# TABLE OF CONTENTS

2 Vision, Mission, & Values  
3 State of the Department  
8 Organizational Charts  
10 Faculty  
16 Volunteer Faculty and Other Contributing Physicians  
18 Professional Society Membership/Activity  
22 Visiting Lecturers  
24 Awards, Honors, Activities and Special Achievements  
25 Department  
25 Events  
28 Publications  
30 Presentations  
35 Affiliated Hospitals  
35 University Hospital of Brooklyn  
35 Kings County Hospital Center  
35 Maimonides Medical Center  
36 Manhattan Eye, Ear, & Throat Hospital/Lenox Hill  
36 New York-Presbyterian Brooklyn Methodist Hospital  
37 Educational Programs  
38 Goals and Objectives for Resident Education  
47 Medical Student Program and Opportunities  
48 Temporal Bone Surgical Dissection Laboratory  
49 Frank E. Lucente Alumni and Resident Research Day  
57 Grand Rounds Schedule  
68 Residency Experience  
   Key Indicator Cases for Graduating Chief Residents  
68 Residents  
77 Resident Rotation Schedule  
78 Service Chief Reports  
78 Division of Pediatric Otolaryngology  
78 Division of Facial Plastic and Reconstructive Surgery  
79 Division of Otology and Neurotology  
79 Division of Head, Neck Surgery and Oncology  
80 Division of Laryngology, Voice and Swallowing Disorders  
81 Communicative Disorders  
81 Audiology  
81 Cochlear Implant Program  
81 Communication Disorders Staff  
83 Research  
87 Communication Information
VISION
Our vision is a community where individuals can access optimal care for disorders of the ears, nose, throat, head, and neck; a department that exceeds the expectations of faculty and staff; and a residency program that offers unsurpassed opportunities for training and employment.

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

1. By continually enhancing the scope and quality of medical and surgical care to the people of Brooklyn and surrounding communities
2. By training and empowering residents to fully realize their potential and obtain whatever future training or employment venues they seek
3. By exposing medical students to the scope and spectrum of otolaryngology as a specialty and mentoring those with special interest to successfully match in a residency program
4. By conducting clinical, basic, and translational research to share knowledge, improve quality of care, and highlight the importance – and thrill – of critical (scholarly) thinking
5. By engaging in the world of otolaryngology beyond our geographic region through volunteerism in local, regional, national, and international medical organizations
6. By engaging in multi-disciplinary and multi-institutional teams to leverage our resources
7. By promoting and supporting the development of our staff and faculty with a goal of long-term retention, well-being, and job satisfaction

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

1. We value safe, ethical, and compassionate patient care
2. We view residency training as the focal point of our efforts as an academic department
3. We value health, wellness, continuous learning, and self-improvement
4. We value professionalism, responsiveness, and timely communication
5. We strive to identify, recognize, and reward our top performing faculty and staff
6. We value camaraderie and mutual support among all faculty, residents, and staff
7. We value and promote diversity and inclusivity in everything we do
8. We seek and value mutually beneficial and sustainable relationships with the College of Medicine, University Hospital of Brooklyn, SUNY Downstate HSU, and affiliate training sites
9. We value resiliency through diverse and dynamic relationships with organizations, voluntary faculty, private practitioners, and affiliate sites in Brooklyn and the NY metropolitan area
STATE OF THE DEPARTMENT 2021

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

The 2020-2021 academic year marked a major milestone for the Department of Otolaryngology, our 30th Anniversary at the State University of New York (SUNY) Downstate Health Sciences University. In terms of matrimony, the traditional 30th anniversary gift is the pearl, with meanings of purity, honesty, and wisdom. Our Department possesses all three in abundance, improving annually with growth, development, and innovation.

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), and Lenox Hill Hospital. Our prior ambulatory rotation at Northwell was discontinued because it was only planned for the one-year we had and extra chief resident.

The past year was marked by resilience, perseverance, and optimism, as we emerged from the depths of the Covid-19 pandemic. Our residency program is fully accredited by the American College of Graduate Medical Education (ACGME), with no citations, and all graduates continue to secure a top choice in employment or fellowship. Despite the impact of Covid-19 on elective surgery, our graduating chief residents exceeded all ACGME key indicator case minimum numbers and our rising chiefs are all well-positioned to have an exceptional surgical experience.

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.

Attitude

Every year I find one word that best reflects the state of our department and my choice for 2021 is “attitude,” defined in psychological terms as having three basic types: positive, negative, or neutral. Attitude applies to organizations, not just people, where it reflects the collective mindset, viewpoints, and beliefs of the group. I put forth a positive attitude as a key driver of our success.

A positive attitude can be defined succinctly as contentment with the past, happiness in the present, and hope for the future. The Department of Otolaryngology is unquestionably content with its three-decade past; extremely happy with our current residents, faculty, support staff, and training sites; and incredibly hopeful and optimistic about the post-pandemic future. In short, we have a wonderfully positive attitude and outlook.

Another way to view positive psychology is through the acronym PERMA: Positive emotion, Engagement, Relationships, Meaning, and Accomplishments. Our positive emotion reflects unabashed optimism in how we view our past, present, and future. Being engaged requires full absorption in the present, which we do gracefully with a blissful immersion that stretches our joint capacities. Our relationships are strongly positive, best exemplified by the Yiddish adjective ‘haimish’ that means “simple, warm, and unpretentious, in a homelike atmosphere.” Knowing one’s purpose is the essence of meaning, and ours is beautifully articulated in the mission, vision, and value statements, appearing earlier in this report. Last, our accomplishments, which span many pages of this report, fill us with collective pride and satisfaction.

Our positive attitude reflects the synergy we derive as an academic department, with resident training as our unwavering focal point. All decisions must consider how they will impact resident education in terms of teaching, research, clinical care, and – perhaps of greatest importance – in preparing residents to face, and master, their future. This continual focus on residents involves sacrificing some personal autonomy for the betterment of the whole, but the win-win benefits that accrue to all stakeholders more than compensate.

The camaraderie, exceptional talents, and positive attitude of all department members ensure our ability to be content with the past, happy in the present, and hopeful for the future. As department chair, I could not ask for more, and remain thankful for the privilege and honor to work with, and serve, such unique and wonderful individuals.
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 with daily teaching of residents and medical students, many of whom remain in the New York metropolitan region. Here are some brief updates on our primary clinical services:

Facial plastic and reconstructive surgery (FPRS) thrive under the leadership of Sydney Butts and alumnus Lee Kaplowitz, and Ofer Azoulay, with expertise in facial reanimation and microvascular flaps. Additional exposure comes from the MEETH rotation, which includes maxillofacial surgery, and with Richard Westreich, in a private practice setting. The division covers all aspects of FPRS, including trauma, cosmetic procedures, microvascular tissue transfer, and reconstruction of complex defects of the head and neck.

Head, neck, and skull-base surgery remains a focal point of our department under the leadership of Krishnamurthi Sundaram, Natalya Chernichenko, Ofer Azoulay, and Michael Weiss, with additional expertise provided by Gady Har-El, Jessica Lim, and Victor Lagmay, and voluntary faculty at our multiple affiliate sites. Jack Russo’s collaboration at NYP-BMH has brought additional surgical volume plus expertise in microvascular reconstruction. 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 other physicians, including Neil Sperling and Sujana Chandrashekhar at MEETH. 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 fully operational, including a dual-head microvascular station. Abraham Shulman continues to help patients cope with tinnitus, as one of the few full-time tinnitus experts worldwide.

Pediatric Otalaryngology 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. We have robust referrals for neonatal feeding problems (tongue tie, upper lip tie) and in-office ear tubes.

Laryngology and neurolaryngology are covered under the leadership of Boris Bentsianov and Sara Abu-Ghanem, with contributions from our pediatric otalaryngologists, head and neck surgeons, and voluntary faculty. We provide a full range of operative and office interventions (laryngoscopy, stroboscopy, and esophagscopy) for diagnosing, managing, and rehabilitating voice, airway, and swallowing problems in children, adults, vocal professionals, stroke patients, and head and neck cancer patients. The volume of functional endoscopic evaluation of swallowing (FEES) and modified barium swallows (MBS) has been increasing.

Rhinology and skull-base surgery are robust under the leadership of Marina Boruk, Victor Lagmay, 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 otalaryngology and allergy are well-covered under the leadership of Marina Boruk, Ofer Azoulay, Sara Abu-Ghanem, Victor Lagmay, and faculty at our diverse training sites. Our department is the first in Brooklyn to offer an implantable hypoglossal nerve stimulator for managing refractory sleep apnea in adults. Sleep disorders have also been increasing in volume. We added a new ambulatory experience this past year in fine needle aspiration, affording our residents the opportunity to spend time with a leader in the field, Gerald Minkowitz.

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. We continue to oversee newborn hearing programs at NYP-BMH, UHB, and KCHC, offer vestibular and auditory brainstem response testing at several office sites.

Research, Education, and Teaching

Our strength as a training program stems in large part for the diversity of affiliate sites, adroitly managed by our residency site directors, Matthew Hanson at KCHC, Jessica Lim at Lenox/MEETH, Natalya Chernichenko at NYP-BMH, and Michael Weiss at Maimonides. In my own roles as department chair, program director, and site director at UHB, my success flows from Sydney Butts as vice chair and Nira Goldstein as associate program director.
Boris Bentsianov organized the 12th Annual Frank E. Lucente Alumni and Resident Research Day program, which for the second (and hopefully last) time took place online as a Zoom conference. Our keynote speaker was Cecilia Schmalbach, from Temple University, who discussed the impact of immunosuppression on advanced head & neck cutaneous squamous cell carcinoma and provided insights on navigating the journey from physician to leader. Our alumni speaker was Punam Thakkar, who spoke on the role of neoadjuvant therapy in head and neck cancer. The highlight, of course, was our resident presentations, for which abstracts appear later in this report. Our alumni panel, featuring Lee Kaplowitz, emphasized combining fellowship training and clinical practice.

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, two grants were awarded for resident research. Alexander Graf received funding for research on sarcogenic dysphagia and Stephanie Tominaga received funding for her project on facial nerve reanimation. We did not sponsor any humanitarian missions this past year because of the ongoing pandemic.

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. 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 continues to oversee our mentoring and simulation programs.

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 worth special emphasis, however, are listed below.

**Notable Faculty Accomplishments**

- Sara Abu-Ghanem was the faculty awardee for KCHC Doctor’s Day
- Sara Abu-Ghanem developed dysphagia programs at KCHC and Maimonides, including training of speech pathologists in FEES and interpretation of MBS study videos
- Sara Abu-Ghanem was nominated to the Post-graduate Committee by the American Laryngological (ALA) Council
- Sara Abu-Ghanem was appointed to the AAO-HNS Airway and Swallowing Committee and the Laryngology & Bronchoesophagology Education Committee
- Ofer Azoulay received the GME faculty teacher of the year award for otolaryngology
- Ofer Azoulay instituted a resident training program in transoral robotic surgery
- Ofer Azoulay conducted a resident training workshop for microvascular reconstruction with a fibular free flap using fresh cadaver tissue
- Ofer Azoulay established a multidisciplinary facial nerve team, including regular meetings with residents and students, to find candidates for facial reanimation surgery
- Ofer Azoulay was approved for robotic surgery, without proctoring, at NYP-BMH
- Ofer Azoulay was appointed to the AAO-HNS Humanitarian Efforts Committee and as a non-voting member of the Head and Neck Surgery Education Committee
- Boris Bentsianov was the course director for the Annual Frank E. Lucente Alumni and Resident Research Day
- Marina Boruk was the Full-time Faculty Honoree at the Resident Graduation event
- Natalya Chernichenko was promoted to Associate Professor of Clinical Otolaryngology
- Nira Goldstein was appointed to the Downstate Central Methodology Review Committee
• Nira Goldstein remains a consultant to the AAO-HNS Pediatric Otolaryngology Education Committee
• Richard Kollmar mentored medical student Takishia Morancy in securing a first-place prize and a one-year Alumni Research Scholarship for facial nerve reanimation in rats
• Dennis Kraus was the Voluntary Faculty Honoree at the Resident Graduation event
• Ann Plum was appointed to the AAO-HNS Simulation Education Committee and the Airway and Swallowing Committee
• Gerald Minkowitz, an expert in fine needle aspiration, joined our department as a faculty member and started a new resident office rotation
• Richard Rosenfeld was emcee and program chair for the inaugural webinar of the SUNY Distinguished Academy, highlighting lifestyle medicine for personal resilience
• Richard Rosenfeld became a diplomate of the American Board of Lifestyle Medicine
• Richard Rosenfeld helped medical students establish the Downstate Lifestyle Medicine Interest Group, an official chapter of the American College of Lifestyle Medicine

Notable Resident, Student, and Other Accomplishments
• James Alrassi authored a Social Media Policy for the Downstate GME Office
• James Alrassi was appointed a resident member of the AAO-HNS History and Archives Committee and the Simulation Education Committee
• Arlan Durban was the Staff Honoree at the Resident Graduation event
• Robert Gorevich – with co-presenters Ryan Tabtabai, Sam Schild, and Marina Boruk – won First-Place Poster Prize in Allergy-Rhinology at the 2021 Triological Society Virtual COSM meeting for: Analysis of anosmia during the Covid-19 pandemic: long-term rates
• Alexander Graf was awarded a 2021 Frank E. Lucente Research grant for: Sarcogenic dysphagia: proposal of diagnostic criteria and investigation of diagnostic instrument
• Rachel Irizarry was the resident awardee for KCHC Doctor’s Day
• Rachel Irizarry secured a fellowship in head and neck and microvascular surgery at Emory University
• Rachel Irizarry represented Downstate at the Annual NYC Metropolitan Research Day with a presentation on: Risk assessment in major head and neck oncologic surgery
• Takishia Morancy was awarded the Downstate Alumni Associate Full Year Research Scholarship, as the first-place winner for her proposal on facial nerve reanimation
• Sen Ninan received the SUNY Downstate Award for Outstanding Medical Student Performance in Otolaryngology
• Prayag Patel received the GME resident advocate of the year award
• Prayag Patel secured a fellowship in rhinology at Rutgers New Jersey Medical School
• Graduating residents received $3,000 each to defray the cost of Board Examination based on donations from Dennis Lee, Frank Lucente, Natalya Chemichenko, Gady Har-El, Richard Rosenfeld, Nira Goldstein, and Krishnamurhi Sundaram
• Sam Schild secured a fellowship in pediatric otolaryngology at Children’s National Medical Center in Washington, DC
• Sam Schild was appointed a resident member of the AAO-HNS Pediatric Otolaryngology Committee
• Ryan Tabtabai represented Downstate at the Annual NYC Metropolitan Research Day with a presentation on: Analysis of olfactory dysfunction during Covid-19
• Stephanie Tominaga and James Alrassi were awarded a 2021 Frank E. Lucente Research grant for: A new technique for facial nerve reanimation, a pilot rodent study
• Stephanie Tominaga was appointed Political Action Committee (ENT PAC) delegate for the Young Physician Section of the AAO-HNS
• Stephanie Tominaga was appointed a resident member of the AAO-HNS Pan American Committee
• Michael Weber was approved for the AAO-HNS Resident Reviewer Development Program, following the path forged by Prayag Patel
A Bright Future

We are delighted to welcome our three new PGY-1 residents, Matthew Adams from Geisinger School of Medicine, Hailey Rodriguez Jus, from the University of California at San Francisco, and Billy Yang, from SUNY Downstate. We look forward to five mutually rewarding years with these highly accomplished individuals, who began their PGY-1 residency training year starting in July 2021.

We are proud of our three departing chief residents and wish them health, happiness, and success. Rachel Irizarry will enter a head and neck microvascular fellowship at Emory University. Prayag Patel will enter a rhinology fellowship at Rutgers New Jersey Medical School, and Alisa Timashpolsky will enter a 2-year pediatric otolaryngology fellowship at the Children’s Hospital of Philadelphia. Kudos to our talented chiefs for securing a top fellowship choice in their subspecialty of choice.

As a quick update from last year, the “two Dans,” Ballard and Sukato, will be employed by Kaiser Permanente and will live in the same city. Derek Wu will also join Kaiser, but in a different location. Sandra Ho, after a year at Jamaica Hospital, will be entering a fellowship in head and neck & skull base surgery at Lenox Hill Hospital.

The positive attitude I referred to earlier in this report is abundantly present in our administrative superstars, Billy Tang at Downstate, Nicole Fraser at Downstate, Jim McHale at Healthcare Transitions Management, 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.

We are poised to expand our faculty practice footprint and to request a resident complement increase to four per training year. This growth, combined with the numerous initiatives outlined in this update will ensure continued happiness in the present and hope for the future. I look forward to sharing more terrific news in annual updates to come.

