

Quarterly *Report*

AOCO,
AOCO-HNS &
Foundation, Inc.

American Osteopathic Colleges of Ophthalmology and Otolaryngology-Head and Neck Surgery - Winter 2007-2008, Vol. 43 No. 1



The Board of Governors, Committees and Council Members wish you and your family a Happy Holiday and a Healthy and Prosperous New Year!

1st Annual Faculty Development Seminar

The AOCOO-HNS is pleased to offer a 2-day seminar in Orlando, Florida this February 9-10, 2008 to all those interested in furthering their educational skills.

We invite all those involved in training/teaching of osteopathic medical students, interns and ophthalmology and otolaryngology residents.

OTHER TEACHING FACULTY, DME'S AND THEIR FACULTY ARE ENCOURAGED TO ATTEND AS WELL.

Registration Information on Page 11

2007-2008 Officers and Members of the AOCOO-HNS Board of Governors

President: Shoib Myint, DO
President-Elect: Thomas E. Brandeisky, DO
Vice President: Sidney K. Simonian, DO
Secretary-Treasurer: Kirk W. Steehler, DO
Past President: Kenneth H. Rogotzke, DO
Paul E. Burk, DO
Robert J. Franchi, DO
David D. Gossage, DO
Michael S. Hauptert, DO
Jeffrey N. Holtzman, DO
Donald M. Rothen, DO
David G. Short, DO
Brian E. Wind, DO

American Osteopathic College of Ophthalmology

President: Shoib Myint, DO
Vice President: Sidney K. Simonian, DO
Members-at-Large: Robert J. Franchi, DO; Jeffrey N. Holtzman, DO; David D. Gossage, DO; Brian E. Wind, DO; *CRR Representative*: Steven Sherman, DO; *CRF Representative*: Karen A. Alvarez, DO

American Osteopathic College of Otolaryngology-Head and Neck Surgery

President: Thomas E. Brandeisky, DO
Vice President: Kirk W. Steehler, DO
Members-at-Large: Paul E. Burk, DO; Michael S. Hauptert, DO; Donald M. Rothen, DO; Edward D. Scheiner, DO; *CRR Representative*: Mahmoud M. Ghaderi, DO; *CRF Representative*: Charles W. Guy II, DO

Executive Vice President:

Alvin D. Dubin, DO

Staff:

Debra Bailey, Administrative Director
Cynthia Carleton-Simon, Administrative Assistant
Diane Turner, Administrative Assistant

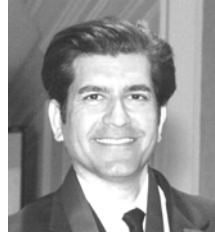
The *AOCOO-HNS Quarterly Report* is published quarterly by the American Osteopathic Colleges of Ophthalmology and Otolaryngology-Head and Neck Surgery, 4764 Fishburg Road, Suite F, Huber Heights, OH 45424, (937) 233-5653 or (800) 455-9404, FAX (937) 233-5673. Send email correspondence to: aocoohns@aol.com. The AOCOO-HNS website is located at: www.aocoohns.org.

Views and opinions expressed in the *AOCOO-HNS Quarterly Report* are not necessarily endorsed by the American Osteopathic Colleges of Ophthalmology and Otolaryngology-Head and Neck Surgery.

Quarterly Report Schedule

SUMMER: copy deadline May 15th
mailing June 15th
FALL: copy deadline August 15th
mailing September 15th
WINTER: copy deadline November 15th
mailing December 15th
SPRING: copy deadline February 15th
mailing March 15th

PRESIDENTS' REPORTS



The Council of Regional Representatives had a very productive conference call. The representatives from both ophthalmology and otolaryngology, along with the chairs from each specialty College, opened a forum for constructive dialogue to improve the functioning of this very important committee.

You as members should be aware of who your representative is in your region so you can voice your suggestions and concerns to the College. This is a very effective means to get your thoughts across to the Board of Governors.

I hope you utilize this for your benefit and for the benefit of the AOCOO-HNS.

Please go to our website, www.aocoohns.org, to view the Council of Regional Representatives composition.

