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ANNUAL REPORT 2020

State University of New York Downstate Health Sciences University

Maimonides Medical Center Kings County Hospital Center University Hospital of Brooklyn New York - Presbyterian Brooklyn Methodist Hospital Manhattan Eye, Ear & Throat Hospital / Lenox Hill Hospital

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Design & Photography The Office of Communications and Marketing SUNY Downstate Medical Center

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TOLARYNGOLOGY

VISION

Our vision is a community where individuals can access optimal care for disorders of the ears, nose, throat, head and neck.

MISSION

We will bring our vision into reality through patient care, education, and research:

- 1. We **provide state-of-the-art medical and surgical care** to the people of Brooklyn and surrounding communities
- 2. We **teach current best practices for patient care** at the local, regional, national, and international level
- 3. We **train residents** to become leaders in the specialty and practice in diverse geographic locations and practice settings
- 4. We **educate medical students** and help those interested in otolaryngology to better understand the specialty and pursue a career in otolaryngology
- 5. We **conduct clinical, basic, and translational research** to share knowledge, identify best practices, and fill knowledge gaps
- 6. We **engage in volunteer service** to professional medical organizations at the local, regional, national, and international level

VALUES

We always want the community to say the following about our work:

- 1. We value safe, ethical and compassionate patient care
- 2. We value teaching, research, and education since we are first and foremost an academic department
- 3. We value **collaboration** and **synergy** with our colleagues, fellow specialists, and other professionals
- 4. We value professionalism, responsiveness, and timely communication
- 5. We value excellence and quality improvement in all endeavors

STATE OF THE DEPARTMENT 2020



Richard M. Rosenfeld, MD, MPH, MBA Distinguished Professor, Chairman, and Program Director

The 2019-2020 academic year marked the 29th anniversary of the Department of Otolaryngology at the State University of New York (SUNY) Downstate Health Science University and affiliated hospitals.

Formed initially from existing services at Long Island College Hospital (LICH) and University Hospital of Brooklyn (UHB), the current academic structure for resident and medical student education includes affiliations with Kings County Hospital Center (KCHC), Maimonides Medical Center,

SUNY at Bay Ridge Ambulatory Surgery Center (SUNY Bay Ridge), New York Presbyterian – Brooklyn Methodist Hospital (NYP-BMH), Manhattan Eye, Ear, and Throat Hospital (MEETH), Lenox Hill Hospital, and Northwell ProHealth.

The past year was marked by stability, optimism, and accomplishment, allowing us to tackle the Covid-19 pandemic with resilience and fortitude. Our residency program is fully ACGME accredited, with no citations, and all graduates continue to secure a top choice in employment or fellowship. We maintain a diverse palate of basic, clinical, and translational research supported by national, state, and institutional grants. We continue to pursue our vision of "a community where individuals can access optimal care for disorders of the ears, nose, throat, head and neck," driven by our mission of excellence in teaching, research, patient care, and public service.

Preparedness

Every year I find one word that best reflects the state of our department and my top choice for 2020 is "preparedness," defined as "the state of being ready for something to happen, especially for war or a disaster." And disaster did indeed engulf us as New York state became the epicenter of the Covid-19 pandemic, accruing more than 20% of total deaths in the United States and earning UHB a "Covid-19 only hospital" designation from Governor Andrew Cuomo.

Perhaps the most common example of preparedness is the ubiquitous financial advice to maintain a personal emergency fund, consisting of cash for 3 to 6 months of expenses. Yet surveys show that only 40% of Americans could access \$400 of cash without going into debt, clearly a worrisome situation. In contrast, our department is exceptionally well managed with regards to our finances and reserves, but this is not the preparedness I wish to emphasize.

The preparedness to which I refer is the reason why our residents responded to the 2019 ACGME Program Survey with 100% satisfaction, more than half expressing high satisfaction. Despite many external challenges over the past decade, our training program shines with a full faculty complement, robust coverage of all subspecialties, synergistic affiliate sites, and the first signs of stability in many years. In other words, we were prepared for a challenge.

Our core and affiliate faculty are the lifeblood of our program, many of whom have been with us for more than a decade. Even our relatively new hires – Ann Plum, Sara Abu-Ghanem, and Ofer Azoulay – have exceeded expectations, earning rave reviews on resident evaluations for their excellence in teaching, research, and patient care. Faculty who deserve special call-out are our residency site directors, notably Matthew Hanson at KCHC, Natalya Chernichenko at NYP-BMH, Michael Weiss at Maimonides, and Jessica Lim at Lenox Hill and MEETH. These are incredible, selfless, and dedicated individuals who advocated for our residents during Covid-19 redeployments and worked yearlong to ensure a safe, positive, and rewarding experience.

I should also highlight the emotional and social preparedness of our department. We often function more like a family with regards to interactions among residents, faculty, staff, and leadership. Communication lines are always wide open, with clear ways to raise and address concerns without fear of retaliation. Brooklyn's bounty promotes personal greatness and mutual opportunity, yielding a cohesive department that is much more than the sum of our talented individuals. We have the most congenial, respectful, and socially connected internal culture that I can recall since joining in 1992.

Even if well prepared, the impact of Covid-19 should never be downplayed. Many of our front-line residents and faculty caught the virus, in some cases requiring several weeks for recovery. Many staff were afflicted, including Covid-19 related deaths of family and relatives. This was an ugly, scary, heart-wrenching experience personally, and professionally, for everyone, especially healthcare workers. We will never be the same, but we survived, with resilience and lessons learned that will promote future prosperity.

Research shows that resilience is fostered by optimism, moral compass, social support, role models,





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physical exercise, mental exercise, flexibility, and meaningful purpose. I remain the perennial optimist and further submit that all these factors abound in our ranks. We have proven ourselves prepared, resilient, and adaptable in exceptionally challenging circumstances, so the sky is the limit as we learn from the past and reimagine our efforts for the times ahead.

Giving Back to Our Community

We relish the opportunities offered to us in Brooklyn and give back to our community by providing quality care that spans the panoply of ENT services and facilitates patient access through diverse practice sites, comprehensive insurance participation, and opportunities for uninsured patients at UHB and KCHC. We further serve our community with daily teaching of residents and medical students, many of whom remain in the New York metropolitan region and further contribute to the region's health and well-being. Here are some brief updates on our primary clinical services:

Facial plastic and reconstructive surgery (FPRS) thrive under the leadership of Sydney Butts and other full-time and voluntary faculty, including alumnus Lee Kaplowitz, who completed an FPRS fellowship, and new hire Ofer Azoulay, with expertise in facial reanimation and microvascular flaps. The division covers all aspects of FPRS, including maxillofacial trauma, cosmetic procedures, microvascular free tissue transfer, and reconstruction of complex defects of the head, neck, and related structures.

Head, neck, and skull-base surgery remains a focal point of our department under the leadership of Krishnamurthi Sundaram, Natalya Chernichenko, and Michael Weiss, with additional expertise provided by Gady Har-El, Jessica Lim, Victor Lagmay, Ofer Azoulay, and voluntary faculty at our multiple affiliate sites. The Lenox Hill rotation continues to enhance our resident exposure to this subspecialty.

Otology and neurotology remain vibrant through the leadership of Matthew Hanson and Michal Preis, with contributions from others. We offer comprehensive otologic services, ranging from ambulatory surgery to complex procedures with our neurosurgical colleagues. Our new, state-of-the art, 8-station temporal bone laboratory, is (finally) nearing completion, including a dual-head microvascular station. Abraham Shulman continues to help patients cope with tinnitus, as one of the few full-time tinnitologists worldwide.

Pediatric Otolaryngology remains strong with leadership by Nira Goldstein, Ann Plum, and Richard Rosenfeld, and contributions by Sydney Butts. We offer a full spectrum of clinical services, including advanced airway reconstruction, voice restoration, endoscopic surgery, and rehabilitative services through our cleft team for children with cleft lip, cleft palate, microtia, velopharyngeal insufficiency, micrognathia, and craniofacial syndromes.

Laryngology and neurolaryngology are covered under the leadership of Boris Bentsianov and Sara Abu-Ghanem, with contributions from our pediatric otolaryngologists, head and neck surgeons, and voluntary faculty. We provide a full range of operative and office interventions for diagnosing, managing, and rehabilitating voice, airway, and swallowing problems in children, adults, vocal professionals, stroke patients, and head and neck cancer patients.

Rhinology and skull-base surgery are robust under the leadership of Marina Boruk, Gady Har-El and others, especially at MEETH and Lenox Hill Hospital. Services include advanced office management of rhinosinusitis and sinonasal disorders plus a full spectrum of surgical procedures, including complicated sinus surgery, image-guided procedures, neurosurgical access, and open and minimally invasive surgery for skull base lesions and tumors.

General otolaryngology and allergy are well-covered under the leadership of Marina Boruk, Victor Lagmay, and faculty at our diverse training sites. Our new faculty recruits – Ofer Azoulay and Sara Abu-Ghanem – have greatly expanded our coverage of general otolaryngology procedures at our UHB, NYP-BMP, and KCHC.

Communicative disorders and audiology thrive under the leadership of John Weigand and Sal Saleh, whose relationships with training programs supply a steady stream of audiology trainees and interns. Patients with cochlear implants continue to be well served by our collaboration with the Auditory Oral School of New York, which provides state-of-the-art mapping and support services, including participation in our monthly cochlear implant team meeting.

Research, Education, and Teaching

Boris Bentsianov organized the 11th Annual Frank E. Lucente Alumni and Resident Research Day program, which for the first time took place online as a Zoom conference. Although the event was limited to resident presentations, the virtual format did attract many alumni. Moreover, the quality and breadth of resident research presented was extraordinary. We remain grateful to Mark Stewart, Dean of the School of Graduate Studies, and Richard Kollmar, from the Department of Cell Biology for their continued engagement with our residents, faculty, and medical students, which serves as a model for research collaboration between clinicians and scientists. Please review the full agenda and abstracts later in this report for additional details.

Nira Goldstein continues as Director of Clinical Research and remains an incredible resource for navigating the intricacies of funding, REDcap surveys, IRB approval, and statistical analysis. Nira is assisted by Richard Kollmar, who serves as Director of Basic and Translational Research, and Richard Rosenfeld, who mentors residents in biostatistics, study design, and systematic review. In addition to many observational studies and systematic reviews, translational work is active on understanding the role of laryngospasm in epilepsy sudden death and pulmonary edema, with the goal of enhancing our current NIH funding with an R01 grant.

The FEL Research Grant, established by alumnus Dennis Lee, is available to residents to support research work and mission travel. This past year, the Grant allowed two PGY-5 residents – Daniel Ballard and Daniel Sukato – to participate in a surgical mission trip to the Philippines, with Michal Preis as mentor. Their group saw 1,848 patients in 4 days, including 601 ear visits with examination, cleaning, audiology, and hearing aid fitting. Our residents performed 29 otologic surgeries, including 20 tympanoplasties and 9 tympanostomy tubes. Of note, Dan Sukato assisted in 5 cleft lip repairs, 6 cleft palate repairs, and 3 pharyngeal flaps.

Nicole Fraser, our educational coordinator, remains an invaluable resource for students and residents, working with Richard Rosenfeld, program director, and Nira Goldstein, associate program director, to maintain a fully ACGME-accredited, citation-free, residency training program. This year was notable for having 16 residents (4 chiefs), a one-time occurrence related to prior sick leave. Sydney Butts continues to oversee our Grand Rounds program, including our pre-rounds session focused on resident issues and education, Natalya Chernichenko has done an admirable job of enhancing our training in cultural competency and health disparities, and Ann Plum has upped our mentoring program to a new level of structure and consistency.

Our traditional Annual Multidisciplinary Head & Neck Symposium, which would have hit a 10-year milestone, was regrettably canceled because of the Covid-19 restrictions, but we look forward to a terrific event in 2021. The same restrictions moved all administrative and educational conferences to the Zoom platform. Our festive resident graduation dinner, normally held at the Water Club, also became a Zoom event, with over 60 participants celebrating our chief residents. In lieu of a large party and the traditional graduation gifts, our chiefs requested support to defray the cost of their upcoming board examinations. Through a combination of departmental funds, and generous donations from Frank Lucente and Mauro Ruffy, we were able to fully cover the cost of the examinations for our departing chiefs.

Our residency training program remains fully accredited and continues to attract the best and brightest candidates with 100% successful attainment of desired employment or fellowship training by all graduates. We view our residency program as the centerpiece of our department, always striving to improve our responsiveness to the needs of residents and faculty.

Recognizing Our Faculty and Staff

Since our last report there have been many notable accomplishments, which are fully described in the pages that follow. Some events worthy of special emphasis, however, are listed below.

Notable Faculty Accomplishments

- Ofer Azoulay resuscitated our microvascular free flap program, performing several successful procedures at multiple sites
- Boris Bentsianov was the course director for the Annual Frank E. Lucente Alumni and Resident Research Day
- Marina Boruk began a 2-year term or service on the AAO-HNS Practice Management Education Committee
- Sydney Butts was honored with the prestigious Leadership Award by the Board of Directors of the Arthur Ashe Institute for Urban Health
- Sydney Butts was elected as the Eastern Regional Director for the AAFPRS, is now a member of their Board of Directors, and was appointed chair of the AAFPRS Patient Safety, Quality Improvement and Accreditation Committee
- · Sydney Butts was the Full-time Faculty Honoree at the Resident Graduation event
- Natalya Chernichenko became resident site director at NY Presbyterian Brooklyn Methodist Hospital
- Nira Goldstein was appointed a consultant to the AAO-HNS Pediatric Otolaryngology Education Committee
- Matthew Hanson was recognized by Castle Connolly as a New York Top Doctor
- Matthew Hanson did an extraordinary job in leading the otolaryngology service at KCHC during the Covid-19 crisis, earning many kudos for our faculty, residents, and division



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- Frank Lucente gave a generous donation to the graduating chief residents to help defray the cost of upcoming board examinations
- Michal Preis mentored two of our chief residents, Daniel Ballard and Daniel Sukato, on a surgical mission trip to the Philippines
- Richard Rosenfeld was appointed to the Health Services Administration Advisory Board for SUNY
 Oswego Business School
- Richard Rosenfeld was recognized by Castle Connolly as a New York Top Doctor and as a Top Doctor in America
- Richard Rosenfeld was appointed to the Research Committee and Expert Committee for the American College of Lifestyle Medicine
- Mauro Ruffy gave a generous donation to the graduating chief residents to help defray the cost of upcoming board examinations
- · Jack Russo was the Voluntary Faculty Honoree at the Resident Graduation event

Notable Resident, Student, and Other Accomplishments

- Daniel Ballard participated in a surgical mission in the Philippines, supported by a Frank E. Lucente Research Grant
- Daniel Ballard secured his 1st choice fellowship in neurotology at University of Pittsburgh Medical Center, under the mentorship of Todd Hillman and Doug Chen
- Sandra Ho joined a multispecialty practice at Jamaica Hospital in Queens, part of a 25-site physician network, where she will work alongside alumnus George Ferzli
- Sean Mooney received the SUNY Downstate Award for Outstanding Medical Student Performance in Otolaryngology
- Prayag Patel completed the resident reviewer program for Otolaryngology Head & Neck Surgery journal, being promoted, with commendation, to an independent peer reviewer
- · June Sandiford was the Staff Honoree at the Resident Graduation event
- Sam Schild was a co-author on the AAO-HNS Tracheotomy Recommendations During the Covid-19 Pandemic, a product of the Airway and Swallowing Committee
- Daniel Sukato participated in a surgical mission in the Philippines, supported by a Frank E. Lucente Research Grant
- Daniel Sukato was invited back as an AAO-HNS CORE grant resident reviewer for general otolaryngology, a highly competitive position awarded to 6 of the 18 applicants
- Daniel Sukato will enter his 1st choice fellowship in facial plastic and reconstructive surgery at UCLA, under the mentorship of Keith Blackwell
- Alisa Timashpolsky matched at her 1st choice for pediatric otolaryngology fellowship at Children's
 Hospital of Philadelphia
- Derek Wu will enter his 1st choice academic rhinology fellowship at Northwestern, under the mentorship of David Conley and Robert Kern

A Bright Future

We are delighted to welcome our three new PGY-1 residents, James Alrassi, from Stony Brook University School of Medicine, Alexander Graf, from the Sydney Kimmel Medical College at Thomas Jefferson University, and Sean Mooney, from SUNY Downstate Health Sciences University. We look forward to five mutually rewarding years with these highly accomplished individuals, who will begin their PGY-1 residency training year starting in July 2020.

We are proud of our three departing chief residents and wish them health, happiness, and success. Daniel Ballard will enter his neurotology fellowship at University of Pittsburgh Medical Center, Sandra Ho will join TJH Medical Services in a multispecialty practice at Jamaica Hospital in Queens, NY, Daniel Sukato will enter his facial plastics and reconstructive fellowship at the University of California in Los Angeles, and Derek Wu will enter his academic rhinology fellowship at Northwestern University.

Reflecting again upon my word for this year – preparedness – I give endless kudos to our administrative leadership, who kept our ship afloat despite turbulent and highly unpredictable waters. These superstars are Billy Tang at SUNY Downstate, Carole Facciponti at NYP Brooklyn Methodist Hospital, and Svetlana Lyulko and Veronica Ortiz at our Faculty Practice sites. Their efforts, along with our other talented support staff, help fulfill our mission of research, teaching, and patient care to the benefit of our community and all stakeholders.

When I accepted a faculty position in Brooklyn in 1992 several individuals responded with concern, stating "what could you ever accomplish in Brooklyn?" Nearly 30 years later the answer is clear: everything and more. Brooklyn remains one of the most exciting, diverse, and opportunity-laden locations on the planet. My pledge as chairman and program director is to continue working tirelessly to embrace all opportunities and enhance an already wonderful department in an equally wonderful borough.

Respectfully submitted,

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Richard M. Rosenfeld, MD, MPH, MBA June 2020

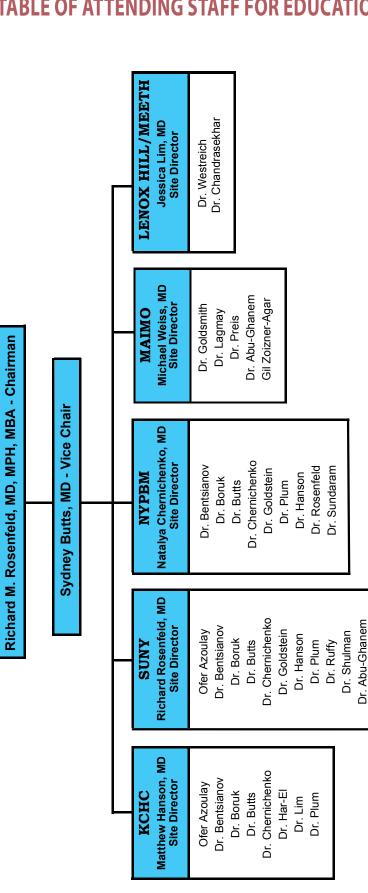


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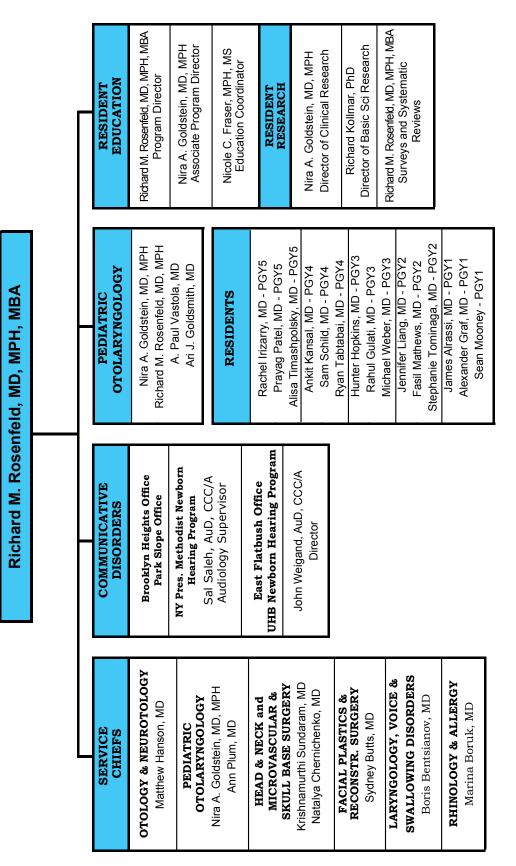
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Department of Otolaryngology TABLE OF ATTENDING STAFF FOR EDUCATIONAL PROGRAMS

Department of Otolaryngology DIVISIONS. RESIDENT EDUCATION, AND RESEARCH



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FACULTY

The faculty of the Department of Otolaryngology is comprised of a variety of individuals who's clinical and research interests encompass the ever-increasing scope of this specialty. For the 2019 to 2020 academic year, the department had twelve full-time academic faculty, three full-time affiliate faculty, four part-time faculty, thirty voluntary faculty and contributing physicians, six audiologists, and one PhD.

Full-Time Academic Faculty



Richard M. Rosenfeld, MD, MPH, MBA

Distinguished Professor, Chairman, and Program Director of Otolaryngology at SUNY Downstate, Vice Chair of the SUNY Distinguished Academy Executive Board, and Chairman of the Board for the Auditory Oral School of New York. Dr. Rosenfeld graduated the Otolaryngology Residency Program at Mount Sinai Medical Center and completed a two-year fellowship in Pediatric Otolaryngology at Children's Hospital of Pittsburgh with a MPH degree. He has received the AAO-HNS Distinguished Service Award five times, the SENTAC Robert Ruben Award for Excellence in Pediatric Otolaryngology, the Guideline International Network Janoua Mlika-Cabanne Innovation Award, and the IAPO Award for Worldwide Contributions to Pediatric Otolaryngology. Dr. Rosenfeld is the Senior

Advisor for Guidelines and Measures at AAO-HNS and has chaired numerous national committees in the AAO-HNS and ASPO. He is the author, coauthor, or editor of 5 books and over 350 scientific publications and textbook chapters, including chapters in "Bailey" and "Cummings" on understanding data and medical literature. Dr. Rosenfeld has given nearly 1,000 scientific presentations and is an international authority on guideline development, evidence-based medicine, and otitis media. He has served as president of ASPO, president of the International Society for Otitis Media, chair of the Guideline International Network North America, and editor in chief of Otolaryngology – Head and Neck Surgery. Dr. Rosenfeld has been listed in Castle Connolly's "Best Doctors in America" since 1999 and completed a Health Services Administration MBA in 2018. He ran his first marathon in 2019 and is an expert consultant and methodologist for the American College of Lifestyle Medicine.



Frank Lucente, MD

Professor and former chairman. He is a graduate of Yale University School of Medicine and residency at Washington University. In 1990 he became Chairman at SUNY –Downstate and LICH. He was President of the Triological Soceity. He has been Vice President and Coordinator for Instruction Courses for the AAOHNSF. He has served as president of the Triological Society and the SUO-HNS. He has been Guest of Honor for the American Broncho-Esophagological Association, American Laryngological Association and the American Society of Geriatric Otolaryngology. He has been on the Executive Editorial Board of The Laryngoscope. He is the author, coauthor or editor of 17 books and over 200 scientific publications and chapters. Dr. Lucente served on the ACGME RRC Otolaryngology and has been Chair of the AMA's

CME Advisory Committee. Dr. Lucente served as Vice Dean for Graduate Medical Education and Director of the Medical Student Career Advisement Office at SUNY. He has also received the SUNY Chancellor's Award for Distinction in Teaching and in 2001, was honored with the Teacher of the Decade Award from the Department of Otolaryngology. In 2008 he received the Graymoor Award from the Franciscan Friars of the Atonement for his service to that organization. On May 25, 2017, Dr. Lucente, one of the Tribute Honorees, was presented SUNY's Gold Medal for Excellence in Medical Leadership by President Wayne Riley at the event honoring graduating residents and fellows at the Brooklyn Marriott.



Krishnamurthi Sundaram, MD

Dr. Sundaram is a graduate of the Otolaryngology Residency Program of State University of New York-Health Science Center at Brooklyn and is Clinical Professor of Otolaryngology. After completion of medical school he did a two year fellowship in surgical oncology at the Cancer Institute, Chennai, India. Prior to starting his Otolaryngology residency he completed a straight surgical internship at Church Hospital Corp.[Affiliate of Johns Hopkins University] in Baltimore, MD, and 3 years of residency in General Surgery at The Methodist Hospital of Brooklyn. After residency he was a junior attending/fellow/residency coordinator in the department of Otolaryngology at SUNY Downstate Medical Center. Subsequently he served as Chief, Division of Otolaryngology at the Methodist Hospital and Chief of Otolaryngology at the Brooklyn Hospital Center. After 1992, he has been actively involved with the residency program at SUNY Downstate Medical Center. His areas of interest include head and neck oncology, thyroid, parathyroid, sinuses, skull base and larynx. From 2007 to 2013, he served as Chief of Head and Neck and Skull Base surgery in the department at Long Island College Hospital in Brooklyn. Dr. Sundaram was Vice-Chairman of the Department of Otolaryngology at UHB-LICH and SUNY Downstate Medical Center from Jan. 2007 to June 2015. Dr. Sundaram now serves as Division Chief of Otolaryngology, NY Presbyterian Brooklyn Methodist Hospital.



Boris Bentsianov, MD

Dr. Bentsianov completed his medical school training at Downstate Medical Center. He continued his clinical training at Downstate Medical Center/Long Island College Hospital as an intern in General Surgery followed by a residency and chief residency in Otolaryngology- Head and Neck Surgery. He then went on to do a fellowship in Laryngology and Neurolaryngology at Columbia University/St Lukes-Roosevelt Hospital-New York Center for Voice and Swallowing Disorders. After becoming a diplomate of the American Board of Otolaryngology- Head and Neck Surgery, he rejoined the faculty of SUNY Downstate in June 2003 as assistant professor in the Department of Otolaryngology and Director of the Division of Laryngology, Voice and Swallowing Disorders.

Dr. Bentsianov's clinical interests are centered on the evaluation and treatment of disorders of the larynx by various endoscopic, stroboscopic and electromyographic techniques, as well as laryngeal framework surgery. Dr. Bentsianov has grown up as a member of the Brooklyn community for the last 45 years and has been dedicated to delivering the highest quality laryngologic clinical and surgical expertise to his home community for the last 2 decades. His research interests include neurologic disorders of the larynx, diagnosis and treatment of dysphagia.



Sara Abu-Ghanem, MD

Sara Abu-Ghanem MD MMedSc is an Assistant Professor of Otolaryngology with expertise in voice, airway, and swallowing disorders. She obtained Bachelor of Science, Master of Medicine in Microbiology and Immunology, and Doctor of Medicine degrees from Ben-Gurion University of the Negev, Israel. She received her residency training in Otolaryngology- Head and Neck Surgery at Tel Aviv Sourasky Medical Center affiliated with Tel Aviv University Sackler Medical School, Israel. She completed two years of clinical fellowship in Laryngology and Bronchoesophagology at Stanford University School of Medicine (California, USA) and New York University School of Medicine (New York, USA). She is also a faculty member in the Department of Surgery at

Maimonides Medical Center. Dr. Abu-Ghanem has published numerous scientific articles and is active in research and medical education. Her clinical interests include the care of professional voice users; phonomicrosurgery; vocal fold paralysis; laryngeal movement disorders (Neurolaryngology); benign and malignant lesions of the larynx (voice box), recurrent respiratory papillomatosis; airway and swallowing disorders; rehabilitation after total laryngectomy; and the treatment of chronic cough and vocal fold dysfunction.