Respectfully submitted,

Richard M. Rosenfeld, MD, MPH, MBA
July 2021
# Table of Attending Staff for Educational Programs

## Clinical Services & Division Chiefs
- **Otorhinolaryngology**
  - Matthew Hanson, Chief
  - Michal Preis
- **Pediatric Otorhinolaryngology**
  - Ann Plum, Chief
  - Nina Goldstein
  - Richard Rosenfeld
- **Head & Neck and Microvascular Surgery**
  - Natalya Chernichenko, Chief
  - Krishnamurthi Sundaram
  - Ofer Azoulay
  - Michael Weiss
  - Jack Russo
- **Facial Plastic and Reconstructive Surgery**
  - Sydney Butts, Chief
  - Lee Kaplowitz
- **Laryngology and Voice**
  - Sara Abu-Ghanem
- **Rhinology & Allergy**
  - Marina Boruk, Chief
  - Victor Lagmay
- **General Otorhinolaryngology**
  - Sara Abu-Ghanem
  - Ofer Azoulay
  - Victor Lagmay

## Communicative Disorders
- **UPB Faculty Practice**
  - Brooklyn Heights and Park Slope
  - Sal Saleh, Director
  - Suzette Xie
  - Malorie Wasey
- **UHB and UPB Faculty Practice East Flatbush & UHB Newborn Screening**
  - John Weigand, Director
  - Anastasiya Goldin
  - Hayley Morgan
  - Sal Saleh
- **NYP-Brooklyn Methodist Newborn Screening**
  - Sal Saleh
- **COCHLEAR IMPLANT TEAM**
  - Esther Hurley
  - Elkin Devom

## Otolaryngology Residents
- **PGY-5 Chief Residents**
  - Ankit Kansal
  - Sam Schild
  - Ryan Tabtabai
- **PGY-4 Residents**
  - Rahul Gulati
  - Hunter Hopkins
  - Michael Weber
- **PGY-3 Residents**
  - Jennifer Liang
  - Fasil Mathews
  - Stephanie Tomiraga
- **PGY-2 Residents**
  - James Alnassi
  - Alexander Graf
  - Sean Mooney
- **PGY-1 Residents**
  - Matthew Adams
  - Hailey Juszczak
  - Billy Yang

## Residency Training Program
- **Program Leadership**
  - Richard Rosenfeld, Director
  - Nira Goldstein, Associate Director
  - Nicole Fraser, Coordinator
- **Training Site Directors**
  - UHB, Richard Rosenfeld
  - KCHC, Matthew Hanson
  - Maimonides, Michael Weiss
  - Methodist, Natalya Chernichenko
  - Lenox/MEETH, Jessica Lim
- **Research & Quality**
  - Clinical & IRB, Nira Goldstein
  - Translational & Grants, Richard Kollmar
  - Systematic Reviews, Richard Rosenfeld
  - Quality and Measures, Sydney Butts
  - Quality/M&M Rounds, Marina Boruk
- **Programs & Conferences**
  - AO Maxillofacial Course, Sydney Butts
  - Audiology & Vestibular, John Weigand
  - Cleft and Craniofacial, Sydney Butts
  - Cochlear Implant Team, Matthew Hanson
- **Diversity & Disparities, Natalya Chernichenko**
- **Facial Reanimation, Ofer Azoulay**
- **FEL Research & Alumni Day, Boris Bentsianov**
- **Fine Needle Aspiration, Gerald Minokowitz**
- **Grand Rounds, Sydney Butts**
- **Head & Neck Symposium, Natalya Chernichenko**
- **Journal Club, Richard Rosenfeld**
- **Mentoring & Simulation, Ann Plum**
- **Microvascular & Robotic Lab, Ofer Azoulay**
- **Mission Trips, Sydney Butts & Nira Goldstein**
- **Temporal Bone Laboratory, Matthew Hanson**

---

**Richard M. Rosenfeld, MD, MPH, MBA**

Chairman & Program Director
FACULTY

The faculty of the Department of Otolaryngology is comprised of a variety of individuals whose clinical and research interests encompass the ever-increasing scope of this specialty. For the 2020 to 2021 academic year, the department had thirteen 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, DipABLM
Distinguished Professor, Chairman, and Program Director of Otolaryngology 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 over 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 runs marathons, does regular strength training, enjoys a healthy plant-based diet, and is founder and chair of the Downstate Committee on Plant-based Health and Nutrition. Dr. Rosenfeld is board-certified in Lifestyle Medicine, an expert consultant and methodologist for the American College of Lifestyle Medicine (ACLM), and faculty advisor for the Downstate ACLM Lifestyle Medicine Interest Group.

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 Society. 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.

Sara Abu-Ghanem, MD
Assistant Professor of Otolaryngology, Sara Abu-Ghanem MD MMEdSc is an otolaryngologist (ENT) 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). As a laryngologist, her clinical interests include the care of professional voice users; phonomicrosurgery; vocal fold paralysis; laryngeal movement disorders (Neurolaryngology); laser surgery for laryngeal cancer; recurrent respiratory papillomatosis; airway and swallowing disorders; rehabilitation after total laryngectomy; and the treatment of chronic cough.

Ofer Azoulay, MD
Assistant Professor of Otolaryngology, Dr. Ofer Azoulay is an Otolaryngologist with surgical expertise in Head and Neck Cancer, robotic surgeries and head and neck microvascular reconstruction. He is Assistant Professor and 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 NYP/H-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 pursued 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.

Boris Bentsianov, MD
Assistant Professor of Otolaryngology, Boris 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.

Marina Boruk, MD
Assistant Professor of Otolaryngology, Marina Boruk 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
Associate Professor and Vice Chair, Dr. Sydney Butts serves as of the 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. Dr. Butts currently serves as the faculty coordinator for the Grand Rounds Program, supervising scheduling of faculty speakers and educational content.

Natalya Chernichenko, MD
Associate Professor of Otolaryngology, Natalya Chernichenko is the chief of the Division 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. She is a recipient of the Young Investigator Award from the American Head and Neck Society.

Nira A. Goldstein, MD, MPH
Professor and Associate Program Director, Nira Goldstein 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 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
Assistant Professor of Otolaryngology, Matthew Hanson is Chief of Otolaryngology 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. Before coming to Downstate in 2005, he had been Director of Otology and Neurotology at Temple University School of Medicine in Philadelphia. 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
Assistant Professor of Otolaryngology and Associate Professor of Cell Biology, Richard 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 Director of Basic Research in Otolaryngology. His first research focus is to understand the mechanisms that underlie the development and maintenance of otoliths and otoconia, from the molecular to the organismal level. His group has identified several novel otolith proteins that are implicated in extracellular-matrix formation. He is now investigating the function of these proteins both in vivo, using the zebrafish as an animal model, and in vitro. His second 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 (LJMC) 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
Assistant Professor of Otolaryngology, Ann Plum joined the Department of Otolaryngology at The State University of New York Downstate Medical Center as full-time 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 Otolaryngology, as well as a Consultant for Pediatric Aerodigestive Disorders at Maimonides. She also is in charge of a weekly Pediatric Otolaryngology Resident Clinic at SUNY Downstate. In collaboration with Pediatric Gastroenterology and Pediatric Pulmonary Services, she has created a multidisciplinary Aerodigestive Clinic at SUNY Downstate Medical Center for children with Airway and Swallowing Disorders, which is in its third year, and continuing to expand. She is also actively involved in Resident and Medical Student Education.

Krishnamurthi Sundaram, MD
Clinical Professor of Otolaryngology, Krishnamurthi 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.

Full-Time Affiliate Faculty

Lee Kaplowitz, MD

Dr. Lee Kaplowitz is an Otolaryngologist, Facial Plastic & Reconstructive surgeon at Maimonides Medical Center. He received his medical degree from University at Buffalo in 2013. He went on to complete his residency in Otolaryngology Head & Neck Surgery at Downstate Medical Center earning the award for Outstanding Performance as a Resident. Following residency, he went on to complete a fellowship in Facial Plastic & Reconstructive Surgery at Mount Sinai Medical Center. He has presented at national meetings and has published his original research. He is board certified by the American Board of Otolaryngology Head and Neck Surgery.

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 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, Eustachian tube balloon dilation and hearing restoration procedu.

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 Otolaryngology 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 last 10 years. Dr. Har-El published a two volume set “Head and Neck Surgery” which he co-edited.

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.

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. His efforts as Acting Director (1975-1980; 1990-1991) and Director (1980-1985) of the Division of Otolaryngology and the Center for Communicative Sciences at the Health Science Center at Brooklyn contributed to the establishment of the SUNY/Downstate Department of Otolaryngology in 1990. 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. In 1995, he became a co-chief editor of the International Tinnitus Journal, the first publication dedicated to the symptom of tinnitus. 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. His research interests include sensorineural hearing loss, electrical and ultrahigh frequency acoustical stimulation of the cochleo-vestibular 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.
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. 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. Downstate residents are 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.

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

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.

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. Dr. de Souza was awarded the gold medal for standing first in the diploma and master of surgery exams in 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 Clinico-pathologic Correlations and Operative Techniques” with Michael Paparella, MD and Neil Sperling as co-authors. His previous books ny. He is the Editor in Chief of the Journal “International Journal of Head and Neck Surgery”. 
Dennis Kraus, MD

Dennis Kraus, MD is the Director of the Center for Head and Neck Oncology within the New York Head & Neck Institute and the Northwell Health Cancer Institute. He is Chair of the Lenox Hill Hospital Cancer Committee, Member of the Cancer Oversight Committee for the Northwell Health System, Professor of Otolaryngology at Donald and Barbara Zucker School of Medicine at Hofstra/Northwell and a Member of the Admissions Committee for the Hofstra School of Medicine. He has served in a number of administrative positions within the otolaryngology and head and neck surgery communities. He has served in multiple roles within the AHNS, including program chair of the annual meeting, Secretary, and past President.

His clinical interest focuses on all aspects of head and neck oncology and his research efforts have paralleled his clinical initiatives. He has particular expertise as it relates to minimally invasive thyroid surgery, robotic surgery of the head and neck and sentinel node biopsy for cutaneous malignancies. He has been a strong advocate for the use of minimally invasive surgery in the sinonasal region and skull base. Each of these developments has been associated with decreased morbidity with improved cosmetic and functional outcomes for patients with head and neck neoplasms. Dr. Kraus lives in New York City with his wife of 30 years Daryl and has 3 adult children, all of whom are successful in professional positions.

Jack Russo, MD

Dr. Russo completed residency in otolaryngology head and neck surgery at Dartmouth-Hitchcock Medical center. He completed a fellowship in head & neck surgical oncology, microvascular reconstructive and robotic surgery at Mount Sinai in Manhattan. He is currently in private practice in Brooklyn and performs surgery at New York Presbyterian Brooklyn Methodist Hospital and at the New York Eye and Ear Infirmary of Mount Sinai. Dr. Russo's clinical practice focuses on surgical management of head and neck cancer, thyroid disease, and benign and malignant salivary conditions.

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.

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
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-
Interamerican Association of Pediatric Otorhinolaryngology, 2012-
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

Sara Abu-Ghanem, MD
Postgraduate American Laryngological Association (ALA) Committee
Website, Communications, and Public Relations Committee (WCPRC) for the Dysphagia Research Society

Ofer Azoulay, MD
NY Head and Neck Society (NYHS)
American Head and Neck Society (AHNS)
American Academy of Otolaryngology Head and Neck Surgery (AAO-HNS)
Sigma Xi - The International Scientific Research Honor Society
Israel Medical Association
Israel Otolaryngology Head and Neck Society
Israel Society of Head and Neck Surgery and Oncology

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-
Triological Society, candidate for membership

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
- 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
- Craniofacial 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
American College of Surgeons (FACS), Fellow

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 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-Esophageal 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
American Society of Pediatric Otolaryngology
Alpha Omega Alpha
Phi Beta Kappa
Sigma Xi, Smith College Chapter

Michal Preis, MD
American Academy of Otolaryngology-Head and Neck Surgery

Abraham Shulman, MD
American Medical Association
American Academy of Otolaryngology-Head and Neck Surgery
Medical Society of the State of New York
Centurion Club, American Academy of Otolaryngology Head and Neck Surgery
American Medical Association
American Nuclear Society
American Audiology Society

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, president 2015

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.

John Weigand, PhD
American Speech Language Hearing Association (ASHA)
American Academy of Audiology (AAA)
NYSSLHA (NYS Speech Language and Hearing Association)

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
VISITING LECTURER
Richard M. Rosenfeld, MD, MPH, MBA
1. Otitis media: new evidence and current controversies. Inter-American Association for Pediatric Otorhinolaryngology (IAPO), Webinar, July 2020.
7. Evidence-based otitis media. Otolaryngology Grand Rounds, Cedar Sinai Hospital, Los Angeles, CA (by Zoom), November 2020.
8. Eating for health and longevity: getting started, doing it right, staying motivated. Inter-American Association for Pediatric Otorhinolaryngology (IAPO), Virtual Conference (organized by Mexico), January 2021.
9. Tongue and lip tie in newborns: fact vs. fiction, when to cut. Inter-American Association for Pediatric Otorhinolaryngology (IAPO), Virtual Conference (organized by Mexico), January 2021.
11. Evidence-informed approach to tongue tie, lip tie, and breastfeeding. Inter-American Association for Pediatric Otorhinolaryngology (IAPO), Virtual Conference (organized by Brazil), February 2021.

Sara Abu-Ghanem, MD
1. Introduction to advanced laryngology. Sunrise Medical Group, Maimonides Medical Center Affiliate, December 2020.

Ofer Azoulay, MD
2. Head and neck reconstruction. ENT Interest Club. SUNY Downstate Health Sciences University, Brooklyn, NY, February 2021.

Boris Bentsianov, MD

Sydney Butts, MD
1. Approaches to Reconstructive Challenges of the Face in Children and Adults: Similarities and Differences. Department of Otolaryngology Grand Rounds, Temple University School of Medicine, February 2021.
Natalya Chernichenko, MD
1. Disparities in Treatment of Head and Neck Cancers. Department of Otolaryngology, Albert Einstein School of Medicine, October 2020.

Nira Goldstein, MD
2. American Medical Women's Association (AMWA) and Association of Women Surgeons (AWS) Joint Women in Surgery Panel, SUNY Downstate School of Medicine, November 2020.

Ann Plum, MD
1. Pediatric Neck Masses. SUNY Downstate Health Sciences University, Department of Pediatrics Resident Didactics, September 2020.

Neil Sperling, MD

Krishnamurthi Sundaram, MD

Michael Weiss, MD
1. Surgical Aspects of Thyroid Management. Department of Surgery Grand Rounds, Maimonides Medical Center, October 2020.
AWARDS, HONORS, & SPECIAL ACHIEVEMENTS

Richard M. Rosenfeld, MD, MPH, MBA
Alumni of the Year Award 2021, Children's Hospital of Pittsburgh
Senior Advisor for Guidelines and Measures, AAO-HNS
America’s Top Doctors, Castle-Connolly Medical Ltd
Diplomate, American Board of Lifestyle Medicine (board-certification)
Mary Rose Memorial Lecturer, Children’s National Medical Center
Emcee and Organizer, SUNY Distinguished Academy Inaugural Webinar
Faculty Advisor, Downstate Lifestyle Medicine Interest Group
Chair, American College Lifestyle Medicine Expert Consensus Panel on Diet as a Primary Intervention for Remission of Type 2 Diabetes in Adults
Best Doctors in NY, New York Magazine, Inc.
Ran virtual marathon in 3 hours and 49 minutes
Ran virtual half-marathon in 1 hour and 40 minutes

Sara Abu-Ghanem, MD
Clinical Medical Consultant/Advisor for Speech and Language Pathology - inpatient and outpatient services, Maimonides Medical Center, Brooklyn, NY

Ofer Azoulay, MD
NY Top Doctors and Rising Stars, 2021
Awarded SUNY Downstate GME Office - Department of Otolaryngology “2021 Attending of the Year”

Marina Boruk, MD
Faculty Award for Outstanding Teaching and Support - presented by graduating residents, June 2021
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)
Appointed as the Alternate Representative from the Department of Otolaryngology to sit on the Clinical Practice Management (CPMP) Board of Directors
Authored AAO-HNS online course: “Telemedicine During the Pandemic: a guide to immediate implementation of telemedicine in your practice during the pandemic”

Sydney Butts, MD
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)
American Academy of Otolaryngology-Head and Neck Surgery Honor Award Recognizing distinguished service on committees, in the scientific programs, exhibits, continuing education courses and instructional courses, September 2020
2020 AO Craniomaxillofacial (CMF)-Chairperson and Course Developer-Advanced Symposium-Evidence Based Craniomaxillofacial Surgery

Natalya Chernichenko, MD
Super Doctor’s New York Rising Star
Promoted to Associate Professor of Clinical Otolaryngology

Ann Plum, MD
Super Doctors' New York Rising Stars 2021

Abraham Shulman, MD
Marquis Who’s Who in America, Distinguished Listees, 2020
Marquis Who’s Who in America, 2021
Top Doctors 2020
Top doctors 2021

Krishnamurthi Sundaram, MD
NY Times in NY ENT Super Doctors, 2021

Richard Westreich, MD
Castle Connelly and NY Magazine Best Doctors, 2021

Christopher de Souza, DORL, MS, DNB, FACS, FRCS
Honorary FRCS (Fellow of the Royal College of Surgeons) England, 2018
Editor in Chief - The International Journal of Head and Neck Surgery
Fellow, American Neurotologic Society
Papal recognition for working with poor deaf children through the covid-19 pandemic to restore hearing through cochlear implant surgery
DEPARTMENT EVENTS  HEAD AND NECK AND MICROVASCULAR FRESH CADAVER COURSE

Course Director: Dr. Ofer Azoulay

Instructors: Dr. Steve Yusupov And Dr. Jack Russo

Residents and instructors during the dissection of the head and neck, chest and fibular
Residents are shown the new scopes and instruments and stations while Dr. Hanson is demonstrating the video system.
Residents in the Medical School Anatomy Lab where they harvested the temporal bones from the first-year medical student cadavers. Twenty-four bones were harvested in less than 2 hours!
PUBLICATIONS


Tabtabai R, Schild D, Preis M. Cochlear Nerve Hypoplasia Identified Years After Passing Newborn Hearing Screening Otolaryngology Case Reports, Volume 17, November 2020.