Shoib Myint, DO
248-357-5100
Fax 248-746-0683
Email: smyint@comcast.net

Ophthalmology CRR By Steven Sherman, DO

The Council of Regional Representatives (CRR) was formed as a vehicle for members of the respective Colleges to have a voice in the operation of our organization. The United States has been divided into six regions for both Otolaryngology and Ophthalmology. Each region has a regional representative whose job it is to network with the members of the region and to bring back to the College any communication received. You can easily locate your Regional Rep by visiting our website. There you will find the regions and their Regional Reps listed, as well as their email addresses. Your utilization of this program will allow our Officers to know and act on your desires, ideas or needs. In addition, the Regional Reps also meet at the Annual Clinical Assembly and the Mid-Year Seminar. I strongly encourage all members to attend these meetings. It is a forum for all of us to discuss anything and everything and exchange ideas. The Colleges and you, the members, will only benefit from the input you provide. Therefore, I ask that everyone

utilize this member service and GET INVOLVED.

Otolaryngology CRR By Mahmoud Ghaderi, DO

Any organization without its members is just a skeleton. Our American Osteopathic Colleges of Ophthalmology and Otolaryngology is not an exception to this rule. We as members take pride in the College's accomplishments and can suffer the consequences of a non-functional College. So far, our College has taken many strides in our profession and has created an opportunity for all of us to get to where we are now. However, any intelligent person would not argue the fact that to go forward we need to adapt, adjust, and modify our old ways. As members, we carry the obligation of taking an active role in our College's destiny.

Do you ever wonder about the College's academic future? Are you concerned about the recertification process? Are you getting what you are looking for in annual and mid-year meetings? Do you know how your College's Boards function? Are you in a position to develop a residency program? Do you have local, state or national issues that you feel your College needs to take action on? Is there any socio-economic, political, and/or legal issues that are affecting your practice? Do you want to be involved in the College activities? Do you want to be part of lectures and workshops? Do you want to be part of the CRR team?

If the answer is "YES" to any of the above questions, then you now have a direct way to get responses to your questions. The CRR is designed to establish a bridge between members and College administration. The CRR is of such vital importance to the College that the Spokesperson of the Council sits at the Colleges' Board meetings. This mechanism allows members' concerns and issues to be taken directly to the Board level.

The country is divided into six regions, and each region has a representative to contact. These regions and their reps are published in this issue. Go ahead and contact your regional representatives. If you are unable to contact your representative, please email me at maxghad@yahoo.com.

Council of Residents and Fellows

By Karen Alvarez, DO and Charles Guy, DO, CRF Representatives

The Council of Residents and Fellows (CRF) recently sent out a survey to all the ophthalmology and otolaryngology residents and fellows regarding their residency training, the College and issues that they would like to have addressed. We would like to thank all who participated. If you have not completed the survey, we will still be collecting the information in an attempt to get a feel for the resident's view of the College and their training. The results of the survey are very interesting thus far. Although the results may not be a true cross representation due to limited responses, most residents agree that they are receiving an adequate diversity of cases to be prepared to practice in a general ophthalmology or otolaryngology setting. The most consistent response to the question of your program's strengths was that of a sufficient volume of cases. Most of the responses to the other questions fell into the neutral range. Two aspects that you feel may be areas to improve upon are our didactics and research opportunities. For those that replied that they were interested in becoming more active in the AOCCO-HNS, you will be contacted by one of us in the near future.

This information is useful because it helps us find ways to improve our training and our experience in an osteopathic residency. It is vital that we continue to grow as a College and to improve upon ourselves. As residents, we often are so busy learning the material that we don't look beyond residency or to just after graduation. We are the next generation that will be representing our College, either as a private physician, in academic practice, or as a representative or Board member for the College.

Do you want to be a part of the CRF team? If yes, the Council of Residents and Fellows holds two meetings each year. The next meeting of the CRF will be held during the Annual Meeting in Arizona. We hope that, if you are interested, you'll attend this very important meeting.

Thank you again for your participation.

EXECUTIVE VP REPORT

Alvin D. Dubin, DO



The year 2007 is rapidly coming to a close, the days and weeks come cascading to a new year and bring a feeling of "not enough time left to do all that we had planned to do" in December, 2006. And yet, the year was fruitful, and the chores were many.

Our Colleges were given multiple tasks by the AOA, AAO, AAO-HNS, the US Governmental Agencies, our members, committees, and Board of Governors. By-laws were updated, Basic Documents revised and improved in order to ensure resident training was keeping pace with all requirements.

Our input on reimbursement issues, practice management style, practice guidelines, CME offerings, and quality training for both the ophthalmology and otolaryngology specialties was appreciated by many of the members who contacted us by way of letters and surveys. Program Directors attended our workshops, and the Council of Regional Representatives and Council of Residents and Fellows were supported by our leaders to continue in their efforts to reach out to our membership in order to encourage greater participation by all and to better serve you.

I would like to share with you some of the meetings that we attended during this past year so that we will be able to develop a true sense of both the needs of various organizations as well as those of our own Colleges.