Ofer Azoulay, MD

Dr. Ofer Azoulay is an Assistant Professor of Otolaryngology with surgical expertise in Head and Neck Cancer, robotic surgeries and head and neck microvascular reconstruction. He is Chief of Robotic and Microvascular Head and Neck reconstruction for SUNY Downstate Health Sciences University and affiliated with Kings County Hospital, Maimonides Medical Center and NYPMH Brooklyn. Dr. Azoulay earned his medical degree and completed his residency training in Otolaryngology at the Hebrew University of Jerusalem and Kaplan Medical Center, Israel. He then pursuit advanced training and completed fellowship in Head and Neck and Microvascular Head and Neck reconstruction and served as Attending in Service at NYU Langone Health, NY. Dr. Azoulay's main

clinical and research interests are; head and neck cancer and reconstruction; thyroid and parathyroid; salivary glands; skin cancer; facial nerve paralysis; facial reanimation and laryngeal diseases.



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Marina Boruk, MD

Dr. Boruk, Assistant Professor of Otolaryngology, joined the Department at the State University of New York – Downstate Medical Center in July of 2010. Dr. Boruk is a graduate of the College of Medicine at State University of New York Downstate Medical Center, Brooklyn, where she also completed her residency in Otolaryngology – Head and Neck Surgery. She continued her training with an American Rhinologic Society accredited fellowship in Rhinology and Skull Base Surgery at Vanderbilt University in Nashville, Tennessee, under the direction of Dr. James Duncavage. Dr. Boruk's clinical interests are in the medical and surgical management of the nose and paranasal sinuses. Her expertise includes both minimally invasive and traditional surgery of the nasal

cavity and sinuses, endoscopic repair of CSF leak and base of skull defects as well as skull-based tumors. Dr. Boruk also has additional training in the field of allergy and in 2016 became a Fellow of the American Academy of Otolaryngic Allergy (AAOA).



Sydney Butts, MD

Dr. Butts serves as Vice Chair and chief of the Division of Facial Plastic and Reconstructive Surgery at University Hospital of Brooklyn/ SUNY Downstate and Kings County Hospital Center. After graduating from the Yale University School of Medicine, Dr. Butts completed a residency in otolaryngology at the Albert Einstein College of Medicine/ Montefiore Medical Center. Dr. Butts then completed fellowship training in facial plastic and reconstructive surgery at SUNY Upstate Medical University in Syracuse,. She then joined the faculty of the department of otolaryngology at SUNY Upstate. Dr. Butts has clinical expertise in congenital craniofacial surgery including cleft lip and palate surgery. Her clinical focus includes the management of congenital craniofacial

anomalies, adult and pediatric maxillofacial trauma, local/regional flap surgery in patients with skin cancers of the face, rhinoplasty and managing other soft tissue lesions that require a reconstructive approach. She has written several book chapters and journal articles, presented research at national academic meetings, and been a guest faculty and invited lecturer on multiple reconstructive topics. Dr. Butts currently serves as the faculty coordinator for the Grand Rounds Program, supervising scheduling of faculty speakers and educational content.



Natalya Chernichenko, MD

Dr. Chernichenko serves as an Assistant Professor of Otolaryngology and Chief of Head and Neck Surgery. Her clinical expertise lies in the diagnosis and management of benign and malignant tumors of the head and neck, including salivary gland, thyroid and parathyroid, oral cavity, pharynx, larynx, sinuses, skull base and skin. Her goal is to provide patients with advanced surgical care for head and neck cancer with an emphasis on quality-of-life issues. Dr. Chernichenko earned her undergraduate degree at New York University and her medical degree from SUNY Downstate Medical Center. Following a residency in Otolaryngology-Head and Neck Surgery at Yale-New Haven Hospital, Dr. Chernichenko pursued additional Head and Neck Surgical Oncology

Fellowship training at Memorial Sloan-Kettering Cancer Center. Dr. Chernichenko's research interest is focused on exploring the molecular mechanisms of nerve invasion by human carcinomas with the goal of identifying novel therapeutic targets. She is a recipient of the Young Investigator Award from the American Head and Neck Society.



Nira A. Goldstein, MD, MPH

Dr. Goldstein, Professor of Otolaryngology, joined the Department of Otolaryngology in 1998, as a full-time pediatric otolaryngologist in the division. She is a graduate of the New York University School of Medicine and the Otolaryngology Residency Program at the New York University Medical Center. Dr. Goldstein completed her fellowship in Pediatric Otolaryngology at the Children's Hospital of Pittsburgh where she also served as the Hamburg Research Fellow. She was an instructor at the University of Pittsburgh School of Medicine as well as staff physician at the Children's Hospital of Pittsburgh. She received her Master of Public Health degree at SUNY Downstate in May 2010. She serves as the Associate Residency Program Director, Director of Medical Student Education and Director of Clinical Research in the department and Clinical Assistant Dean in the Medical School. Dr. Goldstein has authored over 50 articles and 25 chapters on various topics in otolaryngology and has presented at numerous national and international conferences. Her clinical and research interests include pediatric obstructive sleep apnea, otitis media, and sinusitis.

Matthew Hanson, MD



Dr. Matthew Hanson, Assistant Professor and Chief of Otology and Neurotology, and Director of the Otolaryngology Service at KCHC. He has been involved in hearing disorders his whole life. Both of his paternal grandparents were congenitally deaf and he has over thirty deaf relatives. His father, equally fluent in American Sign and English, served as Director of Deaf Services for Vocational Rehabilitation for the State of Iowa for more than 35 years. Dr. Hanson attended medical school at the University of Iowa where he had the opportunity to do research in the early field of cochlear implantation. He went onto residency in Otolaryngology Head and Neck Surgery at Columbia University. After completion of his residency, he was on staff at Manhattan Eye, Ear and Throat Hospital for

two years before completing a fellowship in Otology/Neurotology at The EAR Foundation/Otology Group in Nashville, Tennessee. Dr. Hanson continues to have active clinical and research interests in disorders of balance, disorders of the facial nerve, skull base disease (including treatment of acoustic neuroma) and of course, disorders of hearing and cochlear implantation. In 2009, he was granted subspecialty certification in Neurotology by the American Board of Otolaryngology and is the only full-time practitioner so certified in Brooklyn. He successfully underwent re-certification in 2017. In 2017, he was also appointed to the editorial board of Otology and Neurotology, the prestigious international journal in this subspecialty and was their top reviewer for

2016-17.



Richard Kollmar, PhD

Dr. Kollmar earned his Diploma in Chemistry at the Julius-Maximilians-Universität Würzburg, the Ludwig-Maximilians-Universität München, and the Max-Planck-Institute for Biochemistry in Martinsried. He earned his Ph.D. in Cell and Molecular Biology at the University of Wisconsin-Madison. His postdoctoral training in sensory neuroscience was with Dr. A. J. Hudspeth at the University of Texas Southwestern Medical Center at Dallas and at Rockefeller University in New York. After a stint as Assistant Professor of Molecular and Integrative Physiology at the University of Illinois at Urbana-Champaign, he returned to New York and joined SUNY Downstate Medical Center, where he is an Associate Professor in Cell

Biology and an Assistant Professor and Director of Basic Research in Otolaryngology. His research focus is to develop interventions against Sudden Unexpected Death in Epilepsy (SUDEP). This is a translational research project in collaboration with Dr. Sundaram, Dr. Stewart (PI; Physiology & Pharmacology and Neurology), and Dr. Silverman (LIJMC) that has compiled strong evidence for obstructive apnea due to laryngospasm as the proximal cause of death. Dr. Kollmar also teaches the ear lectures for CHRP students and for second-year medical students during their neuroanatomy block and provides research opportunities in his laboratory for high-school students to residents.



Ann W. Plum, MD

Dr. Plum, Assistant Professor of Otolaryngology, joined the Department of Otolaryngology at The State University of New York Downstate Medical Center as fulltime faculty and Chief of Pediatric Otolaryngology in 2018. She received her Doctorate of Medicine from the University of Miami Leonard M. Miller School of Medicine in 2011. She completed her residency in Otolaryngology at the State University of New York Upstate Medical University in 2016. Her Pediatric Otolaryngology fellowship was done at the University of North Carolina at Chapel Hill. She currently is one of three fellowship trained Pediatric Otolaryngologists here at SUNY Downstate Medical Center, and serves as the division Chief of Pediatric Otolaryngology at SUNY Downstate University Hospital

and the Director of Service for Pediatric Otolaryngology at Kings County Health Center, as a faculty mentor for our Otolaryngology Residents at New York Presbyterian Brooklyn Methodist for Pediatric



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Otolaryngology, as well as a Consultant for Pediatric Aerodigestive Disorders at Maimonides. Her clinical and research interests include Airway and Swallowing disorders in children, Pediatric Voice disorders, Pediatric Obstructive Sleep Apnea, Pediatric Chronic Rhinosinusitis and Nasal disorders, Congenital Malformations of the Head and Neck, Pediatric Neck masses, and Pediatric Hearing loss and Otitis Media.

Full-Time Affiliate Faculty



Victor Lagmay, MD

Dr. Lagmay trained in general surgery and otolaryngology at New York University Medical Center. He completed a fellowship in Head & Neck Surgery at the Beth Israel Medical Center Institute for Head and Neck Cancer in New York. He is currently the division director for Head & Neck Cancer Surgery at the Maimonides Cancer Center in Brooklyn. He is the clinical director of the Endoscopic Dysphagia Service at Maimonides Medical Center. Dr. Lagmay is board-certified in his specialty and is a Fellow of the American College of Surgeons. Dr. Lagmay maintains memberships in several professional societies, including The American Thyroid Association; The American Academy of Otolaryngology - Head and Neck Surgery; and The New York Head and Neck Society. He has been

acknowledged as a Castle Connolly Top Doctor in the New York Metro Area for several years. He serves as an Honorary Police Surgeon for the City of New York.

Michal Preis, MD

Dr. Preis, Assistant Professor of Otolaryngology, graduated from the Ben Gurion University of the Negev in Israel, trained in otolaryngology at the Rabin Medical Center, and completed a fellowship in neurotology at the University of Washington in Seattle. Her clinical interests include vertigo, hearing loss, chronic ear disease, cholesteatoma and pediatric ENT disease. Dr. Preis received the Research Award from Rabin Medical Center, Best Teacher Award from the University of Tel Aviv, Residents recognition from SUNY class of 2015. Her clinical practice is based at Maimonides Medical Center where she trains SUNY Downstate Otolaryngology interns and residents in otologic surgery including mastoidectomy, tympanoplasty, ossicular chain reconstruction, endoscopic ear surgery, ion and hearing resteration practice.

Eustachian tube balloon dilation and hearing restoration procedures.



Michael Weiss, MD

Dr. Michael Weiss serves as the Chief of Otolaryngology at Maimonides Medical Center as well as at the Brooklyn V.A. Medical Center. He is a graduate of the Albert Einstein College of Medicine and did post-graduate training at Tulane University and New York University. He was born in Brooklyn and has been a proud member of the SUNY-Downstate faculty since 1994. He practices as a general otolaryngologist with a strong clinical interest in endocrine surgery. Published articles include a wide variety of subjects in Otolaryngology, ranging from Otology to Head and Neck, Bioethics and Medical Informatics.

Part-Time Faculty



Gady Har-El, MD

Gady Har-El, MD is a Professor of Otolaryngology and Clinical Neurosurgery at SUNY-Downstate. He is the past Chairman of Otolaryngology and current Chief of Head and Neck Surgery and Oncology at Lenox Hill Hospital-Northwell Health System. His clinical interests include head and neck cancer, thyroid and parathyroid surgery, minimally invasive skull base surgery and sinus surgery. Dr. Har-El has authored and co-authored more than 260 scientific publications and book chapters and gave 400 presentations, lectures, and courses. Dr. Har-El served as the President of the American Broncho-Esophagological Association, the New York Head and Neck Society, the New York Laryngological Society, and the American Laryngological Association. Dr.

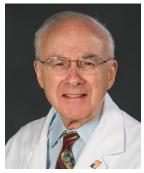
Har-El also served as the Vice President of the Triological Society and he is currently a Governor of the American College of Surgeons. Also, he is a sixth time recipient of the Stanley M. Blaugrund Award for Excellent Teaching from the New York University. He has been listed in the "Best Doctors in America" and "Best Doctors in New York" for 26 consecutive years. He has been also listed in the "America's Top Doctors for Cancer" directory for the last10 years. Dr. Har-El published a two volume set "Head and Neck Surgery" which he co-edited. Dr. Har-El has been invited to lecture and teach in Europe, Asia, Middle East, Africa and Central and South America.



Jessica W. Lim, MD

Dr. Lim, Assistant Professor of Otolaryngology, treats patients of all ages and has a particular interest in endocrine surgery (thyroid, parathyroid), sinus disease, sleep disorders, voice and swallowing disorders and head and neck tumor surgery. She is proud to be recognized by her peers for her excellence in otolaryngology, as listed by Castle Connolly, Best Doctors and Super Doctors. She performed her preliminary general surgery training and completed otolaryngology residency at New York University Medical Center in 1997, followed by a head and neck/sinus surgery fellowship at Rush Presbyterian St.-Luke's Medical Center in Chicago. In 1998, Dr. Lim joined the academic faculty in the Department of Otolaryngology at SUNY-Downstate Medical Center in

Brooklyn. In the past, she has been Director of Otolaryngology Residency Training at SUNY-Downstate and has served as Director of Otolaryngology at Kings County Hospital Center and at Kingsbrook Jewish Medical Center. She is the author or co-author of numerous journal articles and book chapters, and she has presented original research at national and local meetings.



Abraham Shulman, MD

Dr. Shulman, Prof. Emeritus Clinical Otolaryngology, at SUNY Downstate, is a graduate of the Kings County Hospital Center, Division of Otolaryngology's residency training program. Following graduation, he completed a fellowship with Julius Lempert at the Lempert Foundation and served as Lieutenant Commander in the USNR as Chief of Otolaryngology at the Portsmouth Naval Hospital, Portsmouth, New Hampshire. Dr. Shulman has been the author and one of the editors of the 1st edition of the text entitled Tinnitus diagnosis and treatment in 1991, which identified a new discipline, Tinnitology. The second edition of the tinnitus text, Tinnitus diagnosis and treatment, started preparation in 2015. He has contributed textbook chapters and published over 250

scientific articles on the basic science and clinical protocols for tinnitus diagnosis and treatment, and is a reviewer for several scientific journals. In 2010 SUNY Downstate Medical Center included him in a celebration of achievement of 150 years of medical education in Brooklyn. His research interests include sensorineural hearing loss, electrical and ultrahigh frequency acoustical stimulation of the cochleovestibular system, vestibular evoked response, mechanisms of tinnitus production, translation of functional brain imaging with nuclear medicine and EEG based electroencephalography –QEEG/LORETA, for attempting to understand brain function in the presence of the tinnitus signal, development of tinnitus targeted drugs for tinnitus relief for clinical types and subtypes of tinnitus, and fluid dynamics of the ear and brain. Dr. Shulman's clinical interests are hearing loss, tinnitus, vertigo, and the fluid dynamics between ear and brain. Symposia, articles, tinnitus courses and a tinnitus text have identified Dr. Shulman as an international figure for the symptom of tinnitus.







Richard W. Westreich, MD

Dr. Westreich received his medical degree with honors in cell biology research from New York University School of Medicine. He went on to complete both a residency in otolaryngology and a fellowship in facial plastic surgery at Mount Sinai Hospital. His society affiliations include the American Academy of Otolaryngology, the American Academy of Facial Plastic Surgery, the American College of Surgeons, the Rhinoplasty Society and the New York Facial Plastic Surgery Society. Dr. Westreich has published numerous clinical papers on sinonasal disorders, functional nasal surgery, rhinoplasty techniques, and methods for correcting the deviated nose. Dr. Westreich is faculty for a Manhattan based facial plastics fellowship. He has a thriving private practice in Manhattan. Downstate

residents are a able to spend time in the Operating Room or office whenever their schedule permits. He has written papers with the residents and engaged in research project with them and assisted in fellowship applications. Dr. Westreich also serves as a reviewer for the American Journal of Rhinology and is a member of several AAFPRS committees (Multimedia, Emerging Trends and Technology, and Fellowship Compendium) and the past president of the New York Facial Plastic Surgery Society.

VOLUNTEER FACULTY AND OTHER CONTRIBUTING PHYSICIANS

The Volunteer Clinical Staff consists of numerous otolaryngologists and other physicians in the New York Metropolitan area who participate in the educational programs of the department and have a major role in both resident and medical student teaching and in numerous clinical and administrative activities. Among the activities in which they are involved are the following: teaching in the operating rooms and clinics staffed by the University Hospital of Brooklyn, Kings County Hospital Center, the Brooklyn Veterans Administration Medical Center, New York Methodist Hospital, and Maimonides Hospital; active participation in Grand Rounds and other weekly educational conferences at the University Hospital of Brooklyn; attendance at the quarterly meetings of the Otolaryngology Section of the Kings County Medical Society; training residents in their office practices; cooperation in scientific studies and publications; support of departmental research and education projects by contributing to the periodic social and fund-raising activities of the foundation; and participation in various important committee and medical board activities at the hospitals involved in our program. The rapid growth and development of the department continues to offer more opportunities for involvement in these activities.

It is with tremendous gratitude that the department acknowledges the contributions of the following members of the voluntary clinical staff and consultants who have contributed their time, talents, and resources in support of our program.

Voluntary Faculty and Other Contributing Physicians



Mark Carney, MD

Dr. Mark Carney received his medical degree from the State University of New York Health Science Center in Syracuse in 1989. He completed his General Surgery internship and Otolaryngology residency at Thomas Jefferson University Hospital in Philadelphia. He went on to work at Mt Sinai Medical Center in Miami Beach FL and served as a Clinical Instructor at the University of Miami. Dr. Carney is Board Certified in Otolaryngology. He is a member of the American Academy of Otolaryngology-Head and Neck Surgery. He has special interest in endoscopic sinus surgery, voice problems, and head and neck cancer surgery.

Rashid Chaudhry, MD



Dr. Chaudhry received his M.D. from University of Punjab, Nishtar Medical College Multan, Pakistan in 1969. He graduate in 1978 from the Otolaryngology-Head and Neck Surgery Residency Program at State University of New York Health Science Center of Brooklyn. Following graduation, he joined the faculty as instructor and then was promoted to Clinical Assistant Professor. Since 1980, he has been Chief and then Director of Otolaryngology at Brookdale University Hospital Medical Center, Brooklyn, New York. His clinical interests include Head and Neck Cancer, minimally invasive sinus surgery, Rhinometry and sleep disorders. He has been recognized by the colleagues "Best Doctors in New York" for the past 14 consecutive years (2000-2013) and has been listed "Best doctors" on multiple occasions in US News and World

Report, New Yorker and Better Living Magazine. He is the author and co-author of various number of journal articles. He has made many presentations at the national and international scientific conferences.



Shawn C. Ciecko, MD, FACS

Dr. Ciecko is currently an associate at ENT and Allergy Associates LLP in Staten Island, NY and Clinical Instructor at SUNY Downstate/Long Island College Hospital. He completed both internship in General Surgery and residency in Otolaryngology Head and Neck Surgery at the Duke University Medical Center. He has received several honors in his career including Duke Hospital's consultant of the year in 2006. Dr Ciecko's interests are in both adult and pediatric ENT, advanced endoscopic sinus surgery, head and neck cancer surgery, thyroid and parathyroid surgery and obstructive sleep apnea. He has a special interest in Thyroid surgery. Dr. Ciecko is Director of ISMS – Team ENT that travels internationally on humanitarian missions performing Otolaryngology Head and Neck surgery as well as Plastic Surgery on a yearly basis.

Christopher de Souza, MD

Dr. de Souza has been Visiting Assistant Professor in the department since 1997. He is a consultant otolaryngologist and skull base surgeon at Tata Memorial Hospital in Bombay (Mumbai) India. He has been a very productive contributor to the otolaryngology literature with over 30 papers in various aspects of otology and skull base surgery. He has published his, "Atlas of Otitis Media Clinicopathologic Correlations and Operative Techniques" with Michael Paparella, MD and Neil Sperling as co-authors. His previous books included texts in otolaryngology, pediatric otorhinolaryngology, head and neck surgery and an atlas of otitis media. He has done fellowships with Michael Glasscock and C Gary Jackson in 1994 in lateral skull base surgery. Dr. de Souza also completed a fellowship in endoscopic sinus surgery at the University of Pennsylvania with David Kennedy and Donald Lanza. He is the editor in chief of the 2 volume book, Head and Neck Surgery that was published by Jaypee Medical Publishers, India. He has also edited "Rhinologic and facial plastic surgery" published by Springer Verlag Germany. He is the Editor in Chief of the Journal "International Journal of Head and Neck Surgery".

Bhuvanesh Singh, MD

Dr. Singh is a graduate of the Medical School and Otolaryngology Residency Program at SUNY Health Science Center at Brooklyn. He is currently a professor and attending surgeon at Memorial Sloan-Kettering Cancer Center in Manhattan. Dr. Singh is the director of the Laboratory of Epithelial Cancer Biology and the Speech and Hearing Center. Dr. Singh, he is a board certified otolaryngologist specializing in Head and Neck Surgery. He received his PhD in medial molecular biology from the Netherlands Cancer Institute and is actively involved in basic science research. He has published over 190 articles in high impact journals including, the Journal of Biological Chemistry, Cell, EMBO, Proceedings of the National Academy of Sciences, and Cancer Research. He is also coeditor of two textbooks. Dr. Singh has received numerous grants and awards for his research work. He is also actively involved in clinical care.





Neil M. Sperling, MD

Dr. Sperling is Adjunct Associate Professor and previous director of the Division of Otology in the Department of Otolaryngology. He is also Affiliate Assistant Professor of Clinical Otolaryngology at Weill Cornell Medical College. After completing his medical education at New York Medical College and Residency training at the New York Eye and Ear Infirmary, Dr. Sperling completed fellowship training in otologic research and surgery in Minneapolis with Dr. Michael Paparella at the Minnesota Ear, Head and Neck Clinic and the University of Minnesota. Dr. Sperling was involved in the creating the first cochlear implant program in the Borough of Brooklyn at SUNY affiliated hospitals, which continues today. Dr. Sperling's special clinical and research interests include otosclerosis, immune-mediated hearing loss, and tympanic membrane retraction.

Additional Voluntary Faculty Who Contribute To The Department

Daniel Arick, MD Jeffrey H Aroesty, MD Howard Brownstein, MD Tahl Colen, MD Maurice Cohen, MD John Dodaro, MD Mark Erlich, MD Stephen Finger, MD Douglas Finn, MD Sheldon Palgon, MD Alden Pearl, MD Manoj Kantu, MD Sanjay Kantu, MD Kanhaiyalal Kantu, MD Steven Kushnick, MD Anthony J. Sarro, MD Prashant B. Shah, MD K. Tarashansky, MD Jeffrey M. Taffett, MD Stanley Wien, MD Melvin Wiederkehr, MD

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PROFESSIONAL SOCIETY MEMBERSHIP

Richard M. Rosenfeld, MD, MPH, MBA

American Medical Association (AMA), 1985-American Academy of Otolaryngology-Head & Neck Surgery (AAO-HNS), 1987-American Academy of Pediatrics (AAP), 1992-American College of Lifestyle Medicine (ACLM), 2019-American Society of Pediatric Otolaryngology (ASPO), Fellow, 1995-American Bronchoesophagological Association (ABEA), 1999-AAO-HNS Sr. Advisor on Guidelines and Measures, 2011-AAO-HNS Sr. Advisor for Performance Measures, 2016-Editor, Cochrane Collaboration ENT Section, 2008-Society of University Otolaryngologists, 1994-Triological Society, 2003-American Otological Society, 2004-Guideline International Network (G-I-N), 2009-International Society for Otitis Media, 2013-SUNY Distinguished Academy, 2016-

Frank E. Lucente, MD

Life Member, American Academy of Otolaryngology – Head and Neck Surgery Senior Fellow, American Laryngological, Rhinological and Otological Society (Triological) Life Member, American Laryngological Association Life Member, New York Academy of Medicine American Society of Geriatric Otolaryngology, 2007-Society of University Otolaryngologists

Krishnamurthi Sundaram, MD

Kings County Medical Society New York State Medical Society New York Head and Neck Society Fellow, American Rhinologic Society Fellow, The American Academy of Otolaryngology-Head and Neck Surgery Associate Member, American Society of Laser Medicine and Surgery Fellow, American College of Surgeons Member, American Head and Neck Society Fellow, The Triologic Society Member, American Association of Clinical Endocrinologists American Medical Association Member, North American Skull Base society Member, American Thyroid Association Member, Society of Robotic Surgeons Member, American Society of Clinical Oncology Member, NY State Society of Otolaryngologists.

Ofer Azoulay, MD

Israel Medical Association Israel Otolaryngology Head and Neck Society Israeli Society of Head and Neck Surgery and Oncology American Head and Neck Society New York Head and Neck Society

Boris Bentsianov, MD

New York State Medical Society Kings County Medical Society American Medical Association, 1994-Downstate Alumni Association, 1997-Associate Member, American College of Physicians, 1999 American Academy of Otolaryngology, 1999 New York Laryngological society 2012-



Marina Boruk, MD

American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS), 2002-present American Academy of Otolaryngic Allergy (AAOA), 2007- present American Rhinologic Society (ARS), 2012 – present

Sydney Butts, MD

American Academy of Otolaryngology-Head and Neck Surgery, 2001 American Academy of Facial Plastic and Reconstructive Surgery, 2001

- Specialty Surgery Committee (Chair of the Cleft and Craniofacial Subcommittee)

- Women in Facial Plastic Surgery Committee
- Quality Improvement Committee

- Representative of the American Academy of Facial Plastic and Reconstructive Surgery to the AAO-HNS

- Trauma Committee
- Mentor 4 Success member
- Eastern Region Credentials Committee
- Patient Safety, Quality Improvement and Accreditation Committee(2016-present)
- AO/Association for the Study of Internal Fixation, 2008 -present
- Craniomaxillofacial Faculty

Fellow, American College of Surgeons, October 2012 New York Facial Plastic Surgery Society, 2012 -present Society of University Otolaryngologists, 2014-present

- Diversity Task Force Committee

Natalya Chernichenko, MD

American College of Surgeons American Head and Neck Society New York Head and Neck Society American Society of Clinical Oncology American Association for Cancer Research American Board of Otolaryngology American Academy of Otolaryngology – Head and Neck Surgery

Christopher de Souza, DORL, MS, DNB, FACS, FRCS

American Academy of Otolaryngology-Head and Neck Surgery Fellow American Neurotological Society Member of Association of Otolaryngologists of India, Member of the society of Teachers in ENT

Nira Goldstein, MD, MPH

American Academy of Otolaryngology - Head and Neck Surgery American Medical Association American Academy of Pediatrics Brooklyn Pediatric Society American Society of Pediatric Otolaryngology Triological Society, Fellow

Matthew Hanson, MD

American Academy of Otolaryngology – Head and Neck Surgery • Member, 1991 • Elected Fellow, 1997 AAO-HNS Implanted Hearing Devices Committee, term ended 2016 AAO-HNS Equilibrium Committee AAO-HNS Hearing Committee AAO-HNS Otology and Neurotology Education Committee Previously served on AAO-HNS Vestibular, Hearing Aids and Development Committees Fellow, American Neurotologic Society, 2002-Present Fellow, North American Skull-base Society, 2004-Present Member, New York Otologic Society, 2007-Present Member, Medical Society of the State of New York Member, New York Society of Otolaryngology Member, William House Cochlear Implant Study Group Member, Facial Nerve Disorders Study Group

Gady Har-El, MD

American Academy of Otolaryngology - Head and Neck Surgery, 1998, Fellow 1992 American Academy of Facial Plastic and Reconstructive Surgery, 1989-American Medical Association, 1991-Kings County Medical Society, Otolaryngology Section, 1991-New York Head and Neck Society, 1992-American College of Surgeons (Associate Fellow), 1992-; Fellow, 1994-The Society of Head and Neck Surgeons, 1993-North American Skull Base Society, 1994-Society of University Otolaryngologists, 1994-Medical Society of the State of New York, 1994-New York Laryngological Society, 1995-American Rhinologic Society, Member, 1993-; Fellow, 1995 American Laryngological Association, 1997-The American Broncho-Esophagological Association, Member, 1998-American Society for Head and Neck Surgery, 1996-American Laryngological, Rhinological and Otological Society (The Triological Society), Fellow, 1997-President, The American Laryngological Association Vice-President, The Triological Society

Victor Lagmay, MD

American Academy of Otolaryngology - Head and Neck Surgery New York Head and Neck Society American College of Surgeons – Fellow

Jessica W. Lim, MD

American Academy of Otolaryngology – Head and Surgery New York Head and Neck Society American College of Surgeons - Fellow

Ann Plum, MD

American Academy of Otolaryngology Head and Neck Surgery The Triological Society American Society of Pediatric Otolaryngology Alpha Omega Alpha Phi Beta Kappa Sigma Xi

Michal Preis, MD

American Academy of Otolaryngology-Head and Neck Surgery

Abraham Shulman, MD,

American Academy of Ophthalmology & Otolaryngology - Fellow 1962 American College of Surgeons - Fellow 1974 American Academy of Facial Plastic & Reconstructive Surgery - Fellow - 1963, Emeritus – 1997 American Neurotology Society - Fellow 1974 Association for Research in Otolaryngology -1964 American Society for Laser Medicine and Surgery - Fellow Physician 1995; Life Associate Fellow 2009 American Medical Association - Queens County Medical Society; New York Academy of Science Member- 1962-Society of Sigma XI – SUNY Downstate Medical Center Chapter

Neil Sperling, MD

Alpha Omega Alpha Honor Society American Academy of Otolaryngology - Head & Neck Surgery American Neurotology Society, Fellow status Medical Society of the State of New York New York Otological Society



John Weigand, PhD

American Speech Language Hearing Assocation (ASHA) American Academy of Audiology (AAA) American Board of Audiology (Board Certification)

Richard Westreich, MD

American Academy of Otolaryngology - Head and Neck Surgery American Academy of Facial Plastic and Reconstructive Surgery American Rhinologic Society NY Facial Plastic Surgery Society Rhinoplasty Society Fellow of the American College of Surgeons Chair, AAFRPS Publications Sub-Committee

Michael Weiss, MD

AAO-HNS American College of Surgeons American Head and Neck Society Triological Society (Fellow) New York Head and Neck New York Laryngologic (Past President) Maimonides Medical Center - Faculty Practice Advisory Committee

Ankit Kansal, MD

AOA

VISITING LECTURER

Richard M. Rosenfeld, MD, MPH

Office insertion of tympanostomy tubes in young children without general anesthesia: why, who, and how? 5th Course of the Panamerican Association of Otorhinolaryngology, Asuncion, Paraguay, August 2019.