Shulman A, Goldstein B, Hoffer ME, Seidman MD. Tinnitus Diagnosis/Treatment. 2nd Edition. Thieme Publications Inc., Chapters 1-73; Submission 2021


Deschler DG, Nguyen SA, Givi B, Nathan CO, St. John M, Day T, de Souza C. Head and Neck Cancer Care in a Pandemic: Prioritizing Safe Care. PMPUSA Inc, 2021
PRESENTATIONS

Richard Rosenfeld, MD, MPH, MBA
1. How to read journal articles. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, July 2020.
5. Update on tongue tie and lip tie. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, September 2020.
8. ACGME core competency: interpersonal and communication skills. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, October 2020.
10. The annual ACGME program survey: what every resident must know. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, December 2020.
11. Eating for health and longevity: getting started, doing it right, staying motivated. Inter-American Association for Pediatric Otorhinolaryngology (IAPO), Virtual Conference (organized by Mexico), January 2021.
14. CV clinic for ENT residents. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, March 2021.
17. Ankyloglossia, maxillary frenum, and breastfeeding difficulties. Pediatric Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn, NY, April 2021.

Sara Abu-Ghanem, MD
1. Dysphagia screening and aspiration prevention in hospitalized patients: A Multidisciplinary Effort, Department of Otolaryngology, SUNY Downstate Health Sciences University, Brooklyn, NY, July 2020.
2. Tracheostomy. Third year general surgery clerkship presentation. SUNY Downstate Health Sciences University, Brooklyn, NY, August 2020.
4. Laryngology Cases. Department of Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, Brooklyn NY, February 2021.
5. Laryngeal cases: from the OR set up to operative reports. Department of Otolaryngology Grand Rounds, SUNY, April 2021.

Boris Bentsianov, MD
1. Introduction to Laryngology. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, August 2020.
2. Laryngology imaging and case review. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, April 2021.
Marina Boruk, MD
1. Allergy and Immunology. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, August 2020.
2. Rhinology imaging and case review. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, May 2021.

Sydney Butts, MD

Natalya Chernichenko, MD

Nira Goldstein, MD
1. Department Escalation Policy, Handoffs, & Work Hours. Department of Otolaryngology, SUNY Downstate Health Sciences University, Brooklyn, NY, July 2020.
2. Etiology and Therapeutic Strategies to Common Pediatric Illnesses. Department of Otolaryngology, SUNY Downstate Health Sciences University, Brooklyn, NY, August 2020.
3. ACGME Related Discussion – Fatigue Management. Department of Otolaryngology, SUNY Downstate Health Sciences University, Brooklyn, NY, September 2020.
4. ACGME Discussion: CLER Review. Department of Otolaryngology SUNY Downstate Health Sciences University, Brooklyn, NY, October 2020.

Matthew Hanson, MD
1. Auditory Physiology. Department of Otolaryngology, SUNY Downstate Health Sciences University, Brooklyn, NY, July 2020.
2. Vestibular Physiology. Department of Otolaryngology, SUNY Downstate Health Sciences University, Brooklyn, NY, July 2020.
3. Otology Imaging Review. Department of Otolaryngology, SUNY Downstate Health Sciences University, Brooklyn, NY, November 2020.
4. Otology imaging and case. Department of Otolaryngology, SUNY Downstate Health Sciences University, Brooklyn, NY, March 2021.

Gady Har-El, MD
1. Salivary gland anatomy and physiology. Department of Otolaryngology, SUNY Downstate Health Sciences University, Brooklyn, NY, May 2021.

Richard Kollmar, PhD
1. CORE Grants. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, October 2020.
Victor Lagmay, MD
1. Update on HPV-mediated oropharynx cancer. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, May 2021.

Michal Preis, MD
1. Middle Ear Pathology. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, July 2020.
2. Endoscopic Ear Surgery, Eustachian tube dysfunction and Balloon Dilation. Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, September 2020.

Ann Plum, MD
1. Managing Airway Emergencies. SUNY Downstate Health Sciences University, Department of Otolaryngology Grand Rounds, July 2020.
2. Pediatric Neck Masses. SUNY Downstate Health Sciences University, Department of Pediatrics Resident Didactics, September 2020.
3. Surgical Management of Pediatric Chronic Rhinosinusitis. SUNY Downstate Health Sciences University, Department of Otolaryngology Grand Rounds, November 2020.
4. Introduction to Pediatric Swallowing Disorders. SUNY Downstate Health Sciences University, Otolaryngology Interest Group Lecture Series, January 2021.

Abraham Shulman, MD
1. Tinnitus: Past, Present, Future: Clinical types; subtypes; Components tinnitus. Department of Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, September 2020.

Krishnamurthi Sundaram, MD
1. Thyroid and Parathyroid. Department of Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, August 2020.

John Weigand, PhD
1. Understanding the audiogram. Department of Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, July 2020.
2. Introduction to Audiology. 40 West Brighton Avenue Otolaryngology Practice, Brooklyn NY, November 2020.
3. Introduction to Audiology. NY Center for Ear, Nose, Throat, Sinus & Allergy, Brooklyn NY, December 2020.
6. Intro to Audiology. Medical student presentation, SUNY Downstate Health Sciences University, Brooklyn, NY, April 2021.
Resident Presentations

Rahul Gulati, MD

Hunter Hopkins, MD
2. Differential and diagnosis of parapharyngeal space tumors. Department of Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, June 2021.

Rachel Irizarry, MD

Ankit Kansal, MD
2. Evaluation and management of esophageal strictures. Department of Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, April 2021.

Jennifer Liang, MD
1. Laryngopharyngeal reflux management. Department of Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, April 2021.

Fasil Matthews, MD

Sean Mooney, MD

Prayag Patel, MD

Sam Schild, MD

Ryan Tabtabai, MD, MPH
1. Surgical treatment of facial nerve paralysis. Department of Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, March 2021.

Alisa Timashpolsky, MD

Stephanie Tominaga, MD
1. Pediatric Cochlear Implants. Department of Otolaryngology Grand Rounds, SUNY Downstate Health Sciences University, September 2020.

Michael Weber, MD
3. Impact of sleep apnea surgery on seizure control in children with comorbid obstructive sleep apnea and seizure disorder. ASPO 45th Spring Meeting (Virtual), April 2021.
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 840 Lefferts Avenue, The Center for Healthcare Services at Midwood at 2171 Nostrand Avenue.

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 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.
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.

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.
EDUCATIONAL PROGRAMS
Executive Summary
The Department of Otolaryngology at SUNY Downstate Medical Center had intensive continuing medical education activities during the academic year of 2020-2021. 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 7:00 am is dedicated to the discussion of various residency related topics. During the 7:00 to 8:00 am 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 9:00 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 2020-2021 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, 2021 – June 30, 2022
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 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. This didactic and laboratory experience is heavily weighted in histopathology and temporal bone dissection.

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, 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**

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

**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
**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 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 comprehensive overview of the program structure. To view the Department of Otolaryngology's "Residency Program Goals and Objectives" please go to http://www.downstate.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.

<table>
<thead>
<tr>
<th></th>
<th>PGY-1</th>
<th>PGY-2</th>
<th>PGY-3</th>
<th>PGY-4</th>
<th>PGY-5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual otolaryngology in-service examination</strong></td>
<td>Participate in examination</td>
<td>Meet or exceed median PGY-2 score</td>
<td>Meet or exceed median PGY-3 score</td>
<td>Meet or exceed median PGY-4 score</td>
<td>Meet or exceed median PGY-5 score</td>
</tr>
<tr>
<td><strong>Basic science</strong></td>
<td>Familiarity</td>
<td>Attend Basic Science Course</td>
<td>Attend Basic Science Course</td>
<td>In-depth knowledge</td>
<td>In-depth knowledge</td>
</tr>
<tr>
<td><strong>H &amp; N Anatomy</strong></td>
<td>Familiarity</td>
<td>Thorough understanding</td>
<td>In-depth knowledge</td>
<td>Mastery</td>
<td>Mastery</td>
</tr>
<tr>
<td><strong>Clinical medicine learning focus</strong></td>
<td>Approach to the patient</td>
<td>Surgical indications and general otolaryngology</td>
<td>General otolaryngology and subspecialties</td>
<td>Otolaryngology subspecialties</td>
<td>Mastery</td>
</tr>
<tr>
<td><strong>Temporal bone course†</strong></td>
<td>—</td>
<td>Mastoidectomy, labyrinthectomy</td>
<td>Cochleostomy, ossiculoplasty</td>
<td>Develop confidence; avoid complications</td>
<td>Teach junior residents</td>
</tr>
<tr>
<td><strong>COCLIA‡</strong></td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td><strong>AO North America Maxillofacial Trauma Course</strong></td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td><strong>Textbook reading</strong></td>
<td>Case-based; skim chapters</td>
<td>Read all chapters for exposure to field</td>
<td>Read all chapters for understanding</td>
<td>Re-read all chapters for greater insight</td>
<td>Reread all chapters for mastery</td>
</tr>
<tr>
<td><strong>Journal reading</strong></td>
<td>Skim core journals</td>
<td>Read core++ ≥ 60 minutes/week</td>
<td>Read core++ and selected others</td>
<td>Read core++ &amp; sub-speciality journals</td>
<td>Read core++ &amp; sub-speciality journals</td>
</tr>
<tr>
<td><strong>AAO-HNS Resident Flex Course</strong></td>
<td>Exposure</td>
<td>100% participation</td>
<td>100% participation</td>
<td>100% participation</td>
<td>100% participation</td>
</tr>
</tbody>
</table>

*Basic Science includes anatomy, physiology, genetics, audiology, speech pathology, taste/smell, wound healing, child development
†Temporal 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 through bimonthly conferences with faculty supervision
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.

<table>
<thead>
<tr>
<th>Clinical skills and basic procedures</th>
<th>PGY-1</th>
<th>PGY-2</th>
<th>PGY-3</th>
<th>PGY-4</th>
<th>PGY-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perform H&amp;N exam</td>
<td></td>
<td>Proficiency in H&amp;N exam; perform flexible endoscopy</td>
<td>Proficiency in adult endoscopy; develop laser skills</td>
<td>Proficiency in peds endoscopy; learn stroboscopy</td>
<td>Mastery; develops personal style and approach</td>
</tr>
<tr>
<td>Participates</td>
<td></td>
<td>Coordinates with senior residents</td>
<td>Coordinates with senior residents</td>
<td>Supervision and teaching</td>
<td>Supervision and teaching</td>
</tr>
<tr>
<td>Understands appropriate use</td>
<td></td>
<td>Handles with supervision</td>
<td>Effective and appropriate use</td>
<td>Masters appropriate use</td>
<td>Mastery and team leader</td>
</tr>
<tr>
<td>Uses appropriately</td>
<td></td>
<td>Timely and accurate completion of assignments</td>
<td>Timely and accurate completion of assignments</td>
<td>Increasing role in supervision and teaching</td>
<td>Mastery and team leader</td>
</tr>
<tr>
<td>Participates</td>
<td></td>
<td>Completes assignments</td>
<td>Plans care and ensures follow-up</td>
<td>Increasing role in coordination of care</td>
<td>Master and team leader</td>
</tr>
<tr>
<td>Uses and teaches</td>
<td></td>
<td>Uses and teaches</td>
<td>Uses and teaches</td>
<td>Uses and teaches</td>
<td>Leader &amp; role model</td>
</tr>
</tbody>
</table>

Otolaryngology Annual Report 2021
### 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.

<table>
<thead>
<tr>
<th>Specialty</th>
<th>PGY-1</th>
<th>PGY-2</th>
<th>PGY-3</th>
<th>PGY-4</th>
<th>PGY-5</th>
</tr>
</thead>
</table>
| **General otolaryngology, head and neck surgery** | • Physical examination  
• ACLS/ ATLS  
• Central line placement  
• Arterial blood gas sampling  
• Nasogastric tube placement  
• Foley catheter placement  
• Incision and drainage, simple abscesses  
• Management tracheostomy tubes  
• Basic wound management | • Fine needle aspiration, neck  
• Insertion of tracheostomy tube  
• Direct laryngoscopy, diagnostic  
• I&D neck abscesses | • Level 1 neck dissection  
• Tracheostomy  
• Deep lymph node excision/ biopsy  
• Submandibular gland excision  
• Carotid Luc procedure  
• Esophagoscope, diagnostic, dilation  
• Panendoscopy with biopsy | • Superficial parotidectomy  
• Selective neck dissection  
• Partial glossectomy  
• Thyroidectomy  
• Parathyroidectomy  
• Excision congenital neck mass, all types including thyroglossal duct and branchial cleft cysts  
• Endoscopic approach hypophysectomy  
• Lip wedge resection  
• Oral cavity tumor resection  
• Auricular excision | • Total parotidectomy ± facial nerve graft  
• Total glossectomy  
• Radical neck dissection  
• Modified radical neck dissection  
• Lateral rhinotomy  
• Skull base resection, anterior, middle  
• Composite resection, oral cavity/ oropharynx  
• Mandibular resection  
• 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 I+V  
• Mastoidectomy, canal wall down  
• Canaloplasty  
• Resection cerebellopontine angle tumor, assistant | • Ossiculoplasty  
• Stapledectomy  
• Temporal bone resection  
• Skull base resection, lateral  
• Aural atresia repair  
• Facial nerve decompression  
• Repair perilymphatic fistula  
• Labyrinthectomy  
• Cochlear implantation  
• Resection CPA tumor, assistant |
| Allergy                            | N/A                                                                    | • Fiberoptic intubation, angioedema | • Administer and interpret allergy skin test  
• Allergy emergency protocol | | |
<table>
<thead>
<tr>
<th>Adult sleep medicine and surgery</th>
<th>N/A</th>
<th>Septoplasty, turbinate reduction</th>
<th>Tonsillectomy</th>
<th>Uvulopalatopharyngoplasty</th>
<th>Lingual tonsillectomy</th>
<th>Tongue advancement procedure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laryngology</td>
<td></td>
<td>Flexible laryngoscopy</td>
<td></td>
<td>Bronchoscopy, diagnostic</td>
<td>Endoscopic laser ablation ± dilation</td>
<td>Total laryngectomy</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Laryngoscopy with excision</td>
<td>laryngotracheal stenosis</td>
<td>Partial laryngectomy, open or endoscopic</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Endoscopic maxillary antrostomy</td>
<td>Laryngoscopy with microflap excision</td>
<td>Repair laryngeal fracture</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Endoscopic polyectomy</td>
<td>Endoscopic/ open excision Zenker's diverticulum</td>
<td>Tracheal resection, anastomosis</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Endoscopic nasopharyngeal biopsy</td>
<td>Tracheoepipharyngeal fistula creation</td>
<td>Thyroplasty, arytenoid adduction</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Arytenoidectomy</td>
<td>Injection laryngoplasty</td>
</tr>
<tr>
<td>Sinonasal</td>
<td></td>
<td>Flexible nasopharyngoscopy</td>
<td>Anterior and posterior nasal packing</td>
<td>Endoscopic anterior ethmoidectomy</td>
<td>Endoscopic posterior ethmoidectomy</td>
<td>Endoscopic repair CSF leak</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Septoplasty</td>
<td>Endoscopic maxillary antrostomy</td>
<td>Endoscopic sphenoidectomy</td>
<td>Endoscopic sphenopalatine ligation</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Submucous turbinate resection</td>
<td>Endoscopic polyectomy</td>
<td>Endoscopic sphenoidectomy</td>
<td>Osteoplastic frontal sinus obliteration</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Endoscopic sphenoidectomy</td>
<td>Advanced endoscopic frontal sinusotomy</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Endoscopic sphenoidectomy</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Endoscopic sphenoidectomy</td>
<td></td>
</tr>
<tr>
<td>Plastic and Reconstructive-surgery</td>
<td>N/A</td>
<td>Foreign body removal, ear, nose, pharynx</td>
<td>Excision congenital neck masses, all types</td>
<td>Endoscopic management, laryngo-tracheal stenosis</td>
<td>Laryngotracheal reconstruction, open</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Myringotomy and tube placement</td>
<td>Bronchoscopy, diagnostic, foreign body removal</td>
<td>Choanal atresia repair</td>
<td>Lymphangioma excision</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tonsillectomy</td>
<td>Esophagoscopy with foreign body removal</td>
<td>Otoplasty</td>
<td>Management subglottic hemangioma</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Adenoidectomy</td>
<td></td>
<td>Tracheostomy, age under 2 years</td>
<td>Excision juvenile nasopharyngeal angiofibroma</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Frenuoplasty</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Suturing of uncomplicated lacerations</td>
<td>Closed reduction, mandible fracture</td>
<td>Reduction facial fractures, nasal, malar, orbital blowout, mandible, frontal</td>
<td>Pedicile flap procedure, myocutaneous</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Closed reduction, nasal fracture</td>
<td>Pedicile flap procedure, local</td>
<td>Rhinoplasty, closed</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Excision skin lesions, primary closure</td>
<td>Split and full thickness skin grafts</td>
<td>Pedicile flap procedure, regional</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Repair complex facial lacerations</td>
<td>Reconstruction external ear</td>
<td>Rhinooplasty, open</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Scar revision</td>
<td>Tissue expander placement, removal</td>
<td>Microsurgical free flap</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Eyelid weight placement</td>
<td>Facial nerve graft or repair</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Brow lift</td>
<td>Facial reanimation procedures</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Rhynidectomy</td>
<td>Cleft palate, Cleft lip repair</td>
</tr>
</tbody>
</table>
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.

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

*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 professionals.

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

Table 5

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

<table>
<thead>
<tr>
<th>Residents are expected to:</th>
<th>PGY-1</th>
<th>PGY-2</th>
<th>PGY-3</th>
<th>PGY-4</th>
<th>PGY-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrate compassion, integrity, and respect for others</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Demonstrate responsiveness to patient needs that supersedes self-interest</td>
<td>Awareness</td>
<td>Awareness</td>
<td>Progressive implementation</td>
<td>Progressive implementation</td>
<td>Mastery</td>
</tr>
<tr>
<td>Demonstrate respect for patient privacy and autonomy</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Demonstrate accountability to patients, society, and the profession</td>
<td>Accountability to patients, self-mastery</td>
<td>Accountability to patients, self-mastery</td>
<td>Serve as role model for team, department</td>
<td>Role model at regional and national meetings</td>
<td>Role model at regional and national meetings</td>
</tr>
<tr>
<td>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</td>
<td>Self-mastery</td>
<td>Self-mastery</td>
<td>Serve as role model</td>
<td>Serve as role model</td>
<td>Serve as role model</td>
</tr>
</tbody>
</table>
### 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.