In February, we went to Orlando, Florida to present the mid-winter meeting of the Colleges, Foundation, and the AOBOO as well.

In mid-February, the AOA Board of Trustees mid-year meeting in Chicago afforded the opportunity to better understand the AOA point of view in representing its members with regards to political agenda, reimbursement details, developing greater contact with Congressional members, and exploring our point of view in national health care.

We also attended the Bureau of Specialty Societies meeting in February in Chicago and discussed various areas of concern of the Specialty Colleges. Suggestions were forwarded to the AOA so that these concerns may be reviewed by appropriate committees.

April in Chicago demanded our attendance at the COPT (Committee of

Postdoctoral Training), where policy items of the Specialty Colleges were reviewed, as well as the status of our training programs.

In May, we held the Annual Clinical Assembly of the Colleges in Sarasota, Florida, and the surveys taken at that time indicated approval for most of the events, CME courses, and location of the meeting.

July in Chicago took us to the annual Board of Trustees of the AOA and House of Delegates meetings. Over 400 resolutions were reviewed, discussed, and voted upon. The results were published on the AOA website for review.

In September, we held the mid-year meeting of the Colleges in Detroit, and this was the most successful and well-attended mid-year meeting to date. So successful that the Board of Governors decided to hold the mid-2008 meeting there also. We certainly appreciate the support of the Michigan contingent, as well as others, in such a grand style.

The AAO/HNS meeting in Washington, DC was next on the "agenda," and, for the ENT group, it was a most enlightening meeting for the courses attended, the medical devices demonstrated, and the various seminars given.

San Diego in October hosted the annual AOA meeting, preceded by the Board of Trustees meeting. Educational topics were delivered, followed by the Clinical Assembly. President Myint accompanied me to all of these proceedings.

A second Summit Meeting of OGME, sponsored by the AOA, was held in San Francisco in early November. This meeting was attended by leaders of OME and OGME, both from our profession and other academic centers devoted to medical education, all recognized as experts, from all areas of the country. This meeting was held to gain additional insight into the mechanisms of improving educational delivery to our Colleges of Osteopathic Medicine and to all of our OGME programs.

In November, we met in Dayton, Ohio with the Executive Committee and the Audit Committee. The meetings prepared us for full discussion of many items that will be revisited at our Mid-Winter meetings in Orlando.

The number of required meetings has increased during the past few years. This is no surprise to you since, I am sure, you have found that the commitments to your own offices and institutions have increased, as well.

It is hoped that this brief review of the year will give you a better awareness of our activities during these past many months. This increased activity necessitates that we all stay informed of current issues and be ready to engage in meaningful discussions when we meet together at various functions during the coming year.

2008-2009 BOARD NOMINEES

AOCOO-HNS Nominees for Secretary

David D. Gossage, DO



I would like to thank the Nominating Committee for their support and nomination for Secretary of the AOCOO-HNS. During the past several years, I have had the opportunity to serve and participate in the College meetings and retreats to improve the overall function of the Board. In November 2006, I became the Councilor to the American Academy of Ophthalmology. Serving as the Councilor and as a Member-at-Large, I was able

to voice the concerns of our College members to the AOCOO-HNS Board, the American Academy of Ophthalmology, as well as our legislators in Washington, D.C.

Quality education has always been an important part of why I became involved in the College. In the past, I have lectured and conducted several workshops for the Annual Clinical Assembly, the Mid-Year Meeting, and I have attended every ACA for the past 13 years. I served as a designated examiner and as an exam item writer for the Ophthalmology Board of Examiners, as well as the NBOME. In 2006, I began a new residency program in ophthalmology. We need to continue to train bright new physicians to handle the increasing demands on our profession in the years to come. I believe the future of Osteopathic Ophthalmology begins with a quality education, both didactic and surgical. As Secretary of the AOCOO-HNS, I will continue to uphold the ideas of our College and encourage new members, as well as old, to become more involved in what our College has to offer.

It would be a great honor to continue to serve the College as secretary, and I ask for your support at election time.

Jeffrey N. Holtzman, DO



It is again an honor to be nominated to serve on the Board of Governors for 2007-2009 as secretary. As a Member-at-Large for three years and previous secretary for one year, I have gained a great deal of knowledge about the workings of the AOCOO-HNS. I feel that this knowledge and experience on the Board will help me serve the membership well. My interests and strengths have allowed me to

serve on the Council of Medical Education this year. The strength of our organization rests on the continual improvement of our residency programs and involvement of our new members. As a program director for many years, I have mentored young ophthalmologists. I hope to be able to encourage these new members to increase their commitment to our profession and our College. I am convinced that by increased involvement by more members, our organization will grow and impact our patients for the better. We are our patients' best advocates.