Evidence-based otitis media: what's new, what's important? 5th Course of the Panamerican Association of Otorhinolaryngology, Asuncion, Paraguay, August 2019.

Current guidelines for otitis media with effusion. 5th Course of the Panamerican Association of Otorhinolaryngology, Asuncion, Paraguay, August 2019.

Current guidelines for rhinosinusitis in children. 5th Course of the Panamerican Association of Otorhinolaryngology, Asuncion, Paraguay, August 2019.

Expert series: Evidence-based otitis media. AAO-HNS Annual Meeting, New Orleans, LA, September 2019.

Expert series: How to conduct and interpret systematic reviews. AAO-HNS Annual Meeting, New Orleans, LA, September 2019.

Expert series: Experts guide to tympanostomy tubes. AAO-HNS Annual Meeting, New Orleans, LA, September 2019.

Are we Choosing Wisely in Otolaryngology? AAO-HNS Annual Meeting, New Orleans, LA, September 2019.

Ankyloglossia clinical consensus statement: methodology. AAO-HNS Annual Meeting, New Orleans, LA, September 2019.

How quality metrics impact care and payment in otolaryngology. AAO-HNS Annual Meeting, New Orleans, LA, September 2019.

Judicious and appropriate use of antibiotics in pediatric otolaryngology. Pediatric ENT and Pediatric Infectious Disease Fellow Teaching Rounds, Children's Hospital, Mexico City, Mexico, October 2019.

Evidence-based otitis media. Keynote Presentation, Mexican Society for ORL, Mexico City, Mexico, October 2019.

Controversies in tonsillectomy. Connecticut ENT Society Annual Meeting, Plantsville, CT, November 2019

Controversies in otitis media. Connecticut ENT Society Annual Meeting, Plantsville, CT, November 2019

What's new and exciting with guidelines? Update from the 14th annual Guideline Int'l Network Conference: Guideline Task Force, AAO-HNS, Alexandria, VA, December 2019

AAO-HNS Cochrane Scholars Program: past, present, and future. Guideline Task Force, AAO-HNS, Alexandria, VA, December 2019

Tongue and lip tie in newborns: Fact or fantasy? To cut or not to cut? Otolaryngology Section Annual Clinic Day, Nassau Surgical Society, Uniondale, NY, December 2019

Tonsillectomy: NSAIDs, steroids, antibiotics (postop or not?), and sleep study (preop or not?). Otolaryngology Section Annual Clinic Day, Nassau Surgical Society, Uniondale, NY, December 2019

Food as medicine for type 2 diabetes and obesity. Health Expo & Diabetes Conference, Central Brooklyn Diabetes Task Force, Thomas Jefferson High School, Brooklyn, NY, February 2020Critical thinking in otolaryngology. Otolaryngology Grand Rounds, Columbia Presbyterian Medical Center, New York, NY, February 2020

Ofer Azoulay, MD

Head and Neck Cancer and Facial Reanimation. Medical Grand Rounds. New York Presbyterian Methodist, Brooklyn, NY. February 2020.

Marina Boruk, MD

Challenging CRS Cases: What Would You Do? Invited panelist, Moderator: Waleed Abuzeid, MD, 42nd Annual Vanderbilt Otolaryngology Symposium: Sisson-Ossoff International Workshop, Vail, CO, February, 2020

Sydney Butts, MD

Zygomatic fractures- AO Principles of Operative Treatment of Craniomaxillofacial Trauma and Reconstruction. As a faculty member for this course, also served as a lab instructor for practical exercises, facilitator for small group discussion sections in addition to the lecture presentation-Chicago IL, November 2019







Natalya Chernichenko, MD

Primary Hyperparathyroidism: Surgeon's Perspective. SUNY Downstate Medical Center, Department of Endocrinology, September 2019

Nira Goldstein, MD

Tonsillectomy Controversies. Invited lecture at the SUNY Downstate Medical Center Pediatric Resident Conference, Brooklyn, NY, September 2019.

Ann Plum, MD

Emergencies in Pediatric Otolaryngology. New York Presbyterian Pediatric Emergency Department Fellows Lecture series, May 2020.

AWARDS, HONORS, & SPECIAL ACHIEVEMENTS

Richard M. Rosenfeld, MD, MPH, MBA

AAO-HNS Distinguished Service Award, 5th time

Recognized by AAO-HNS as only member in history to earn 5 Distinguished Service Awards

Selected for Lunch with the Experts, AAO-HNS 2019 Annual Meeting

Appointed to the Expert Committee of the American College of Lifestyle Medicine

Senior Advisor for Guidelines and Measures, AAO-HNS

America's Top Doctors, Castle-Connolly Medical Ltd

Top Doctors in America, Consumer Research Council

Best Doctors in America, Best Doctors, Inc.

Best Doctors in NY, New York Magazine, Inc.

Successfully ran two 26.2-mile marathons and one 12.1-mile half-marathon

Completed transition to a fully whole food, plant-based diet

Marina Boruk, MD

Functioned in a role of Faculty Physician Practice Administrator

Super-user and support of EMR for faculty practice (Patient portal, questionnaires, staff support and continued development on use of HER

Successful completion of MIPS reporting with REG-ENT for 2019 for Dept of Otolaryngology practice

Sydney Butts, MD

Annual Resident Teaching Award - Department Of Otolaryngology, SUNY Downstate Medical Center, June 2020

Arthur Ashe Institute for Urban Health Leadership Award- In recognition of dedication and service to the community in the area of medicine and mentoring- October 2020

Eastern Regional Director, American Academy of Facial Plastic and Reconstructive Surgery-Three-year elected position to represent members in the Eastern region on the AAFPRS Board (January 2020-October 2022)

Natalya Chernichenko, MD

Super Doctor's New York Rising Star

Nira Goldstein, MD, MPH

New York Super Doctors 2020

Best Doctors in America 2019-2020

Appointed to Chair of the Committee on Academic and Professional Qualifications (CAPQ) 2019-2020

Matthew Hanson, MD

America's Top Doctors, Castle-Connolly Medical Ltd

Super Doctors (NY Times Sunday magazine), Best Doctors

Senior author, "The COACH Score" Oral Presentation at COSM, won Best Resident Presentation Award

Abraham Shulman, MD

Marquis Who's Who in America 73rd Anniversary Edition 2020

2020 Kings County Hospital Honorary

Krishnamurthi Sundaram, MD Marquis Who's Who in America.

NY Times in NY ENT Superdoctors.

2019 Laryngoscope reviewer certificate.

Richard Westreich, MD

Chair of the AAFRPS Publications Sub-committee NY Magazine Best Doctors for 2019

Christopher de Souza, DORL, MS, DNB, FACS, FRCS

Editor in Chief - The International Journal of Head and Neck Surgery

Fellow, American Neurotologic Society

Prayag Patel, MD

Independent reviewer of Otolaryngology – Journal of Head & Neck Surgery

Daniel Sukato, MD

2020 CORE Study Section Resident Reviewer

Denis Lee Resident Travel Grant (Ifugao, Philippines Humanitarian Mission)



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DEPARTMENT EVENTS ORAL AND AUDITORY SCHOOL OF NEW YORK



The Strivright 20th Anniversary Celebration for the Oral and Auditory School of New York. (Dr. Rosenfeld with Lieutenant Governor Kathy Hochul)



Dr. Rosenfeld and Lieutenant Governor Kathy Hochul at the Press Event of the 20th Anniversary Celebration

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NY METROPOLITAN PEDIATRIC AIRWAY SYMPOSIUM



Symposium attendees: L to R: Dr. Zoigner-Agar, Resident Irizarry, Dr. Nira Goldstein, faculty, Resident Timashpolsky, Resident Schild and Dr. Ann Plum, faculty



(L to R): Aline, Julia, Lana, Elony, Viana and Veronica



(L to R): John, Haley and Anastasiya



(Left): front to back: Resident Wu, Resident Ballard and his girl friend Xotchiltl (Right): front to back: Resident Kansal, Resident Mathews, Resident Liang



(L to R): Mariam, Carole, Ruby



(L to R): Sheneeza, Bibi, Billy's wife Katherine and Billy



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(L to R): Resident Tabtabai, Resident Schild and wife Ilana

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Party attendees socializing at the cocktail hour



(L to R): Resident Tabtabai, Dr. Boruk and Resident Sukato



Party Attendees



Dr. Bentsianov and his wife Marie



Resident Schild's wife Ilana and Resident Irizarry



(L to R): Resident Ballard, Dr. Harris, Resident Sukato and Resident Wu



Dr. Rosenfeld and his wife Mindy



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DEPARTMENT EVENTS HOLIDAY PARTY AT CHINAR



Dr. Goldstein and Dr. Harris



Dr. Zoizner-Agar and his wife Sharon



(L to R): Bibi and Yvette



(L to R): Sheneeza, Sandra and her friend Noel



(L to R): Dr. Abu Ghanem and Dr. Lagmay



(L to R): Resident Schild's wife Ilana, Resident Schild, Resident Wu and Resident Irizarry



(L to R): Resident Ballard and his girl friend Xotchiltl



(L to R): Resident Kansal, Resident Timashpolsky and Resident Mathews



(L to R) standing: John's wife Sharon, John, Anastasiya, and Haley (L to R) sitting: Tameka and her husband Shaun



On the dance floor



On the dance floor



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On the dance floor

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FOLARYNGOLOG



Singer from Chinar



The DJ/Singer from Chinar



One the dance floor



On the dance floor



DJ/singer Constantine from Chinar

PHILIPPINES MISSION 2020



In total (as a group), 1848 patients were seen over a 4 day period

- 601 of those were "ear" visits, which included ear exams, cleaning, audiology, and hearing aid fitting
- Performed 29 ear surgeries, including 20 tympanoplasties and 9 BMTs
- Dan Sukato helped repair 5 cleft lips, 6 cleft palates, and performed 3 pharyngeal flaps

Dr. Preis was a fantastic mentor, and helped make it a terrific, hands-on experience. The patients were incredibly appreciative of our help









In the operating room



In the operating room



(L to R): Resident Sukato and Dr. Preis



(L to R): Resident Sukato and Resident Ballard



In the operating room



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Abu-Ghanem S, Sung CK, Junlapan A, et al. Endoscopic Management of Postradiation Dysphagia in Head and Neck Cancer Patients: A Systematic Review. Ann Otol Rhinol Laryngol. 2019;128(8):767-773. doi:10.1177/0003489419837565

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Akdagli S, Dimaculangan D, Ferzli G, **Butts SC**. Anesthesia for Minimally Invasive Facial Aesthetic Surgery, in Complications in Minimally Invasive Facial Rejuvenation: Avoidance and Management. Carniol PJ, Avram M and Brauer J, eds. New York, Thieme; 2020

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Irizarry R, Sukato D, Kollmar R, Schild S, Silverman J, Sundaram K, et al. Seizures induce obstructive apnea in DBA/2J audiogenic seizure-prone mice: Lifesaving impact of tracheal implants. Epilepsia. 2020;61(2):e13-e16. doi:10.1111/epi.16431

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Schilder AGM, Rosenfeld RM, Venekamp RP. Acute otitis media and otitis media with effusion. In: Flint PW, Francis HW, Haughey BH, et al (eds). Cummings Otolaryngology Head and Neck Surgery. 7th Edition. Elsevier, Inc. Philadelphia: 2020; Chapter 199:2956-69.

Rosenfeld RM, Helzner B. Eating for Health and Longevity: A Practical Guide to Adding More Whole, Plant-Based Foods to Your Diet. Brooklyn: SUNY Downstate Committee on Plant-based Health and Nutrition. 2020; https://www.downstate.edu/plantbased/pdf/eating_for_health_longevity.pdf. Della Rocca R, Della Rocca D, Reddy H and Rousso J, eds. New York, Springer; 2020

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PRESENTATIONS

Richard Rosenfeld, MD, MPH, MBA

How to read journal articles. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2019

Eating for energy, health, and longevity. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, September 2019.

Acute otitis media update. Pediatric Resident Conference, Department of Pediatrics, SUNY Downstate Medical Center, Brooklyn, NY, October 2019.

Effective use of online resources for practice-based learning and improvement. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, October 2019.

AAO-HNS Cochrane scholars program. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, October 2019.

Curriculum Vitae clinic for residents. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, November 2019.

Why medicine is still a great career. Alumni Mentoring Program, SUNY Downstate Medical Center, Brooklyn, NY, November 2019

Otolaryngology as a career choice. ENT Club, SUNY Downstate Medical Center, Brooklyn, NY, November 2019

Quality improvement update: What's new, what's important? Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, January 2020

Business of medicine: managing your office finances and accounts receivable. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, January 2020

Plant-based nutrition to prevent, treat, and reverse type 2 diabetes. Endocrine Grand Rounds, Dept. of Medicine, SUNY Downstate Medical Center, Brooklyn, NY, February 2020

Financial savvy for physicians. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, February 2020

Investing 101: Planning for future security and prosperity. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, March 2020

Eating for health and longevity. Downstate Initiative for Nutritional Empowerment (DINE) Student Club, SUNY Downstate Health Sciences University, Brooklyn, NY, March 2020

Controversies in tonsillectomy. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, April 2020

Business of medicine: responding to revenue declines during the Covid-19 pandemic. SUNY Downstate Health Sciences University, Brooklyn, NY, April 2020.

Sara Abu-Ghanem, MD

Leukoplakia: Diagnosis and management. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, February 2020

A Novel Approach for Treating Vocal Fold Mucus Retention Cysts: Awake KTP Laser Assisted Cyst Drainage and Marsupialization. W.Z. Gao (presentor), S. Abu-Ghanem, L.S. Reder, M. Amin, M.M. Johns. The Fall Voice Conference. Plano, Texas. October 2019.

Leukoplakia: Diagnosis and management. Consortium of Resident Otolaryngologic knowledge Attainment (CORONA) initiative in Otolaryngology resident education http://entcovid.med.uky.edu/, May 2020

SLP-Otolaryngology interdisciplinary assessment protocol: Vocal fold injection augmentation and swallowing outcomes in acute postoperative period. 2020 Dysphagia Research Society (DRS) Annual Virtual Meeting. June 2020. (Poster).

Ofer Azoulay, MD

The Role of Frozen Section in Oral Cavity Cancer. The annual conference of the Israeli Head and Neck Society. Tel Aviv, Tel Aviv, Nov 2019.

Advances in Head & Neck Microvascular Reconstruction. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, May 2020.

Boris Bentsianov, MD

The Larynx, Dysphonia, and Dysphagia. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2019

Verrucous changes after chronic keratosis of Vocal folds. New York Laryngological Society Meeting, New York, NY, November 2019

Videostroboscopy Interpretation. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, February 2020

Transition to fellowship or Practice? Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Marina Boruk, MD

Allergy and Immunology, Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2019.

Rhinology Imaging Review. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, January 2020.

Sydney Butts, MD

Nasal Reconstruction: Soft Tissue considerations & Functional Rhinoplasty. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2019.

Alessi A, Noh MG, Corti S, Yusopov S, Valesky W, Anziska Y and Butts SC. Concussion Risk in Facial Trauma Patients: A Prospective Study. Podium Presentation at the Section Meeting of the Triological Society, Coronado CA, January 2020.

Patel P, Hinds S, Oh JK, Plum A and Butts SC. Immediate post-operative outcomes of tracheostomy in children and adults and its implications for a quality initiative. Poster Presentation at the Section Meeting of the Triological Society, Coronado CA, January 2020.

Natalya Chernichenko, MD

Healthcare disparities in head & neck cancer. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2020.

Christopher de Souza, DORL, MS, DNB, FACS, FRCS

Otoplan and insertion depth of electrodes in cochlear implantation, Asia Pacific Conference on Cochlear Implants, Tokyo, November 2019.

Difficult cases in cochlear implantation, The Cochlear Implant Workshop – The Cochlear Company, Sydney, Australia, October 2019.

Nira Goldstein, MD

Etiology and Therapeutic Strategies to Common Pediatric Illnesses, Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2019.

Management of Fatigue. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2019.

Matthew Hanson, MD

Auditory Physiology, Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2019.

Vestibular Physiology, Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2019.

Richard Kollmar, PhD

Morello, T. D., Kollmar, R., and Stewart, M. Hippocampal formation in Carollia perspicillata. Society for Neuroscience 49th Annual Meeting. Control/Tracking Number: 2019-S-9208-SfN. Chicago, IL, October 2019.

Orman, Morello, T. Kollmar, R., and Stewart, M. Claustral-amygdalar connections may link fear and perception. 72nd Annual meeting of the Japan Society of Neurovegetative Research (the Japan Autonomic Nervous System Society). Kokura, Japan, November 2019.

Irizarry, R., Sukato, D., Kollmar, R., Silverman, J. B., Sundaram, K., Stephenson, S., and Stewart, M. Seizures induce obstructive apnea in DBA/2 audiogenic-seizure-prone mice: lifesaving impact of tracheal implants. American Epilepsy Society Annual Meeting. Baltimore, MD, December 2019.

Mooney, S., Kollmar, R., Gurevich, R., Tromblee, J., Banerjee, A., Sundaram, K., Silverman, J. B., and Stewart, M. An oxygen-rich atmosphere or systemic fluoxetine extend the time to respiratory arrest in



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a rat model of obstructive apnea. Late breaking abstract. American Epilepsy Society Annual Meeting, Baltimore, MD, December 2019.

Michal Preis, MD

Endoscopic ear surgery and eustachian tube balloon dilation, Otolaryngology Grand Rounds, SUNY Downstate Medical Center, September 2019.

Ann Plum, MD

Deep Space Neck Infections. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2019.

An Introduction to the Head and Neck. SUNY Downstate Medical Center, Physician Assistants Program, Brooklyn, NY, July 2019.

Endoscopic Injection versus repair of type 1 laryngeal clefts: A systematic review and meta-analysis. American Academy of Otolaryngology- Head and Neck Surgery Annual Meeting, New Orleans, Louisiana, Brooklyn, NY, September 2019..

Pediatric Neck Masses. Department of Pediatrics Grand Rounds, Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, October 2019.

Treating children with residual obstructive sleep apnea following adenotonsillectomy. 12th Annual New York Pediatric Airway Symposium, Columbia Medical Center, New York, NY, November 2019.

The Management of Choanal Atresia. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center Brooklyn, NY, December 2019.

An overview of Pediatric airway anomalies. ENT Interest Group Lecture Series, SUNY Downstate Medical Center Brooklyn, NY, May 2020.

Neil Sperling, MD

Becoming a hearing healthcare advocate: The pivotal roles of the otolaryngologist and audiologist. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, October 2019.

Krishnamurthi Sundaram, MD

Thyroid & Parathyroid. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2019.

Prevention of Unplanned Pharyngocutaneous Fistula in Salvage Laryngectomy: Downstate Fistula Formula Update. Irizarry R, Sukato D, Sundaram K. The Triological Society Combined Section Meeting, January 2020.

"Panel on the Pandemic" Webinar on Zoom/Facebook. Invited speaker. Cancer Institute Foundation {WIA} International, May 2020

John Weigand, PhD

Audiology for Physicians, Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2019.

Audiology for Primary Care Providers. Department of Geriatrics, Downstate Medical Center, Brooklyn, NY, October 2019.

Audiology for Primary Care Providers, Department of Family Practice, Downstate Medical Center, Brooklyn, NY, February 2020.

Audiology for Primary Care Providers, Department of Medicine, Downstate Medical Center, Brooklyn, NY, May 2020.

Audiology for Medical Students, Downstate Medical Center, Brooklyn, NY, June 2020.

Michael Weiss, MD

Surgical Rounds at Maimonides Medical Center - New Developments in Parathyroid Disorders, Maimonides Medical Center, July 2019.

Daniel Ballard, MD

Cochlear Nerve Hypoplasia Identified Years After Passing Newborn Hearing Screen, AAOHNSF Annual Meeting 2019.

Systematic Review of Endoscopic Versus Microscopic Stapes Surgery for Stapes Fixation, AAOHNSF Annual Meeting 2019.

Endoscopic Injection Versus Repair of Type 1 Laryngeal Clefts: A Systematic Review, AAOHNSF Annual Meeting 2019.

Establishing Interrater and Intrarater Reliability of a Novel Chronic Ear, Triological Society Combined Sections Meeting, 2020.

Systematic Review of Endoscopic Versus Microscopic Stapes Surgery for Stapes Fixation, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Rahul Gulati, MD

Preoperative Evaluation for Rhinoplasty. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, February 2020.

Optimal Management of HPV+ Oropharyngeal SCC. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, May 2020.

Neonatal Ear Molding. Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Hunter Hopkins, MD

Diagnostic considerations in salivary gland neoplasm. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

ACE inhibitor prescribing habits of a providers serving a predominantly Afro-Caribbean population, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Sandra Ho, MD

Systematic Review of Endoscopic versus Microscopic Stapes Surgery, AAO-HNSF annual meeting, New Orleans, September 2019.

Establishing Inter-rater and Test-retest reliability of a Novel Chronic Ear Grading System, TRIO Combined Sections Meeting, San Diego, January 2020.

Prospective Validation of the COACH score: A Novel Chronic Ear Grading System. Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Rachel Irizarry, MD

Pediatric Head and Neck Neoplasms. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, November 2019.

Prevention of unplanned pharyngocutaneous fistula in salvage laryngectomy: Downstate fistula formula update. Triological Society 2020 Combined Sections Meeting, Coronado, CA January, 2020.

A rare case of intranasal lobular capillary hemangioma. Triological Society 2020 Combined Sections Meeting, Coronado, CA, January 2020.

Risk assessment in major head and neck oncologic surgery. Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Ankit Kansal, MD

A dizzying array of surgical options for Meniere's Disease. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, September 2019.

Neurolaryngology. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, April 2020.

AOCMF Trauma Management. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, February 2020

Increased survival in DBA/2J audiogenic seizure-prone mice after oxygen enrichment during specific seizure phases and the impact of a tracheal implant serving as a surrogate airway, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Jennifer Liang, MD

Comparison of outcomes for total thyroidectomy in patients with Graves' disease and patients with multinodular goiters, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Prayag Patel, MD

Management of Skull Base Tumors. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, February 2020.

Outcomes of Endoscopic Endonasal Surgery for Skull-base Chondrosarcoma: A Systematic Review, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020. DEPARTMENT OF

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Sam Schild, MD

Congenital Malformations of Branchial Arches and Associated Disorders. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, December 2019.

AOCMF Trauma Management. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, February 2020

The timing of obstructive apneic events in DBA/2J audiogenic seizure-prone mice derived from plethysmography, behavioral analysis, and controlling the open or closed status of a tracheal implant, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Daniel Sukato, MD

Experience with "Jaw in a Day" Technique, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Ryan Tabtabai, MD

Cochlear Nerve Hypoplasia Identified Years after Passing Newborn Hearing Screen" poster presentation AAO-HNSF Annual Meeting, New Orleans, LA, September 2019.

Expanding indications and advancements in cochlear implantation, Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, October 2019.

Analysis of Anosmia During the Covid-19 Pandemic, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Alisa Timashpolsky, MD

Management of Type 1 Posterior Laryngeal Clefts – A Systematic Review and Meta-Analysis- Primary Presenter - Alisa Timashpolsky, MD, Sam Schild, MD, Daniel Ballard, MD, Sarah Leventer, BS, Richard Rosenfeld, MD, MPH, MBA, Ann Plum, MD, AAO-HNSF Annual Meeting, New Orleans, LA, September 2019

Trends in Free-Flap Salvage and Management in Otolaryngology, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Michael Weber, MD

AAO-HNSF Resident Learning Guide. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, January 2020.

Microtia: Diagnosis & Management. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, February 2020.

Hemodynamic management after free Flap surgery. Department of Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Case series of adult onset idiopathic auditory neuropathy, Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

Derek Wu, MD

Impact of Adenotonsillectomy on Homework Performance in Children with Obstructive Sleep Apnea (OSA). Annual FEL Alumni & Resident Research Day, SUNY Downstate Medical Center, Brooklyn, NY, June 2020.

AFFILIATED HOSPITALS

SUNY Downstate Health Sciences University University Hospital of Brooklyn

University Hospital of Brooklyn has been an integral part of SUNY Downstate Health Sciences University, one of America's most prominent educational and patient care networks. The 376-bed University Hospital serves the needs of nearly 3 million people. Brooklyn's only academic medical center, SUNY Downstate encompasses the College of Medicine, School of Graduate Studies, College of Nursing, College of Health Related Professions and extensive research facilities.

The Hospital is a regional referral center for neonatology, transplantation and pediatric hemodialysis and offers a rich resource of sophisticated medical facilities, many of which are found nowhere else in the region. Physicians refer patients here for diagnosis, treatment and rehabilitation services that require our advanced technologies.

University Hospital of Brooklyn is committed to providing quality health care to the people of Brooklyn and beyond. To expand access to medical services, our Emergency Care Center sees patients 24 hours a day, seven days a week. The Hospital also operated 3 satellite health centers to serve community healthcare needs; The Family Health Services Center at 840 Lefferts Avenue, The Center for Healthcare Services at Midwood at 2171 Nostrand Avenue and the Center for Healthcare Services at Bedford Stuyvesant located at 613 Throop Avenue.

The Department of Otolaryngology has a full service presence with specialty services in Head and Neck Surgery and Neurotology. A Tinnitus Clinic has been in operation since 1977 and has evaluated and treated over 25,000 patients with severe disabling tinnitus. Head and Neck Surgery and the Pediatric Otolaryngology Service are active and multidisciplinary conferences are held regularly with corresponding medical specialties. The former otolaryngology clinic has now been renovated and changed into a facility which treats both private and clinic patients. The full array of otolaryngologic subspecialties are represented including Otology, Head and Neck, Oncology, Pediatric Otolaryngology, and Facial Plastic and Reconstructive Surgery.