<table>
<thead>
<tr>
<th>Residents are expected to:</th>
<th>PGY-1</th>
<th>PGY-2</th>
<th>PGY-3</th>
<th>PGY-4</th>
<th>PGY-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work effectively in various health care delivery settings and systems relevant to their clinical specialty</td>
<td>Work effectively at Maimonides and UHB/KCHC</td>
<td>Work effectively at Lenox Hill/MEETH and UHB/KCHC</td>
<td>Work effectively at NYPBM and UHB/KCHC</td>
<td>Work effectively at Maimonides, UHB/KCHC, NYPBM, Maimonides, and Lenox Hill/MEETH</td>
<td>Mastery</td>
</tr>
<tr>
<td>Coordinate patient care within the health care system relevant to their clinical specialty</td>
<td>Participate in team</td>
<td>Participate in team</td>
<td>Coordinate with supervision</td>
<td>Progressive responsibility</td>
<td>Mastery</td>
</tr>
<tr>
<td>Incorporate considerations of cost awareness and risk-benefit analysis in patient or population-based care as appropriate</td>
<td>Understand and consider</td>
<td>Understand and consider</td>
<td>Incorporate</td>
<td>Incorporate</td>
<td>Incorporate</td>
</tr>
<tr>
<td>Work in interprofessional teams to enhance patient safety and improve patient care quality</td>
<td>Attend dept. M&amp;M; Program evaluation committee</td>
<td>Attend dept. M&amp;M; Program evaluation committee</td>
<td>Present at dept. M&amp;M; Program evaluation committee; Residency Selection Committee</td>
<td>Present at dept. M&amp;M; Program evaluation committee; Residency Selection Committee; Residents Fellows Subcommittee of GMEC at UHB</td>
<td>Lead and present at dept. M&amp;M; Program evaluation committee; Residency Selection Committee; Residents Fellows Subcommittec of GMEC at UHB</td>
</tr>
<tr>
<td>Participate in identifying system errors and implementing potential system solutions</td>
<td>---</td>
<td>Patient Safety Committee at KCHC</td>
<td>Residents Fellows Subcommittee of GMEC at UHB</td>
<td>Residents Fellows Subcommittee of GMEC at UHB</td>
<td>Root Cause Analyses (pm)</td>
</tr>
<tr>
<td>Advocate for quality patient care and optimal patient care systems</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

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 otolaryngology 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.
MEDICAL STUDENT PROGRAM AND OPPORTUNITIES

The Department of Otolaryngology has a strong commitment to medical student education and to exposing students to the field as early as possible during medical school. The following opportunities are available:

**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).

**Lifestyle Medicine:** Richard Rosenfeld is faculty advisor for the College of Medicine Lifestyle Medicine Interest Group and the Downstate Initiative for Nutrition Empowerment (DINE).

**Committee on Plant-based Health and Nutrition:** Chaired by Richard Rosenfeld, the committee offers medical students, residents, faculty, and staff a unique forum to collaborate on diverse issues related to healthy eating and plant-forward nutrition.
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. This year we officially opened our new State-of-the-art Temporal Bone Lab at Downstate. It is located in room B7-39 of the SUNY Basic Science Building, immediately next to Dr. Hanson's academic office. This lab features dissection stations from Global Surgical Corporation, including eight new microscopes and drills, with an additional two-headed pro-sector station and video monitors. The lab is intended as a specialty-wide surgical education resource and will include instruments for microvascular training and soft-tissue repair. The lab is used for frequent courses and educational sessions, and unlike our previous lab located in our old offices at 134 Atlantic, this lab will be accessible 24 hours a day to the residents for opportunities for independent drilling and study. Dr. Samuel Marquez of the Department of Anatomy works closely with us to secure a steady supply of specimens. We are planning to install two work stations with equipment suitable for virtual temporal bone dissection to supplement the study of cadaveric material. The lab contains items of historical interest, including items from the lab of Dr. Dorothy Wolff and dissections done by Dr. Julius Lempert, the founder of modern otology and a Downstate graduate. Funding for the lab was provided by the College of Medicine and the University President, and a charitable account raised additional money to make the project, finally, a reality.
FRANK E. LUCENTE ALUMNI AND RESIDENT RESEARCH DAY
June 10, 2021

10:00 Welcome Remarks – B Bentsianov
10:05 Introduction – R Rosenfeld
10:10 Introduction – F Lucente
10:15 Impact of Immunosuppression on Advanced Head & Neck Cutaneous Squamous Cell Carcinoma – C Schmalbach
11:00 “The Role of Neoadjuvant therapy in Head and Neck Cancer” – P Thakkar
11:45 Risk assessment in major head and neck oncologic surgery – R Irizarry (PGY-5)
11:57 Level of evidence for studies published in a high impact otolaryngologic journal over the last 15 years – J Liang (PGY-2)
12:09 Lunch
12:54 Systematic Review and Meta-Analysis of Post-Treatment PET/CT in HPV-Associated Oropharyngeal Cancer – F Matthews (PGY-2)
1:06 Otolaryngologists’ Attitudes Towards In-Office Pediatric Tympanostomy Tube Placement without General Anesthesia – Sam Schild (PGY-4)
1:18 Analysis of Olfactory Dysfunction During the COVID-19 Pandemic: Long Term Prevalence and Disease Severity – R Tabtabai (PGY-4)
1:30 Postoperative Respiratory Complications after Adenotonsillectomy in Children with Obstructive Sleep Apnea – A Timashpolsky (PGY-5)
1:42 Surgical Management of Subglottic Airway Infantile Hemangioma: A Systematic Review – S Tominaga (PGY-2)
1:54 Impact of sleep apnea surgery on seizure control in children with comorbid obstructive sleep apnea and seizure disorder – M Weber (PGY-3)
2:06 Defining the middle turbinate on a cellular level: a rhinologic application of single-cell transcriptomics – H Hopkins (PGY-3)
2:18 Break
2:50 Postoperative Level of Care Following Microvascular Free Flap Reconstruction of the Head and Neck: A Systematic Review and Meta-analysis – R Gulati (PGY-3)
3:02 Sudden Unexplained Death in Epilepsy Patients: an update and next steps – A Kansal (PGY-4)
3:14 Navigating the Journey from Physician to Leader – C Schmalbach
3:44 Alumni Panel Discussion – L Kaplowitz
Topic: “Combining Fellowship training and Private Practice”
4:29 Closing Remarks – B Bentsianov
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 objective: To analyze and compare the predictive value of pre-operative risk assessment measures on post-operative adverse events in the uniquely susceptible population of head and neck cancer patients undergoing major oncologic surgery.

Methods: A retrospective cohort analysis was performed using the American College of Surgeons National Surgical Quality Improvement Program (ACS NSQIP) database from 2007 to 2017. Surgically treated head and neck cancer patients (n=4371) were identified then stratified by age, American Society of Anesthesiologist physical status (ASA) classification, modified 5-item frailty index (mFI-5) score, and American College of Surgeons morbidity probability score (MORBPROB). Rates of adverse events defined as post-operative complications, reoperation, readmission, and length of stay were then analyzed.

Results: An increase in MORBPROB and ASA class significantly increased odds of post-operative complications across all age groups whereas the mFI-5 association was limited to ages 41-79 (p<0.05). MORBPROB showed a statistically significant relationship with length of stay and reoperation across all age groups (p<0.05) whereas ASA class significance was limited to ages 41-79 (p<0.05). On multivariate regression analysis MORBPROB was the best predictor of post-operative complications, reoperation, and readmission, and length of stay (β 8.47, β 5.20, and β 41.05; respectively, p<0.001). There was no significant association between MORBPROB, ASA, or mFI-5 and readmission or age group and any adverse event.

Conclusion: Age alone is not a significant predictor of surgical adverse events. MORBPROB is a promising surgical risk assessment measure for head and neck cancer patients.

Title: LEVEL OF EVIDENCE FOR STUDIES PUBLISHED IN A HIGH IMPACT OTOLARYNGOLOGIC JOURNAL OVER THE LAST 15 YEARS

Investigators: Jennifer Liang MD, Ann Plum MD

Faculty Mentor: Ann Plum MD

Outcome Objectives: To identify the trend of level of evidence for studies published in a high impact otolaryngologic journal over the last 15 years.

Methods: Four issues from the journals Laryngoscope, Otolaryngology – Head and Neck Surgery, and JAMA Otolaryngology – Head and Neck Surgery from the years 2005, 2010, 2015, and 2020 were identified as representative samples of journal content. The contents of each article were reviewed the type of study it represented was identified. Each article was subsequently and assigned a level of evidence grade based on the Oxford Center of Evidence Based Medicine guidelines. Where present, the author-submitted level of evidence was also abstracted.

Results: The following include preliminary results from this study. One hundred and ninety-nine articles were identified using the methods described. The number of articles published in each issue increased from 35 in 2005 to 81 in 2020. A greater proportion of systematic reviews and public health studies were published in the years 2015 (2.5%) and 2020 (4.6%) in comparison to 2005 and 2010 (both 0%). Randomized control trials represented a fairly consistent proportion of studies throughout the years (between 2.5% to 5%). There also seemed to be a trend toward publishing a greater proportion of retrospective chart reviews (26% in 2005 vs. 64% in 2020) as the years progressed.

Conclusion: Simple proportions analyses suggest that systematic reviews and retrospective chart reviews became more commonly published in more recent years. Further data collection and analysis needs to be performed to verify these findings.
Title: SYSTEMATIC REVIEW AND META-ANALYSIS OF POST-TREATMENT PET/CT IN HPV-ASSOCIATED OROPHARYNGEAL CANCER

Investigators: Fasil Mathews MD; Rachel Irizarry MD; Richard Rosenfeld MD, MPH, MBA; Krishnamurthi Sundaram, MD, FACS

Faculty Mentor: Krishnamurthi Sundaram, MD, FACS

Outcome Objectives: To perform a systematic review with meta-analysis to investigate the utility of post-treatment PET/CT specifically in HPV-associated oropharyngeal squamous cell carcinoma following curative intent treatment.

Methods: Random-effects meta-analysis was used to pool data from 7 observational studies (2013-2019) obtained from a database search of PubMed, Web of Science, and EMBASE using an a priori protocol with dual independent evaluation for inclusion, risk of bias assessment for acceptable methodology, and extraction of data for analysis. PET/CT results, disease recurrence, imaging and interventions subsequent to PET/CT findings, and efficacy of salvage therapy were extracted.

Results: Of the 910 post-treatment scans, PET/CT results were largely negative (76.2%; 95% CI, 63.4-85.6) and least often positive (11.3%; 95% CI, 8.8-14.4). PET/CT results were equivocal for 22.5% (95% CI, 12.5-36.9%) and equivocal/positive for 34.2% of patients (95% CI, 25.1-44.5%). Patients with an initial positive scan had the highest recurrence rates (43.1%; 95% CI, 21.4-67.7) and those with an initial negative scan had the lowest rates (7.4%; 95% CI, 5.7-9.7). The equivocal and equivocal/positive scans had intermediate prevalence of 16.5% (95% CI, 9.4-27.6) and 16.7% (95% CI, 9.1-28.7), respectively.

Conclusion: The low recurrence rate following a negative PET/CT scan is reassuring, but the data are consistent with recurrence rates up to 9.7% suggesting follow-up of these patients is prudent. Additionally, the low positive predictive value for recurrence observed alludes to use of post-treatment PET/CT in HPV-associated disease frequently leading to unnecessary subsequent imaging and intervention.

Title: OTOLARYNGOLOGISTS’ ATTITUDES TOWARDS IN-OFFICE PEDIATRIC TYMPANOSTOMY TUBE PLACEMENT WITHOUT GENERAL ANESTHESIA

Investigators: Sam Schild MD; Richard Rosenfeld MD, MPH, MBA, DipABLM

Faculty Mentor: Richard Rosenfeld MD, MPH, MBA, DipABLM

Objectives: Our objectives were to assess attitudes regarding office-based insertion of tympanostomy tubes without general anesthesia, to identify barriers that would discourage in-office procedures, and to highlight opportunities that would potentially facilitate this approach in the future.

Methods: Cross-sectional survey administered to members of the American Society of Pediatric Otolaryngology (ASPO) from March to April 2020 using the Research Electronic Data Capture (Redcap), internet-based data capture platform. The brief, 10-item survey required 3 minutes to complete and used a 5-point Likert scale for primary questions.

Results: Respondents included 172 fellowship trained, pediatric otolaryngologists with 14 median years of clinical practice and 25 median tympanostomy tube insertions per month (75% > 40 per month). Although tubes, in any setting, were most often inserted in children under age 2 years (95% “often” or “very often”) and in those aged 3 to 5 years (93%), the likelihoods of doing this in-office for these age groups were only 8% and 6% respectively. For children aged 6 to 12 years, likelihood of in-office insertion was only 15%. Frequent barriers noted were safety concerns, emotional trauma, physical pain, and inability to suction. Opportunities to facilitate this approach include improved topical anesthesia, availability of conscious sedation, conclusive research on adverse effects of general anesthesia, and availability of an automated tube insertion device.

Conclusion: Office-based insertion of tympanostomy tubes in children without general anesthesia is performed by a small minority of respondents, but there are discernible barriers and opportunities to promote future uptake. Our results should facilitate ongoing discussion and innovation to better accommodate the preferences of families whose children are candidates for tympanostomy tubes.
Title: ANALYSIS OF OLFACTORY DYSFUNCTION DURING THE COVID-19 PANDEMIC: LONG TERM PREVALENCE AND DISEASE SEVERITY

Investigators: Ryan Tabtabai, MD, MPH, Sam Schild, MD, Robert Gurevich BA, Andrew Voight BA, Jerome Salvani MD, Richard Rosenfeld MD MPH MBA.

Faculty Mentor: Marina Boruk MD

Outcome Objectives: Study objective include assessing rate of olfactory dysfunction (OD) within cohort of patients admitted for COVID-19. We also assessed for association between self-reported OD and hospital length of stay as well as patient factors and comorbidities such as gender, BMI, and ACEI / ARB use.

Methods: This is a single-institution cohort study with chart review of consecutive patients admitted to a COVID-only hospital with a positive PCR test between Mar 12 and Apr 30, 2020. Exclusion criteria were age<18, non-English speakers, inability to provide informed consent, patients mentally/medically unable to complete survey during evaluation, patients with indeterminate or negative COVID-19 tests, and those still admitted. Patients were contacted by telephone between May 8 and July 9 to complete a survey and responses were recorded in REDCap by one of three authors. Patients were then contacted again for follow up regarding if they were still having ongoing olfactory dysfunction.

Results: Of 434 patients contacted, 143 (33%) completed the survey. The sample was predominantly Afro-Caribbean (86%), 51.4% female, with mean age 62.4. There were significant comorbidities, particularly diabetes (55%) and hypertension (85%). The overall rate of OD was 34%. Increased age was associated with olfactory dysfunction (p=0.05). Olfactory dysfunction was associated with shorter hospital stay approaching statistical significance (p=0.055) and ACEi usage associated with olfactory dysfunction approaching statistical significance (p= 0.061). Gender, BMI, ARB use, and diabetes were not associated with OD. Follow up data is still being collected at this time.

Conclusion: Age was associated with significantly increased rate of OD in our predominantly Afro-Caribbean inner-city population. Association of length of stay and ACEi use with anosmia approach significance and warrant study in a larger sample. Since COVID disproportionately affects our vulnerable population, additional resources to help their recovery would help address justice and social determinants of health. Olfactory therapy may make a significant impact on the quality of life of patients recovering from COVID anosmia.

Title: POSTOPERATIVE RESPIRATORY COMPLICATIONS AFTER ADENOTONSILLECTOMY IN CHILDREN WITH OBSTRUCTIVE SLEEP APNEA

Investigators: Alfonso Caetta, BS, Alisa Timashpolsky, MD, Stephanie M. Tominaga, MD, Neeta D'Souza, BA, Nira A. Goldstein, MD, MPH

Faculty Mentor: Nira A. Goldstein, MD, MPH

Outcome Objectives: To determine if otherwise healthy children age ≥ 3 years with an apnea-hypopnea index (AHI) < 24 on overnight polysomnography (PSG) can be safely discharged on the same day of surgery.

Methods: Case series with chart review of children age < 18 years with positive PSG (AHI > 2) who underwent adenotonsillectomy (T&A) between January 2013 and August 2019.

Results: Of the 560 children, mean (SD) age was 6.4 (3.7) years, 318 (56.8%) were male, 438 (78.2%) were African American, 243 (43.4%) were obese, 16 (2.9%) had Down Syndrome and 12 (2.1%) had sickle cell disease. Median (range) AHI was 12.3 (2-145). Fifteen children (2.7% [95% CI 1.3, 4.0]) had an intraoperative or postoperative respiratory complication. Minor complications including mild desaturation, stridor, croupy cough, and laryngospasm occurred in 9 patients and did not prolong the planned ambulatory or hospital stay. Of the 6 children with more severe complications including prolonged desaturation, tachypnea, atelectasis, intercostal retraction and obstructive apnea requiring continuous positive airway pressure, all were planned admissions based on age, severe sleep study indices (AHI ≥ 24 or oxygen saturation nadir < 80%) or underlying medical condition. Of the 165
otherwise healthy children age ≥ 3 with AHI ≥ 10 but < 24, 113 (68.5%) were discharged home on the same day of surgery without additional respiratory sequelae.