Over the past several years, our Board has revised their structure and Bylaws. I would like to continue to assist in this

evolution as secretary. The focus on improving education, both on the CME level and in residency training, is impressive. We need to look critically at ourselves to improve and grow. I hope to be able to represent you in this manner.

AOCO Board Member Nominees

Members-at-Large to be Elected to a One-Year Term:

Robert J. Franchi, DO (incumbent)

Brian E. Wind, DO (incumbent)

Robert B. Chambers, DO

Sirtaz S. Sibia, DO

John D. Siddens, DO

Leonid Skorin Jr., DO

The Board has asked that each nominee submit a statement outlining his service to the College and/or desire to serve on the Board and reasons why he should be elected.

Robert J. Franchi, DO (incumbent)



I am flattered to have been nominated once again for an at-large position to the American Osteopathic Board of Ophthalmology. To date, I have served our College in several different capacities which include: Chairman of the professional program for the Ophthalmology section in Miami, Florida and Scottsdale, Arizona. I have submitted written test questions for ophthalmology certification examinations and served on subcommittees including that of Continuing Medical Education for the AOCO.

Having served the College and its membership, I have interacted with many Board members in a spirit of cooperation and teamwork. Most recently, I have served your College as a Member-at-Large for the past two years including chairmanship of the Communications Committee and membership on the Ethics Committee. In my charge, our committee has helped to improve access, usability and provided more pertinent information to our College website. I feel my prior experience and willingness for our College to grow in national stature will continue to serve me well as an elected Board Officer.

Thank you again for your confidence in nominating me for this position.

Brian E. Wind, DO (incumbent)



It has been my privilege to serve on the AOCO Board for the past two years, and I am again honored to be nominated for the Member-at-Large position. As a Board member of this organization and chairman of the Practice Committee, I feel it is my responsibility to promote, support and advance the AOCO. As medicine continues to become fragmented by external forces, it is important that our

organization increase efficient communication between AOCO physicians and utilize the untapped resources and talents of our membership.

Having recently completed my second year on the Board, I have gained much insight into our College and the challenges that our organization faces in the future. I enthusiastically look forward to continue to serve as a Member-at-Large and promote the high standards of the AOCO. Thank you for your support and confidence in considering me for this position.

Robert B. Chambers, DO



It was an honor to have been nominated to serve as a Member-at-Large of the AOCOO-HNS. My desire to serve these Colleges reflects an ongoing commitment dating back to 1989 when I was appointed as a designated examiner for the American Osteopathic Board of Ophthalmology and Otolaryngology-Head and Neck Surgery. After examining in each subsequent year, I was asked to join the Examining Board in 1993 where I served as secretary, Vice Chair and Chairman of the Board. Because of some transitional issues on the Board, I was asked to serve two years as Board Chairman. In 1998, I received the Governor's Achievement Award for service to the AOCOO-HNS. I have also been a member of the Council of Medical Education and have served the College as a program inspector for residency certification. I have also served on several ad hoc committees at the request of the Board and the Colleges. I was residency program director at Ohio State University for 12 years and received Teacher of the Year award three times from the Department and once from the Ohio State University College of Medicine for the department.

Since my term on the AOCOO-HNS expired in 2006, I have missed the interaction with individuals dedicated to the preservation and betterment of osteopathic ophthalmology and otolaryngology. While most of my experience has been on the educational and examining side of things, I look forward to the possibility of working with the Board of Governors of these Colleges on advocacy issues. I would hope that my experiences on the Board of Examiners would help me provide insight to issues that affect both of these important missions of our organization.

Sirtaz S. Sibia, DO

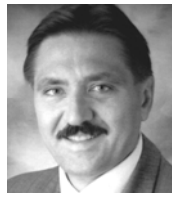


I am honored to be nominated for the position of Member-at-Large of our College. For those of you who do not know me, would like to give you some background. I graduated from the Detroit Osteopathic Ophthalmology Consortium in 1999. I then completed an Ophthalmic and Facial Plastic Surgery Fellowship at the Beraja Medical Institute in Miami. I am currently in private practice in Boynton Beach and Lake Worth, Florida.

I have been actively involved in our College for the past eight years since I graduated from residency. I have been a speaker at the Mid-Year Meeting and have run a workshop at our Annual Clinical Assembly on three different occasions. I have been a member of the Communications Committee for our College for the past two years. I also was chairperson for the 2006 Mid-Year Seminar in Philadelphia. Currently, I am the chairperson for the 2008 ACA meeting in Scottsdale, Arizona.