Kings County Hospital Center

Kings County Hospital Center has a rich legacy for its pioneering role in medicine. Today, with over 627 beds, it remains on the cutting edge of technology and provides the most modern procedures with state-of-the-art equipment. Built in 1831 as a one room infirmary for publicly supported care of the sick, Kings County Hospital Center continues to be a leading healthcare facility whose mission is to provide care to everyone regardless of their ability to pay. The hospital provides a wide range of health services, and specialties are offered in all fields of modern medicine. More than 200 clinics provide a wide array of ambulatory care services. Kings County Hospital Center operates a world-renowned Level 1 Trauma Center, one of only three in the borough, which serves 2.6 million residents of Brooklyn and Staten Island. KCHC, a member institution of the New York City Health & Hospitals Corporation (HHC), is located in the heart of Brooklyn at the juncture of Crown Heights and East Flatbush. The hospital serves the Brooklyn community as both the family doctor and a major provider of a full spectrum of health care services. Throughout its history, the hospital has played a major role in meeting the health care needs of its surrounding population. This role is challenged by the growth of problems with AIDS, drugs, mental health, TB, homelessness, and other epidemics which strain existing resources and means for effective and efficient health care delivery. The Department of Otolaryngology is extremely busy at KCHC and runs an active out-patient facility, in-patient consultation service and surgical schedule. Four residents cover KCHC and UHB as a combined service, with the assistance of one general surgery resident and a dedicated otolaryngology physician assistant. The Department of Otolaryngology has scheduled Operating Room activities five days a week. All otolaryngologic subspecialties are covered with emphasis on head and neck cancer surgery, facial plastic and reconstructive surgery, pediatric otolaryngology and maxillofacial trauma. Matthew B. Hanson, MD is the director of the service and he is assisted by 10 additional part-time and voluntary board-certified otolaryngologists.

Maimonides Medical Center

A 705-bed hospital, Maimonides Medical Center is the third largest independent teaching hospital nationally in the size of its training programs, providing a full range of inpatient and outpatient medical and surgical care. Maimonides sponsors 19 residency training programs and three SUNY-HSCB integrated programs with close to 400 residents and fellows. With over 40% of its residents in primary





ARYN care positions, Maimonides continues to strive to meet the demand for generalist physicians. It has recently been accredited for its Primary Care Medicine Residency Program. Through intensive recruitment, it has recently added five full time primary care faculty. A Certificate of Need has been obtained for a primary care facility in Borough Park to provide care to an underserved community of Russian immigrants, and the Medical Center is in the process of making curriculum changes in Medicine, Pediatrics and Obstetrics and Gynecology to reflect an increased focus on primary care training.

New York-Presbyterian Brooklyn Methodist Hospital

New York-Presbyterian Brooklyn Methodist Hospital is located in the historic brownstone neighborhood of Park Slope in Brooklyn, New York, between Seventh and Eighth Avenues, on Sixth Street. The hospital is a 651-bed voluntary, non-profit hospital with about 38,000 annual inpatients admissions, 250,000 annual outpatient visits, and about 6,000 births. The Hospital is also a major teaching hospital, with ten graduate medical education programs and five schools that provide training in allied health professions. New York-Presbyterian Brooklyn Methodist Hospital is affiliated with the Weill Cornell Medical College of Cornell University and is a member of the New York-Presbyterian Healthcare System. New York-Presbyterian Brooklyn Methodist Hospital has a number of institutes that bring together multidisciplinary specialists to provide care and offer community education and physician referral services. The Institute for Advanced Otolaryngology at NYM was established by the SUNY Downstate Department of Otolaryngology in July 2013 and includes the Center for Head, Neck and Skull Base Surgery and the Center for Advanced Pediatric Otolaryngology. Our on-site presence includes two otolaryngology residents (PGY5 and PGY2 with home call), administrative support, a faculty practice, and a new medical student rotation (July 2014). Daily clinical and operative instruction is provided by our faculty along with a monthly tumor board. Tertiary level cases are performed with state-of-the-art equipment that includes lasers, robots, image guidance, and operative microscopes and also with equipment for microvascular, advanced pediatric, cleft lip and palate, rhinologic, laryngeal, otologic, and head, neck, and skull base surgery.

Manhattan Eye, Ear & Throat Hospital/Lenox Hill Hospital

Manhattan Eye, Ear & Throat Hospital (MEETH) opened its doors to patients on October 15, 1869 at its original location, 223 East 34th Street. At the time, much of the city did not have access to many vital services and the lack of basic healthcare drastically affected everyday life. Faced with this reality, the New York state legislature issued a charter to found a voluntary, non-profit hospital whose mission was to "...alleviate the sufferings of the poor, the prevention of pauperism, and the cultivation and diffusion of sound knowledge of all that relates to the diseases of the eye and ear." Since its founding, MEETH has built upon its proud tradition of providing patient-centered care and has grown to become the world-renowned facility that it is today. MEETH and Lenox Hill Hospital joined Northwell Health in 2011. MEETH, which is located at 210 East 64th Street, is a specialized center that continues to focus on high-quality care for eye, ear and throat conditions. The center provides advanced treatments for thousands of patients each year, offering a range of services and expert care. Areas of expertise in ambulatory medicine include ophthalmology, otolaryngology (ENT), orthopedics, podiatry, plastic surgery, urology, gynecology, dental surgery and general surgery. 17 operating rooms equipped with the latest technology for surgery. Highly specialized medical and clinical staff, with skilled professionals across multiple disciplines collaborating to deliver the best care. Six outpatient practices including the Retroviral Disease Center, the Center for Attention and Learning, Outpatient Center for Mental Health, Ophthalmology, Otolaryngology and Plastic Surgery. As of November 2013, the otolaryngology resident on the ambulatory care rotation spends two days per month at the Manhattan Eye, Ear and Throat Hospital (MEETH) performing cosmetic facial plastics cases and seeing office patients under the direction of Richard Westreich, MD. This rotation provides training in cosmetic facial plastic surgery, with both operating room and in-office procedures. Pre-operative and post-operative care is emphasized. Since the fall of 2015, residents are also spending two days per month with Sujana Chandrasekhar, MD, performing otologic cases.

Lenox Hill Hospital is a 652-bed, acute care hospital located on Manhattan's Upper East Side. A staple in the community for more than 150 years, the hospital has earned a national reputation for outstanding patient care and innovative medical and surgical treatments. The mission of Lenox Hill Hospital is to deliver outstanding healthcare with compassion and respect, to promote wellness in its communities, and to advance the field of medicine through education and research.

The hospital is particularly well known for excellence in internal medicine, cardiovascular disease, orthopedics, sports medicine, otolaryngology/head and neck surgery and maternal/child health. The hospital is also a recognized leader in public health education and community outreach.

EDUCATIONAL PROGRAMS **Executive Summarv**

The Department of Otolaryngology at SUNY Downstate Medical Center had intensive continuing medical education activities during the academic year of 2019-2020. The mission of our department's activity is to provide formal education, disseminate new information, provide a forum for presentation and discussion, and to ensure improvements and adjustments based on feedback from attendees.

The department's continuing education is based mainly on Grand Rounds, a weekly conference that takes place at the SUNY Downstate campus. All Otolaryngology, Audiology, Speech and Language Pathology professionals as well as professionals in related disciplines are invited. The conference is mandatory for the faculty and residents of our department.

The morning conference is divided into four parts. The first half hour from 6:30 to 7:00am is dedicated to the discussion of various residency related topics. During the 7:00 to 8:00 am hour, lectures are delivered by invited quests who are nationally known for their expertise and experience in a variety of topics. In-house speakers and faculty as well as residents present information during the 8:00 to 9:00 am hour. Also, journal club occurs from 8:00 to 9:00 on the second Thursday of each month and morbidity & mortality conference occurs during this time on the fourth Thursday. Biweekly Head and Neck Tumor Board are included in the schedule from 9:00 to 10:00 with the other weeks being dedicated to Comprehensive Otolaryngologic Curriculum Learning through Interactive Approach (COCLIA) Review Sessions. Various aspects of basic sciences as related to the field of Otolaryngology-Head & Neck Surgery are presented and discussed from 7:00 to 9:00 am during July and August.

The roster of guest speakers for 2019-2020 is included in this report. In general, all the speakers were knowledgeable and gave excellent lectures with organized information relevant to the practice of Otolaryngology-Head and Neck Surgery. The overall quality of the presentation was rated highly, as per the anonymous evaluation forms submitted. Practitioners, as well as residents, use the information which is disseminated during these conferences for their day to day clinical practice. The same lectures are used also as a forum for the audience to ask questions and to discuss difficult cases.

The major strength of this program is the diversity of the topics discussed and their relevance to the clinical practice of all attendees. This Grand Rounds Conference format will continue, with three hours dedicated to a single topic which is explored in depth.

Each year residents participate in a temporal bone dissection course run by Dr. Matthew Hanson, anatomy lab surgical dissection sessions taught by the head and neck and rhinology faculty and simulation sessions run by Dr. Ann Plum. The residents also attend an AO North America maxillofacial trauma course during their PGY 3 or PGY 4 year. All residents receive a subscription for the Boards Vital for ENT Review and the AAO-HNS Focused Lifeline Education Xperience (FLEX). Each spring the residents take the ABOto Otolaryngology Training Examination.





GOALS AND OBJECTIVES

July 1, 2020 – June 30, 2021 Department of Otolaryngology SUNY-Downstate and Affiliated Hospitals Educational Program for Residents

Sponsoring Institution: State University of New York-Downstate Medical Center **Affiliated Institutions:** Kings County Hospital Center, Maimonides Medical Center, University Hospital of Brooklyn, Lenox Hill Hospital - Manhattan Eye, Ear and Throat Hospital, New York-Presbyterian Brooklyn Methodist Hospital

Chair and Program Director: Richard M. Rosenfeld, MD, MPH, MBA **Associate Program Director:** Nira A. Goldstein, MD, MPH

Overall Residency Experience

Goals and Objectives for resident education are best understood in the context of the entire program, which is based in 5 academic centers, as well as in private offices in the region. The academic centers are located in Brooklyn and Manhattan and include Kings County Hospital Center (KCHC), University Hospital of Brooklyn (UHB), Maimonides Medical Center (Maimo), Lenox Hill Hospital - Manhattan Eye, Ear and Throat Hospital (MEETH) and New York-Presbyterian Brooklyn Methodist Hospital (Methodist).

The Department of Otolaryngology offers a fully accredited residency program that provides education and experience in surgery, inpatient and outpatient clinical care, basic sciences and research as they relate to diseases of the head and neck. The practice of otolaryngology- head and neck surgery is exciting, as it involves aspects of medicine, pediatrics, neurology, neurosurgery, ophthalmology, plastic surgery, and surgery. It is a specialty inclusive of all age groups from newborns with congenital anomalies to the very aged with profound hearing losses or head and neck tumors. Many of those conditions treated by the otolaryngologist-head and neck surgeon require periodic examinations with extended follow-up, so that the patient-physician relationship becomes more established.

Some practitioners in otolaryngology-head and neck surgery concentrate in specific areas, such as laryngology, neurotology, rhinology, pediatric otolaryngology, facial plastic surgery, skull base surgery, microvascular reconstruction, or head and neck oncology. Others emphasize the medical or the surgical aspects of head and neck problems, including allergy, immunology, and communicative disorders. This broad mix of patients, medical disorders, and surgical challenges makes otolaryngology an exciting and rewarding specialty.

Each resident develops skill and knowledge of all aspects of modern otolaryngology. Practice experience in private, governmental, and municipal hospitals is blended to give the trainee a quality learning experience. Individual supervision and teaching are provided at all levels of training. Participation in clinical care and the operating rooms is commensurate with the trainee's level of competence and ability. Ample clinical material is available, ensuring graduated resident responsibility. A basic science program is strategically placed at the beginning of the trainee's education in otolaryngology-head and neck surgery.

High priority is given to educating medical students that rotate within the department. Students elect to spend from two weeks to two months on the service. Residents participate actively in a coordinated program designed to furnish the students with a basic core of knowledge and understanding of the discipline. Outpatient clinics, ward rounds, operating room exposure, and special seminars are the foundation of their learning.

The rare combination of diverse practice settings and a single training program serving a population of more than 3 million inhabitants of Brooklyn and Staten Island makes the SUNY Downstate Residency Training Program a unique opportunity for exposure to all aspects of Otolaryngology.

Program Core

The Otolaryngology Residency is five years. The first year is coordinated with the SUNY-Downstate Medical Center Departments of Surgery, Anesthesiology, Emergency Medicine, Oral and Maxillofacial Surgery and Neurosurgery, with whom we have had a productive working relationship for many years. The excellent training provided by those departments is an integral part of the program designed to prepare the contemporary otolaryngologist-head and neck surgeon. The following four years are spent in the Department of Otolaryngology.

There are 15 residents, with 3 residents accepted each year through the National Resident Matching Program. The training program is designed to provide graduated responsibility, culminating in an intensive and tailored Chief Residency year. There is full attending physician supervision in clinics, inpatient care and operating rooms in all affiliated hospitals.

Rotation Schedule

PGY-1 (n=3)	Surgery (2 months selected from general surgery and pediatric surgery)	1 month in each of the following:	Otolaryngology: 2 months at KCHC/ UHB and 4 months at Maimonides
	4 months	4 months	4 months
PGY-2 (n=3)	KCHC/UHB	KCHC/UHB	Lenox Hill/MEETH
PGY-3 (n=3)	KCHC/UHB	NYMH	Research
PGY-4 (n=3)	Lenox Hill/MEETH	Maimonides	KCHC/UHB
PGY-5 (n=4)	Ambulatory Care/MEETH/ NYMH	NYMH	KCHC/UHB

Abbreviations:

KCHC/UHB – Kings County Hospital Center/University Hospital of Brooklyn MEETH – Manhattan Eye, Ear and Throat Hospital NYMH - New York-Presbyterian Brooklyn Methodist Hospital



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ACGME Core Residency Training Competencies by Training Year SUNY Downstate Department of Otolaryngology

Purpose

This document describes expectations by training year for otolaryngology residents enrolled in the training program at the SUNY Downstate Department of Otolaryngology and comprehensive overview of the program structure. To view the Department of Otolaryngology's "Residency Program Goals and Objectives" please go to http://www.downstate. apply to the primary training hospital and all affiliates. This is intended as a supplement to the document entitled "Residency Program Goals and Objectives," which is a more edu/otolaryngology/

Table 1

Medical Knowledge: Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social behavioral sciences, as well as the application of this knowledge to patient care.

	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Annual otolaryngology in-service examination	Participate in examination	Meet or exceed median PGY-2 score	Meet or exceed median PGY-3 score	Meet or exceed median PGY-4 score	Meet or exceed median PGY-5 score
Basic science*	Familiarity	Attend Basic Science Course	Attend Basic Science Course	In-depth knowledge	In-depth knowledge
H&N Anatomy	Familiarity	Thorough understanding	In-depth knowledge	Mastery	Mastery
Clinical medicine learning focus Approach to the patient	Approach to the patient	Surgical indications and general otolaryngology	General otolaryngology and subspecialties	Otolaryngology subspecialties	Mastery
Temporal bone course†	1	Mastoidectomy, labyrinthectomy	Cochleostomy, ossiculoplasty	Develop confidence; avoid complications	Teach junior residents
COCLIA‡	1	Present basic topics	Present more advanced topics	Present advanced and complex topics	Supervise junior residents; present
AO North America Maxillofacial Trauma Course	I	I	Attend as PGY-3 or PGY-4 resident	Attend as PGY-3 or PGY-4 resident	I
Textbook reading (Bailey's and/ or Cummings)	Case-based; skim chapters	Read all chapters for exposure to field	Read all chapters for understanding	Re-read all chapters for greater insight	Re-read all chapters for mastery
Journal reading	Skim core journals	Read core** ≥ 60 minutes/ week	Read core** and selected others	Read core** & sub-specialty journals	Read core** & sub-specialty journals
AAO-HNS Resident Flex Course	Exposure	100% participation	100% participation	100% participation	100% participation

*Basic Science includes anatomy, physiology, genetics, audiology, speech pathology, taste/smell, wound healing, child development TTemporal Bone Course includes anatomy, mastoid drilling technique, middle ear prosthesis placement, and implantable hearing devices #COCLIA, or Comprehensive Otolaryngologic Curriculum Learning through Interactive Approach, is a teaching tool from the AAO-HNS Foundation to help residents learn otolaryngology – head and neck surgery hrough bimonthly conferences with faculty supervision

*Core journals are Ann Otol Rhinol Laryngol, Arch Otolaryngol Head Neck Surg, Laryngoscope, Otolaryngol Head Neck Surg, and Otolaryngol Clin NA.

Table 2

Patient Care, Clinical Skills: Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Clinical skills and basic procedures	Perform H&N exam	Proficiency in H&N exam; perform flexible endoscopy	Proficiency in adult endoscopy; develop laser skills	Proficiency in peds endoscopy; learn stroboscopy	Mastery; develops personal style and approach
Admissions, transfers, dis- charges	Participates	Coordinates with senior residents	Coordinates with senior residents	Supervision and teaching	Supervision and teaching
Use of labs, ancillary studies, consultations	Understands appropriate use	Handles with supervision	Effective and appropriate use	Masters appropriate use	Mastery and team leader
Administrative skills: EHR, documentation, medical records, transcriptions	Uses appropriately	Timely and accurate completion of assignments	Timely and accurate completion of assignments	Increasing role in supervision and teaching	Mastery and team leader
Follow-up care	Participates	Completes assignments	Plans care and ensures follow-up	Increasing role in coordination of care	Master and team leader
Universal precau- tions	Universal precau- Uses appropriately ions	Uses appropriately	Uses and teaches	Uses and teaches	Leader & role model

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Table 2

Patient Care, Surgical Procedures: Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

Specialty	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
General otolaryn- gology, head and	Physical examination ACLS/ ATLS	Fine needle aspiration, neck Insertion of tracheostomy tube	Level 1 neck dissection Tracheotomy	 Superficial parotidectomy Selective neck dissection 	 Total parotidectomy ± facial nerve graft
ircen suigery	Central line placement	Direct laryngoscopy, diagnostic	Deep lymph node excision/ biopsy	 Partial glossectomy 	 Total glossectomy Radical neck dissection
	 Arterial blood gas sampling Nasogastric tube placement 	• I&D neck abscess	 Submandibular gland excision Caldwell Luc procedure 	 Thyroidectomy Parathyroidectomy 	Modified radical neck dissection
	 Foley catheter placement Incision and drainage, simple abscesses 		 Esophagoscopy, diagnostic, dilation Panendoscopy with biopsy 	 Excision congenital neck mass, all types including thyroglossal duct and branchial cleft cysts 	 Lateral rhinotomy Skull base resection, anterior, middle
	 Management tracheostomy tubes Basic wound management 			 Endoscopic approach hypophysectomy Lip wedge resection 	 Composite resection, oral cavity/ oropharynx Mandibular resection
				 Oral cavity tumor resection Auricular excision 	 Parapharyngeal space tumor excision
					 Maxillectomy ± orbital exenteration Laryngopharyngectomy
					Major vessel repair
Otology and neurotology	N/A	 Microscopic examination, external ear In-office adult myringotomy/ tube Audiogram interpretation Tympanogram interpretation 	Tympanoplasty, I Simple mastoidectomy	 Tympanoplasty IHV Mastoidectomy, canal wall down Canaloplasty Resection cerebellopontine angle tumor, assistant 	 Ossiculoplasty Stapedectomy Stapedectomy Temporal bone resection Skull base resection, lateral Aural atresia repair Aural atresia repair Facial nerve decompression Repair perilymphatic fistula Labyrinthectomy Cochlear implantation Resection CPA turnor, assistant
Allergy	N/A	Fiberoptic intubation, angloedema	Administer and interpret allergy skin test Allergy emergency protocol		
			0		

Adult sleep medi- cine and surgery	N/A	 Septoplasty, turbinate reduction Tonsillectomy 	Uvulopalatopharyngoplasty	Lingual tonsillectomy	• Tongue advancement procedure
Laryngology	• Flexible laryngoscopy		Bronchoscopy, diagnostic Laryngoscopy with excision	 Endoscopic laser ablation ± dilation laryngotracheal stenosis Laryngoscopy with microflap exci- sion, vocal fold mass Endoscopic/ open excision Zenker's diverticulum Tracheoesophageal fistula creation Arytenoidectomy 	 Total laryngectorny Partial laryngectorny, open or endoscopic Laryngotracheoplasty Repair laryngeal fracture Tracheal resection, anastomosis Thyroplasty, arytenoid adduction Injection laryngoplasty
Sinonasal	• Flexible nasopharyn-goscopy	 Anterior and posterior nasal packing Septoplasty Submucous turbinate resection 	 Endoscopic anterior ethmoidectomy Endoscopic maxillary antrostomy Endoscopic polypectomy Endoscopic nasopharyngeal biopsy 	 Endoscopic posterior ethmoidec- tomy Endoscopic sphenoidectomy Endoscopic frontal sinusotomy Frontal sinus trephination 	 Endoscopic repair CSF leak Endoscopic sphenopalatine ligation Osteoplastic frontal sinus obliteration Advanced endoscopic frontal sinusotomy Dacryocystorhinostomy
Pecliatric otolaryngology	N/A	 Foreign body removal, ear, nose, pharynx Myringotonny and tube placement Tonsillectomy Adenoidectomy Frenuloplasty 	 Excision congenital neck masses, all types Bronchoscopy, diagnostic, foreign body removal Esophagoscopy with foreign body removal 	Endoscopic management, laryngo- tracheal stenosis Choanal atresia repair Otoplasty Tracheostomy, age under 2 years	 Laryngotracheal reconstruction, open Lymphangioma excision Management subglottic heman- gioma Excision juvenile nasopharyngeal angiofibroma
Plastic and Reconstructive- surgery	 Suturing of uncomplicated lacera- tions 	 Closed reduction, mandible fracture Closed reduction, nasal fracture Excision skin lesions, primary closure 	 Reduction facial fractures, nasal, malar, orbital blowout, mandible, frontal Pedicle flap procedure, local Split and full thickness skin grafts Repair complex facial lacerations Scar revision 	 Rhinoplasty, closed Pedicle flap procedure, regional Reconstruction external ear Tissue expander placement, removal Eyelid weight placement Brow lift Rhytidectomy 	 Pedicle flap procedure, myocutane- ous Rhinoplasty, open Microsurgical free flap Blepharoplasty Blepharoplasty Facial nerve graft or repair Facial reanimation procedures Cleft palate. Cleft lip repair



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Table 3

Practice-based Learning and Improvement (PBLI): Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning.

Residents are expected to:	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Identify strengths, deficiencies, and limits in one's knowledge and expertise; set learning and improvement goals; perform ap- propriate learning activities	Yes	Yes	Yes	Yes	Yes
Systematically analyze practice using quality improvement meth- ods, and implement changes with the goal of practice improvement	Participate	Participate	Present at multi-disciplinary tumor board	Organize tumor board & present at M&M	Organize tumor board & present at M&M
Incorporate formative evaluation feedback into daily practice; use information technology to optimize learning	Yes	Yes	Yes	Yes	Yes
Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems	Learn search strategies	Use information resources ef- fectively	Learn critical appraisal tech- niques	Assimilate and apply evidence to patient care	Assimilate and apply evidence to patient care
Participate in the departmental Grand Rounds program	Attend and learn format	Case report and topic review	Evidence-based presentations	Evidence-based presentations	Invite speakers* and organize program
Participate in monthly journal club	Learn critical appraisal	Learn critical appraisal	Master critical appraisal	Master critical appraisal	Organize and teach
Participate in the education of patients, families, students residents, and other health professionals	Participate in team	Participate in team	Develop independence	Serve as role model	Serve as role model
Research expectations	Co-investigator	Case report	Chart review	Planned, protocol-driven research	Present and publish research

*Invitations to invited speakers should be issued at least 6 months in advance, with a "cc" to the relevant attending

Table 4

Interpersonal and Communication Skills: Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health

Residents are expected to:	ΡGΥ-1	PGY-2	PGY-3	PGY-4	PGY-5
Communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds	Participate with supervision	Participate with supervision	Greater independence	Continued improvement	Team leader and mentor to junior residents
Communicate effectively with physicians, other health profes- sionals, and health related agencies	Participate with supervision	Participate with supervision	Greater independence	Continued improvement	Team leader and mentor to junior residents
Work effectively as a member or leader of a health care team or other professional group	Work effectively as team member	Work effectively as team member	Improve leadership	Prepare for role as chief resident Team leader	Team leader
Act in a consultative role to other physicians and health professionals	Gather information and present	Gather information and present	Formulate plan with supervision Increased independence	Increased independence	Mastery
Maintain comprehensive, timely, and legible medical records	Yes	Yes	Yes	Yes	Yes

Table 5

Professionalism: Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles.

Residents are expected to:	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Demonstrate compassion, integrity, and respect for others	Yes	Yes	Yes	Yes	Yes
Demonstrate responsiveness to patient needs that super- sedes self-interest	Awareness	Awareness	Progressive implementa- tion	Progressive implementa- tion	Mastery
Demonstrate respect for patient privacy and autonomy	Yes	Yes	Yes	Yes	Yes
Demonstrate accountability to patients, society, and the profession	Accountability to patients; self-mastery	Accountability to patients; Accountability to patients; Serve as role model for self-mastery self-mastery team, department	Serve as role model for team, department	Role model at regional and national meetings	Role model at regional and national meetings
Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation	Self-mastery	Self-mastery	Serve as role model	Serve as role model	Serve as role model









Table 6

Systems-based Practice: Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.

Residents are expected to:	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Work effectively in various health care delivery settings and systems relevant to their clinical specialty	Work effectively at Maimonides and UHB/KCHC	Work effectively at Lenox Hill/ MEETH and UHB/KCHC	Work effectively at NYPBM and UHB/KCHC	Work effectively at Maimonides, UHB/KCHC, NYPBM, Mai- monides, and Lenox Hill/MEETH	Mastery
Coordinate patient care within the health care system relevant to their clinical specialty	Participate in team	Participate in team	Coordinate with supervision	Progressive responsibility	Mastery
Incorporate considerations of cost awareness and risk- benefit analysis in patient and or population-based care as appropriate	Understand and consider	Understand and consider	Incorporate	Incorporate	Incorporate
Work in interprofessional teams to enhance patient safety and improve patient care quality	Attend dept. M&M Program evaluation committee	Attend dept. M&M Program evaluation committee	Present at dept. M&M Program evaluation committee; Residency Selection Committee	Present at dept. M&M Program evaluation committee; Residency Selection Committee	Lead and present at dept. M&M Program evaluation committee; Residency Selection Committee
Par participate in identifying system errors and implementing potential system solutions	1	Patient Safety Committee at KCHC	Residents Fellows Subcommit- tee of GMEC at UHB	Residents Fellows Subcommit- tee of GMEC at UHB	Root Cause Analyses (prn)
Advocate for quality patient care and optimal patient care systems	Yes	Yes	Yes	Yes	Yes
Be familiar with ethical, socioeconomic, and medi and cost-effective otolaryngology care within the c analysis of clinical outcomes to ensure such care	nomic, and medico-legal issues that care within the context of the health sure such care	affect the provision of quality and c i care system; and the use of resou	Be familiar with ethical, socioeconomic, and medico-legal issues that affect the provision of quality and cost-effective care and the utilization of resources within the health care system; the provision of quality and cost-effective colaryngology care within the context of the health care system; and the use of resources of that health care system, other medical specialists, information technology, CME, and ongoing analysis of clinical outcomes to ensure such care	of resources within the health care er medical specialists, information t	system; the provision of quality echnology, CME, and ongoing

MEDICAL STUDENT PROGRAM AND OPPORTUNITIES

Introduction to Clinical Medicine: During the first year the department participates in the airway course along with the departments of emergency medicine and anesthesia. Residents and attendings also attend the anatomy lab sessions dedicated to head and neck dissection.