Conclusions: This study demonstrates a low risk of respiratory complications after T&A. Otherwise healthy children with AHI < 24 may be considered for ambulatory discharge.

Title: SURGICAL MANAGEMENT OF SUBGLOTTIC AIRWAY INFANTILE HEMANGIOMA: A SYSTEMATIC REVIEW

Investigators: Stephanie M. Tominaga, MD; Matthew Mendelsohn, BS; Sam Schild, MD; Ann W. Plum, MD

Faculty Mentor: Ann W. Plum, MD

Outcome Objectives: Compare outcomes and complications between different surgical approaches to management of subglottic hemangiomas.

Methods: This systematic review included studies of patients with subglottic hemangioma who were managed surgically. Two independent investigators assessed study eligibility, rated the quality, and extracted data for analysis.

Results: Of the 872 studies identified, 28 met inclusion criteria. There were 446 patients with subglottic hemangioma treated surgically with reported outcomes. Regardless of surgical approach, the majority of patients had resolution of symptoms. No significant difference was found in comparing outcomes for the different interventions. The rate of complete resolution of symptoms was 89.6% for open excision, 92.4% for CO2 laser excision, 95.4% for KTP laser excision, and 90.5% for diode laser excision. The average number of treatments required for CO2 lasers was 2.25, 1.35 for KTP laser, and 1.6 for diode laser. There were also no differences in rates of complications including subglottic stenosis, formation of granulation tissue, and prolonged need for tracheostomy.

Conclusion: Our systematic review demonstrated that both open surgical excision and endoscopic laser ablation result in good outcomes and resolution of symptoms in patients with subglottic hemangiomas. Further prospective and controlled studies comparing the efficacy of each treatment are necessary to determine new treatment paradigms after failed medical management.

Title: IMPACT OF SLEEP APNEA SURGERY ON SEIZURE CONTROL IN CHILDREN WITH COMORBID OBSTRUCTIVE SLEEP APNEA AND SEIZURE DISORDER

Investigators: Michael Weber, MD; Nabil Khan, BS; Alexandra Reznikov, MD; Ann Plum, MD, Nira A. Goldstein, MD, MPH

Faculty Mentor: Dr Goldstein

Introduction: Obstructive sleep apnea (OSA) and epilepsy are common medical problems in children, with an incidence of 1 to 4% and 1% respectively. There are studies demonstrating an increased incidence of OSA in patients with epilepsy and several small case series reporting improved seizure control in patients with comorbid OSA and seizure disorder following treatment of OSA.

Objective: The primary goal of this study was to determine whether children with comorbid epilepsy and OSA who underwent surgical treatment experience improved seizure control at 12 months following surgery.

Methods: A retrospective chart review was performed for all patients age < 18 years seen in the pediatric epilepsy clinic in our academic medical center from January 2014 to March 2019. Patients with epilepsy who underwent surgical treatment for OSA were selected for further review including demographic data, pre- and post-operative measures of seizure control and sleep study data. Mean change scores were calculated and paired samples t-tests were performed for data analysis.

Results: 448 patients were seen in the pediatric epilepsy clinic, 36 patients (8%) had symptoms concerning for OSA and 25 were referred to ENT clinic. A total of 10 patients underwent surgery for OSA.
Title: DEFINING THE MIDDLE TURBINATE ON A CELLULAR LEVEL: A RHINOLOGIC APPLICATION OF SINGLE-CELL TRANSCRIPTOMICS

Investigators: Hunter Hopkins, MD

Faculty Mentor: Marina Boruk, MD; Oleg Evgrafov, PhD

Outcome Objectives: In cell biology, single-cell transcriptomics is a technique used to analyze the transcriptomes, or RNA, being expressed by single cells within a tissue being studied. Using this method of classification based on gene expression, the various cell populations that contribute to the function of a specific tissue can be identified. In this study, biopsy specimens from the head of the middle turbinate were subjected to single-cell transcriptomics in order to perform this method of cell typing. More specifically, gene markers for neural progenitor cells were sought after as evidence that olfactory neuroepithelium (or precursor cells) may exist outside of the traditionally defined sites.

Methods: Biopsy specimens were obtained from the head of the middle turbinate from two patients during planned rhinologic surgeries. Next, specimens were sent to 10x Genomics, where single-cell transcriptomics was performed separately on each specimen in order to detect cellular RNA expression. This data was displayed in cell clusters with similar patterns of increased gene expressivity. Review of each cluster's most highly expressed genes enabled specific cell populations to be defined.

Results: Single-cell transcriptomics identified at least 28 distinct cell clusters based on shared RNA expressivity. After reviewing the distinct gene expression of each cluster, approximately 20 unique cell populations from the head of the middle turbinate were able to be defined. Additionally, gene markers differentially expressed by neural progenitor cells were able to be identified.

Conclusion: Single-cell transcriptomics gives investigators a simple way to describe tissues being studied down to the cellular level. This information is integral for clinicians involved in basic science and translational research. Specifically, the degree of gene expressivity in cell clusters from the head of the middle turbinate was used to confirm the complex cellular background in an efficient and easy to understand way. Due to expression of neural progenitor cell gene markers in the present study, further investigation is warranted to clarify if these cells are associated with the olfactory neuroepithelium.

Title: NEONATAL ORAL VERRUCOUS XANTHOMA: A CASE REPORT AND REVIEW OF LITERATURE

Investigators: Prayag Patel MD, Rahul Gulati MD, Ann Plum MD

Faculty Mentor: Ann Plum MD

Outcome Objectives: To describe the clinical features on a rare, benign lesion of unknown pathogenesis usually seen in adults and to review the existing literature on the clinical and demographic features, etiology, pathogenesis and treatment of this lesion, as well as to present an unusual presentation of this type of lesion in a neonate.

Methods: After IRB approval, a chart review was performed to collect information on the clinical and pathological features of the patient and the lesion respectively. For the review of literature, PubMed was searched with the keyword “oral verrucous xanthoma” or “oral verruciform xanthoma”. Only cases of histologically confirmed oral verrucous xanthoma were included in the study.
**Results:** A full-term baby girl was found to have a 2cmx2cm firm, pedunculated, non-tender mass from the right upper alveolar ridge gingival mucosa at birth. MRI was notable for lobulated T1 hypointense and T2 isointense/minimally hyperintense mass lesion along the right anterior oral cavity, inseparable from the maxillary gingiva. The lesion was completely excised in the operating room and gingival mucosa was reapproximated and closed primarily. Microscopically and immunohistochemically, the lesion was diagnosed as a verrucous xanthoma. On a preliminary review of literature, oral verrucous xanthomas occur most commonly in the 5th to 7th decade of life. Clinically, these lesions mainly present as an asymptomatic, single, papillary or granular plaque or nodule, with elastic or soft consistency and white, red or pink color, commonly located on the gingiva, tongue, hard palate or buccal mucosa. The treatment of choice is surgical excision with low rates of recurrence.

**Conclusion:** Verrucous xanthoma is a rare lesion most often encountered on the gingival mucosa. To our knowledge, this is the first reported case of its presentation in a neonate. As its clinical presentation is not pathognomonic, it should be included in the differential diagnosis of verrucous or papillary lesions in the oral cavity of neonates.

**Title:** POSTOPERATIVE LEVEL OF CARE FOLLOWING MICROVASCULAR FREE FLAP RECONSTRUCTION OF THE HEAD AND NECK: A SYSTEMATIC REVIEW AND META-ANALYSIS

**Investigators:** Rahul D. Gulati, MD; Ryan Kong BS; Prayag S. Patel, MD; Richard M. Rosenfeld, MD, MPH, MBA; Ofer Azoulay, MD

**Faculty Mentor:** Ofer Azoulay, MD

**Outcome Objectives:** Microvascular free flap reconstruction has now become the standard of care for most large defects following head and neck tumor resection. Ideal postoperative monitoring protocols are controversial and vary between, and even within institutions. While most head and neck free flap patients are admitted to the intensive care unit (ICU) in the immediate postoperative setting, several recent studies have examined the effects of a de-escalation in the postoperative level of care. The aim of this systematic review was to analyze and compare outcomes of patients admitted to an ICU versus a non-ICU setting after undergoing microvascular reconstruction of various head and neck defects.

**Methods:** Independent screening and data extraction were performed by two authors. Only studies that directly compared ICU and non-ICU settings were included. Single-arm studies and studies published prior to 2005 were excluded. The primary outcome of interest was hospital length of stay (LOS). Secondary outcomes included medical and surgical complications, upgrade to the ICU, 30-day readmission, and mortality.

**Results:** The initial query yielded 3,942 results, of which 9 comparative studies were used for final analysis. The pooled sample sizes for the ICU and non-ICU cohorts were 1511 and 766, respectively.

**Conclusion:** In select patients undergoing head and neck microvascular free flap reconstruction, routine postoperative admission to the ICU may not be necessary.

**Title:** SUDDEN UNEXPLAINED DEATH IN EPILEPSY PATIENTS: AN UPDATE AND NEXT STEPS

**Investigators:** Ankit Kansal, MD, Sam Schild, MD, Richard Kollmar, PhD, Mark Stewart, MD, PhD

**Faculty Mentor:** Richard Kollmar, PhD

**Outcome Objectives:** To describe research that has been conducted regarding survivability during induced seizures in DBA/2J mice. Specifically, to describe how tracheostomy opening as well as oxygenation can affect survivability. To examine applications for this research and next steps

**Methods:** Previous work done in this laboratory (Irrizary et al) has established the efficacy of tracheal t-tubes as a mechanism of preventing sudden death in epilepsy (SUDEP), with the hypothesis that SUDEP is primarily caused by seizure induced laryngospasm and obstructive apnea lasting until respiratory arrest. Previous research (Willott et al, Venit et al) established the survival benefits of high
oxygen environments in DBA-2 mice during seizure episodes. We established 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. We also induced seizures in DBA/2J mice that had tracheal t-tubes inserted vs controls, and then used a small box to deliver high doses of oxygen at various points during the seizure. The specific periods that were measured were prior to induction of seizure, from the start of the tonic phase to the end, and after the tonic phase until a post-ictal period. 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:** In the “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 All animals that received oxygen prior to induction of seizure survived. Animals with both a tracheal t-tube and that received oxygen upon the start of the tonic phase had a close to 100% survival rate, while oxygen during the tonic phase or an open t-tube during seizure both conferred some benefit, as compared to control mice.

**Conclusion:** These findings suggest that airway protection during the tonic phase of the seizure in DBA/2J mice is critical for survival. In addition, high oxygen environments after initiation of seizure can provide some benefit, but that the addition of a tracheostomy that bypasses the laryngospasm and resulting obstructive apnea provides a significantly higher level of oxygenation and resultant survival. The next steps in translating this for practical application will be the investigation of treatments and interventions that can prevent SUDEP in human patients. There is a paucity of strong studies that demonstrate any significant benefit. Several studies have examined the effect of different levels of supervision on SUDEP. One area that has yet to be explored is the effect of interventions that could aid respiration during a seizure, based on the basic science work done in this lab.
# GRAND ROUNDS 2020-2021