John D. Siddens, DO

Leonid Skorin Jr., DO



I would like to thank the Nominating Committee for allowing me to present myself as a candidate for the Member-at-Large position of the AOCO Board.

I believe I have knowledge and strength in two areas that are of interest and importance to our membership.

As the editor-in-chief of "Clinical and Surgical Ophthalmology," I have appointed several of our members to be department editors of that journal. I encourage our membership to submit articles for publication to this journal, thus giving our organization both national and international exposure in ophthalmology.

As the chairman of my hospital's Institutional Review Board and as a member of the Mayo Health System Research Committee, I hope to bring my experience in research planning and implementation to our membership. Research in osteopathy is a major initiative of the American Osteopathic Association.

I have served on the International Education Committee as co-chairman, the Communications Committee and currently serve on the Editorial Committee. I have presented both lectures and workshops at our meetings and have been an exam item writer for the Board of Examiners.

I hope to have this opportunity to represent our College and its membership. Thank you for your support.

AOCO-HNS Board Member Nominees

Members-at-Large to be Elected to a One-Year Term:

Paul E. Burk, DO (incumbent)
Michael S. Hauptert, DO (incumbent)
Douglas F. Hegyi, DO
Donald M. Rothen, DO (incumbent)
Edward D. Scheiner, DO (incumbent)
James V. Zirul, DO

The Board has asked that each nominee submit a statement outlining his service to the College and/or desire to serve on the Board and reasons why he should be elected.

Paul E. Burk, DO (incumbent)



I am honored to have served on the Board as a Member-at-Large/Member in the past, and I thank you for your continued support in nominating me again this year. I have been a member of our College since 1987, board certified in 1989, and I became a Fellow in 1991. As a member of our College, I have attended every annual meeting since 1987.

Within our College, I have served on several committees: 1999-2001 Annual Program, chairman, 2001; 2001 Image-Guided Sinus Surgery Workshop; 2004-2005 Ethics

Committee, chairman 2005/2006; 1996 to present, Residency Ad Hoc; and 2004-present, chairman, Communications, which has also involved contributing articles with the help of our residents for our "Quarterly Report." In 2004, I received the Presidential Achievement Award and in 2007, the Board of Governors Award. In 1989, I was instrumental in establishing our residency training program here in St. Louis, and we have graduated a resident almost every year since then.

One project I have recently spearheaded is the establishment of the computerized surgical logs for Ophthalmology and Otolaryngology/Facial Plastic Surgery. This program allows the residents to store their surgical cases with more ease and transmit this information to the College electronically, avoiding paperwork. I am also working on computerizing the annual Program Director's year-end evaluation of the resident. Ideally, the thought is to eliminate as much paperwork as possible for the residents, program directors, residency inspectors, and the College. My goal is to have this completed by the end of this year.

As residency program directors, our role is invaluable to the College with respect to increasing our membership and the continuation of a high level of excellence of our membership. I feel it is extremely important to continue the support of our residency programs. The future of our College rests with today's residents.

I will continue to work to meet the College's needs, and I would be honored to serve our membership as a Board member.

Michael S. Haupert, DO (incumbent)



It has been my distinct honor and pleasure to serve as an AOCO-HNS Board Member-at-Large for the past year. This position has afforded me an opportunity to give back to our honorable profession. I have always felt it is important to give back to the College and osteopathic medicine. It is a crucial element in maintaining the success and longevity of our profession, as well as paying

respect to our predecessors and mentors. Having served as an examination question writer, designated examiner, and on the Board of Examiners prior to being elected to the present position has helped broaden my perspective of osteopathic otolaryngology. It has been a privilege to lecture at several of the Annual Clinical Assemblies and Mid-Year Meetings. The opportunity to help train residents while they have rotated with us at Children's Hospital of Michigan has been an exciting opportunity for me to help in the educational process of these future otolaryngologists. I would be honored to be allowed to continue serving our College and you, my colleagues. I respectfully ask for your thoughtful consideration to serve another one year term as an AOCO-HNS Board Member-at-Large.

Douglas F. Hegyi, DO



It is indeed an honor to be nominated by one's peers to serve our College as a Member-at-Large. I have had the opportunity to participate in many positions from the College to the Board of Examiners level.

A brief synopsis: College Board Member-at-Large: 2003-2006; Chairman Clinical Subspecialty Committee: 2001-2002; Annual Assembly program chairman 1996 and 1997; lecturer at a number of assemblies; designated Board examiner: 1991-1995; Board of Examiner Member: 1995-2003; chairman of the ENT Section: 2002-2003; Chairman of the Board of Examiners 2003, as well as serving on various committees for both the College and Board.