Career Exposure Elective (first & second year students): Students observe basic operative procedures and techniques of history and physical examination in general otolaryngology and pediatric otolaryngology. Students observe residents and attending physicians in the clinic setting and operating room. Students have the opportunity to attend departmental Grand Rounds at SUNY Downstate Medical Center, morbidity and mortality sessions, multidisciplinary tumor board conferences, and other conferences.

Third Year Clerkship Program via the Department of Surgery

Third year students will follow the daily schedule of the residents, seeing patients with them and attending the departmental conferences. All students must attend the rotation every day for the full day unless they have prior permission from the supervising attending to be absent. They are required to read in depth about diseases or clinical problems and be prepared to discuss these with the supervising attending or resident. Each student makes a 10-minute case presentation at the completion of his/her clerkship. Students will be assessed by their supervising attendings based on their attendance, professional behavior, self-directed learning, and progress toward achieving the objectives of the rotation. It is expected that the attending will seek input into the assessment from the residents or fellows on the service.

Core Year (MS3) Elective in Otolaryngology: Third year students complete a 2-week elective shadowing an attending in the outpatient offices and participating in operating room procedures. They also participate in all teaching conferences in including weekly grand rounds at SUNY Downstate Medical Center.

Elective in Fourth Year: Fourth year students may take a 2 or 4- week elective in either general otolaryngology or pediatric otolaryngology. The experience includes participation in daily teaching rounds and work rounds with attendings and residents involved in inpatient care, participating in the operating room procedures, working in the ambulatory clinics, participating in all teaching conferences in including weekly grand rounds at SUNY Downstate Medical Center, weekly head-and-neck tumor journal club at Kings County Hospital Center and other conferences. Each 4-week student makes a 10-minute case discussion and literature review at the final grand rounds during the rotation. Guidance is provided in the preparation of this presentation.

Elective Goals

While the above electives each have different schedules and levels of responsibility, the goals and objectives remain very similar. The successful student will hopefully begin to investigate and study the following by completion of his or her elective:

1. The specifics and nuances of the ENT History and Physical Examination.

2. Differential diagnosis formulation in patients with problems of the head and neck region.

3. Criteria for appropriate referral to an Otolaryngologist.

Basic understanding of the most commonly encountered problems of the head and neck region, including otitis media and otitis externa, sinusitis, adenotonsillar disease, head and neck cancer, upper airway obstruction, and hearing loss.

Otolaryngology Club: The department is working with interested students on the creation of an Otolaryngology Club for students who would like to come in contact with the field as early as possible. Opportunities will be provided for students to shadow and attending for a brief period as well as to observe in clinics whenever possible. Further details will be posted.

Research Opportunities: Students who would like to explore research opportunities, either during the summer or during the academic year, are encouraged to contact the departmental office for further information.

Reading: The department has prepared a textbook, Essentials of Otolaryngology (edited by Frank E. Lucente, MD and Gady Har-El, MD) which is now in its fifth edition. This text is oriented toward medical students and primary care practitioners. In addition to the English edition, it has been published in Italian, Spanish and Turkish.

Career Advisors: All senior faculty members have offered to serve as faculty advisors. Students who would like to explore the field and obtain more information are invited to contact Nicole Fraser, Educational Coordinator (718-270-1638) who can set up appointments with Nira Goldstein, MD, MPH (coordinator of medical student programs) and Richard M. Rosenfeld, MD, MPH, MBA (departmental chairman).



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TEMPORAL BONE SURGICAL DISSECTION LABORATORY

The Temporal Bone Laboratory is an important aspect of otolaryngology training. Continuous education in the intricacies of temporal bone anatomy and surgical technique is extremely important in the practice of otology. A fully equipped 8 workstation laboratory had been maintained at the 134 Atlantic Avenue location, until the closure of that site in 2014. A new, state-of-the-art lab was planned for the SUNY site, but was delayed for many years. During that time, we were able to offer our Temporal Bone course to our residents using the facilities at Bellevue Hospital thanks to the help of the ENT Program at NYU. We anticipate the completion and opening of our own lab on the SUNY-Downstate campus in September 2020. It will be located in room BSB 7-39 of the SUNY Basic Science Building, immediately next to Dr. Hanson's academic office. This lab will feature state-of-the-art dissection stations from Global Surgical Corporation, including new microscopes and drills, with a two-headed prosector station and video monitors. The lab is intended to be used as a specialty-wide surgical education resource and will include instruments for microvascular training and soft-tissue repair. Significant funding for the lab was provided by the Medical School, the University President, and a charitable account which raised additional money to make the project, finally, a reality.

FRANK E. LUCENTE ALUMNI AND RESIDENT RESEARCH DAY

- 6:50 Welcome Remarks B Bentsianov
- 6:55 Welcome Remarks G Har-El
- 7:05 Introduction R Rosenfeld
- 7:10 Systematic Review of Endoscopic versus Microscopic Stapedectomy for Stapes Fixation D Ballard (PGY-5)
- 7:24 Neonatal Ear Molding R Gulati (PGY-2)
- 7:31 Prospective Validation of the COACH score: A Novel Chronic Ear Grading System S Ho (PGY-5)
- 7:45 Comparison of outcomes for total thyroidectomy in patients with Graves' disease and patients with multinodular goiters J Liang (PGY-1)
- 7:59 Trends in Free-Flap Salvage and Management in Otolaryngology A Timashpolsky (PGY-4)
- 8:13 Outcomes of Endoscopic Endonasal Surgery for Skull-base Chondrosarcoma: A Systematic Review P Patel (PGY-4)
- 8:27 ACE inhibitor prescribing habits of a providers serving a predominantly Afro-Caribbean population **H Hopkins (PGY-2)**
- 8:41 Break
- 8:56 The timing of obstructive apneic events in DBA/2J audiogenic seizure-prone mice derived from plethysmography, behavioral analysis, and controlling the open or closed status of a tracheal implant **S Schild (PGY-3)**
- 9:10 Increased survival in DBA/2J audiogenic seizure-prone mice after oxygen enrichment during specific seizure phases and the impact of a tracheal implant serving as a surrogate airway. A Kansal (PGY-3)
- 9:24 Experience with "Jaw in a Day" Technique D Sukato (PGY-5)
- 9:31 Analysis of Anosmia During the Covid-19 Pandemic R Tabtabai (PGY-3)
- 9:45 Case series of adult onset idiopathic auditory neuropathy M Weber (PGY- 2)
- 9:52 Impact of Adenotonsillectomy on Homework Performance in Children with Obstructive Sleep Apnea (OSA) - D Wu (PGY-5)
- 10:06 Risk assessment in major head and neck oncologic surgery R. Irizarry (PGY-4)
- 10:20 Closing Remarks B Bentsianov



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ABSTRACTS FOR RESIDENT PRESENTATIONS 2020

Title: SYSTEMATIC REVIEW OF ENDOSCOPIC VERSUS MICROSCOPIC STAPEDECTOMY FOR STAPES FIXATION

Investigators: Sandra Ho, MD; **Daniel Ballard, MD**; Richard Rosenfeld, MD, MPH, MBS; Sujana Chandrasekhar, MD

Objectives: To compare outcomes between endoscopic and microscopic stapes surgery for stapes fixation.

Methods: Systematic review and meta-analysis comparing postoperative complications and hearing outcomes between microscopic and endoscopic stapes surgery for stapes fixation. Two investigators independently assessed study eligibility, rated the risk of bias using Methodological Index for Non-Randomized Studies (MINORS), and abstracted data for comparative analysis. A random-effects model was used for pooling data and heterogeneity was assessed using the I2 statistic.

Results: Ten comparative studies with low to moderate risk of bias comprising 205 endoscopy and 255 microscopy patients satisfied inclusion criteria. Endoscopic surgery improved the air-bone gap (ABG) from 33.5 dB HL to 8.1 dB HL and microscopic surgery resulted in ABG improvement from 33.8 dB HL to 11.1 dB HL. Although both techniques had similar rates of ABG closure for <10 dB and <20 dB, the endoscopic group improved their ABGs by, on average, 2.7 dB more than the microscopic group, producing a large and significant effect size (standard mean difference: 1.06, 95% Cl 0.32 to 1.8, p=0.005, I2=86%). There were no significant differences between the interventions with regards to operative time (p=0.06), chorda tympani nerve transection (p=0.83) or manipulation (p=0.19), dysgeusia (p=0.21), or vertigo (p=0.37).

Conclusion: Endoscopic stapes surgery appears comparable to traditional surgery with regards to operative time, dysgeusia, chorda tympani nerve manipulation, and vertigo. Endoscopy may offer improved ABG reduction (about 3 dB), but the high heterogeneity and broad confidence intervals make this, at present, a preliminary finding that requires validation in future studies.

Title: NEONATAL EAR MOLDING

Investigators: Rahul Gulati, MD; Nick Faraci, MD, FAAP; Sydney C. Butts MD, FACS Faculty Mentor: Sydney C. Butts MD, FACS Outcome

Objectives: Evaluate the use of ear splinting as a safe and effective option for ear molding neonates.

Methods: Medical tapes were applied to the ears of a 2-week-old neonate with bilateral deformities resulting from effacement of the superior helical rim due to the presence of a third antihelical crus (Stahl's ear deformity). Splints that are more rigid can be fashioned with readily available materials and were successfully used in other cases.

Results: Normal anatomic curvature of the superior helix with appropriate concavity of the scaphoid fossa was restored. There was no evidence of skin breakdown, infection, or dermatitis at any point in treatment.

Conclusion: Our use of taping for ear-molding in a 2-week-old neonate demonstrates an efficient way to correct neonatal ear deformities. Medical tapes are widely available, with low rates of complications, and techniques can be readily taught to caregivers. Early ear molding may significantly ameliorate a congenital anomaly making later surgery unnecessary or less extensive. While not every contour anomaly is appropriate for molding, the option to lessen the severity of this problem may spare young children from teasing and bullying in their early lives.

ABSTRACTS FOR RESIDENT PRESENTATIONS 2020

Title: PROSPECTIVE VALIDATION OF THE COACH SCORE: A NOVEL CHRONIC EAR GRADING SYSTEM.

Investigators: Sandra Ho, MD; Ryan Tabtabai, MD; Daniel Ballard, MD; Matthew Hanson, MD

Faculty Mentor: Matthew Hanson, MD

Outcome Objectives: Currently, there is no standard way of grading a chronic ear, especially one with cholesteatoma. The COACH score, developed by the principal investigator of this study, attempts to provide otolaryngologists with a status of the chronic ear. We sought to determine if there is a change in COACH scores in patients that undergo

surgery for cholesteatoma and if there is any correlation between the preoperative COACH score and the Middle Ear Risk Index (MERI).

Methods: Prospective cohort study. Patients enrolled undergoing surgery for chronic ear disease from 12/1/18 to 12/1/19 at SUNY Downstate Medical Center. Preoperative COACH scores calculated and correlation with MERI and CES assessed.

Results: 10 patients were included in the study. There were 9 males and 1 female with 5 surgeries performed left and right ears each. The mean preoperative COACH score was 2.7 (range 0-7, SD 2.1). The mean MERI score was 5.2 (range 2-9, SD 2.6) and mean CES was 39.4 (range 20-55, SD 10.8). Preoperative COACH score was negatively correlated with MERI score (spearman's rho = -0.75, p = 0.012) and CES (spearman's rho = -0.70, p = 0.035).

Conclusion: The COACH score is a novel chronic ear grading system that can become a standardized instrument for evaluating a chronic ear. We have demonstrated that patients who have had surgery for cholesteatoma have COACH scores that negatively correlate with scores for MERI and CES. This finding suggests that the COACH score is predictive of the health and functional status of the middle ear.

Title: COMPARISON OF OUTCOMES FOR TOTAL THYROIDECTOMY IN PATIENTS WITH GRAVES' DISEASE AND PATIENTS WITH MULTINODULAR GOITERS

Investigators: Jennifer J. Liang, MD; Rachel Irizarry, MD; Lousette Saint Victor, MPH, Lori A. Hoepner, DrPH, MPH; Natalya Chernichenko, MD

Faculty Mentor: Natalya Chernichenko, MD

Objective: Total thyroidectomy for treatment of Graves' disease is controversial due to concern for complications. The aim of our study is to evaluate the morbidity of total thyroidectomy in patients with Graves' disease as compared to nontoxic multinodular goiter.

Methods: A retrospective cohort study using the American College of Surgeons National Surgical Quality Improvement Program (NSQIP) database from 2007-2017 categorized thyroidectomy patients in two groups: patients with Graves' disease and patients with nontoxic multinodular goiter. Perioperative outcomes were analyzed using T-test, Pearson's Chi-Squared test and calculation of odds ratio.

Results: Our study identified 5,642 patients with Graves' disease and 25,515 patients with nontoxic multinodular goiter who underwent total thyroidectomy. Patients with Graves' disease who underwent thyroidectomy were noted to be significantly younger (42.6 vs 53.9, p<0.001) and fewer were diagnosed with hypertension (34.4% vs 45.3%, p<0.001) or diabetes (7.2% vs 16.0%, p<0.001) despite more smoking (30.3% vs 16.7%, p<0.001) than patients with nontoxic multinodular goiter. These patients had a significantly higher rate of readmission (OR 1.78, Cl 1.46-2.18) as well as rate of returning to the operating room (OR 1.44, Cl 1.15-181) in comparison to patients with nontoxic multinodular goiter. They also had a significantly higher rate of commonly tracked complications after surgery (OR 1.43, Cl 1.18-173) such as wound infections and reintubation. For thyroidectomy-specific outcomes, patients with Graves' disease had a significantly higher rate of post-operative hypocalcemia (OR 2.18, Cl 1.58-3.00), as well as hematoma (OR 1.86 Cl 1.17-2.96) and hemorrhage (OR 5.82, Cl 2.17-15.64), both of which required return to the OR. However, there was no significant difference in rates of post-operative vocal fold paralysis between the two groups.



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Conclusion Patients with Graves' disease undergoing total thyroidectomy are at higher risk of complications as well as readmission and return to the OR in comparison to nontoxic multinodular goiter patients, likely due to sequelae of the disease. These risks should be addressed when presenting thyroidectomy as therapeutic option to a patient with Graves' disease.

Title: INCREASED SURVIVAL IN DBA/2J AUDIOGENIC SEIZURE-PRONE MICE AFTER OXYGEN ENRICHMENT DURING SPECIFIC SEIZURE PHASES AND THE IMPACT OF A TRACHEAL IMPLANT SERVING AS A SURROGATE AIRWAY.

Investigators: Ankit Kansal, MD; Sam Schild, MD; Richard Kollmar, PhD; Mark Stewart, MD, Krishnamurthi Sundaram, MD; Joshua Silverman, MD, PhD

Faculty Mentor: Richard Kollmar, PhD

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Outcome Objectives: To measure the effects of atmospheric changes on survivability during induced seizures in DBA/2J mice, and to further narrow the periods during the seizure that a high oxygen atmosphere would create the greatest benefit. To compare how mice did in these different environments and during these phases both in the presence and absence of tracheal t-tubes.

Methods: Previous work done in this laboratory (Irizarry et al., Epilepsia 2020) has established the efficacy of tracheal t-tubes as a mechanism of preventing sudden death in epilepsy (SUDEP), with the hypothesis that SUDEP is caused by seizure induced laryngospasm and obstructive apnea lasting until respiratory arrest. Previous research (Willott and Henry, J. Comp. Physiol. Psych. 1976; Venit et al. Epilepsia 2004) established the survival benefits of high oxygen environments in DBA-2 mice during seizure episodes. We induced seizures in DBA/2J mice that had open tracheal t-tubes inserted vs unoperated controls, and then used a small box filled with oxygen at atmospheric pressure to enrich the animal's available oxygen at specific points during a seizure. The specific periods that were studied were (a) prior to induction of seizure, (b) from the start of the tonic phase to the end of the tonic phase, and (c) after the tonic phase until the end of a 30 second postictal period or the complete respiratory arrest of the animal. We also sought to compare how mice did in these different environments and during these phases both in the presence and absence of tracheal t-tubes.

Results: All animals that received oxygen immediately before the tonic phase survived. Animals with both a tracheal t-tube and that received oxygen during the tonic phase had a close to 100% survival rate. In contrast, either oxygen alone during the tonic phase or an open t-tube throughout the seizure conferred less of a survival benefit, as compared to control mice.

Conclusion: These findings provide additional evidence that early oxygen enrichment, even after the initiation of a seizure, can be protective against sudden death (see also Mooney et al. Neurobiol. Dis. 2020). The increased survival in animals with open tracheal tubes that started oxygen enrichment after the airway was presumably closed due to laryngospasm supports the idea that the open tracheal tube permits breathing during the period of obstructive apnea.

Title: OUTCOMES OF ENDOSCOPIC ENDONASAL SURGERY FOR SKULL-BASE CHONDROSARCOMA: A SYSTEMATIC REVIEW

Investigators: Prayag Patel MD; Rahul Gulati MD; Tristan Tham MD; Lee Kaplowitz MD

Background: Technical advances in endoscopic, endonasal approaches (EEA) to the clivus have allowed the median endonasal corridor to be used in the management of skull-base chondrosarcomas. Here, we systematically review the literature to report the surgical outcomes of such an approach.

Methods: An electronic search of PubMed, EMBASE and Web of Science was conducted. We included studies describing surgical outcomes of purely endoscopic, endonasal approaches for skull-base chondrosarcomas arising from the clivus or cranio-cervical junction. We performed dual, independent data extraction for outcomes of extent-of-resection (EOR), tumor recurrence during the follow-up period, resolution/improvement of pre-operative cranial nerve neuropathies, post-operative complications including CSF leak and new cranial nerve neuropathies.

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Results: 6 studies comprising of 74 patients who underwent EEA for skull-base chondrosarcomas met the final selection criteria. The average age of the patients was 45.6 years with majority of the patients being female (52.8%). 23 (31.1%) patients were undergoing surgery for recurrence. Cranial nerve (CN) VI was noted to be the most common pre-operative neuropathy (61.3%). Gross-total resection (GTR) was obtained in the majority of the patients (70.2%) of the tumor while a sub-total resection (STR) was achieved in 8 patients. Post-operatively 6 patients (12.2%) had a CSF leak that required a surgical intervention while 81.9% had resolution of their pre-operative CN VI palsy. On the average follow-up duration of 32.4 months, 83.3% of patients who achieved a GTR had no recurrence. 54.5% of patients who obtained a near-total resection (NTR) underwent adjuvant therapy and had no disease on follow-up.

Conclusion: The preliminary results of this study suggest that EEA, in experienced hands, can achieve GTR of skull-base chondrosarcomas with resolution or improvement of pre-operative cranial nerve neuropathies and low rates of post-operative CSF leaks. Adjuvant therapy remains a viable option for patients who have residual tumor left after EEA although data on this is limited suggesting the need for larger well-developed, randomized trials with longer follow-up periods.

Title: ACE INHIBITOR PRESCRIBING HABITS OF A PROVIDERS SERVING A PREDOMINANTLY AFRO-CARIBBEAN POPULATION

Investigators: Hunter Hopkins MD; Natalya Chernichenko MD Faculty Mentor: Natalya Chernichenko, MD

Outcome Objectives: The primary objective of the current study is to gather ACE inhibitor prescribing habits of medical providers that care for a primarily Afro-Caribbean population, and, more specifically, to see whether these providers take into account the known side effect of these medications, angioedema, when deciding on anti-hypertensive regimens. Methods: questionnaires were distributed via an online survey platform to providers affiliated with a tertiary-care hospital in East Flatbush, Brooklyn that prescribe anti-hypertensive medications. Survey results were then compiled. Trends in prescribing habits, as well as patient-related factors and medication-related factors that often play a role in prescribing decisions, were examined. Results: distribution of survey was postponed due to the COVID-19 pandemic. However, now with the acuity of the pandemic in East Flatbush dissipating, the survey will be distributed, results compiled, and conclusions made Conclusion: distribution of survey was postponed due to the COVID-19 pandemic. However, now with the acuity of the pandemic in East Flatbush dissipating, the survey will be distributed, results compiled, and conclusions made Conclusions made

Title: THE TIMING OF OBSTRUCTIVE APNEIC EVENTS IN DBA/2J AUDIOGENIC SEIZURE-PRONE MICE DERIVED FROM PLETHYSMOGRAPHY, BEHAVIORAL ANALYSIS, AND CONTROLLING THE OPEN OR CLOSED STATUS OF A TRACHEAL IMPLANT

Investigators: Sam Schild, MD; Ankit Kansal MD; Krishnamurthi Sundaram MD; Joshua Silverman MD Ph; Richard Kollmar PhD; Mark Stewart MD PhD

Faculty Mentor: Richard Kollmar, PhD

Outcome Objectives: To determine the timing of obstructive apnea and respiratory arrest during seizure activity DBA/2J audiogenic seizure prone mice. To identify the seizure phase(s) during which a tracheal implant must be open for animal survival.

Methods: Previous work in this laboratory established the efficacy of tracheal T-tubes in DBA/2J mice as an intervention for preventing sudden death in epilepsy (SUDEP) (Irizarry et al., Epilepsia 2020), supporting the hypothesis that SUDEP is caused by seizure-induced laryngospasm and obstructive apnea leading to respiratory arrest. Using this model, we characterized the timing of sequential observable behaviors during a seizure event (running, clonic, tonic, respiratory arrest) with plethysmography and video analysis. We sought to define the behavior phase(s) during which an open tracheal implant was critical for preventing death by testing animals with open or closed tracheal implants in experiments where tubes would be "snipped" open or "sealed" closed at specific times during the behavioral sequence.

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Results: Plethysmography and video analysis revealed the tonic phase of seizure to be the moment when the obstructive event occurred (i.e. lack of airflow in a closed tube). Inthe "snip-or-seal" experiments, there was a statistically significant increased survival in mice with open T-tube during the tonic phase compared to those without (Pcorr<0.025) with the following survival rates: closed T-Tube (4%, 1/27), open T-Tube until tonic start (0%, 0/18), open T-tube until tonic end (43%, 10/23), open T-Tube after tonic start (59%, 13/22), and open T-tube (44%, 21/48).

Conclusion: These findings indicate that airway protection during the tonic phase of the seizure in DBA/2J mice is critical for survival. While not a practical surgical intervention, the data refine our understanding of sudden death in this widely used mouse model and reinforce other evidence from our group that interventions can be initiated after a seizure starts.

Title: EXPERIENCE WITH "JAW IN A DAY" TECHNIQUE

Investigators: Daniel Sukato, MD; Daniel Hammer; Weitao Wang; Tom Shokri; Fayette Williams; Yadranko Ducic

Faculty Mentor: Yadranko Ducic

Outcome Objectives: The "Jaw in a Day" (JIAD) technique establishes immediate functional occlusion through a single stage maxillomandibular reconstruction with concurrent implant placement and provisional prosthesis delivery. Given the small number of patients described in the literature, we aim to add to the body of evidence by describing our two cases of JIAD.

Methods: We describe 2 cases from a tertiary institution exemplifying the reconstructive principles of JIAD.

Results: One patient underwent mandibular reconstruction with the JIAD technique and another patient underwent JIAD with an optimized rapid sequence computer-aided design and computer-aided manufacturing (CAD-CAM) for composite maxillomandibular reconstruction. Immediate implant-borne prosthesis was fixated and all implants osseointegrated into the neomandible.

Conclusion: Although our patient outcomes are consistent with the literature, the published reports of JIAD remain limited, and further studies are required to assess the long-term functional and aesthetic outcomes as well as cost-effectiveness of this approach.

Title: ANALYSIS OF ANOSMIA DURING THE COVID-19 PANDEMIC

Investigators: Ryan Tabtabai, MD, MPH; Sam Schild, MD; Marina Boruk, MD Faculty Mentor: Marina Boruk, MD

Outcome Objectives: To identify the incidence of anosmia and dysgeusia in COVID-19 positive patients, as well as duration/resolution of symptoms, within the unique, Afro-Caribbean predominant patient population in central Brooklyn. Methods: The study design is a descriptive, cross-sectional survey of COVID-19 positive patients admitted to University Hospital of Brooklyn form March 1st, 2019 to present date. The study consists of the following: a patient completed survey as well as extraction of relevant demographic and treatment data from the electronic medical record. Results: The study is ongoing. We expect prevalence of anosmia and dysgeusia to be at least consistent with previously reported rates of 50-70% amongst those positive for COVID-19 in European studies. Considering the higher rates of hospitalization seen among racial minorities within New York City as compared to white, non-Hispanic population, it is reasonable to expect that rates or duration of anosmia/dysgeusia may be higher amongst racial minorities as well. Conclusion: Better understanding of the symptomatology of anosmia/dysgeusia associated with COVID-19 amongst the patient population in central Brooklyn will help define the natural course of the disease and may lead to improvements in risk stratification and care.

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Title: TRENDS IN FREE-FLAP SALVAGE AND MANAGEMENT IN OTOLARYNGOLOGY

Investigators: Billy Yang, BS; Alisa Timashpolsky, MD; Jennifer Liang, MD Nira Goldstein, MD; Eli Gordin, MD

Faculty mentor: Eli Gordin, Nira Goldstein

Objectives: There is a lack of standardization in microvascular free-flap salvage and management across practicing microvascular head and neck surgeons in the US and worldwide. This study investigates the preoperative, intraoperative, and post-operative management of free-flap patients amongst surgeons with varying levels and years of experience and aims to identify any trends in practice based on geographic distribution, years of experience, and volume of free-flaps performed.

Study Design: Cross-sectional survey study.

Methods: An online survey was sent via email to members of the American Head and Neck Society (AHNS). Questions included years of experience, surgical volume, geographic location and anticoagulation practices employed in the preoperative, perioperative, and postoperative periods of free-flap reconstruction.

Results: Of the 1391 members of the AHNS, 120 surgeons completed the survey, with an overall 8.6% response rate. Out of these 120, 108 (90.0%) routinely performed head and neck free-flap reconstruction and over 90% were located in the US. Anticoagulation was employed in uncomplicated cases preoperatively (9.3%), intraoperatively (17.8%), postoperatively (53.3%), or not at all (30.8%). The most commonly used medications for thrombosis prophylaxis included aspirin (57.0%), low molecular weight heparin (22.4%), and heparin (19.6%), although a significant portion of surgeons do not routinely administer systemic anticoagulation (21.5%). The data was then stratified based on surgical volume > 50 flaps a year and >10 years of experience, and it was noted that surgeons with greater experience employed antiplatelet therapy post operatively for a significantly longer period of time (p=.02) and were more likely to attempt another free-flap rather than a pedicled flap after an initial failure (p=.02).

Conclusions: Anticoagulation and management practices in microvascular free-flap management vary across surgeons with some variation in practice based on years of experience and surgical volume. Overall, trends vary widely with no standardized management.

Title: CASE SERIES OF ADULT ONSET IDIOPATHIC AUDITORY NEUROPATHY

Investigators: Michael Weber, MD; Sam Schild, MD; Matthew Hanson, MD

Faculty Mentor: Matthew Hanson, MD

Outcome Objectives: Describe a series of patients with a condition of adult onset auditory neuropathy minimally described in the literature.

Introduction: Auditory neuropathy (AN) is a disorder of hearing generally accepted to be characterized by poor speech discrimination and absent auditory brainstem responses (ABR) in the setting of normal outer hair cell function as demonstrated by normal pure tone averages and otoacoustic emissions. Many cases are due to genetic or perinatal causes, however, few cases of acquired adult AN have been reported. Amplification has been shown to not be beneficial in these cases, and cochlear implantation is currently being frequently used with good results reported in the literature.

Methods: A series of 3 case reports with review of literature. We performed a retrospective review of medical records of a series of 3 patients with auditory neuropathy seen at our academic medical center between December 2015 - December 2019.