<table>
<thead>
<tr>
<th>CONFERENCE</th>
<th>DATE</th>
<th>TIME</th>
<th>SPEAKER</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACGME Core Competency and Residency Issues: Residency Goals and Objectives</td>
<td>7/2/20</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Auditory Physiology</td>
<td>7/2/20</td>
<td>7:00-7:50</td>
<td>Matthew Hanson, MD</td>
</tr>
<tr>
<td>Vestibular Physiology</td>
<td>7/2/20</td>
<td>8:00-8:50</td>
<td>Matthew Hanson, MD</td>
</tr>
<tr>
<td>Research Review: Grid Update</td>
<td>7/9/20</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>Applications of Skin Grafts &amp; Flaps in Reconstruction of Facial Mohs Defects</td>
<td>7/9/20</td>
<td>7:00-7:50</td>
<td>Sydney Butts, MD</td>
</tr>
<tr>
<td>How to Review Journal Manuscripts</td>
<td>7/9/20</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>7/9/20</td>
<td>9:00-9:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Department Escalation Policy, Handoffs &amp; Work hours</td>
<td>7/16/20</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>Understanding the Audiogram</td>
<td>7/16/20</td>
<td>7:00-7:50</td>
<td>John Weigand, AuD</td>
</tr>
<tr>
<td>Middle Ear Pathology</td>
<td>7/16/20</td>
<td>8:00-8:50</td>
<td>Michal Preis, MD</td>
</tr>
<tr>
<td>Medical Student Rotator Presentations</td>
<td>7/23/20</td>
<td>6:30-7:00</td>
<td>B. Bentsianov, MD</td>
</tr>
<tr>
<td>Introduction to Laryngology</td>
<td>7/23/20</td>
<td>7:00-7:50</td>
<td>Sara Abu Ghanem, MD</td>
</tr>
<tr>
<td>Dysphagia Screening &amp; Aspiration Prevention in Hospitalized Patients: A Multidisciplinary Effort</td>
<td>7/23/20</td>
<td>8:00-8:50</td>
<td></td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>7/23/20</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Investing in Stocks for Long-term Wealth</td>
<td>7/30/20</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>7/30/20</td>
<td>7:00-7:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Pediatric Airway Emergencies</td>
<td>7/30/20</td>
<td>8:00-8:50</td>
<td>Ann Plum, MD</td>
</tr>
<tr>
<td>Etiology and Therapeutic Strategies to Common Pediatric Illnesses</td>
<td>8/6/20</td>
<td>7:00-7:05</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>COCLIA - Antibiotics in ENT</td>
<td>8/6/20</td>
<td>8:00-8:50</td>
<td>All Residents</td>
</tr>
<tr>
<td>Thyroid and Parathyroid</td>
<td>8/13/20</td>
<td>7:00-7:50</td>
<td>K. Sundaram, MD</td>
</tr>
<tr>
<td>Deep Neck Spaces of the Neck</td>
<td>8/13/20</td>
<td>8:00-8:50</td>
<td>Deborah Reede, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>8/13/20</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Allergy and immunology</td>
<td>8/20/20</td>
<td>7:00-7:50</td>
<td>Marina Boruk, MD</td>
</tr>
<tr>
<td>Histopathology Review</td>
<td>8/20/20</td>
<td>8:00-8:50</td>
<td>Raavi Gupta, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>8/27/20</td>
<td>7:00-7:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Healthcare Disparities in Head &amp; Neck Cancer</td>
<td>8/27/20</td>
<td>8:00-8:50</td>
<td>N. Chernichenko, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>8/27/20</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Academy Presentation Practice</td>
<td>9/3/20</td>
<td>6:30-7:00</td>
<td>All Residents</td>
</tr>
<tr>
<td>Mild Traumatic Brain Injury for the Otolaryngologist - New Frontiers for a New Decade</td>
<td>9/3/20</td>
<td>7:00-7:50</td>
<td>Michael Hoffer, MD</td>
</tr>
<tr>
<td>Tinnitus: Clinical Tips Components of a Sensation and Clinical Types and Subtypes</td>
<td>9/3/20</td>
<td>8:00-8:50</td>
<td>A. Shulman, MD</td>
</tr>
<tr>
<td>Current Management of Tongue and Lip Tie</td>
<td>9/10/20</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Endoscopic Ear Surgery, Eustachian Tube Dysfunction and Balloon Dilation</td>
<td>9/10/20</td>
<td>7:00-7:50</td>
<td>Michal Preis, MD</td>
</tr>
<tr>
<td>Journal Club</td>
<td>9/10/20</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Event Description</td>
<td>Date</td>
<td>Time</td>
<td>Presenter(s)</td>
</tr>
<tr>
<td>-------------------------------------------------------</td>
<td>---------</td>
<td>----------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>9/10/20</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>ACGME Related Discussion - Fatigue Management</td>
<td>9/17/20</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>Human Otopathology and the Mechanisms of Conductive Hearing Loss</td>
<td>9/17/20</td>
<td>7:00-7:50</td>
<td>A. Remenschneider, MD</td>
</tr>
<tr>
<td>COCLIA</td>
<td>9/17/20</td>
<td>8:00-8:50</td>
<td>All Residents</td>
</tr>
<tr>
<td>Core Clinical - Vestibular Migraines</td>
<td>9/24/20</td>
<td>6:30-7:00</td>
<td>Michael Weber, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>9/24/20</td>
<td>7:00-7:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Pediatric Cochlear Implants</td>
<td>9/24/20</td>
<td>8:00-8:50</td>
<td>S. Tominaga, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>9/24/20</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Core Competency - Case Logs</td>
<td>10/1/20</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>ABI in Children</td>
<td>10/1/20</td>
<td>7:00-7:50</td>
<td>Thomas Roland, MD</td>
</tr>
<tr>
<td>COCLIA</td>
<td>10/1/20</td>
<td>8:00-8:50</td>
<td>All Residents</td>
</tr>
<tr>
<td>Core Grants</td>
<td>10/8/20</td>
<td>6:30-7:00</td>
<td>Richard Kollmar, PhD</td>
</tr>
<tr>
<td>Disparities in Cochlear Implantation</td>
<td>10/8/20</td>
<td>7:00-7:50</td>
<td>S. Briggs, MD, PhD</td>
</tr>
<tr>
<td>Journal Club</td>
<td>10/8/20</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>10/8/20</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>ACGME Discussion: CLER Review</td>
<td>10/15/20</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>Healthbridge Training Session</td>
<td>10/15/20</td>
<td>7:00-9:00</td>
<td>All Residents</td>
</tr>
<tr>
<td>Core Clinical - Management of Tympanic Membrane Perforations</td>
<td>10/22/20</td>
<td>6:30-7:00</td>
<td>Jennifer Liang, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>10/22/20</td>
<td>7:00-7:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Grand Rounds Talk, “Single Sided Deafness”</td>
<td>10/22/20</td>
<td>8:00-8:50</td>
<td>Michael Weber, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>10/22/20</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Using Statistics to Report Research</td>
<td>10/29/20</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Congenital Hearing Loss</td>
<td>10/29/20</td>
<td>7:00-7:50</td>
<td>Y. Mary Ying, MD</td>
</tr>
<tr>
<td>Mock Oral Boards</td>
<td>10/29/20</td>
<td>8:00-8:50</td>
<td>Ann Plum, MD</td>
</tr>
<tr>
<td>Facial Nerve Reanimation Multidisciplinary Meeting</td>
<td>10/29/20</td>
<td>9:00-9:50</td>
<td>Ofer Azoulay, MD</td>
</tr>
<tr>
<td>ACGME Core Competencies: Professionalism &amp; Interpersonal Communications Skills</td>
<td>11/5/20</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Vascular Tumors</td>
<td>11/5/20</td>
<td>7:00-7:50</td>
<td>Neha Patel, MD</td>
</tr>
<tr>
<td>FLEX/Jeopardy</td>
<td>11/5/20</td>
<td>8:00-8:50</td>
<td>All Residents</td>
</tr>
<tr>
<td>Research Review</td>
<td>11/12/20</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>Journal Club</td>
<td>11/12/20</td>
<td>7:00-7:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>11/12/20</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Otology Imaging Review</td>
<td>11/19/20</td>
<td>6:30-7:00</td>
<td>Matthew Hanson, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>11/19/20</td>
<td>7:00-7:50</td>
<td>Department</td>
</tr>
<tr>
<td>A Stepwise Approach to the Pediatric Airway Patient</td>
<td>11/19/20</td>
<td>8:00-8:50</td>
<td>Sam Schild, MD</td>
</tr>
<tr>
<td>ACGME Systems-based Practice</td>
<td>12/3/20</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Quality and Safety for Pediatric Tracheostomy</td>
<td>12/3/20</td>
<td>7:00-7:50</td>
<td>Romaine Johnson, MD</td>
</tr>
<tr>
<td>Risk Management Talk</td>
<td>12/3/20</td>
<td>8:00-8:50</td>
<td>W. Nyarko, RN, JD</td>
</tr>
<tr>
<td>Grand Rounds Cancelled - Residency Interviews</td>
<td>12/10/20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Event</td>
<td>Date</td>
<td>Time</td>
<td>Presenter</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------------</td>
<td>----------</td>
<td>------------------------------------</td>
</tr>
<tr>
<td>ACGME Resident Survey Results</td>
<td>12/17/20</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Laser Skin Treatment</td>
<td>12/17/20</td>
<td>7:00-7:50</td>
<td>J. Jagdeo, MS, MD</td>
</tr>
<tr>
<td>Journal Club</td>
<td>12/17/20</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Facial Nerve Reanimation Multidisciplinary Meeting</td>
<td>12/17/20</td>
<td>9:00-9:50</td>
<td>Ofer Azoulay, MD</td>
</tr>
<tr>
<td>Core Clinical: Pediatric Aerodigestive Foreign Body</td>
<td>12/24/20</td>
<td>6:30-7:00</td>
<td>Rahul Gulati, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>12/24/20</td>
<td>7:00-7:50</td>
<td>Department</td>
</tr>
<tr>
<td>FLEX/COCLIA</td>
<td>12/24/20</td>
<td>8:00-8:50</td>
<td>All Residents</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>12/24/20</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Review of Escalation Policy and Pediatric Airway Consult Guidelines</td>
<td>1/7/21</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>Introduction to the Temporal Bone and Microvascular Laboratory</td>
<td>1/7/21</td>
<td>7:00-7:50</td>
<td>Matthew Hanson, MD</td>
</tr>
<tr>
<td>Mock Orals</td>
<td>1/7/21</td>
<td>8:00-8:50</td>
<td>Ann Plum, MD</td>
</tr>
<tr>
<td>Core Clinical: Management of Early Esophageal Perforations</td>
<td>1/14/21</td>
<td>6:30-7:00</td>
<td>Hunter Hopkins, MD</td>
</tr>
<tr>
<td>Coding/Practice Management</td>
<td>1/14/21</td>
<td>7:00-7:50</td>
<td>Seth Brown, MD</td>
</tr>
<tr>
<td>Journal Club</td>
<td>1/14/21</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>1/14/21</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Residency Goals and Objectives</td>
<td>1/21/21</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>In-service Questions Review</td>
<td>1/21/21</td>
<td>7:00-8:50</td>
<td>All Residents</td>
</tr>
<tr>
<td>Facial Nerve Reanimation Multidisciplinary Meeting</td>
<td>1/21/21</td>
<td>9:00-9:50</td>
<td>Ofer Azoulay, MD</td>
</tr>
<tr>
<td>Core Clinical: Ocular Considerations in Sinus Disease</td>
<td>1/28/21</td>
<td>6:30-7:00</td>
<td>S. Tominaga, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>1/28/21</td>
<td>7:00-7:50</td>
<td>Department</td>
</tr>
<tr>
<td>Management of CSF Rhinorrhea</td>
<td>1/28/21</td>
<td>8:00-8:50</td>
<td>Fasil Mathew, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>1/28/21</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>CV Clinic</td>
<td>2/4/21</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Contemporary Management of HHT</td>
<td>2/4/21</td>
<td>7:00-7:50</td>
<td>Troy Woodard, MD</td>
</tr>
<tr>
<td>HealthBridge Update</td>
<td>2/4/21</td>
<td>8:00-8:50</td>
<td>Sara Abu Ghanem, MD</td>
</tr>
<tr>
<td>Facial Soft Tissue Trauma Case Review</td>
<td>2/11/21</td>
<td>6:30-7:00</td>
<td>Sydney Butts, MD</td>
</tr>
<tr>
<td>Pituitary and Skull Base Tumors</td>
<td>2/11/21</td>
<td>7:00-7:50</td>
<td>R. Ramakrishma, MD</td>
</tr>
<tr>
<td>Journal Club</td>
<td>2/11/21</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>2/11/21</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Laryngology Imaging and Case Review</td>
<td>2/18/21</td>
<td>6:30-7:00</td>
<td>Sara Abu Ghanem, MD</td>
</tr>
<tr>
<td>Olfactory Chemosensory</td>
<td>2/18/21</td>
<td>7:00-7:50</td>
<td>J Overdevest, MD, PhD</td>
</tr>
<tr>
<td>FLEX/Jeopardy</td>
<td>2/18/21</td>
<td>8:00-8:50</td>
<td>All Residents</td>
</tr>
<tr>
<td>Core Clinical: Nasal Sprays</td>
<td>2/25/21</td>
<td>6:30-7:00</td>
<td>Fasil Mathews, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>2/25/21</td>
<td>7:00-7:50</td>
<td>Department</td>
</tr>
<tr>
<td>Controversies in Post-operative Management of H&amp;N Free Flap Reconstruction</td>
<td>2/25/21</td>
<td>8:00-8:50</td>
<td>Ankit Kansal, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>2/25/21</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>ACGME: Patient Care and Work Hours</td>
<td>3/4/21</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Management of the Cocaine Nose</td>
<td>3/4/21</td>
<td>7:00-7:50</td>
<td>Rebecca Fraioli, MD</td>
</tr>
<tr>
<td>Event</td>
<td>Date</td>
<td>Time</td>
<td>Presenter</td>
</tr>
<tr>
<td>------------------------------------------------------------</td>
<td>------------</td>
<td>--------------</td>
<td>--------------------------------------------</td>
</tr>
<tr>
<td>Current Practice and Innovations in Facial Paralysis Reconstructon</td>
<td>3/4/21</td>
<td>8:00-8:50</td>
<td>Eyal Gur, MD</td>
</tr>
<tr>
<td>COSM/ASPO Resident Presentations</td>
<td>3/11/21</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>Learning After Fellowship: Facial Plastic Cases as a First Year Attending</td>
<td>3/11/21</td>
<td>7:00-7:50</td>
<td>Lee Kaplowitz, MD</td>
</tr>
<tr>
<td>Journal Club</td>
<td>3/11/21</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>3/11/21</td>
<td>9:00-9:50</td>
<td>Department</td>
</tr>
<tr>
<td>Otology Imaging and Case Review</td>
<td>3/18/21</td>
<td>6:30-7:00</td>
<td>Matthew Hanson, MD</td>
</tr>
<tr>
<td>COVID Anosmia; Faster Than Speed of Smell</td>
<td>3/18/21</td>
<td>7:00-7:50</td>
<td>CW David Chang, MD</td>
</tr>
<tr>
<td>Mechanisms and Outcomes in COVID-19 Associated Anosmia</td>
<td>3/18/21</td>
<td>8:00-8:50</td>
<td>R. Sandeep Datta, MD</td>
</tr>
<tr>
<td>Microvascular Lab</td>
<td>3/18/21</td>
<td>9:00-9:50</td>
<td>Ofer Azoulay, MD</td>
</tr>
<tr>
<td>Rhinoplasty - Post-operative Evaluation and continuity of Care</td>
<td>3/25/21</td>
<td>6:30-7:00</td>
<td>Sydney Butts, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>3/25/21</td>
<td>7:00-7:50</td>
<td>Department</td>
</tr>
<tr>
<td>Surgical Treatment of Facial Nerve Paralysis</td>
<td>3/25/21</td>
<td>8:00-8:50</td>
<td>Ryan Tabtabai, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>3/25/21</td>
<td>9:00-9:50</td>
<td>Department</td>
</tr>
<tr>
<td>ACGME: Medical Knowledge and PBLI</td>
<td>4/1/21</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Pediatric Vocal Cord Paralysis</td>
<td>4/1/21</td>
<td>7:00-7:50</td>
<td>Ann Plum, MD</td>
</tr>
<tr>
<td>FLEX/Jeopardy - Benign Laryngeal Pathology</td>
<td>4/1/21</td>
<td>8:00-8:50</td>
<td>Prayag Patel, MD</td>
</tr>
<tr>
<td>Facial Nerve Multidisciplinary Meeting</td>
<td>4/1/21</td>
<td>9:00-9:50</td>
<td>Ofer Azoulay, MD</td>
</tr>
<tr>
<td>Laryngeal Cases: from the OR Set Up to Operative Reports</td>
<td>4/8/21</td>
<td>6:30-7:00</td>
<td>Sara Abu Ghanem, MD</td>
</tr>
<tr>
<td>Current an Innovative Approaches to Aspiration Prevention in Adults</td>
<td>4/8/21</td>
<td>7:00-7:50</td>
<td>Anais Rameau, MD</td>
</tr>
<tr>
<td>Journal Club</td>
<td>4/8/21</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>4/8/21</td>
<td>9:00-9:50</td>
<td>Department</td>
</tr>
<tr>
<td>Laryngology: Imaging and Case Review</td>
<td>4/15/21</td>
<td>6:30-7:00</td>
<td>Boris Bentsianov, MD</td>
</tr>
<tr>
<td>Faculty Meeting</td>
<td>4/15/21</td>
<td>7:00-9:00</td>
<td>Department</td>
</tr>
<tr>
<td>Research Grid Review</td>
<td>4/22/21</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>4/22/21</td>
<td>7:00-7:50</td>
<td>Department</td>
</tr>
<tr>
<td>Laryngopharyngeal Reflux Management</td>
<td>4/22/21</td>
<td>8:00-8:50</td>
<td>Jennifer Liang, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>4/22/21</td>
<td>9:00-9:50</td>
<td>Department</td>
</tr>
<tr>
<td>Evaluation and Management of Esophageal Strictures</td>
<td>4/29/21</td>
<td>6:30-7:00</td>
<td>Ankit Kansal, MD</td>
</tr>
<tr>
<td>Introduction to Voice Therapy: from ENT Diagnosis to Therapy</td>
<td>4/29/21</td>
<td>7:00-7:50</td>
<td>Shirley Gherson, MS</td>
</tr>
<tr>
<td>Microvascular Lab</td>
<td>4/29/21</td>
<td>8:00-8:50</td>
<td>Ofer Azoulay, MD</td>
</tr>
<tr>
<td>Professionalism/Interpersonal and Communication Skills</td>
<td>5/6/21</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Update on HPV-mediated Oropharynx Cancer</td>
<td>5/6/21</td>
<td>7:00-7:50</td>
<td>Victor Lagmay, MD</td>
</tr>
<tr>
<td>Rhinology Imaging and Case Review</td>
<td>5/6/21</td>
<td>8:00-8:50</td>
<td>Marina Boruk, MD</td>
</tr>
<tr>
<td>COCLIA/Jeopardy Skull Base and Paranasal Sinus Neoplasms</td>
<td>5/6/21</td>
<td>9:00-9:50</td>
<td>All Residents</td>
</tr>
<tr>
<td>Resident Review: Salivary Gland Anatomy and Physiology</td>
<td>5/13/21</td>
<td>6:30-7:00</td>
<td>Gady Har-El, MD</td>
</tr>
<tr>
<td>Event</td>
<td>Date</td>
<td>Time</td>
<td>Speaker</td>
</tr>
<tr>
<td>------------------------------------------------------</td>
<td>--------</td>
<td>----------</td>
<td>-----------------------</td>
</tr>
<tr>
<td>Updates on the Role of HPV in H&amp;N Cancer</td>
<td>5/13/21</td>
<td>7:00-7:50</td>
<td>Carol Fakhry, MD</td>
</tr>
<tr>
<td>Journal Club</td>
<td>5/13/21</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>5/13/21</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>Head and Neck Cancer Cases: Review of Clinical Staging</td>
<td>5/20/21</td>
<td>6:30-7:00</td>
<td>Rachel Irizarry, MD</td>
</tr>
<tr>
<td>Keeping the Airway Safe: A System-wide Approach to Airway Management</td>
<td>5/20/21</td>
<td>7:00-7:50</td>
<td>Minka Schofield, MD</td>
</tr>
<tr>
<td>Head and Neck Imaging Review</td>
<td>5/20/21</td>
<td>8:00-8:50</td>
<td>Deborah Reede, MD</td>
</tr>
<tr>
<td>Facial Nerve Multidisciplinary Meeting</td>
<td>5/20/21</td>
<td>9:00-9:50</td>
<td>Ofer Azoulay, MD</td>
</tr>
<tr>
<td>Core Clinical: Post-op Laryngectomy Care</td>
<td>5/27/21</td>
<td>6:30-7:00</td>
<td>Sam Schild, MD</td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>5/27/21</td>
<td>7:00-7:50</td>
<td>Department</td>
</tr>
<tr>
<td>Differential and Diagnosis of Parapharyngeal Space Tumors</td>
<td>5/27/21</td>
<td>8:00-8:50</td>
<td>Hunter Hopkins, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>5/27/21</td>
<td>9:00-9:50</td>
<td></td>
</tr>
<tr>
<td>ACGME: Systems Based Practice</td>
<td>6/3/21</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
</tr>
<tr>
<td>Surgical Management of Head and Neck Melanoma</td>
<td>6/3/21</td>
<td>7:00-7:50</td>
<td>Dennis Kraus, MD</td>
</tr>
<tr>
<td>Sentinel Node Biopsy for T1/T2 NO Squamous Cell Carcinoma of the Oral Cavity: State of the Art or Still Controversial?</td>
<td>6/3/21</td>
<td>8:00-8:50</td>
<td>Francisco Civantos, MD</td>
</tr>
<tr>
<td>Annual Frank E. Lucente Alumni and Resident Research Day</td>
<td>6/10/21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient Handoffs/IPASS</td>
<td>6/17/21</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
</tr>
<tr>
<td>Parathyroid Disease</td>
<td>6/17/21</td>
<td>7:00-7:50</td>
<td>N. Chernichenko, MD</td>
</tr>
<tr>
<td>Differential and Diagnosis of Parapharyngeal Space Masses</td>
<td>6/17/21</td>
<td>8:00-8:50</td>
<td>Hunter Hopkins, MD</td>
</tr>
<tr>
<td>Medical Student Presentations</td>
<td>6/24/21</td>
<td>6:30-7:00</td>
<td></td>
</tr>
<tr>
<td>Quality Improvement Conference</td>
<td>6/24/21</td>
<td>7:00-7:50</td>
<td>Department</td>
</tr>
<tr>
<td>Surgical Approaches to the Infratemporal Fossa</td>
<td>6/24/21</td>
<td>8:00-8:50</td>
<td>Rahul Gulati, MD</td>
</tr>
<tr>
<td>Multidisciplinary Head and Neck Tumor Board</td>
<td>6/24/21</td>
<td>9:00-9:50</td>
<td></td>
</tr>
</tbody>
</table>
OTOLARYNGOLOGY RESIDENTS

Fifth 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

Fourth 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 Jersey 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

Third Year Otolaryngology

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

Jennifer Liang, MD
College: University of Pennsylvania - 2012
Medical School: Boston University School of Medicine – 2019
Internship: SUNY Downstate Health Sciences University – 2019

Fasil Mathews, MD
College: University of Pittsburgh - 2015
Medical School: University of Pittsburgh School of Medicine – 2019
Internship: SUNY Downstate Health Sciences University – 2019

Second Year Otolaryngology

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
Incoming Residents
(starting July 1, 2021)

Matthew Adams, MD
College: Pennsylvania State University - 2016
Medical School: Geisinger Commonwealth School of Medicine - 2021
Internship: SUNY – Health Science Center at Brooklyn – 2021

Hailey Juszczak, MD
College: Stanford University - 2015
Medical School: University of California, San Francisco, School of Medicine - 2021
Internship: SUNY – Health Science Center at Brooklyn – 2021

Billy Yang, MD
College: Cornell University - 2015
Medical School: SUNY – Health Sciences Center at Brooklyn, College of Medicine - 2021
Internship: SUNY – Health Science Center at Brooklyn – 2021