The College has honored me a number of times in the past and in 2007 with the Special Board of Governors Award, a singular honor I shall long remember.

My goals in representing the membership are:

1. The educational portion of our assemblies should always be of the highest caliber to ensure that our membership receives not only standard of practice information, but cutting edge ideas and techniques while assisting as a source for recertification examination.
2. The social portion of our assemblies should be of such a nature that it promotes the enjoyment of its members and their families with each other.
3. Our residency programs shall be the most sought after as a result of their training and educational opportunities.
4. The number of residency programs should be increased wherever and whenever possible in response to the number of increasing DO graduates seeking post-graduate education.
5. The prospering and growth of our Foundation to ensure educational grants and awards to future generations of residents.
6. The College should be a source of education to the public, insurance companies and governmental agencies as it relates to our specialties and our uniqueness as osteopathic physicians.

I look forward to serving you, one and all.

Donald M. Rothen, DO (incumbent)



I would like to thank the Nominating Committee of the College for nominating me to serve a one year term as an AOCO-HNS Board Member-at-Large. It has been my privilege to serve in this capacity for the past three years, and I hope that I have been able to make a contribution to the College. I have been involved in the College for many years. I have been a program director in

otolaryngology for over 30 years. I established the Otolaryngic Allergy Program for the College and the Certificate of Added Qualification in Otolaryngic Allergy for the Board of Examiners, and have been the program director in the only active otolaryngic allergy fellowship since its inception. I am a member of the Council of Medical Education and was on the Board of Examiners for many years until I became a College board member. I am chairman of the Editorial Committee and sit on the Bylaws Committee.

It has been exciting for me to see the College grow over these

many years and see many of my former residents achieve successful careers as well as give back to the College by donating their time and efforts. I want to stay a part of this. I want to continue to give back to an organization that has been my professional home, that has always treated me fairly and been there when it was needed. These are difficult times for the medical profession and medicine in general, and, whatever experience I may have gleaned over my years in practice, I would like to continue to contribute to the College what I can.

Edward D. Scheiner, DO (incumbent)



I have been a member of the AOCOO-HNS since the start of my residency training in 1981. I have attended every annual meeting since 1988. Since starting in practice, I have been involved in the training of residents. I have been program director of the residency training program at UMDNJ-SOM/Kennedy Memorial Hospital since 1996. I have also been a member of the Council of Medical Education since 2001, and was elected a Member-at-Large of the Board of Governors two years ago.

My desire to continue in my current role as a member of the Board is fueled by my concern for the significant issues facing our specialties over the next several years. My involvement with residency training at both the local and national level has given me insight into the many deleterious factors facing our organization and specialties. It is extremely important that the officers of our College continue to advocate on behalf of our specialties the need for improved support by the AOA and the federal government, particularly concerning the increasing need for continued and improved funding to allow our training programs to maintain high standards in training, as well as the need to increase the number of residents trained to meet the growing needs of the osteopathic profession and the overall population.

I feel that it is imperative that members of our College, particularly those with many years of experience on a clinical and managerial level, contribute their talents to our organization. After 23 years in practice, I feel that I have acquired a good understanding of the issues facing physicians in otolaryngology on a national level, as well as on a local level. I very much want to be a part of the continued growth and strengthening of our organization.

As we approach issues affecting the short- and long-term welfare of our organization, I feel that I can contribute based upon my experience towards moving our organization forward in a cohesive and united fashion. It is important, now more than ever, that we stand together in a united fashion to face the issues ahead of us, rather than to dilute our strength through partisan issues.

The AOCOO-HNS can only continue to thrive if we place partisanship aside and work towards the common good.

I would appreciate your support of my candidacy for a continued position on the Board and will work to the best of my ability to represent each of you.

James V. Zirul, DO



I am pleased to be selected as one of seven candidates to be nominated to fill one of the Member-at-Large positions on the American Osteopathic College of Otolaryngology-Head and Neck Surgery Board.

As a board certified otolaryngologist, I have practiced in a rural community in Alaska for the past twenty years. My membership in the AOCOO-HNS, AOA and the Alaska Osteopathic Medical Association has proven beneficial over the years in many ways. I have been actively involved on both the state and national level, both as a member of these associations and as an officer at various levels in my state association. I have also served as the Alaska state delegate to the AOA House of Delegates since 2003.