Results: We describe 3 unique case of rapid onset, bilateral isolated adult acquired AN in adults without any evidence of other neurologic disorder. No underlying genetic, inflammatory or toxic cause has been identified in these patients. They all reported normal hearing prior to experiencing a rapid decline in speech discrimination. Each had audiograms with PTAs in the normal to mild range and normal



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OAEs along with absent ABRs. Each had a negative workup for underlying pathology. The first patient received a cochlear implant (CI) and did poorly following implantation. The second patient improved with high dose steroids, and remitted following steroid cessation. The third patient received a CI and has been doing well since implantation. **Conclusion:** We describe a condition of adult onset isolated rapidly progressive idiopathic AN that has been previously minimally reported in the literature, unlikely due to genetic or systemic process

Title: IMPACT OF ADENOTONSILLECTOMY ON HOMEWORK PERFORMANCE IN CHILDREN WITH OBSTRUCTIVE SLEEP APNEA (OSA)

Investigators: Nira Goldstein MD, MPH; Derek Wu, MD; Michelle Bernstein; Sylvia Horne BS; Billy Tang BS

Faculty Mentor: Nira Goldstein, MD, MPH

Outcome Objectives: The study aims to prospectively determine if adenotonsillectomy improves homework performance for children with OSA.

Methods: Variables to be examined will include the Pediatric Sleep Questionnaire (PSQ) score for measure of OSA severity, various parameters (Apnea-Hypopnea Index, oxygen nadir, etc) from a standard polysomnography (PSG), if indicated, and the parent version of the Homework Performance-Questionnaire (HPQ-P). The change in the total HPQ-P score after surgery between the adenotonsillectomy and control subjects will be analyzed.

Results: ongoing project, thus pending

Conclusion: ongoing project, thus pending

Title: RISK ASSESSMENT IN MAJOR HEAD AND NECK ONCOLOGIC SURGERY

Investigators: Rachel Irizarry MD; Jennifer Liang MD; Lousette Saint Victor MPH; Lori A. Hoepner DrPH; Natalya Chernichenko MD

Faculty Mentor: Natalya Chernichenko, MD

Outcome objectives: Identification of patients at increased risk for perioperative adverse events (AE) is imperative to properly counsel those offered major head and neck oncologic surgery. Age, comorbidity, and frailty are well established risk factors for surgical morbidity. Yet, few large-scale studies have analyzed and compared their predictive value in head and neck cancer (HNC) patients specifically.

Methods: A retrospective cohort study using ACS National Surgical Quality Improvement Program (NSQIP) database (2007-2017) was performed. Surgically treated HNC patients were identified then stratified based on age: <40, 41-64, 65-79, >80, American Society of Anesthesiologists (ASA) score, and Modified Frailty Index-5 (MFI-5) score and rates of postoperative AE including postoperative complications (POC), extended length of stay (LOS), reoperation (RO), or readmission (RA) were analyzed.

Results: Of the 4,414 patients included 1053 (24%) experienced AE. The odds of POC among all age groups was 3.5% higher in ASA 4 compared to ASA 3 (3.6% vs. 7.1%, p<0.05). Similarly, for ages 40-69, RO and LOS rates were higher in ASA 4 compared to ASA 3, 0.75% (2.58 vs. 1.84, p<0.05) and 4.1% (11.75 vs. 7.68, p<0.05), respectively. As MFI-5 score increased there was a corresponding increase in POC from 1.43 to 1.61 to 2.77 (p<0.05). No risk factor accurately predicted RA.

Conclusion: Although increased rates of major surgical complications occur in patients over 65 years of age, particularly those >80, our study shows age alone is not an independent predictor of post-operative AE in HNC patients. Conversely, both risk assessment indices, MFI-5 and ASA, were significant predictors of POC and therefore, should be used to counsel patients considered for major HNC surgery.

GRAND ROUNDS 2019-2020

CONFERENCE	DATE	TIME	SPEAKER
ACGME Core Competency and Residency Issues: Residency Goals and Objectives	7/11/19	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Auditory Physiology	7/11/19	7:00-7:50	Matthew Hanson, MD
Vestibular Physiology	7/11/19	8:00-8:50	Matthew Hanson, MD
Multidisciplinary Head & Neck Tumor Board	7/11/19	9:00-9:50	
Research Review: Grid Update	7/18/19	6:30-7:00	Nira Goldstein, MD MPH
Nasal Reconstruction: Soft Tissue considerations & Functional Rhinoplasty	7/18/19	7:00-7:50	Sydney Butts, MD
How to Review Journal Manuscripts	7/18/19	8:00-8:50	Richard Rosenfeld, MD MPH, MBA
ACGME Related Discussion: Resident Duty Hours and Department Escalation Policy	7/25/19	6:30-7:00	Nira Goldstein, MD MPH
Quality Improvement Conference	7/25/19	7:00-7:50	Richard Rosenfeld, MD MPH, MBA
Deep Neck Space Infections	7/25/19	8:00-8:50	Ann Plum, MD
Multidisciplinary Head & Neck Tumor Board	7/25/19	9:00-9:50	
ACGME Core Competency and Residency Issues: New Innovations, Surgical Case Logs	8/1/19	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Audiogram	8/1/19	7:00-7:50	John Weigand, AuD
Bailey's Chapter Review: Otology Chapter	8/1/19	8:00-8:50	Sam Schild, MD Jennifer Liang, MD
CORE Research Grants	8/8/19	6:30-7:00	Richard Kollmar, PhD
Healthcare disparities in head & neck cancer	8/8/19	7:00-7:50	N. Chernichenko, MD
Histopathology Review	8/8/19	8:00-8:50	Raavi Gupta, MD
Multidisciplinary Head & Neck Tumor Board	8/8/19	9:00-9:50	
Disability Insurance	8/15/19	6:30-7:00	Frank Schursky
The Larynx, Dysphonia, and Dysphagia	8/15/19	7:00-7:50	B. Bentsianov, MD
Etiology and Therapeutic Strategies to Common Pediatric Illnesses	8/15/19	8:00-8:50	Nira Goldstein, MD, MPH
Medical student presentations	8/22/19	6:30-7:00	Roman Povolotsky John Kim Sydney Zaransky
Quality Improvement Conference	8/22/19	7:00-7:50	Richard Rosenfeld, MD MPH, MBA
Thyroid & Parathyroid	8/22/19	8:00-8:50	K. Sundaram, MD
Multidisciplinary Head & Neck Tumor Board	8/22/19	9:00-9:50	
ACGME: Management of Fatigue	8/29/19	6:30-7:00	Nira Goldstein, MD MPH
Mock Oral Boards	8/29/19	7:00-7:50	Marina Boruk, MD
Allergy and Immunology	8/29/19	8:00-8:50	Marina Boruk, MD
Core Clinical: Otology Topic	9/5/19	6:30-7:00	Michael Weber, MD
Brain effects of age-related hearing loss	9/5/19	7:00-7:50	Justin Golub, MD



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Bailey's Chapter Revie Chapter 150; SSNHL	w:	9/5/19	8:00-8:50	A. Timashpolsky, MD Michael Weber, M
Sub-Intern Presentation Presentations	on and AAO-HNS	9/12/19	6:30-7:00	James Alrassi
Endoscopic Ear Surge Dysfunction, Balloon		9/12/19	7:00-8:00	Michal Preis, MD
Journal Club		9/12/19	8:00-8:50	Richard Rosenfeld, MD MPH, MBA
Multidisciplinary Head	d & Neck Tumor Board	9/12/19	9:00-9:50	
Eating for Energy, Hea	alth, and Longevity	9/19/19	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Faculty Practice Retre	at	9/19/19		MPH, MDA
Bailey's Chapter Revie	ew: Otology	9/19/19	7:00-8:00	Jennifer Liang, MD
Integra Inservice		9/19/19	8:00-9:00	Sam Schild, MD
BOG Review Presenta	tion	9/26/19	6:30-7:00	Ankit Kansal, MD Hunter Hopkins, MD
Quality Improvement	Conference	9/26/19	7:00-7:50	Richard Rosenfeld, MD MPH, MBA
A dizzying array of su For Meniere's Disease		9/26/19	8:00-8:50	Ankit Kansal, MD
Multidisciplinary Head	d & Neck Tumor Board	9/26/19	9:00-9:50	
ACGME Core Compete Residency Issues: Mea PBLI		10/3/19	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Becoming a hearing h The pivotal roles of th audiologist	ealthcare advocate: e otolaryngologist and	10/3/19	7:00-8:00	Neil Sperling, MD Scott Yerdon, AuD
Bailey's Chapter Revie	ew: Otology	10/3/19	8:00-9:00	S. Tominaga, MD Sam Schild, MD
Research Review		10/10/19	6:30-7:00	Nira Goldstein, MD, MPH
How to use blood ves a diagnosis	sels to help make	10/10/19	7:00-7:50	Deborah Reede, MD
Journal Club		10/10/19	8:00-8:50	Richard Rosenfeld, MD MPH, MBA
Multidisciplinary Head	d & Neck Tumor Board	10/10/19	9:00-9:50	
ACGME Related Discu	ssion	10/17/19	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
A balancing act: coch and vestibular functic		10/17/19	7:00-7:50	Maura Cosetti, MD
Bailey's Chapter Revie	ew: Otology	10/17/19	8:00-8:50	Sam Schild, MD Fasil Mathews, MD
Core Clinical: otologic of head and neck can	signs and symptoms cer	10/24/19	6:30-7:00	Hunter Hopkins, MD MPH
Quality Improvement	Conference	10/24/19	7:00-7:50	Sydney Butts, MD
Expanding indication in cochlear implantati		10/24/19	8:00-7:50	Ryan Tabtabai, MD
Multidisciplinary Head	d & Neck Tumor Board	10/24/19	9:00-9:50	
Pediatric Airway Symp Grand Rounds Cancel	posium - led	10/31/19		
CV Clinic		11/7/19	6:30-7:00	Richard Rosenfeld, MD MPH, MBA

Quality Improvement Conference	11/7/19	7:00-7:50	R. Sundaram, MD
Bailey's Chapter Review: Salivary Gland Disease in Children	11/7/19	8:00-8:50	Sam Schild, MD S. Tominaga, MD
Research Review	11/14/19	6:30-7:00	Nira Goldstein, MD, MPH
Quality Improvement Conference	11/14/19	7:00-7:45	Richard Rosenfeld, MD MPH, MBA
Surgical Complications	11/14/19	7:45-8:00	Kunjamma Chacko, RN, MSN, CCRN
Journal Club	11/14/19	8:00-8:50	Richard Rosenfeld, MD MPH, MBA
Multidisciplinary Head & Neck Tumor Board	11/14/19	9:00-9:50	
Congenital CMV and Hearing Loss	11/21/19	7:00-7:50	Alison Maresh, MD
Pediatric Head and Neck Neoplasms	11/21/19	8:00-8:50	Rachel Irizarry, MD
EPIC Training – Grand Rounds Cancelled	12/5/19		
Otolaryngology Residency Interviews - Grand Rounds Cancelled	12/12/19		
PDSA Projects	12/19/19	6:30-7:00	Nira Goldstein, MD MPH
Management of Choanal Atresia	12/19/19	7:00-7:50	Ann Plum, MD
Journal Club	12/19/19	8:00-8:50	Richard Rosenfeld, MD MPH, MBA
In-service Review for Residents: Pediatric Syndromes	12/19/19	9:00-9:50	Daniel Ballard, MD
Velopharyngeal Insufficiency and Cleft Palate	12/26/19	6:30-7:00	Gil Zoizner-Agar, MD
Quality Improvement Conference	12/26/19	7:00-7:50	Richard Rosenfeld, MD MPH, MBA
Congenital Malformations of Branchial Arches and Associated Disorders	12/26/19	8:00-8:50	Sam Schild, MD
Multidisciplinary Head & Neck Tumor Board	12/26/19	9:00-9:50	
Quality Insights from the 2019 Guideline Intern'I Network Annual Conference	1/2/20	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Anterior Skull Base Surgery	1/2/20	7:00-8:50	David Gudis, MD
Journal Club	1/2/20	9:00-9:50	Richard Rosenfeld, MD MPH, MBA
Otolaryngology Interviews – Grand Rounds Cancelled	1/9/20		
Rhinology Imaging Review	1/16/20	6:30-7:00	Marina Boruk, MD
Faculty Practice Meeting	1/16/20	7:00-9:00	
AAO-HNSF Resident Learning Guide	1/23/20	6:30-7:00	Michael Weber, MD
Quality Improvement Conference	1/23/20	7:00-7:50	Richard Rosenfeld, MD MPH, MBA
Healthbridge Training Session	1/23/20	8:00-8:50	Healthbridge Staff
Multidisciplinary Head & Neck Tumor Board	1/23/20	9:00-9:50	
Business of Medicine	1/30/20	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Management of CSF Leaks	1/30/20	7:00-7:50	Seth Lieberman, MD
Mock Oral Boards	1/30/20	8:00-8:50	Marina Boruk, MD



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Financial Savvy for Physicians	2/6/20	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Velopharyngeal Insufficiency: An Update	2/6/20	7:00-7:50	Michel Nassar, MD, MSc
Management of Skull Base Tumors	2/6/20	8:00-8:50	Prayag Patel, MD
AOCMF Trauma Management	2/13/20	6:30-7:00	Sam Schild, MD Ankit Kansal, MD
Leukoplakia & Early Glottic Cancer	2/13/20	7:00-7:50	Sara Abu-Ghanem, MD MMedSc
Journal Club	2/13/20	8:00-8:50	Richard Rosenfeld, MD MPH, MBA
Multidisciplinary Head & Neck Tumor Board	2/13/20	9:00-9:50	
Laryngology Imaging Review	2/20/20	6:30-7:00	Boris Bentsianov, MD
Laser Surgery: Applications in Dermatology And Facial Plastic	2/20/20	7:00-7:50	Georgina Ferzli, MD, MS
COCLIA: Facial Reconstruction	2/20/20	8:00-8:50	R. Irizarry, MD
Preoperative Evaluation for Rhinoplasty	2/27/20	6:30-7:00	Rahul Gulati, MD
Quality Improvement Conference	2/27/20	7:00-7:50	Richard Rosenfeld, MD, MPH, MBA
Microtia: Diagnosis & Management	2/27/20	8:00-8:50	Michael Weber, MD
Multidisciplinary Head & Neck Tumor Board	2/27/20	9:00-9:50	
"Investing 101: Planning for Future Security and Prosperity"	3/5/20	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Robotics In-service for residents	3/5/20	7:00-8:50	Ofer Azoulay, MD
Multidisciplinary Facial Nerve Meeting	3/5/20	9:00-9:50	Ofer Azoulay, MD
Grand Rounds Cancelled due to COVID-19 Pandemic	3/12/20		
Grand Rounds cancelled due to COVID-19 Pandemic	3/19/20		
QI Conference	3/26/20	7:00-8:00	Richard Rosenfeld, MD MPH, MBA
Issues Related to COVID-19	3/26/20	8:00-8:50	Richard Rosenfeld, MD MPH, MBA
Core Competency Discussion	4/2/20	6:30-7:00	
Graves Orbitopathy	4/2/20	7:00-7:50	Nickisa Hodgson, MD
COCLIA	4/2/20	8:00-8:50	Rachel Irizarry, MD
Core Clinical: Injection Laryngoplasty	4/9/20	6:30-7:00	Ryan Tabtabai, MD
Deciphering Reflux in Today's Age	4/9/20	7:00-7:50	Chandra Ivey, MD
Faculty Meeting - Grand Rounds Cancelled	4/16/20		
"Neurolaryngology"	4/23/20	6:30-7:00	Ankit Kansal, MD
Quality Improvement Conference	4/23/20	7:00-7:50	Richard Rosenfeld, MD MPH, MBA
Business of Medicine	4/30/20	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Laryngology Topic	4/30/20	7:00-7:50	Milan Amin, MD
"Neurolaryngology"	5/7/20	6:30-7:00	Ankit Kansal, MD
Cutaneous Malignancies in Head & Neck			

COCLIA: Rhinoplasty	5/7/20	8:00-8:50	Rachel Irizarry, MD
Core Clinical: Multidisciplinary care in Head & Neck Cancer	5/14/20	6:30-7:00	Hunter Hopkins, MD
Advances in Head & Neck Microvascular Reconstruction	5/14/20	7:00-7:50	Ofer Azoulay, MD
Journal Club	5/14/20	8:00-8:50	Richard Rosenfeld, MD MPH. MBA
Multidisciplinary Head & Neck Tumor Board	5/14/20	9:00-9:50	
Research Grid Review	5/21/20	6:30-7:00	Nira Goldstein, MD MPH
Health Disparities	5/21/20	7:00-7:50	Moro Salifu, MD
Rhinology Imaging Review & Rhinology COCLIA	5/21/20	8:00-8:50	Marina Boruk, MD R. Irizarry, MD
Core Clinical: Septal Perforations	5/28/20	6:30-7:00	Sam Schild, MD
Quality Improvement Conference	5/28/20	7:00-7:50	Richard Rosenfeld, MD MPH, MBA
Optimal Management of HPV+ Oropharyngeal SCC	5/28/20	8:00-8:50	Rahul Gulati, MD
Multidisciplinary Head & Neck Tumor Board	5/28/20	9:00-9:50	
FEL Alumni & Resident Research Day Presentations	6/4/20		
Hemodynamic management after free Flap surgery	6/11/20	6:30-7:00	Michael Weber, MD
Diagnostic considerations in salivary Gland neoplasm	6/11/20	7:00-7:50	Hunter Hopkins, MD
Journal Club	6/11/20	8:00-8:50	Richard Rosenfeld, MD
MPH, MBA			
Core Competency Discussion	6/18/20	6:30-7:00	Richard Rosenfeld, MD MPH, MBA
Quality Improvement Conference	6/18/20	7:00-7:50	Richard Rosenfeld, MD MPH, MBA
Immunotherapy in Head & Neck Cancer Base Neoplasms	6/18/20	8:00-8:50	Doru Paul, MD, PhD
New Resident Orientation	6/25/20	6:30-8:00	
Resident Crash Course	6/25/20	8:00-9:00	



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Fifth Year Otolaryngology



Rachel Irizarry, MD College: Binghamton University -2010

Medical School: SUNY – Health Science Center at Brooklyn - 2015 Internship: SUNY Downstate Health Sciences University - 2016



Prayag Patel, MD College: Boston University - 2012 Medical School: SUNY – Health Science Center at Brooklyn - 2016 Internship: SUNY Downstate Health Sciences University - 2016



College: Cornell University - 2011 Medical School: SUNY at Stony Brook - School of Medicine - 2016 Internship: SUNY Downstate Health Sciences University - 2016

Fourth Year Otolaryngology

Ankit Kansal, MD College: Wesleyan University -2010 Medical School: Yale University School of Medicine - 2017 Internship: SUNY Downstate Health Sciences University - 2017



Sam Schild, MD College: Cornell University - 2012 Medical School: Rutgers University, Robert Wood Johnson Medical School - 2017 Internship: SUNY Downstate Health Sciences University - 2017



Ryan Tabtabai, MD, MPH College: University of Connecticut - 2012 Medical School: University of **Connecticut School of Medicine** - 2017 Internship: SUNY Downstate Health Sciences University - 2017



Third Year Otolaryngology

Hunter Hopkins, MD

College: Louisiana State University Medical School: Louisiana State University School of Medicine - 2018

Internship: SUNY Downstate Health Sciences University - 2018



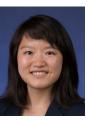
Rahul Gulati, MD **College:** Rutgers University Medical School: Rutgers New Jersev Medical School - 2018 Internship: SUNY Downstate Health Sciences University - 2018



Michael Weber, MD College: CUNY Brooklyn College Medical School: State University of New York Downstate Medical Center College - 2018 Internship: SUNY Downstate Health Sciences University - 2018

Second Year Otolaryngology

Stephanie Tominaga, MD College: Cornell University - 2009 Medical School: University of South Florida - 2019 Internship: SUNY Downstate Health Sciences University - 2019



- 2012 Medical School: Boston University School of Medicine - 2019 IInternship: SUNY Downstate Health Sciences University - 2019

College: University of Pennsylvania

Jennifer Liang, MD



Fasil Mathews, MD **College:** University of Pittsburg - 2015

Medical School: University of Pittsburgh School of Medicine - 2019

Internship: SUNY Downstate Health Sciences University - 2019



DEPARTMENT OF

Incoming Residents (starting July 1, 2020)



James Alrassi, MD College: State University of New York at Stony Brook - 2016 Medical School: Renaissance School of Medicine at Stony Brook – 2020 Internship: SUNY Downstate Health Sciences University – 2020



Sean Mooney, MD College: University of California, Los Angeles - 2013 Medical School: SUNY - Downstate Health Sciences University - 2020 Internship: SUNY Downstate Health Sciences University - 2020



Alexander Graf, MD College: University of Pennsylvania - 2015 Medical School: Sidney Kimmel Medical College at Thomas Jefferson University - 2020 Internship: SUNY Downstate Health Sciences University - 2020

Graduating Residents



Daniel Ballard, MD



Sandra Ho, MD



Daniel Sukato, MD



Derek Wu, MD



DEPARTMENT OF LARYN **GOLO**



ANNUAL DEPARTMENTAL PHOTOGRAPHS



Front Row (L to R): Natalya Chernichenko, MD, Faculty; Rachel Irizarry, MD, Resident; Nira Goldstein, MD, Faculty; Sydney Butts, MD, Faculty; Richard Rosenfeld, MD, Distinguished Professor and Chairman; Ann Plum, MD, Faculty; Marina Boruk, MD, Faculty; and Krishnamurthi Sundaram, MD, Faculty

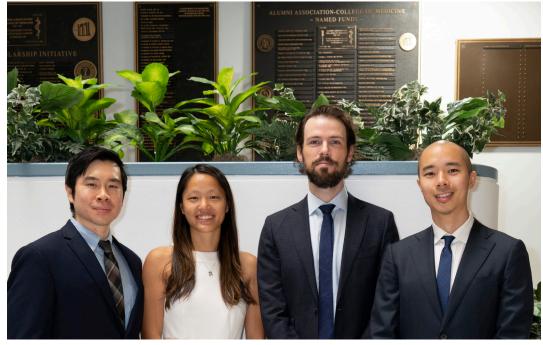
2nd Row (L to R): Ofer Azoulay, MD, Faculty; Ankit Kansal, MD, Resident; Sara Abu Ghanem, MD, Faculty; Alisa Timashpolsky, MD, Resident; Michael Weber, MD, Resident; Jennifer Liang, MD, Resident; and Stephanie Tominaga, MD, Resident; 3rd Row (L to R): Sam Schild, MD, Resident; Derick Wu, MD, Graduating Resident; Prayag Patel, MD, Resident; Hunter Hopkins, MD, Resident; and Boris Bentsianov, MD, Faculty

4th Row (L to R): Fasil Mathews, MD, Resident; Rahul Gulati, MD, Resident; Michael Weiss, MD, Faculty; Daniel Ballard, MD, Graduating Resident; Sandra Ho, MD, Graduating Resident; and Daniel Sukato, MD, Graduating Resident



(L to R): Nira Goldstein, MD, Associate Program Director; Richard Rosenfeld, MD, MPH, MBA, Distinguished Professor and Chairman; Daniel Sukato, MD, Graduating Resident; Sandra Ho, MD, Graduating Resident; Daniel Ballard, MD, Graduating Resident; and Derick Wu, MD, Graduating Resident

Before Grand Rounds...



(L to R): Daniel Sukato, MD, Graduating Resident; Sandra Ho, MD, Graduating Resident; Daniel Ballard, MD, Graduating Resident; and Derick Wu, MD, Graduating Resident



Front Row (L to R): Sam Schild, MD, Resident; Rachel Irizarry, MD, Resident; Alisa Timashpolsky, MD, Resident; Jennifer Liang, MD, Resident; Stephanie Tominaga, MD, Resident, and Sandra Ho, MD, Graduating Resident 2nd Row (L to R): Fasil Mathews, MD, Resident; Ankit Kansal, MD, Resident; Derick Wu, MD, Graduating Resident; Michael Weber, MD, Resident; and Hunter Hopkins, MD, Resident 3rd Row (L to R): Prayag Patel, MD, Resident; Rahul Gulati, MD, Resident; Daniel Ballard, MD, Graduating Resident and Daniel Sukato, MD, Graduating Resident



Fun shot for the residents

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DEPARTMENT OF OTOLARYNGOLOGY RESIDENT ROTATION SCHEDULE ACADEMIC YEAR 2020-2021

PGY-1 2020-2021 SCHEDULE

	7/1-7/12	7/13-7/26	7/27-8/9	8/10-8/23	8/24-9/6	9/7-9/20	9/21-10/4	10/5-10/18	10/19-11/1	11/2-11/15
James Alrassi	ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo	Neurosugery	Neurosurgery	Vacation	Vacation	OMFS	OMFS
Sean Mooney	ENT-KCHC/UHB	ENT-KCHC/UHE	3 Neurosurg	Neurosurg	ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo	KCHC-GenSurg	KCHC-GenSurg
Alexander Graf	Neurosurg	Neurosurg	ENT-KCHC/UHE	B ENT-KCHC/UHB	KCHC-GenSurg	KCHC-GenSurg	SICU	SICU	ENT-Maimo	ENT-Maimo
James Alrassi	11/16-11/29 KCHC-GenSurg k	11/30-12/13 CHC-GenSurg	12/14-12/27 ENT-Maimo	12/28-1/10 ENT-Maimo	1/11-1/24 ENT-Maimo	1/25-2/7 ENT-Maimo	2/8-2/21 SICU	2/22-3/7 SICU	3/8-3/21 KCHC-GenSurg	3/22-4/4 KCHC-GenSurg
Sean Mooney	OMFS	OMFS I	KCHC-GenSurg I	KCHC-GenSurg	SICU	SICU	ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo
Alexander Graf	ENT-Maimo	ENT-Maimo	OMFS	OMFS	KCHC-GenSurg	KCHC-GenSurg	ENT-UHB/KCHC	ENT-UHB/KC	HC Vacation	Vacation

	4/5-4/18	4/19-5/2	5/3-5/16	5/17-5/30	5/31-6/13	6/14-6/30
James Alrassi	ENT-UHB/KCHC	ENT-UHB/KCHC	Anesthesia	Anesthesia	ENT-Maimo	ENT-Maimo
Sean Mooney	Anesthesia	Anesthesia	ENT-UHB/KCHC	ENT-UHB/KCHC	Vacation	Vacation
Alexander Graf	ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo	Anesthesia	Anesthesia

DEPARTMENT OF

DEPARTMENT OF OTOLARYNGOLOGY RESIDENT ROTATION SCHEDULE ACADEMIC YEAR 2020-2021

	KCHC/SUNY	LENOX HILL /MEETH	AMBUL, CARE	<u>021</u> RESEARCH*	MAIMO	NYPBM
JANUARY	IRIZARRY SCHILD WEBER LIANG MATHEWS	KANSAL TOMINAGA	TIMASHPOLSKY	HOPKINS	TABTABAI	PATEL GULATI
FEBRUARY	IRIZARRY SCHILD WEBER LIANG MATHEWS	KANSAL TOMINAGA	TIMASHPOLSKY	HOPKINS	TABTABAI	PATEL GULATI
MARCH	TIMASHPOLSKY TABTABAI HOPKINS LIANG TOMINAGA	SCHILD MATHEWS	PATEL	GULATI	KANSAL	IRIZARRY WEBER
APRIL	TIMASHPOLSKY TABTABAI HOPKINS LIANG TOMINAGA	SCHILD MATHEWS	PATEL	GULATI	KANSAL	IRIZARRY WEBER
МАҮ	TIMASHPOLSKY TABTABAI HOPKINS MATHEWS TOMINAGA	SCHILD LIANG	PATEL	GULATI	KANSAL	IRIZARRY WEBER
JUNE	TIMASHPOLSKY TABTABAI HOPKINS MATHEWS TOMINAGA	SCHILD LIANG	PATEL	GULATI	KANSAL	IRIZARRY WEBER

PGY-3 resident on Research Rotation and Ambulatory Care Rotation takes call at Maimonides

DEPARTMENT OF OTOLARYNGOLOGY RESIDENT ROTATION SCHEDULE ACADEMIC YEAR 2020-2021

PGY-1 2020-2021 SCHEDULE

	7/1-7/12	7/13-7/26	7/27-8/9	8/10-8/23	8/24-9/6	9/7-9/20	9/21-10/4	10/5-10/18	10/19-11/1	11/2-11/15
<mark>James Alrassi</mark>	ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo	Neurosugery	Neurosurgery	Vacation	Vacation	OMFS	OMFS
Sean Mooney	ENT-KCHC/UHB	ENT-KCHC/UHB	Neurosurg	Neurosurg	ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo
Alexander Graf	Neurosurg	Neurosurg	ENT-KCHC/UH	B ENT-KCHC/UHB					EIN I -IVIAIMO	EN I -Maimo
	11/16-11/29	11/30-12/13	12/14-12/27	12/28-1/10	1/11-1/24	1/25-2/7	2/8-2/21	2/22-3/7	3/8-3/21	3/22-4/4
James Alrassi			ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo				
Sean Mooney	OMFS	OMFS					ENT-Maimo	ENT-Maimo	ENT-Maimo	ENT-Maimo
Alexander Graf	ENT-Maimo	ENT-Maimo	OMFS	OMFS			ENT-UHB/KCHC	ENT-UHB/KCHC	Vacation	Vacation
	4/5-4/18	4/19-5/2	5/3-5/1	6	5/17-5/30	5/3	1-6/13	6/14-6/30		
<mark>James Alrassi</mark>	ENT-UHB/KCHC	ENT-UHB/KCHC	Anesth	esia	Anesthesia	EN	T-Maimo	ENT-Maimo		
Sean Mooney	Anesthesia	Anesthesia	ENT-U	HB/KCHC	ENT-UHB/KCHC	Vac	ation	Vacation		
Alexander Graf	ENT-Maimo	ENT-Maimo	ENT-M	ſaimo	ENT-Maimo	And	esthesia	Anesthesia		



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FIRST YEAR OF OTOLARYNGOLOGY / SURGICAL TRAINING (PGY-1)

The PGY-1 year in otolaryngology includes clinical and didactic activities that prepare residents to (a) assess, plan, and initiate treatment of adult and pediatric patients with surgical and/or medical problems, (b) care for patients of all ages with surgical and medical emergencies, multiple organ system trauma, soft tissue wounds, nervous system injuries and disease, and peripheral vascular and thoracic injuries, (c) care for critically-ill surgical and medical patients in the intensive care unit and emergency room settings, (d) participate in the pre-, intra-, and post-operative care of surgical patients, and (e) understand surgical anesthesia in hospital and ambulatory care settings, including anesthetic risks and the management of intra-operative anesthetic complications.