Graduating Residents

Rachel Irizarry, MD

Prayag Patel, MD

Alisa Timashpolsky, MD
ANNUAL DEPARTMENTAL PHOTOGRAPHS

Front Row (L to R): Alisa Timashpolsky, MD, Graduating Resident; Rachel Irizarry, MD, Graduating Resident; Nira Goldstein, MD, Faculty; Richard Rosenfeld, MD, Distinguished Professor and Chairman; Natalya Chernichenko, MD, Faculty; Marina Boruk, MD, Faculty

2nd Row (L to R): Sydney Butts, MD, Faculty; James Alrassi, MD, Resident; Jennifer Liang, MD, Resident; Prayag Patel, MD, Graduating Resident; Ankit Kansal, MD, Resident; Alexander Graf, MD, Resident; Sara Abu Ghanem, MD, Faculty

3rd Row (L to R): Krishnamurthi Sundaram, MD, Faculty; Fasil Mathews, MD, Resident; Hunter Hopkins, MD, Resident; Michael Weber, MD, Resident; Sean Mooney, MD, Resident; Sam Schild, MD, Resident

4th Row (L to R): Boris Bentsianov, MD, Faculty; Rahul Gulati, MD, Resident; Matthew Hanson, MD, Faculty; Michael Weiss, MD, Richard Kollmar, PhD, Faculty; Ofer Azoulay, MD, Faculty

(L to R): Nira Goldstein, MD, Faculty; Rachel Irizarry, MD, Graduating Resident; Richard Rosenfeld, MD, Distinguished Professor and Chairman; Alisa Timashpolsky, MD, Graduating Resident; Prayag Patel, MD, Graduating Resident
(L to R): Rachel Irizarry, MD, Graduating Resident; Prayag Patel, MD, Graduating Resident; Alisa Timashpolsky, MD, Graduating Resident

Front Row (L to R): Jennifer Liang, MD, Resident; Alisa Timashpolsky, MD, Graduating Resident; Rachel Irizarry, MD, Graduating Resident; Prayag Patel, MD, Graduating Resident

2nd Row (L to R): Sam Schild, MD, Resident; Michael Weber, MD, Resident; Ankit Kansal, MD, Resident

3rd Row (L to R): Fasil Mathews, MD, Resident; Hunter Hopkins, MD, Resident; Sean Mooney, MD, Resident; Alexander Graf, MD, Resident

4th Row (L to R): Rahul Gulati, MD, Resident; James Alrassi, MD, Resident

Fun shot for the residents
### DEPARTMENT OF OTOLARYNGOLOGY
#### RESIDENT ROTATION SCHEDULE
##### ACADEMIC YEAR 2021-2022

<table>
<thead>
<tr>
<th>Month</th>
<th>KCCHC/SUNY</th>
<th>LENOX HILL /MEETH</th>
<th>AMBUL. CARE</th>
<th>RESEARCH*</th>
<th>MAIMO</th>
<th>NYPBM</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>TABBABAI</td>
<td>GULATI</td>
<td>SCHILD</td>
<td>TOMINAGA</td>
<td>WEBER</td>
<td>KANSAL</td>
</tr>
<tr>
<td></td>
<td>HOPKINS</td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td>MATHEWS</td>
</tr>
<tr>
<td></td>
<td>LIANG</td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td>ALRASSI</td>
</tr>
<tr>
<td>August</td>
<td>TABBABAI</td>
<td>GULATI</td>
<td>SCHILD</td>
<td>TOMINAGA</td>
<td>WEBER</td>
<td>KANSAL</td>
</tr>
<tr>
<td></td>
<td>HOPKINS</td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td>MATHEWS</td>
</tr>
<tr>
<td></td>
<td>LIANG</td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td>ALRASSI</td>
</tr>
<tr>
<td>September</td>
<td>TABBABAI</td>
<td>GULATI</td>
<td>SCHILD</td>
<td>TOMINAGA</td>
<td>WEBER</td>
<td>KANSAL</td>
</tr>
<tr>
<td></td>
<td>HOPKINS</td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td>MATHEWS</td>
</tr>
<tr>
<td></td>
<td>LIANG</td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td>ALRASSI</td>
</tr>
<tr>
<td>October</td>
<td>TABBABAI</td>
<td>GULATI</td>
<td>SCHILD</td>
<td>TOMINAGA</td>
<td>WEBER</td>
<td>KANSAL</td>
</tr>
<tr>
<td></td>
<td>HOPKINS</td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td>MATHEWS</td>
</tr>
<tr>
<td></td>
<td>LIANG</td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td>ALRASSI</td>
</tr>
<tr>
<td>November</td>
<td>KANSAL</td>
<td>HOPKINS</td>
<td>TABTABAI</td>
<td>LIANG</td>
<td>GULATI</td>
<td>SCHILD</td>
</tr>
<tr>
<td></td>
<td>WEBER</td>
<td>ALRASSI</td>
<td></td>
<td></td>
<td></td>
<td>TOMINAGA</td>
</tr>
<tr>
<td></td>
<td>MATHEWS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>December</td>
<td>KANSAL</td>
<td>HOPKINS</td>
<td>TABTABAI</td>
<td>LIANG</td>
<td>GULATI</td>
<td>SCHILD</td>
</tr>
<tr>
<td></td>
<td>WEBER</td>
<td>ALRASSI</td>
<td></td>
<td></td>
<td></td>
<td>TOMINAGA</td>
</tr>
<tr>
<td></td>
<td>MATHEWS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

---

### DEPARTMENT OF OTOLARYNGOLOGY
#### RESIDENT ROTATION SCHEDULE
##### ACADEMIC YEAR 2021-2022

<table>
<thead>
<tr>
<th>Month</th>
<th>KCCHC/SUNY</th>
<th>LENOX HILL /MEETH</th>
<th>AMBUL. CARE</th>
<th>RESEARCH*</th>
<th>MAIMO</th>
<th>NYPBM</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>KANSAL</td>
<td>HOPKINS</td>
<td>TABTABAI</td>
<td>LIANG</td>
<td>GULATI</td>
<td>SCHILD</td>
</tr>
<tr>
<td></td>
<td>WEBER</td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td>TOMINAGA</td>
</tr>
<tr>
<td></td>
<td>MATHEWS</td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td>ALRASSI</td>
</tr>
<tr>
<td>February</td>
<td>KANSAL</td>
<td>HOPKINS</td>
<td>TABTABAI</td>
<td>LIANG</td>
<td>GULATI</td>
<td>SCHILD</td>
</tr>
<tr>
<td></td>
<td>WEBER</td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td>TOMINAGA</td>
</tr>
<tr>
<td></td>
<td>MATHEWS</td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td>ALRASSI</td>
</tr>
<tr>
<td>March</td>
<td>SCHILD</td>
<td>WEBER</td>
<td>KANSAL</td>
<td>MATHEWS</td>
<td>HOPKINS</td>
<td>TABTABAI</td>
</tr>
<tr>
<td></td>
<td>GULATI</td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td>LIANG</td>
</tr>
<tr>
<td></td>
<td>TOMINAGA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>ALRASSI</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>April</td>
<td>SCHILD</td>
<td>WEBER</td>
<td>KANSAL</td>
<td>MATHEWS</td>
<td>HOPKINS</td>
<td>TABTABAI</td>
</tr>
<tr>
<td></td>
<td>GULATI</td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td>LIANG</td>
</tr>
<tr>
<td></td>
<td>TOMINAGA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>ALRASSI</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>May</td>
<td>SCHILD</td>
<td>WEBER</td>
<td>KANSAL</td>
<td>MATHEWS</td>
<td>HOPKINS</td>
<td>TABTABAI</td>
</tr>
<tr>
<td></td>
<td>GULATI</td>
<td>ALRASSI</td>
<td></td>
<td></td>
<td></td>
<td>LIANG</td>
</tr>
<tr>
<td></td>
<td>TOMINAGA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>June</td>
<td>SCHILD</td>
<td>WEBER</td>
<td>KANSAL</td>
<td>MATHEWS</td>
<td>HOPKINS</td>
<td>TABTABAI</td>
</tr>
<tr>
<td></td>
<td>GULATI</td>
<td>ALRASSI</td>
<td></td>
<td></td>
<td></td>
<td>LIANG</td>
</tr>
<tr>
<td></td>
<td>TOMINAGA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MOONEY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>GRAF</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Resident Rotation Schedule

#### Academic Year 2021-2022

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Matthew Adams</strong></td>
<td>Neurosurg</td>
<td>Neurosurg</td>
<td>ENT-KCHC/UHB</td>
<td>ENT-KCHC/UHB</td>
<td>SICU</td>
<td>SICU</td>
<td>Peds</td>
<td>Peds</td>
<td>ENT-Maimo</td>
<td>ENT-Maimo</td>
</tr>
</tbody>
</table>

| **Billy Yang** | SICU | SICU | ENT-Maimo | ENT-Maimo | ENT-Maimo | ENT-Maimo | SICU | SICU | Peds | Peds |
| **Hailey Juszczak** | OMFS | OMFS | SICU | SICU | SICU | Peds | Peds | ENT-Maimo | ENT-Maimo | ENT-Maimo |
| **Matthew Adams** | ENT-Maimo | ENT-Maimo | Vacation | Vacation | OMFS | OMFS | KCHC-GenSurg | KCHC-GenSurg | Anesthesia | Anesthesia |

| **Billy Yang** | ENT-UHB/KCHC | ENT-UHB/KCHC | Vacation | Vacation | ENT-Maimo | ENT-Maimo |
| **Hailey Juszczak** | Anesthesia | Anesthesia | ENT-UHB/KCHC | ENT-UHB/KCHC | Vacation | Vacation |
| **Matthew Adams** | ENT-Maimo | ENT-Maimo | ENT-Maimo | ENT-Maimo | ENT-KCHC/UHB | ENT-KCHC/UHB |
RESIDENCY EXPERIENCE

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 Department of 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.
TYPICAL SURGICAL PROCEDURES PERFORMED DURING PGY-2

- Closed Reduction Nasal Fracture
- Intransal 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
- Laryngoscopy with Excision
- Reduction Facial Fractures
- Mandibular Fracture Reduction – Closed
- Adenoidectomy
- Tonsillectomy
- T & A

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 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, Nasalveolar)
- Tymanoplasty – 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, T1 Closure
- Local Excision Cancer Mouth
- Incision & Drainage Neck Abscess
- Cervical Lymph Node Biopsy
- Repair Complex Facial Lacerations
- 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, sphenothmoidectomy, 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.
TYPICAL SURGICAL PROCEDURES PERFORMED DURING PGY-4

- Canaloplasty
- Tympanoplasty I-IV (without Mastoidectomy)
- Modified Radical Mastoidectomy
- Simple Mastoidectomy
- Transnasal approach to the sella
- Closure of Pharyngostome
- Transantral Ligation of Vessels
- Oraanatal Fistula Repair
- Choanal Atresia Repair
- Uvulopalatopharyngoplasty
- Excision of Simple Tumor of Nose
- Cricopharyngeal Myotomy
- Tissue Expander, placement and management
- Lingual Tonsillectomy
- Pedicle Flap Procedures-Mycutaneous
- 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
- 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

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 Bayview, 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, parapharyngealctomy, temporal bone resection, mediastinal resection, craniocerebral 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.
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
- Transternal 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
- 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
- Endolymphatic Sac Operation
- Labyrinthectomy
- Resection Cerebellopontine Angle Tumor

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 regional meetings.
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:  Richard Rosenfeld
• Kings County Hospital Center:  Matthew Hanson
• Maimonides Medical Center:  Michael Weiss
• NY Presbyterian Brooklyn Methodist Hospital:  N. Chernichenko
• Lenox Hill/ MEETH:   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

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

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

Research Expectations
All residents in the PGY-2 through PGY-5 years are expected to present a research project at the annual Frank E. Lucente Resident and Alumni Research Day in June.

Research projects may consist of (a) case series and chart reviews, (b) systematic reviews or meta-analyses of the literature, (c) planned observational research, (d) survey research or projects, or (e) experimental research (basic science or clinical trials).

A resident should be able to identify an area of study and specific questions to be addressed. The resident should be able to develop an investigative plan in the form of a research protocol, which will address the questions to be answered (i.e. retrospective vs. prospective) and explain their limitations. One should be able to design and implement a study. One should also be able to critique study design, methodology, statistical analysis and interpretations in both their own work as well as journal publications.
Residents are expected to work independently. Faculty members are available as advisors to provide guidance and direction. A research template must be completed six months prior to the start of the research rotation for review by the faculty mentor and research faculty.

**Designated Research Time**

Four months of protected research time is available to all residents during the PGY-3 year of otolaryngology training. Research is part of the ACGME core competency on practice-based learning and improvement (PBLI). Please refer to the “Goals and Objectives” document for a description of research expectations in the PGY-3 year under the PBLI subheading.

Research may be basic science or clinical. Work may be performed in any department as long as the work is done in one of the approved institutions and a member of the full time Otolaryngology faculty must be one of the research advisors.

Residents are encouraged to develop projects that can be completed during the allotted research time. Cost factors are also important in determining whether a protocol is approved.

**Undesignated Research Time**

All residents are expected to take advantage of the large clinical volume available to them. A clinical issue to study prospectively should be identified during the first three years of training. With the assistance of an otolaryngology faculty member, a protocol is then written and submitted to the Otolaryngology research committee for approval. Subsequent approval by the institution research review board may also be required. After approval of a protocol, the study should be performed without interfering with other clinical responsibilities.

A retrospective study using the clinical material available at any or all affiliated institutions should also be performed during the regular clinical assignments. Again, a protocol should be written and approved by the research committee prior to incurring any expense.
### Key Indicator Cases for June 2021 Graduating Chief Residents

Final Case Log Report with Comparison to RRC Minimum Required

Department of Otolaryngology, SUNY Downstate Health Sciences University

<table>
<thead>
<tr>
<th>RRC Key Indicator Case</th>
<th>RRC Minimum Required</th>
<th>Total* Resident Supervisor</th>
<th>Total* Resident Surgeon</th>
<th>Mean** Supervisor or Surgeon</th>
<th>Comparison to RRC Minimum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head and Neck</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parotidectomy</td>
<td>15</td>
<td>1</td>
<td>79</td>
<td>27</td>
<td>+12 (180%)</td>
</tr>
<tr>
<td>Neck dissection (all types)</td>
<td>27</td>
<td>3</td>
<td>138</td>
<td>47</td>
<td>+20 (174%)</td>
</tr>
<tr>
<td>Glossectomy</td>
<td>10</td>
<td>0</td>
<td>61</td>
<td>20</td>
<td>+10 (200%)</td>
</tr>
<tr>
<td>Thyroid/parathyroidectomy</td>
<td>22</td>
<td>4</td>
<td>218</td>
<td>74</td>
<td>+52 (336%)</td>
</tr>
<tr>
<td>Otology/Audiology</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tympanoplasty (all types)</td>
<td>17</td>
<td>1</td>
<td>112</td>
<td>38</td>
<td>+18 (206%)</td>
</tr>
<tr>
<td>Mastoidectomy (all types)</td>
<td>15</td>
<td>3</td>
<td>92</td>
<td>32</td>
<td>+17 (213%)</td>
</tr>
<tr>
<td>Ossicular chain surgery</td>
<td>10</td>
<td>1</td>
<td>39</td>
<td>13</td>
<td>+3 (130%)</td>
</tr>
<tr>
<td>Facial Plastic Reconstructive</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rhinoplasty (all types)</td>
<td>8</td>
<td>0</td>
<td>53</td>
<td>18</td>
<td>+10 (225%)</td>
</tr>
<tr>
<td>Mandible/midface fractures</td>
<td>12</td>
<td>0</td>
<td>71</td>
<td>24</td>
<td>+12 (200%)</td>
</tr>
<tr>
<td>Flaps and Grafts</td>
<td>20</td>
<td>1</td>
<td>213</td>
<td>71</td>
<td>+51 (355%)</td>
</tr>
<tr>
<td>General/Pediatric</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Airway – pediatric and adult</td>
<td>20</td>
<td>14</td>
<td>187</td>
<td>67</td>
<td>+47 (335%)</td>
</tr>
<tr>
<td>Congenital neck masses</td>
<td>7</td>
<td>3</td>
<td>53</td>
<td>19</td>
<td>+12 (271%)</td>
</tr>
<tr>
<td>Sinus surgery</td>
<td>40</td>
<td>4</td>
<td>156</td>
<td>53</td>
<td>+13 (133%)</td>
</tr>
<tr>
<td>Bronchoscopy</td>
<td>22</td>
<td>9</td>
<td>115</td>
<td>41</td>
<td>+13 (186%)</td>
</tr>
</tbody>
</table>

*Total cases for all 3 graduating chief residents combined

**Mean cases per graduating chief resident
SERVICE CHIEF REPORTS

Division of Pediatric Otolaryngology
Ann Plum, MD

The Division of Pediatric Otolaryngology, now in its 29th year, has continued to achieve excellence in patient care, teaching, and research during the 2020-2021 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. 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 expansion of the multidisciplinary Aerodigestive Clinic during its third year.

Academic pursuits remain a strong priority as the Division continues to enhance its national reputation. Richard Rosenfeld, MD, MPH, MBA 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 continued to be active with clinical research within the Department and with the Young Physicians Section of the American Academy of Otolaryngology. Research is regularly presented at national meetings. In addition, all faculty continue to be extremely active 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

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 Otolaryngology

Matthew B. Hanson, MD

The Division of Otolaryngology 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 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. Otolaryngology 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 Division of Otolaryngology continues to show growth and an improved learning experience for our residents. Dr Hanson continues to have a burgeoning practice in all types of ear cases at UHB, Bay Ridge and Kings County. Dr. Preis has continued to bring state-of-the-art otology to Maimi and continues to present at national meeting in the area of endoscopic ear surgery. Our affiliation with Lenox Hill/MEETH has made an enormous number of ear cases available to our residents, as well as the opportunity to work with several national leaders in the field, such as Darius Kohan, Neil Sperling, Soha Ghoossani and Neil Sperling.