I firmly believe that the training and opportunities afforded me by these organizations have allowed me to focus my practice in a manner commensurate with the philosophy of osteopathic medicine. I have actively lobbied our congressional delegation and state legislators to further the osteopathic profession and its goals. I would like the opportunity to continue this effort and would appreciate the support of the membership.

Membership News

Check Your CME Credits

AOA members may check their CME credits by going to <https://www.do-online.org> and typing in their AOA ID and password and then clicking on CME. The alternative, AOA members may contact the AOA Division of CME to obtain a copy of their CME activity report via a fax or email by calling 1-800-621-1773, Ext. 8262. CME activity reports are available on line 24 hours a day, 7 days a week.

Patrick Murray Eye Center

by Christopher D. Covington, DO

Dear Colleagues:

The Patrick Murray Eye Center currently cares for a large volume of patients with diabetes and glaucoma. Significant portions of these patients are lower socioeconomic status and are uninsured. For these patients, our Detroit based residency clinic is the only option for laser treatment. Being able to provide these services is a great benefit for our patients, as well as a great learning tool for the residents. Sadly, our argon laser just recently passed away. Repair technicians have informed us that the laser was antiquated and will be unable to be repaired. Our only chance of continuing these services is to acquire assistance from our fellow osteopathic ophthalmology brethren. Our program would like to thank you in advance for your consideration in this matter and invite you to contact us at 313-891-3000 or email: dohophthalmology@hotmail.com.

Member News

Warren L. Brandes, DO

Dr. Warren Brandes has donated his time to the American Physicians Fellowship for Medicine in Israel.

One of thirty North American physicians, Dr. Brandes flew to Israel for a one week course where he received intense training in advance disaster management and emergency medical management. Included was a simulated hands-on hospital wide disaster trauma situation at Sheba Medical Center, Tel Hashomer, Assaf Harh Hospital, Tzrifin and Sederot.

Drills in mass casualties as well as NBC (Nuclear, Biological, and Chemical) casualties were taught. Each of these thirty American doctors is willing to help out Israel in a time of potential crisis should that situation ever arise.

Kudos to Dr. Brandes as he now has the knowledge and skills to handle anything from here, across our country or across the world.

AAO Update Ophthalmic News and Education Network Launches at Academy Annual Meeting

The American Academy of Ophthalmology announced the launch of the Ophthalmic News and Education (O.N.E.) Network, a unique resource designed to help ophthalmologists keep up with current developments while helping them to meet continuing education and certification requirements. The Network, which is free to Academy members, capitalizes upon the newest Web technologies to provide ophthalmologists with the information and resources necessary to support them in their professional practice.

“The O.N.E. Network is an exciting development for Academy members,” said H. Dunbar Hoskins Jr., MD, executive vice president of the Academy. “With the support of the Academy and ophthalmic subspecialty societies, the Network will enhance the educational experience of Academy members, residents and

ophthalmologists worldwide.”

Fast answers to tough clinical cases with powerful search tools. The Network allows users to retrieve relevant information quickly with a targeted clinical search of the extensive literature banks of the Academy and trusted third party material.

Customization to see the latest developments in a subspecialty. The O.N.E. homepage can be personalized for quick access to subspecialty-targeted newsletters, clinical updates, alerts and breaking news, a personal calendar, and more.

Easy access tools for life-long learning. The Network offers more than 50 free courses, cases, videos and podcasts.

Free self-assessment. Academy members can access free online self-assessment questions providing real-time evaluation of performance compared to that of peers.

Custom learning plan with automated reminders. The Network allows members to analyze self-assessment performance and get suggested content to augment a custom learning plan.

Review of standards of care with O.N.E.'s library of practice guidelines. Ophthalmologists can search practice guidelines based on clinical evidence and expert consensus to help treat specific diseases and improve quality of care.

ENT UPDATE Three-Drug Chemotherapy Regimen Better Than Two for Advanced Head & Neck Cancers

by Paul E. Burk, DO

About three to five percent of all cancers in the United States are head and neck cancers, according to the National Cancer Institute. That means almost 40,000 Americans are diagnosed with these cancers each year. They most commonly occur in people over 50, and the biggest risk factor for head and neck cancers is tobacco use.

Treatment for these cancers can be

difficult because surgical removal of tumors can result in multiple post-operative dysfunctions including difficulty chewing, talking and swallowing. In some cases, the cancer may be unresectable; that is, the risk of harm outweighs the potential benefit of surgical removal of the cancer. Two new studies are now reporting that the addition of the chemotherapy drug, docetaxel, to the standard two-drug regimen used for head and neck cancers may improve the efficacy of the treatment while reducing the toxicity.