The training in this year is managed by the Departments Otolaryngology in coordination with the Departments of Surgery, Anesthesiology, Oral and Maxillofacial Surgery and Neurosurgery. This year includes the following rotations, as mandated by the ACGME Program Requirements for Graduate Medical Education in Otolaryngology:

- 1. Six months of otolaryngology rotations.
- 2. Rotations selected from anesthesia, general surgery, neurological surgery, oral-maxillofacial surgery, pediatric surgery and plastic surgery. The total time for each non-otolaryngology rotation must be at least four weeks but must not exceed two months.
- 3. One month of an intensive care rotation.

Rotations take place at KCHC, UHB, Maimonides as described below:

- KCHC rotations: otolaryngology, general surgery, critical care unit (SICU), neurosurgery, oral and maxillofacial surgery (OMFS)
- UHB rotations: otolaryngology, general surgery, pediatric surgery, anesthesia
- Maimonides: otolaryngology

TYPICAL PROCEDURES PERFORMED DURING PGY-1

- physical examination
- ACLS (Advanced Cardiac Life Support)
- ATLS (Advanced Trauma Life Support)
- oxygen administration
- bag-valve mask device usage
- closed chest compression
- oropharyngeal and nasopharyngeal airways
- phlebotomy
- peripheral intravenous lines
- Foley catheter placement
- arterial blood gas sampling
- nasogastric tube placement
- thoracentesis
- central line placement
- lumbar puncture
- management of a lumbar drain

- basic wound management
- incision and drainage of simple abscesses, including peritonsillar
- basic suturing of uncomplicated (non-facial, non-hand) lacerations
- splinting of strains and sprains
- flexible nasal and nasopharyngeal endoscopy
- flexible laryngoscopy
- fine needle aspiration in the neck
- insertion and management of tracheotomy tubes
- foreign body removal from the ear, nose and pharynx
- · anterior and posterior nasal packing

SECOND YEAR OF OTOLARYNGOLOGY / SURGICAL TRAINING (PGY-2)

This year includes 3 four-month rotations, two four-month rotations at Kings County Hospital Center/ University Hospital of Brooklyn and one four--month rotations at the Lenox Hill Hospital/MEETH. This PGY-2 year is directed to the development of clinical abilities, the taking of otolaryngological histories, performing physical examinations, and learning special techniques, leading to the identification and treatment of common conditions encountered in otolaryngology. The resident participates in the outpatient clinical care of both pediatric and adult populations and also participates in specialty clinics, such as pediatric, otology, and head and neck oncology.

The Basic Science Program, during the first two months of the resident year, reinforces basic science application to the clinical practice of otolaryngology-head and neck surgery. The lectures, in addition to temporal bone dissection and head and neck gross anatomy dissection, are provided by full-time and part-time faculty of otolaryngology and other medical school faculty. An introduction to hearing and speech evaluation/therapy is provided by the audiology and speech faculty.



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TYPICAL SURGICAL PROCEDURES PERFORMED DURING PGY-2

- Closed Reduction Nasal Fracture
- Intranasal Antrotomy
- Excision Preauricular Sinus
- Turbinectomy
- Tracheotomy
- Myringotomy and Tube
- Split Thickness Skin Graft
- Full Thickness Skin Graft
- Excision Skin Lesions, Primary Closure
- Direct Laryngoscopy Diagnostic

THIRD YEAR OF OTOLARYNGOLOGY / SURGICAL TRAINING (PGY-3))

This year includes one four-month rotation at the Kings County Hospital Center, one four- month rotation at Methodist and four months of research. Increasing responsibilities are reflected in performing inpatient consultations, and in teaching of medical students and residents of other programs. Broad clinic patient responsibility and refinement of diagnostic and treatment skills are continued in the junior year.

Knowledge of work-up and differential diagnosis for complex diseases related to otolaryngology is required, such as acoustic neuroma, Ménière's disease, diseases of the thyroid gland, allergy mediated disease, and unknown primary cancer of the head and neck. Residents and gain experience in open reduction of facial fractures, removal of foreign bodies from the upper aerodigestive tract, pediatric endoscopy and laser procedures, tympanoplasty, excision of salivary glands, frontal and ethmoid sinus surgery, regional skin flaps, radical neck dissection, total laryngectomy, and cosmetic facial surgery.

TYPICAL SURGICAL PROCEDURES PERFORMED DURING PGY-3

- Endoscopic Maxillary Antrostomy and Ethmoidectomy
- Excision of Cysts (Globulomaxillary, Nasoalveolar)
- Tympanoplasty –Type 1
- Thyroglossal Duct Cyst Excision
- Congenital Cyst Excision
- Partial Neck Dissection
- Submandibular Gland Excision
- Lip Shave
- Hemiglossectomy, simple
- Excision other Nasopharyngeal Tumor
- Lip Wedge Resection, 1o Closure
- Local Resection Cancer Mouth
- Incision & Drainage Neck Abscess
- Cervical Lymph Node Biopsy
- Repair Complex Facial Lacerations

s, radical neck dissection, total laryngectorny, and cosmetic facial su

- Reduction Facial Fractures Nasal
- Reduction Facial Fractures Malar
- Reduction Facial Fractures Orbital Blowout
- Reduction Facial Fractures Mandibular-open
- Pedicle Flap Procedures Local
- Pedicle Flap Procedures Regional
- Endoscopic Sinus Surgery
- Nasal Polypectomy
- Caldwell Luc
- Esophagoscopy Diagnostic with Foreign Body Removal
- Esophagoscopy Diagnostic with Structure Dilation
- Bronchoscopy Diagnostic
- Panendoscopy (Multiple Concurrent Endoscopic Procedures)

FOURTH YEAR OF OTOLARYNGOLOGY / SURGICAL TRAINING (PGY-4)

This year includes one four-month rotation at Maimonides Medical Center, one four-month rotation at Kings County Hospital Center and one four-month rotation at Lenox- Hill – MEETH. The resident has substantial responsibility in administration and in teaching junior otolaryngology residents. Also, at this stage, he or she develops knowledge and experience with various medical and surgical complications and their management.

The fourth-year otolaryngology resident is in charge of performing elective and emergency in-house consultations. The resident also develops awareness of rehabilitation techniques and procedures pertaining to otolaryngology. During this year, the resident gains more experience with parotidectomy, modified neck dissection, composite resection, sphenoethmoidectomy, mastoidectomy, stapedectomy, endolymphatic sac shunt, maxillectomy, rhinoplasty, rhytidectomy, blepharoplasty, otoplasty, correction of congenital deformities, facial nerve decompression, and removal of nasopharyngeal tumors.

The PGY-4 resident is expected to use the experience of this year to prepare for the Chief Resident experience.

- Direct Laryngoscopy and biopsy
- Laryngoscopy with Excision
- Reduction Facial Fractures
- Mandibular Fracture Reduction Closed
- Adenoidectomy
- Tonsillectomy
- T&A

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TYPICAL SURGICAL PROCEDURES PERFORMED DURING PGY-4

- Canaloplasty
- Tympanoplasty II-IV (without Mastoidectomy)
- Modified Radical Mastoidectomy
- Simple Mastoidectomy
- Transnasal approach to the sella
- Closure of Pharyngostome
- Transantral Ligation of Vessels
- Oroantral Fistula Repair
- Choanal Atresia Repair
- Uvulopalatopharyngoplasty
- Excision of Simple Tumor of Nose
- Cricopharyngeal Myotomy
- Tissue Expander, placement and management
- Lingual Tonsillectomy
- Pedicle Flap Procedures-Myocutaneous
- Lymphangioma excision
- Parathyroidectomy
- Thyrotomy (Laryngofissure)
- Vertical Hemilaryngectomy
- Supraglottic Laryngectomy
- Pharyngeal Diverticulectomy
- Modified Neck Dissection, primary
- Excision with Flap Reconstruction
- Lateral Rhinotomy
- Superficial Parotidectomy
- Composite Resection of Primary in Floor of Mouth, Alveolus, Tongue, Buccal Region,
- Tonsillectomy, radical
- Mandibular Resection (independent procedure)
- Excision Pinna
- Surgical Speech Fistula Creation
- Arytenoidectomy, Arytenoidopexy
- Thyroid Lobectomy
- Subtotal Thyroidectomy
- Total Thyroidectomy

FIFTH YEAR OF OTOLARYNGOLOGY / SURGICAL TRAINING (PGY-5)

This year includes a four-month rotations at New York Methodist Hospital (administrative chief resident), a four-month rotations at Kings County Hospital Center/University Hospital at Brooklyn and a 4-month ambulatory care rotation at SUNY Bayridge, MEETH, Methodist and the 185 Montague Street offices. The chief resident has administrative responsibility for all aspects of patient care. The resident gains wide exposure to the following concepts: chemotherapy and radiation therapy for treatment of patients with cancer of the head and neck, cancer immunology laryngotracheal reconstruction and skull base surgery. The chief resident develops broad experience with the following surgical procedures: partial and total laryngectomy, tracheal resection and reconstruction, total parotidectomy, parathyroidectomy, temporal bone resection, mediastinal resection, craniofacial resection, orbital decompression, neck dissection and composite resection, complicated reconstructive problems of the head, neck and face, neuro-otology (including middle cranial fossa surgery, Meniere's disease), cochlear implantation, skull base surgery, and major pediatric otolaryngological surgery.

The chief resident participates actively in teaching medical students, paramedical personnel, and junior otolaryngology residents. The chief resident also has major responsibility for assuring that the numerous consults received from other services are handled accurately and expeditiously and that attendings are fully informed and consulted on all patient care and administrative matters which occur at night and on the weekends. Chief residents also are responsible for exploring clinical research projects and stimulating other members of the team to explore research opportunities.

All Chief Residents (and PGY-4 at Maimonides and Lenox Hill) are responsible for preparation of material for monthly M&M/PI/CQI conferences in the required format. This includes presentation of data on patient volume (in-patient and out-patient), on-going issues in clinic and inpatient services, interaction with other services, NYPORTS, equipment and service needs, transfusions/rational, complications, morbidities, mortalities and changes in procedures mandated by the above.

- Cervical Esophagostomy for Feeding
- Major Vessel Ligation
- Branchial Cleft Cyst Excision
- Vocal Cord Injection
- Laser Laryngoscopy
- Bronchoscopy-Diagnostic with Foreign Body Removal
- Bronchoscopy-Diagnostic with Stricture
 Dilation
- Dermabrasion
- Brow Lift
- Liposuction
- Reduction Facial Fractures Frontal
- Otoplasty
- Rhinoplasty
- Mentoplasty
- Blepharoplasty
- Maxilla-Le Fort I
- Maxilla LeFort II
- Rhytidectomy
- Scar Revision
- Frontoethmoidectomy
- External Ethmoidectomy
- Frontal Sinus Trephine
- Endoscopic Sinus Surgery with sphenoidotomy and frontal sinusotomy

Further information about the role of the Chief Resident is included in the Chief Resident Manual, which was first prepared by Boris Bentsianov, MD, former Chief Resident, and is updated annually.

TYPICAL SURGICAL PROCEDURES PERFORMED DURING PGY-5

- Total Parotidectomy with facial nerve preservation
- Parapharyngeal Space Tumor Excision
- Rhinectomy
- Maxillectomy
- Maxillectomy with Orbital Exenteration
- Excision Tumor Ethmoid and Cribriform Plate •
- **Temporal Bone Resection** .
- Laryngopharyngectomy •
- Repair Laryngeal Fracture •
- Pharyngoesophagectomy •
- Tracheal Resection with Repair
- Major Vessel Repair
- · Parotidectomy with Nerve Graft
- Excision Angiofibroma
- Transsternal Mediastinal Dissection
- Scalene Node Biopsy
- Facial Nerve Graft, Repair or Substitution
- Microsurgical Free Flap
- Skull Base Resection Lateral
- Excision of Paraganglioma of Neck and Skull Base
- Laryngoplasty
- Tracheoplasty
- Fascial Sling Procedures
- Pharyngeal Flap

regional meetings.

Endolymphatic Sac Operation . Labyrinthectomy •

All residents participate in the numerous educational programs of the American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS) Triological Society, New York Head and Neck Society, and various New York Metropolitan residency programs. In addition, each resident is expected to have two

active clinical research projects underway at any given time. The faculty provides supervision of these projects and encourages completion of manuscripts for publication and presentation at national and/or

- Mediastinoscopy
- Pharyngogastric Anastomosis (Gastric Pull-Up)
- Skull Base Resection Anterior •
- Skull Base Resection – Middle
- Temporalis Muscle Transfer
- **Composite Graft** • •
 - **Osteoplastic Frontal Sinusectomy**
- Frontal Sinus Ablation
- Radical Pan-Sinusectomy •
- Dacryocystorhinostomy •
- **Cleft Lip Repair** •
- **Cleft Palate Repair**
- **Reconstruction Congenital Aural Atresia** •
- **Reconstruction External Ear** .
- . Maxilla-LeFort III
- Stapedectomy •
- Facial Nerve Decompression •
- . Repair of Perilymphatic Fistula
- Resection Cerebellopontine Angle Tumor





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Training in Otolaryngology Allergy, and Immunology

Training in otolaryngologic allergy and immunology includes the following:

- Combined Allergy-Rhinology Clinic at KCHC
- Participation in programs of American Academy of Otolaryngic Allergy (AAOA) (residents are encouraged to join).
- Series of lectures by the chairman on otolaryngologic aspects of AIDS.
- Close clinical working relationship with KCHC and SUNY faculty in allergy and immunology.
- Inclusion of discussion of allergic and immunologic aspects of otolaryngologic disease during routine conferences.
- Use of AAO-HNS educational material in allergy/immunology including selected SIPacs, Monographs, and Home Study Courses.
- · Directed reading assignments on allergy/immunology topics.

Training in Endocrinology

• Training in endocrinology includes the following activities:

- Extensive discussion on teaching rounds and in the operating rooms about the numerous patients who present with endocrine disorders or who require endocrine surgery.
- Special Grand Rounds lectures and conferences on topics such as thyroid disease, parathyroid disease, diabetes, etc. These conferences involved colleagues from related clinical and basic science departments.
- Numerous surgical cases are performed in conjunction with the Department of Neurosurgery which has a special interest in transsphenoidal hypophysectomy.
- Use of AAO-HNS educational materials and selected reading in endocrinology.
- Close working relationship with endocrinologists at all hospitals.

Training in Neurology

Training in neurology includes the following activities:

- Discussion of the neurologic aspects of various otolaryngologic disorders in the operating room, clinics, and teaching rounds.
- Close working relationship with the Department of Neurosurgery with whom a Skull Base Surgical Center has been created at UHB and with whom we perform numerous surgical procedures.
- Interactive research projects with Richard Kollmar, PhD in the Department of Cell Biology

Organization of Teaching Services and Clinics

The teaching service at each of the 5 sites (6 hospitals) is under the direction of a full-time staff member:

- University Hospital of Brooklyn:
- Kings County Hospital Center:
- Maimonides Medical Center:
- NY Presbyterian Brooklyn Methodist Hospital:
- Lenox Hill/ MEETH:

Richard Rosenfeld Matthew Hanson Michael Weiss

N. Chernichenko Jessica Lim

The attending physician is responsible for determining standards for the delivery of clinical care, defining and coordinating the intramural educational program, assuring that all institutional regulations are followed, monitoring resident progress, coordinating the activities of the attending staff and reporting promptly and accurately to the chairman on all departmental details.

The service chief recruits and supervises the attending staff, plans the intramural conference schedule, plans the operating room and clinic schedules and assures that there is a proper balance between service responsibilities and educational opportunities for the residents. All surgery is performed under attending supervision and all clinics have attending coverage. The chairman is present every week at the three major hospitals and makes periodic on-site visits to the other two hospitals. He also holds carefully structured meetings with the service chiefs from each institution bimonthly to assess the progress of clinical and educational programs.

Basic Science Education

The Chairman, Program Director, and Associate Program Director, in conjunction with the full-time staff, the Director of Communicative Disorders and the Director of Research, have planned a multifaceted program for basic science education which includes the following:

- Introductory basic science conferences directed toward the first-, second- and third-year residents for 2 hours each week during July-September.
- Special targeted seminars are held approximately quarterly to integrate basic science and clinical topics (such as thyroid function and thyroid surgery).
- Didactic instruction in biostatistics, epidemiology, and basic science research by Richard Rosenfeld, Nira Goldstein, and Richard Kollmar.
- Monthly research conference that reviews current faculty and resident projects and monitors
 resident planning for the research rotation
- Protected 4-month research rotation during the PGY-3 year in which the focus on basic science aspects or research experience are stressed.
- Numerous interactive projects with colleagues in Anatomy, Physiology, and Cell Biology Departments at SUNY.
- Use of basic science educational material prepared by AAO-HNS.

Attending rounds are conducted by the Socratic method. Knowledge of basic sciences, including anatomy, physiology, biochemistry, microbiology and pathology are stressed in a way in which they can be related to direct patient care.

Laboratory Facilities

A New York State accredited Research Laboratory is located at SUNY-Downstate and available to members of the Department of Otolaryngology.

A new temporal bone dissection laboratory that will serve as a state-of-the-art facility for the department's regular basic course in otologic surgery for the residents will be opening up at SUNY-Downstate this year.

A comprehensive animal laboratory is also located at SUNY-Downstate.

Scientific and Academic Computing Center

The Scientific/Academic Computing Center (S/Acc) located in the Basic Science Building at SUNY, aids students, staff, and faculty by offering formal courses, information, instruction and individual consultations. The staff offers these consultations in a wide area of computer applications, including how to use the Center's computers and other facilities, statistical analysis, data acquisition, analysis techniques, research methodology, and mathematical/analytical methods.

Rotation Schedule

PGY-1 (n=3)	Surgery (2 months selected from general surgery and pediatric surgery))	1 month in each of the following: Anesthesia (UHB), Critical Care (KCHC), Oral-maxillofacial surgery (KCHC), and Neurosurgery (KCHC)	Otolaryngology: 2 months at KCHC/ UHB and 4 months at Maimonides
	4 months	4 months	4 months
PGY-2 (n=3)	KCHC/UHB	KCHC/UHB	Lenox Hill/MEETH
PGY-3 (n=3)	KCHC/UHB	NYMH	Research
PGY-4 (n=3)	Lenox Hill/MEETH	Maimonides	KCHC/UHB
PGY-5 (n=3)	Ambulatory Care/MEETH/ NYMH	NYMH	KCHC/UHB

Abbreviations:

KCHC/UHB – Kings County Hospital Center/University Hospital of Brooklyn MEETH – Manhattan Eye, Ear and Throat Hospital NYMH - New York-Presbyterian Brooklyn Methodist Hospital



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DIDACTIC TEACHING PROGRAM Grand Rounds

Grand Rounds are held every Thursday morning at the University Hospital of Brooklyn. All house staff, students, research fellows and faculty are required to attend. The first half hour is dedicated to the discussion of various residency related topics. During the 7:00 to 8:00am hour, lectures are delivered by invited guests who are nationally known for their expertise and experience in a variety of topics. In-house speakers and faculty as well as residents present information during the 8:00 to 9:00am hour. Also, journal club occurs from 8:00 to 9:00 on the second Thursday of each month and morbidity & mortality conference occurs at 7:00am on the fourth Thursday. On the fourth Thursday, invited speakers presentations occur from 8:00 to 9:00. Biweekly Head and Neck Tumor Board is included in the schedule from 9:00 to 10:00 alternating with the COCLIA Chapter Review Sessions Different aspects of basic sciences as related to the field of Otolaryngology-Head & Neck Surgery are presented and discussed from 7:00 to 9:00am during July and August.

Morbidity and Mortality/Quality Improvement

Monthly departmental meetings are scheduled to discuss issues related to quality improvement, performance improvement and morbidity/mortality. This important process involves all department members in an effort to improve individual, departmental, interdisciplinary and system activities in rendering quality patient care. Focusing on the quality activities of all five affiliated hospitals provides a coherent departmental-wide program. These conferences always include a systems-based practice approach, with identification of the roles of all members of the health-care team and identification of any institutional or system issues.

Resident Presentations

Once per year each resident gives a formal presentation on a basic science or clinical subject at Grand Rounds. The resident is expected to choose a faculty adviser to assist with topic selection, format determination and possible manuscript preparation. The presentations may be a part of a research project and submission to local, regional and national meetings.

Otology Conference - Kings County Hospital Center

The Otology Conference takes place on a weekly basis in the office of the Department of Otolaryngology. The content of didactic and bedside teaching is based upon clinical material related to patients treated at Kings County Hospital and University Hospital of Brooklyn. The resident presents the case, and the discussion is led and supervised by the attending physician. An attempt is made to integrate the clinical material from the standpoint of diagnosis, treatment, and didactic teaching. Operative cases are presented both before and following surgery.

Radiology and Pathology

Radiology and pathology conferences are held regularly every month within the context of the Grand Rounds conference. Basic overview of imaging and pathology as well as interesting cases in the head and neck are presented. Discussion and teaching is facilitated by experienced head and neck radiologists and pathologists.

Combined Head and Neck Oncology

Twenty four times a year, the Departments of Oncology, Otolaryngology, Radiology, Radiation Therapy and Pathology meet to discuss recent head and neck cancer patients and selected topics in head and neck cancer. A similar conference is held weekly at New York Presbyterian Brooklyn Methodist Hospital. A combined otolaryngology/radiation oncology/medical oncology Tumor Board is held at SUNY-UHB/ KCHC once a month; all head and neck cancer cases are presented for treatment planning.

Basic Science Lecture Series

During the summer, a 9-week basic science and communicative disorders course is given for 1st, 2nd and 3rd year residents, with senior resident attendance encouraged. Held on Thursday mornings, the first hour is devoted to basic anatomic, physiologic, radiologic and pharmacologic aspects of otolaryngology - head and neck surgery. The second hour is devoted to topics in clinical otolaryngology, audiology and speech and language pathology.

Communicative Disorders

A set of in-service meetings have been established by the Division of Communicative Disorders for the residents of otolaryngology. Topics covered include basic audiometry, immittance audiometry, evoked potentials, hearing loss, hearing aids, head and neck disorders, laryngectomy and rehabilitation and dysphagia.

Temporal Bone Dissection Course

During each year of training, residents attend a 3 day temporal bone course. Early course work stress anatomy and embryology, followed by intensive dissections and surgical technique practice. Dr. Matthew Hanson, Dr. Neil Sperling, and Dr. Michal Preis along with other faculty members, guide the resident through this important and valuable educational program. Temporal bones are also available for resident self-study and dissection.

Anatomy/Cadaver Dissection Course

Every spring, 2 or 3 sessions dedicated to cadaveric dissection takes place in the anatomy laboratory. The sessions are supervised by Samuel Marquez, PhD and the head and neck, rhinology and plastics/ reconstructive faculty and include head and neck, sinus, skull base and flap dissections.

Journal Club

On a monthly basis, the current literature is reviewed in a journal club format. Review of the literature is important for keeping up-to-date with the ever-changing world of medicine. The Journal Club format helps residents learn how to analyze research fundamentals and new material, allowing them to draw their own conclusions. Reading the literature also helps create interest in specific research ideas and stimulates discussion and controversy.

Flex Resident Study Course

The Flex Resident Study Course, offered by AAO-HNS emphasizes both classic and current studies in otolaryngology-head and neck surgery. Course material span across all eight specialty areas. The first five specialty topics include: Chronic Rhinosinusitis with Polyps (September), Glottic and Subglottic Stenosis (October), Oropharyngeal Cancer Update 2020: HPV, Robotic surgery, and De-escalation (November); Acoustic Neuroma (January); and Pediatric OSA (February). The final three topics will include material on Practice Management (March); General Otolaryngology and Sleep Medicine (April), and Facial Plastic and Reconstructive Surgery (May).

A self-assessment examination is provided after each section and scored for credit. All residents participate in this course, with the registration fee paid by the Department of Otolaryngology at SUNY Downstate.

In-Training Examination (Annual Otolaryngology Resident Training Examination) As part of the Bailey's Chapter Review Sessions, In-Training Examination -type questions are also reviewed. Supervision is provided by an attending who is present at the request of the resident staff and is available for consultation. Topics from past examinations are reviewed to allow more comprehensive coverage of all aspects of the specialty of Otolaryngology - Head and Neck Surgery.

Mock Oral Board Examinations

Approximately 4 times annually the department will conduct a mock oral board examination session as part of the grand rounds schedule.

Special Evening Meetings

Four times a year, the New York Head and Neck Society hosts a Wednesday evening lecture series devoted to a particular issue. Local, national and international authorities are invited to speak. All residents are invited and sponsored by our department. The residents also attend the yearly New York City Pediatric Airway Course.

Residents also attend the AO North America Maxillofacial Trauma Course as a PGY-3 or PGY-4.

Additional Site Specific Conferences

Lenox Hill, New York Methodist, Kings County Hospital and Maimonides Tumor Boards Lenox Hill Endocrinology Tumor Board Head and Neck Journal Club at Lenox Hill and Kings County Cochlear Implant Conference at UHB

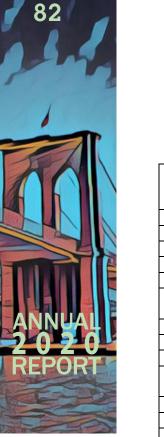
Suggested Readings

Specific reading requirements by training year are given under the "Medical Knowledge" competency sections in the "Goals and Objectives" document. In addition, it is expected that residents implement a systematic reading schedule to prepare for the annual Otolaryngology Training Examination each spring. The goal of the reading schedule should be to cover all material in a general otolaryngology textbook (e.g. Bailey's) at least once annually, even if only superficially. More in-depth and focused reading should occur progressively as the resident advances in training.