The coming year is expected to have a lot of activity in Otolaryngology at Downstate. The Temporal Bone lab is completed and open! The first courses will be taught there in July and with the opportunity for 24-hour access, the residents will have opportunity for independent drilling and study. We also plan to acquire a equipment for a Virtual TB dissection work station to supplement cadaveric dissections. The lab is also being used for instruction in microvascular surgery and soft tissue surgery, with plans for even more as time goes on.

We also anticipate a continued increase in our cochlear implant program. Under the audiologic leadership of Dr. Megan Wehner, we have passed over one hundred implantations at UHB and we continue to be the only active Cochlear Implantation Program in Brooklyn. Our affiliations with The Auditory Oral School of New York continues to benefit our program by the provision of full services for our pediatric implant patients. This year we will also be able to begin doing implants at Kings County Hospital. Dr. Veronica Barnwell, the Director of Audiology at County has long participated in our program, but now we will be able to implant our County patients at County.

Division of Head and Neck Surgery and Oncology

Krishnamurthi Sundaram, 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. 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,
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.

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 laryngology instruments and procedures. The clinic allows all patients access to the highest level 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.

The Division has also become more active in the operating room setting, including new microlaryngologic instruments to facilitate microsurgical vocal cord surgery and new laser technology allowing us to expand our endoscopic options. This improved precision and reliability allows us to perform less invasive procedures with shorter recovery times and improved results.

Contributing to education of medical students at SUNY Downstate medical center continues to be a core mission within the Division of Laryngology. We are active in the basic science years with supervision in the anatomy labs and preparation for clinical medicine curriculum. As students progress through their clinical years they can participate in our office hours and surgical block-time in either a 2 week surgical rotation or more advanced 4 week sub-internship designed to prepare students for a possible career in otolaryngology.

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.
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

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

Saleh Saleh, AuD, CCC-A  Director of Audiology, responsible for training audiology residents. Saleh graduated from the University of Florida January 2010 with an AuD in Audiology. Special interests include: electrophysiological testing, dizziness evaluation, tinnitus evaluation and amplification.

Malorie Wagman, AuD, CCC-A New York State Licensed Audiologist and Hearing Aid Dispenser. She earned her Bachelor of Science degree in Communication Sciences and Disorders from the University of Wisconsin- Madison. She then attended the University of Illinois at Urbana- Champaign, where she graduated with a Doctorate in Audiology (AuD). Her clinical specialties include pediatric and adult diagnostic testing, vestibular assessment, as well as auditory brainstem response testing for the infant to adult populations. She has experience in the realm of hearing aid fitting and programming, as well as with BAHAs and other implantable devices.

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 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 within the US. We hold extensive interviews annually where we selected exceptional audiology residents. We currently have 7 students.

**SUNY Downstate Health Sciences University**

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 student interns. 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.
RESEARCH REPORT

In the year 2020-2021, 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. Drs. Boruk and Rosenfeld, 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. Drs. Azoulay, Kollmar, Alrassi and Tominaga are starting work studying facial reanimation in a rat model.

Drs. Boruk and Rosenfeld, 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. Drs. Azoulay, Kollmar, Alrassi and Tominaga are starting work studying facial reanimation in a rat model.

Dr. Rosenfeld continued his work with the AAO-HNS, developing clinical practice guidelines on opioid prescribing in otolaryngology, drug-induced sleep endoscopy and an update for the guideline on tympanostomy tubes. He also developed an expert consensus statement on diet as a primary intervention for remission of type 2 diabetes for the American College of Lifestyle Medicine. Drs. Gulati, Irizarry, Chernichenko and Goldstein are conducting a quality improvement project focusing on nutritional assessment of head and neck cancer patients at Kings County Hospital. Drs. Abu-Ghanem and Graf are investigating the diagnostic criteria for sarcopenic dysphagia. Drs. Boruk, Tabtabai and Schild are studying anosmia in COVID-19 patients.

Dr. Irizarry presented Risk assessment in major head and neck oncologic surgery and Dr. Tabtabai presented Analysis of Olfactory Dysfunction During the COVID-19 Pandemic: Long Term Prevalence and Disease Severity at the 15th Annual Virtual NYC Metropolitan Resident Research Day Symposium.

Notable publications include Dr. Stewart’s, Sundaram’s and Kollmar’s Causes and Effects Contributing to Sudden Death in Epilepsy and the Rationale for Prevention and Intervention in Frontiers in Neurology; Dr. Boruk’s and Rosenfeld’s Elevated S100A9 expression in chronic rhinosinusitis coincides with elevated MMP production and proliferation in vitro in Scientific Reports; Dr. Rosenfeld’s Clinical practice guidelines: opioid prescribing for analgesia after common otolaryngology operations and Expert consensus statement: pediatric drug-induced sleep endoscopy in Otolaryngology Head and Neck Surgery; Dr. Rosenfeld’s and David Zakay’s (MS 4) Choices in deaf education and cochlear implantation: suggesting a more inclusive approach in the International Journal of Pediatric Otorhinolaryngology; and Dr. Schild’s, Timashpolsky’s, Ballard’s, Horne’s, Rosenfeld’s and Plum’s Surgical management of sialorrhea: a systematic review and meta-analysis in Otolaryngology -Head and Neck Surgery.

ONGOING RESEARCH PROJECTS

Faculty Research Projects:

Richard M. Rosenfeld, MD, MPH, MBA
1. History of the tonsil riots in New York City
2. AAO-HNS clinical practice guideline on opioid prescribing in otolaryngology
3. AAO-HNS clinical consensus statement on drug-induced sleep endoscopy (DICE)
4. AAO-HNS clinical practice guideline on tympanostomy tubes, update
5. American College of Lifestyle Medicine, expert consensus statement on diet as a primary intervention for remission of type 2 diabetes in adults
6. Multiple ongoing projects assisting otolaryngology residents with research design, systematic review, and data analysis

Sarah Abu-Ghanem, MD
1. Sarcopenic dysphagia: Proposal of diagnostic criteria and investigation diagnostic instrument (prospective study)
2. Disparities in dysphagia management in H&N Cancer patients
3. Assessment of Swallowing Function in Healthy Adults While Using High-Flow Nasal Cannula (prospective study)
4. A simple protocol and assessment tool for aspiration prevention and dysphagia screening in hospitalized adult patients (prospective study)
5. A novel approach to subglottic stenosis dilation in severely obese patients- (retrospective case series)
6. The use of oxygen blender in jet ventilation transoral microsurgery – a novel approach (retrospective case series)

Dr. Rosenfeld presented Risk assessment in major head and neck oncologic surgery and Dr. Tabtabai presented Analysis of Olfactory Dysfunction During the COVID-19 Pandemic: Long Term Prevalence and Disease Severity at the 15th Annual Virtual NYC Metropolitan Resident Research Day Symposium.
Ofer Azoulay, MD
1. Post-operative level of Care Following Microvascular Free Flap Reconstruction of the Head and neck: A systematic Review and Meta-analysis.
3. Outcomes of Hypoglossal Nerve Stimulation Devise (Inspire) for obstructive sleep apnea.
4. Co-founder of a basic science animal lab at SUNY Downstate Health Science University focused on investigating facial reanimation in rats.

Boris Bentsianov, MD
1. Patient voice outcomes in Reinkes edema. A comparison of Cold knife excision to microdebrider.

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. REDCap survey: 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
2. Quality improvement of malnourishment assessment of head and neck cancer patients at KCHC

Nira Goldstein, MD, MPH
1. Impact of adenotonsillectomy on homework performance in children with obstructive sleep apnea
2. Postoperative Respiratory Complications in Children with Obstructive Sleep Apnea after Adenotonsillectomy
3. Free-flap salvage management
4. Randomized Controlled Trial of Valganciclovir for Cytomegalovirus Infected Hearing Impaired Infants (ValEAR Trial)
5. Impact of tonsillectomy and adenoidectomy on seizure control in children with comorbid obstructive sleep apnea and seizure disorder
6. Nutritional Status in Head and Neck Cancer Patients
7. Neonatal hearing screening outcomes in infants that initially refer testing

Matthew Hanson, MD
1. Cholesteatoma and chronic ear surgery

Richard Kollmar, PhD
1. Neurobiology of the fruit bat: The Claustrum in Carollia perspicillata
2. Seizure-induced laryngospasm during seizures
3. Facial-Nerve Reanimation in the Rat

Ann Plum, MD
1. Neonatal Oral Verrucous Xanthoma: A case report and review of the literature. Presented at research day and manuscript currently being submitted.
2. Level of Evidence for Studies Published in a high Impact Otolaryngology Journal over the last 15 years. Preliminary results presented at research day, in data collection phase.
3. Surgical Management of Subglottic Hemangiomas: A Systematic Review. Presented at research day and manuscript currently being written.
5. Impact of tonsillectomy and adenoidectomy on seizure control in children with comorbid obstructive sleep apnea and seizure disorder. Presented at national meeting and manuscript being prepared.

Michal Preis, MD
1. Tracheostomy in COVID patients
2. Tympanostomy tube surgery trends during the COVID pandemic
3. Otoendoscopy in the office and patient satisfaction.

Abraham Shulman, MD
1. Otology Imaging and Case review Covid Anosmia
2. Mechanisms and outcomes in COVID-19 associated anosmia

Krishnamurthi Sundaram, MD
1. SUDEP
2. PETCT in HPV SCC
3. Systematic review of flaps
4. Systematic review of SOM and nasopharyngeal cancer

Michael Weiss, MD
1. Analysis of thyroid prognostic studies.

Christopher de Souza, DORL, MS, DNB, FACS(USA), FRCS (England)
1. The end point of treatment of skull base osteomyelitis

Resident Research Projects
James Alrassi, MD
1. Tonsil Riots & Vaccine Hesitancy: A 100 Year Legacy of Medical Mistrust
2. Comparing patient demographics with clinical outcomes following facial nerve palsy treatment: a prospective study
3. Facial-Nerve Reanimation in the Rat

Alexander Graf, MD
1. Sarcopenic Dysphagia: Investigation of diagnostic instruments and proposal of diagnostic criteria
2. Assessment of Swallowing Function in Healthy Adults While Using High-Flow Nasal Cannula

Rahul Gulati, MD
1. Postoperative Level of Care Following Microvascular Free Flap Reconstruction of the Head and Neck: A Systematic Review and Meta-analysis
2. Fractures of the Mandibular Condyle
3. Surgical Techniques in Laryngeal Papillomatosis: A Systematic Review and Meta-analysis
5. Nutritional Status in Head and Neck Cancer
6. Synchronous Laryngeal Squamous Cell Carcinoma and Small-Cell Carcinoma of the Lung: A Case Report and Review of Literature
7. 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

Hunter Hopkins, MD
1. Defining the middle turbinate on a cellular level: a rhinologic application of single-cell transcriptomics.

Rachel Irizarry, MD
1. Risk assessment in major head and neck oncology surgery.
2. Systematic Review and Meta-Analysis of Post-Treatment PET/CT in HPV-Associated Oropharyngeal Cancer
Jennifer Liang, MD
1. Risk assessment in major head and neck oncologic surgery
2. Comparison of outcomes of patients with and without Graves’ disease undergoing total thyroidectomy for non-malignant reasons
3. Trends in Free-Flap Salvage and Management in Otolaryngology Level of Evidence for Studies Published in a High Impact Otolaryngologic Journal Over the Last 15 Years

Ankit Kansal, MD
1. Sudden Unexpected Death in Epilepsy Patients: Research into Airway Obstruction and Outcomes with Various Interventions

Fasil Mathews, MD
1. Post-treatment PET/CT in HPV-Associated Oropharyngeal Cancer.

Sean Mooney, MD
1. Morbidity and mortality of free flaps in patients above the age of 80
2. Mandibular condyle fractures
3. Systematic review of pectoralis flap vs free flap in pharyngeal

Prayag Patel, MD
1. Oral verruciform xanthoma in a neonate
2. Postoperative level of care following microvascular free flap reconstruction of the head and neck: a systematic review and meta-analysis

Sam Schild, MD
1. Ongoing analysis of anosmia during the COVID 19 pandemic in a community in central Brooklyn, NY

Ryan Tabtabai, MD, MPH
1. Analysis of Anosmia during the Covid-19 Pandemic: Long Term Anosmia Rates by Disease Severity

Stephanie Tominaga, MD
1. Subglottic Hemangioma: Systematic Review
2. Facial nerve in a rat model

Alisa Timashpolsky, MD
1. Postoperative respiratory complications after adenotonsillectomy in children with obstructive sleep apnea

Michael Weber, MD
1. Impact of sleep apnea surgery on seizure control in children with comorbid obstructive sleep apnea and epilepsy
2. Systematic review of submandibular gland excision vs submandibular duct rerouting for control of sialorrhea.
ATTENDINGS:

Richard M. Rosenfeld, MD, MPH, MBA
Chairman, SUNY-Downstate
185 Montague St. Office: (718) 780-1282
SUNY Office: (718)270-1638

Sydney Butts, MD
Vice-Chairman, SUNY-Downstate
Office: (718) 270-1638
Pager: (917) 218-2128

Ofer Azoulay, MD
SUNY: (718) 270-1638

Sara Abu Ghanem, MD
Office: (718) 270-1638

Boris Bentsianov, MD
Montague St. Office: (718) 780-1498
(South Bklyn) (718) 996-2260

Marina Boruk, MD
Office: (718) 270-1638

Natalya Chernichenko, MD
Office: (718)270-1638
Pager: (917) 218-1267

Nira Goldstein, MD, MPH
Office: (718) 270-1638
Pager: (917) 219-3283

Matthew Hanson, MD
Office: (718) 270-1638
Pager: (917) 219-1925

Gady Har-El, MD
Office: (212) 744-4368
KCHC: (718) 245-4156
Pager: (917) 923-7909

Jessica Lim, MD
NYC Office: (212) 434-2323
Pager: (917) 760-1750

Ann Plum, MD
SUNY: (718) 270-1638
Pager: (917) 205-1096

Abraham Shulman, MD
Office: (718) 270-3916

Krishnamurthi Sundaram, MD
SUNY Downstate Hospital
Office: (718) 270-1638
Pager: (917) 448-1950

Neil Sperling
NYC Office: (212) 889-8575

Michael Weiss, MD
(Drs. Lagmay, Preis, same office number only)
Office: (718) 283-6260
Pager: (718) 283-7243 #6262

Richard Westreich, MD
Office: 212-595-1922

Francisca Yao, MD
Office: (718) 208-4449

RESEARCH COORD.
Richard Kollmar, PhD
Office: (718) 221-6559

PRACTICE COORDINATOR
Svetlana Lyulko (185 Montague St.) 718-780-1282

ADMINISTRATIVE ASSISTANT
Veronica Ortiz (185 Montague St.) 718-780-1688

ADMINISTRATIVE ASSISTANT
Lystra Cudjoe (450 Clarkson Ave.) 718-270-1638

ADMINISTRATIVE ASSISTANT
Mariam Anjum
Office: (718) 780-3537
Fax: (718) 780-7310

Erik Liu, SUNY
Office: (718) 270-1638
Fax: (718) 270-3924

EDUCATION COORDINATOR
Nicole Fraser
Office: (718) 270-1638
Fax: (718) 270-3924

VOLUNTARY ATTENDINGS
Dr. Adler (718) 236-3900
Dr. Arick (718) 624-0222
Dr. Chaundry (718) 240-6366
Dr. Carney & Ciecko (718) 370-0072
Dr. Dodaro (917) 354-4214
Dr. Finger (718) 692-1515
Dr. M. Habib (718) 780-5125
Dr. R Habib (917) 204-0423
Dr. Scott Harris (516) 482-3223
Drs. Kantu (718) 646-2500
Dr. Palgon (718) 748-5225
Dr. Pearl (718) 622-0505
Dr. Ruffy (718) 625-4230
Dr. Sinnreich (718) 370-0072
Dr. Frank Russo (718) 208-4449
Department of Otolaryngology

HOSPITAL COMMUNICATION LIST

SUNY Downstate Medical Center
Administrative Office
450 Clarkson Avenue, Box 126
Brooklyn, NY 11203
Phone: 718.270.1638
Fax: 718.270.3924
Administrator Erik Liu

Suite H/Patient Office
450 Clarkson Avenue
Brooklyn, NY 11203
Phone: 718.270.4701
Fax: 718.270.1599
Administrative Assistant Bibi Beckles

Patient Office
185 Montague Street
Brooklyn, NY 11201
Phone: 718.780.1282
Fax: 718.780.1488
Practice Coordinator Svetlana Lyulko

Division of Communicative Disorders
185 Montague Street
Brooklyn, NY 11201
Phone: 718.780.1755
Fax: 718.780.4940
Audiology Supervisor Sal Saleh, AuD

Research Training Laboratory
450 Clarkson Avenue
Brooklyn, NY 11203
Phone: 718.221.6559
Fax: 718.270.3732
Director of Basic Science Research Richard Kollmar, PhD

Kings County Hospital Center
451 Clarkson Avenue
Brooklyn, NY 11201
Phone: 718.245.4156
Fax: 718.245.3871
Administrative Assistant Sandra Daley-Clarke

Maimonides Medical Center
4802 10th Avenue
Brooklyn, NY 11219
Phone: 718.283.8432
Fax: 718.283.8261
Office Manager Laura Mujia

New York Methodist Hospital
529 Sixth Street
Brooklyn, NY 11215
Phone: 718.780.3537
Fax: 718.780.731
Administrative Assistant Mariam Anjum