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Key Indicator Cases for June 2020 Graduating Chief Residents

Final Case Log Report with Comparison to RRC Minimum Required Department of Otolaryngology, SUNY Downstate Health Sciences University

	RRC Minimum	Resident	Resident	Mean Supervisor	Comparison to RRC
RRC Key Indicator Case	Required	Supervisor	Surgeon	or Surgeon	Minimum
Head and Neck	-	-			
Parotidectomy	15	4	84	22	+7 (47%)
Neck dissection (all types)	27	8	188	49	+22 (81%)
Glossectomy	10	4	54	15	+5 (50%)
Thyroid/parathyroidectomy	22	37	327	91	+69 (314%)
			228		
Otology/Audiology					
Tympanoplasty (all types)	17	7	130	59	+42 (247%)
Mastoidectomy (all types)	15	7	88	34	+19 (127%)
Ossicular chain surgery	10	0		22	
Facial Plastic Reconstructive					
Rhinoplasty (all types)	8	2	172	44	+36 (450%)
Mandible/midface fractures	12	3	64	17	+5 (42%)
Flaps and Grafts	20	6	419	106	+86 (430%)
General/Pediatric					
Airway – pediatric and adult	20	21	281	76	+56 (280%)
Congenital neck masses	7	3	77	20	+13 (186%)
Sinus surgery	40	29	491	130	+90 (225%)
Bronchoscopy	22	12	151	41	+19 (86%)

SERVICE CHIEF REPORTS

Division of Pediatric Otolaryngology Ann Plum, MD

The Division of Pediatric Otolaryngology, now in its 27th year, has continued to achieve excellence in patient care, teaching, and research during the 2019-2020 academic year.

The division has continued its expansion at multiple Brooklyn sites, including SUNY Downstate University Hospital, New York - Presbyterian Brooklyn Methodist Hospital, and Kings County Hospital Center. The educational experience as well as patient care experience has continued to grow and diversify to include all areas of Pediatric Otolaryngology.

Faculty from a wide variety of specialties work together in a multi-disciplinary fashion to create system-based initiatives as well as individual treatment plans for patients. The faculty base has expanded by the addition of Ann Plum, MD. This year has also seen continued success in providing care for children in a multidisciplinary fashion through the multi-disciplinary Brooklyn Cleft and Craniofacial Center and the formation of a multidisciplinary Aerodigestive Clinic.

Academic pursuits remain strong priorities as the Division continues to forge a national reputation. Richard Rosenfeld, MD, MPH, continues to expand his role as senior advisor for the AAO-HNS clinical guidelines. Nira Goldstein, MD, MPH, continues to be extremely active in the American Academy of Otolaryngology, American Society for Pediatric Otolaryngology, and SUNY Downstate Medical School, and is a leading authority on sleep-disordered breathing in children, with many publications on the subject, and multiple current active clinical projects. Ann Plum, MD, has started to be active with clinical research within the Department. Research is regularly presented at national meetings. In addition, all faculty continue to be active participants in Resident and Medical Student Education within the Department and SUNY Downstate Medical Center.

Division of Facial Plastic and Reconstructive Surgery Sydney C. Butts, MD, Chief

The Division of Facial Plastic and Reconstructive Surgery is based at several clinical sites, with services provided at University Hospital Brooklyn, Kings County Hospital Center and New York Methodist Hospital. There was an even distribution of facial plastic surgery cases including trauma surgery, congenital craniofacial reconstruction and pediatric facial reconstruction, functional nasal reconstruction, Mohs defect reconstruction and cosmetic facial procedures. A dedicated cosmetic surgery rotation under the supervision of Dr. Richard Westreich allows senior residents to operate at Manhattan Eye, Ear and Throat Hospital (MEETH)

Academic activity from the division included presentations at national meetings, publications in peer reviewed journals and textbook chapter submissions.

The otolaryngology service has become actively involved in the management of congenital craniofacial anomalies, becoming the primary referral service for the cleft lip and palate patients born at the neonatal intensive care units at SUNY Downstate and Kings County Hospital. Through collaboration with the NICU, general pediatrics and the pediatric subspecialties, as well as local speech/language pathologists and geneticists, comprehensive and multidisciplinary care is brought to these patients.

During the Downstate/Kings County rotation, the otolaryngology service provides coverage of facial trauma in a rotation schedule with the oral surgery and ophthalmology services. Residents participate in formalized didactic activities relating to maxillofacial trauma during this rotation. Residents are sent to participate in maxillofacial trauma courses sponsored by the AO. Dr. Butts has been involved with maxillofacial trauma education on a national level as a faculty member of the AO.

In summary, the Division of facial plastic surgery continues to provide residents and medical students with significant exposure to cosmetic and reconstructive procedures of the face. Our recent staff additions have provided continuity and helped to preserve the volume of cases critical to resident training. We expect further growth over the next few years in all aspects of the subspecialty.

Division of Otology and Neurotology Matthew B. Hanson, MD

The Division of Otology and Neurotology provides sub-specialized care for patients with diseases of the ear and temporal bone. In striving for optimal outcomes for our patients, their care is carefully coordinated with our colleagues in Audiology, where accurate diagnosis relies on advanced technology. Our Skull-Base team for treatment of neuro-otologic disorders includes colleagues in head and neck



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surgery and neurosurgery. We provide advanced care for the hearing impaired, including cochlear implantation, bone-anchored hearing implants, and early detection of hearing loss. Newborn hearing screening is routine at our participating hospitals and regularly identifies hearing loss at the youngest possible age. This enables early intervention to foster language development. Otology education is supplemented by the careful and precise study of the temporal bone anatomy. The Temporal Bone Laboratory provides intensive training for all residents during each of their four years. Our laboratory is also available for post-graduate training. Routine educational conferences in otology take place through the Grand Rounds schedule, as well as during weekly patient conferences, Vestibular conferences and weekly Case Review Conferences. We also benefit from our close affiliation with the Auditory Oral School of New York, which provides pre- and post-operative services for our cochlear implant patients of all ages.

The past year has seen continued growth to the Otology Division. In addition to Dr. Michal Preis, who has continued to bring state of the art otology to Maimonides Medical Center, we have benefitted greatly from our new affiliation with Lenox Hill Hospital and Manhattan Eye, Ear and Throat Hospital. Dr. Preis has continued to advance endoscopic ear surgery and had served as an instructor at a course in EES at Columbia. She also continues to participate in a yearly medical mission to the Philippines, wo which a resident usually accompanies her. At MEETH, our residents now get to work with Drs lan Storper, Darius Kohan and Sujana Chandresekhar and have significantly increased the otologic experience of our residents. Also, now at MEETH and again affiliated with our residency is Dr. Neil Sperling, who directed Otology and Neurotology at SUNY-Downstate for many years. At University Hospital of Brooklyn, the Cochlear Implant Program under Dr Matthew Hanson and Dr. Hailey Morgan has continued to expand and we have also affiliated with Island Audiology in Staten Island to provide cochlear implant and BAHA services for their patients.

Division of Head and Neck Surgery and Oncology Krishnamurthi Sundaram, MD Natalva Chernichenko, MD

The Division of Head and Neck, Surgery and Oncology continues to be extremely active and productive, both clinically and academically. Drs. Sundaram, Har-El, Chernichenko, Azoulay, Butts, and Hanson, continue their role in running the leading center for head and neck cancer management in Brooklyn. Using an interdisciplinary approach, experts from across disciplines come together to provide state-of-the-art care for patients with all types and stages of head and neck cancer. Each month, the Division of Head and Neck Surgery and Oncology runs two busy head and neck tumor boards at SUNY Downstate/Kings County Hospital. We also participate in a monthly head and neck tumor board at New York Presbyterian-Brooklyn Methodist Hospital. In the spirit of multidisciplinary approach, management decisions are made in collaboration by head and neck surgeons, radiation oncologists, medical oncologists, radiologists, and pathologists. There is full participation of our attending and resident staff members in all tumor board conferences. Dr. Frank Lucente contributes invaluable advice on ethical issues. These dedicated tumor board sessions have been very successful in discussing difficult cases and designing treatment plans. Advances in surgical equipment as well as special training and expertise of our surgeons made it possible to add transoral robotic surgery (TORS), transoral laser surgery (TLS), endoscopic skull base surgery and video-assisted thyroid surgery to our armamentarium.

As a comprehensive head and neck cancer center, we place a special emphasis on quality of life of cancer patients and their families that led to establishment of our survivorship program. Head and neck cancer can impact some of the most basic human functions, including swallowing, speech, sight, fertility and appearance just to name a few. Our head and neck surgeons as well as our laryngologists, Dr. Bentsianov and Dr. Abu-Ghanem, in collaboration with speech and language pathologists, Dr. Luis Riquelme and Ms. Alexandra Soyfer, work with our patients to rehabilitate every aspect of speech and swallowing function following ablative head and neck surgery. Physicians in the Division of Microvascular and Reconstructive Surgery, Dr. Azoulay, Dr. Butts and Dr. Russo, have been working closely with our cancer surgeons on advanced reconstructive procedures for head and neck cancer.

In the Division of Head and Neck Surgery and Oncology we place a special emphasis on basic science and clinical research. Our Division of Head and Neck Surgery in collaboration with Dr. Richard Kollmar and Dr. Rosenfeld had successfully secured Empire Clinical Research Investigator Program (ECRIP) Grant (\$150,000) to investigate the mechanisms of perineural invasion by head and neck cancers. The results of this work should directly impact the clinical care of cancer patients not only by improving survival and preventing progression of neurotrophic tumors, but also by improving patients' quality of life by diminishing pain and functional impairment. Areas of clinical research include health and healthcare disparities in head and neck cancer, and NSQIP (ACS National Surgical Quality Improvement Program) database research to study surgical complications of head and neck surgery. Faculty members and residents of our department are regular participants and attendees at the meetings of the New York Head and Neck Society, which is the largest local/regional head and neck oncological organization in North America. Our Chairman, Dr. Richard Rosenfeld has supported the head and neck division and strongly encouraged its growth. With his help we look forward to further growth and development of the division.

Division of Laryngology, Voice and Swallowing Disorders Boris L. Bentsianov M.D., Director

The Division of Laryngology has been providing our patients with the latest and most advanced diagnostic and therapeutic modalities for the care of voice and swallowing pathology. Office procedures include videostroboscopy, laryngeal EMG and EMG guided injection, endoscopic swallowing evaluation, as well as percutaneous medialization thyroplasty and awake, in- office, laryngeal biopsy techniques. The practice has expanded over the last 18 years to meet the growing demand for high quality voice and laryngeal care throughout the community and borough with referral for tertiary care from a catchment area including Brooklyn, Queens and Staten Island. The division also includes a laryngology clinic in collaboration with the residency program, in which resident physicians, and their patients, also benefit from the full complement of laryngologic care, and allows the residents an exciting opportunity to learn and contribute in a hands on fashion. This year the Division is further growing with the addition of a new full time Laryngologist Dr Sara Abu-Ghanem, who will be spending time at the SUNY Downstate campus, Kings County Medical Center, NY Methodist Hospital and Maimonides Medical Center. This will further expand coverage for laryngology subspecialty care at all of our training sites.

The Division of Laryngology, Voice and Swallowing Disorders is also excited to deliver services at our new practice site in Park Slope, Brooklyn. This effort includes coverage of the laryngology work at New York Presbyterian Brooklyn Methodist hospital. This location and our new ambulatory surgical site in Bay Ridge, Brooklyn has further expanded our surgical capabilities and our relationships throughout the borough.

The division is further enhanced by its affiliation with Maimonides Medical center where we have a full operating room session and resident coverage. The division is also active within the grand rounds curriculum for resident education and continuing medical education for our faculty, as well as the resident basic science course.

The Division of Laryngology has also been greatly benefited by its interaction with the Communicative Disorders Group at Brooklyn Methodist Hospital were we have collaborated with their voice trained speech and language pathologists for non-invasive therapeutic techniques for care of professional voice performers, patients with high vocal demand and neurolaryngology patients. This unique access to subspecialty voice trained speech pathologists has dramatically improved patient compliance and therapy results. The program has also allowed us to build our relationship with the Parkinsons program at SUNY Downstate and deliver the highest level of LSVT trained therapy to this challenging population. This aspect of our Division also has facilitated the care of post laryngectomy patients by providing this patient group with a host of rehabilitative options from esophageal speech teaching, to TEP care and counseling.

As always, our goal is continued growth, and to expand our current scope of care providing the highest level of laryngologic care to our patients and our community.



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COMMUNICATIVE DISORDERS

The Division of Communicative Disorders serves infants, children, and adults with speech, language and hearing disorders. The division has developed the first cochlear implant program in Brooklyn. Plans for the future include further expansion of a cochlear implant program, the development of a specialized voice and swallowing center with state of the art diagnostic and therapeutic equipment, and expanded services for head and neck cancer patients.

Audiology

Audiology services include complete diagnostic evaluations including complete audiological evaluation and immittance testing on infants, children and adults. Specialized testing includes otoacoustic emissions, hearing aid and cochlear implant evaluation and mapping, auditory brainstem response testing, electronystagmography, and evaluation of central auditory processing skills.

Our universal newborn hearing screening program evaluates auditory function in all newborns born within our facilities. The goal of the program is to identify babies at risk for hearing loss and provide them with further evaluation. For those with permanent hearing loss, amplification evaluations will be recommended. Treatment before six months of age, will reduce the negative effects of hearing loss on speech and language development.

Counseling and referrals are available as needed..

Cochlear Implant Program

The Cochlear Implant Program is unique in that it is part of an auditory verbal therapy program. Patients who elect to have cochlear implants can receive therapy services at the same facility that performing their mapping. Experienced audiologists are available to visit schools and provide assistance. The program is a combined effort of University Hospital of Brooklyn, Kings County Hospital Center, and the Auditory Oral School of New York.

Communicative Disorders Staff

SUPB Faculty Practice sites – 185 Montague Street and 376 6th Avenue

Saleh Saleh, AuD, CCC-A	Supervisor of Audiology, responsible for supervising staff Audiologists as well as training audiology residents. Saleh graduated from the University of Florida January 2010 with an AuD in Audiology. Special interests include: electrophysi- ological testing, dizziness evaluation, tinnitus evaluation and amplification.
Talia Mizrahi, AuD	New York State Licensed Audiologist and Hearing Aid Dispenser. She earned her Bachelor of Arts degree in Communication Sciences and Disorders at the University of Maryland, College Park in May 2013. After earning her B.S., she then attended Montclair State University, where she graduated in May 2017 with her Doctorate in Audiology. Her clinical specialties include pediatric and adult diagnostic testing as well as auditory evoked potentials ranging for the infant to geriatric population. She has experience in the realm of hearing aid fitting and programming, as well as with BAHAs and other implantable devices. Other clinical specialties include vestibular assessment and aural rehabilitation.
Suzette Xie, AuD	New York State Licensed Audiologist. She graduated Magna Cum Laude and earned her Bachelor of Arts (B.A.) degree in Communication Sciences and Disorders at St. John's University. After earning her B.A. degree, Dr. Xie attended Northeastern University in Boston, Massachusetts where she graduated with her Doctorate in Audiology (Au.D.) Dr. Xie has expertise in audiological evaluations, appropriate selection, programming, and fitting of amplification, vestibular assessment, as well as auditory brainstem response testing within the pediatric and adult population. Other specialties include aural rehabilitation and assistive listening devices.

The Audiology Department with the guidance of Dr. Sal Saleh AuD, is affiliated with several Audiology Doctorate programs in NY, NJ as well as Pennsylvania . We hold extensive interviews annually where we select two Audiology residents. We currently have 2 students.

SUNY Downstate Medical Center

John Weigand, AuD, CCC-A	Director of Audiology at SUNY Downstate, graduated from University of Florida in 2000 with an AuD in Audiology. Special interests include: amplification, electrophysiologic testing and vestibular assessment and training audiology students.
Anastasiya Goldin, AuD	Credentialed audiologist who works alongside Dr Weigand providing all aspects of clinical care. Her specialties are diagnostic evaluations on children and adults, hearing aid evaluation and fitting and supervising and training audiology students.
Hayley Morgan, AuD	Credentialed audiologist who works alongside Dr. Weigand. Dr. Morgan's expertise lies in Cochlear Implant programming and management, diagnostic evaluation on children and adults and hearing aid evaluations and fittings.

Teaching Program/Student Internships

Presently Downstate has established affiliations with over 10 Doctor of Audiology training program we currently have 6 students. Our students function as full time supervised clinicians working alongside certified audiologist and ENT physicians. Graduates from our program have gone on to find positions of leadership within the profession of Audiology.



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RESEARCH REPORT

In the year 2019-2020, Drs. Kollmar, Sundaram, Stewart, Kansal and Schild continued their work supported by an R03 from the NINDS studying seizure induced laryngospasm in mice and an R21 from the NIDCD studying the restoration of recurrent laryngeal nerve function after injury in a rat model. Dr. Chernichenko continues work on her New York State ECRIP Fellowship Award studying the role of Rho GTPases in perineural invasion in a zebrafish model. Drs. Boruk and Wu, in collaboration with the Departments of Medicine and Cell Biology, have continued their work supported by 2 FAMRI grants and one NIH grant studying eosinophils for the treatment of sinusitis, the impact of CXCL11 on chronic rhinosinusitis in smokers and transcriptome sequencing of neuronal cell lines from patients with schizophrenia.

Dr. Rosenfeld continued his work with the AAO-HNS, developing clinical practice guidelines on epistaxis, opioid prescribing in otolaryngology and drug-induced sleep endoscopy, and along with Dr. Goldstein a clinical consensus statement on ankyloglossia in children. He also developed an expert consensus statement on nutrition for the American College of Lifestyle Medicine. Dr. Chernichenko, in collaboration with Dr. Hopkins and Dr. Moro Salifu of the Department of Medicine, initiated projects evaluating health disparities in patients with head and neck cancer and angioedema. Drs. Butts, Plum and Patel performed a review of immediate tracheostomy outcomes in adults and children, and are currently planning a quality initiative. Dr. Abu-Ghanem is spearheading a multidisciplinary assessment of aspiration and dysphagia in COVID-19 patients and Drs. Boruk, Tabtabai and Schild are studying anosmia in COVID-19 patients.

Notable publications include Dr. Irizzary's, Dr. Sukato's, Dr. Kollmar's, Dr. Schild's, Dr. Silverman's and Dr. Sundaram's Seizures induce obstructive sleep apnea in DBA/2J audiogenic seizure-prone mice: Lifesaving impact of tracheal implants published in Epilepsia, Dr. Goldstein's The generalizability of the Clinical Assessment Score-15 for pediatric sleep-disordered breathing published in Laryngoscope, Dr. Patel's, Dr. Wu's and Dr. Rosenfeld's Upper lip frenotomy for neonatal breastfeeding problems published in the International Journal of Pediatric Otorhinolaryngology, Dr. Rosenfeld's Tympanostomy tube controversies and issues: State of the art review published in the ENT Journal and Dr. Gulati's and Dr. Butts' Neonatal ear molding published in Laryngoscope.

ONGOING RESEARCH PROJECTS Faculty Research Projects:

Richard M. Rosenfeld, MD, MPH, MBA

- 1. Physician attitudes regarding in-office insertion of tympanostomy tubes in children without general anesthesia
- 2. AAO-HNS clinical practice guideline on epistaxis
- 3. AAO-HNS clinical practice guideline on opioid prescribing in otolaryngology
- 4. AAO-HNS clinical practice guideline on tonsillectomy (update)
- 5. AAO-HNS clinical consensus statement on ankyloglossia
- 6. AAO-HNS clinical consensus statement on drug-induced sleep endoscopy (DICE)
- 7. AAO-HNS quality measures development program
- 8. American College of Lifestyle Medicine, expert consensus statement on nutrition
- 9. Multiple ongoing projects assisting otolaryngology residents with research design, systematic review, and data analysis

Sarah Abu-Ghanem, MD

1. Multidisciplinary Speech Language Pathology/ Otolaryngology Aspiration and Dysphagia Assessment in suspected/proven COVID-19 Patients

Ofer Azoulay, MD

- 1. Submental Artery Island Flap versus Free Flap in Head and Neck Reconstruction: A meta-analysis. Scope review on VSS and CAD /CAM on head and neck reconstruction.
- 2. ICU Vs Alternative care for post op head and neck free flap reconstruction. Systematic review and meta-analysis
- 3. Free flap in the geriatric population. case serious

Marina Boruk, MD

- 1. Targeting eosinophils for the treatment of sinusitis.
- 2. The Impact of CXCL11 on Chronic Rhinosinusitis in Smokers.
- 3. Transcriptome sequencing of neuronal cell lines from patients with schizophrenia.
- 4. Randomized clinical control trial using carboxymethylcellulose impregnated triamcinolone in nasal polyposis.
- 5. Impact of Schizophrenia Polygenic Risk on Brain Structure and Function.
- 6. Analysis of Anosmia During the COVID-19 Pandemic.
- 7. Single cell transcriptomes of respiratory epithelium in patients with post-COVID-19 anosmia.

Sydney Butts, MD

- 1. Post-operative tracheostomy complications in adults and children. Principal Investigator: Sydney C. Butts, MD; Co-PI: Ann Plum, MD Co-Investigator-Prayag Patel
- 2. The Incidence of Concussions in Facial Trauma Patients: A Prospective Study

Natalya Chernichenko, MD

- 1. National Surgical Quality Improvement Program database study of surgical complications in head and neck surgical oncology
- 2. Health and Health Care Disparities in Otolaryngology-Head and Neck Surgery

Nira Goldstein, MD

- 1. Multi-Institutional Validation of the Clinical Assessment Score-15 (CAS-15) for Pediatric Sleep-Disordered Breathing
- 2. Analysis of outcomes and complications from button batteries as foreign bodies in the ear, nose or throat
- 3. Impact of adenotonsillecomy on homework performance in children with obstructive sleep apnea
- 4. Postoperative Respiratory Complications in Children with Obstructive Sleep Apnea after Adenotonsillectomy
- 5. Free-flap salvage management
- 6. Randomized Controlled Trial of Valganciclovir for Cytomegalovirus Infected Hearing Impaired Infants (ValEAR Trial)
- 7. Impact of tonsillectomy and adenoidectomy on seizure control in children with comorbid obstructive sleep apnea and seizure disorder

Matthew Hanson, MD

- 1. Cholesteatoma and chronic ear surgery
- 2. Pulsatile tinnitus and cochlear implants

Richard Kollmar, PhD

- 1. Seizure-induced laryngospasm in mice and rats
- 2. The Impact of Vitamin D on Zebrafish Otolith Formation
- 3. The claustrum of Seba's short-tailed bat (Carollia perspicillata)

Ann Plum, MD

- 1. Surgical Management of Sialorrhea Systematic Review
- 2. Impact of tonsillectomy and adenoidectomy on seizure control in children with comorbid obstructive sleep apnea and seizure disorder. In data collection phase.
- 3. Systematic Review of Surgical Management of Sialorrhea. Accepted for oral presentation at the 2020 Annual AAO-HNS Meeting and manuscript currently being written.
- Immediate post-operative outcomes of tracheostomy in adults and children and its implication for a quality initiative. Manuscript currently being prepared and Quality Initiative component being planned
- 5. Schild S, Irrizary R, Plum A. A rare case of Pediatric Intranasal Lobular Capillary Hemangioma. Otolaryngology- Head and Neck Surgery. Manuscript Submitted.
- 6. Timashpolsky A., Schild S., Ballard, D., Leventer S, Rosenfeld R, Plum A. Endoscopic Injection versus repair of type 1 laryngeal clefts: A systematic review and meta-analysis. American Academy of Otolaryngology- Head and Neck Surgery. Manuscript In revision.

Michal Preis, MD

1. Tracheostomy during Covid outbreak

Krishnamurthi Sundaram, MD

- 1. Restoration of recurrent-laryngeal-nerve function after injury in a rat model
- 2. Lifesaving impact of tracheal implants in audiogenic seizure trained mice
- 3. Post treatment PETCT in HP associated oropharyngeal cancer
- 4. Prospective chemoradiation trial in nasopharyngeal cancer- a national study.

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Resident Research Projects

Daniel Ballard, MD

- 1. Development and Assessment of the Cochlea Otorrhea Aeration Cholesteatoma Happiness Score
- 2. Surgical Management of Sialorrhea Systematic Review

Rahul Gulati, MD

- 1. Neonatal Ear Molding
- 2. Postoperative Level of Care Following Head and Neck Microvascular Free-Flap Reconstruction, Systematic Review with Meta-analysis
- 3. Randomized clinical control trial comparing the effects of a steroid eluting implant versus triamcinolone-impregnated carboxymethylcellulose foam on the postoperative clinic experience in patients that underwent functional endoscopic surgery for nasal polyposis
- 4. Nutritional Issues and Head and Neck Cancer
- 5. Outcomes of Endoscopic Endonasal Surgery for Clival Chondrosarcomas, a Systematic Review

Sandra Ho, MD

1. Prospective Validation of the COACH score: A Novel Chronic Ear Grading System

Hunter Hopkins, MD

1. ACE inhibitor prescribing habits of a providers serving a predominantly Afro-Caribbean population **Rachel Irizarry, MD**

- 1. Risk assessment in major head and neck oncology surgery.
- 2. Utility of post-treatment in PET/CT in HPV-associated oropharyngeal squamous cell carcinoma: A systematic review with metanalysis
- 3. Comparison of outcomes for total thyroidectomy in patients with Graves' disease and patients with multinodular goiters.

Jennifer Liang, MD

- 1. Comparison of Outcomes of Patients with and without Graves' Disease Undergoing Total Thyroidectomy for Non-malignant Reasons.
- 2. Risk Assessment in Major Oncologic Head and Neck Surgery.
- 3. Trends in Free-Flap Salvage and Management in Otolaryngology
- 4. Organized Hematoma of the Maxillary Sinus: A Case Report.

Ankit Kansal, MD

1. Increased survival in DBA/2J audiogenic seizure-prone mice after oxygen enrichment during specific seizure phases and the impact of a tracheal implant serving as a surrogate airway.

Fasil Mathews, MD

1. Post-Treatment PET/CT in HPV-Associated Oropharyngeal Cancer

Prayag Patel, MD

1. Immediate post-operative outcomes of tracheostomy in adults and children and its implications for a quality initiative.

Sam Schild, MD

1. Otolaryngologists' Attitudes Towards In-Office Pediatric Tympanostomy Tube Placement

Daniel Sukato, MD

1. Submental artery island flap vs free flap in head and neck reconstruction: A systematic review and meta-analysis.

Ryan Tabtabai, MD

1. Analysis of Anosmia during the Covid19 Pandemic

Stephanie Tominaga, MD

1. Postoperative Respiratory Complications after Adenotonsillectomy in Children with Obstructive Sleep Apnea

Alisa Timashpolsky, MD

- 1. Free-Flap Salvage and Management A Survey Study
- 2. Postoperative Respiratory Complications after Adenotonsillectomy in Children with Obstructive Sleep Apnea
- 3. Systematic Review: Surgical Management of Sialorrhea
- 4. Management of Type 1 Posterior Laryngeal Clefts A Systematic Review and Meta-Analysis

Michael Weber, MD

- 1. Case Series of Adult onset Auditory neuropathy, Michael Weber, MD, Sam Schild, MD, Matthew Hanson, MD. Accepted for poster presentation at AAO-HNS
- 2. Present Impact of Tonsillectomy and Adenoidectomy on seizure incidence in co-morbidity OSA and epilepsy.

Derek Wu, MD

- 1. Elevated levels of calpain 14 in nasal tissue of chronic rhinosinusitis
- 2. Impact of adenotonsillectomy on homework performance in children

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