The study done by Posner and his colleagues included 501 people with advanced—stage III or IV—head and neck cancers. Posner said his study included people who had both unresectable and resectable tumors. The second study, conducted by European researchers, included 358 people with unresectable stage III or IV head and neck cancer. In the first study, participants were randomly assigned to receive the standard two-drug regimen (cisplatin and fluorouracil) or the new three-drug treatment which included cisplatin, fluorouracil and docetaxel. People in both groups then received seven weeks of weekly chemoradiotherapy (chemotherapy and radiation combined) with carboplatin, and radiotherapy (radiation treatment) for five days a week. Those who became eligible for surgery were able to have surgery six to 12 weeks after completing chemoradiotherapy. In the second study, participants were randomized to receive either the two-drug regimen or the newer three-drug treatment. If there was no progression of disease after the study participants completed chemotherapy, they were given radiotherapy.

In the Posner study, overall survival after three years was estimated to be 62 percent for the three-drug group compared to 48 percent for the two-drug group. Median overall survival was 71 months for the newer treatment versus just 30 months for the older regimen. The overall survival in the European study increased from 14.5 months for the two-drug group to 18.8 months for the three-drug group in this study.

In both studies, the three-drug regimen had a similar, though slightly reduced, side-effect profile than the two-drug therapy. Posner said that's because they were able to use less fluorouracil in the three-drug regimen.

Each study was able to maximize efficacy while reducing toxicity. But, what oncologists want to know is whether

induction chemotherapy (as was done in these studies) plus chemoradiotherapy is more effective than chemoradiotherapy alone. Studies are currently under way to determine which treatment is best, and, in the meantime, chemoradiotherapy alone will remain the standard of care.

Board of Examiners Update

OPHTHALMOLOGY

Ralph P. Crew, DO

On Wednesday, May 7th, 2008, the AOBOO will enter a new era. That's the first date on which our initial candidates for recertification are eligible to take their examinations. Individuals in ophthalmology were first issued time-dated certificates in 2000, while otolaryngology began the process in 2002. Candidates are eligible to initiate the recertification process two years prior to the date their certification expires. Hence, 2008 for ophthalmology and 2010 for otolaryngology.

Recertification exams are presently being developed. In ophthalmology, this test will examine a "core" of ophthalmic knowledge that is considered basic to the practice of all ophthalmologists, whether generalist or specialist. Our goal is to provide an exam that is psychometrically sound, defensible and helps to maintain the quality and reputations of osteopathic physicians. Once the recertification exam has been completed, the results shall be forwarded to the AOA. It is the AOA that grants continuing recertification status.

If you are eligible and would like to participate in the test next May, please contact the AOBOO office prior to February 1, 2008.

OTOLARYNGOLOGY

Benjamin W. Murcek, DO

The AOBOO-HNS meets formally four times yearly to prepare both the written and oral board examinations. Additionally, members of the Board administer both exams at the annual AOCOO-HNS meeting. The Board members spend many

hours of personal time writing and refining test questions.

Gregory Stone, PhD, provides psychometric analysis and validation of both the written and oral examinations, as well as the examination process. Dr. Stone's expertise has proven invaluable in constructing these high stakes examinations.

Dr. Murcek serves as the current Board representative to the AOA Bureau of Osteopathic Specialists (BOS). The BOS develops policy for all osteopathic certifying boards. Active participation of our Board ensures that we have a voice in BOS decision-making.

The Board is working to develop a closer working relationship with the AOCOO-HNS Board of Governors. A certain degree of separation must exist between the AOBOO-HNS and the AOCOO-HNS to ensure a Board certification examination process with no conflicts of interest. While there are many concerns and interests shared by both that affect our specialties, perhaps none is more pressing than the Maintenance of Certification. Both groups are working together diligently to provide fair and expert recertification examinations and maintenance processes.

AOA Washington Update

New Rule on Hospital Acquired Conditions

As of October 1, 2007, inpatient prospective payment hospitals must complete a "Present on Admission" indicator for all primary and secondary diagnoses on hospital claims. Hospitals will want to work closely with physicians to ensure medical records include documentation on the conditions. The hospital prospective payment rule finalized conditions for which hospitals will not receive additional reimbursement for hospital acquired conditions beginning October 1, 2008. The rule only affects hospital payment. Physicians will be reimbursed for their professional services however, there are concerns that the rule may have unintended consequences that could affect physicians.

Fit for Life, The Wellness and Prevention Act of 2007

As part of Dr. Peter Ajluni's Fit for Life Campaign, the AOA will begin including articles in the DO Washington Update that address health and wellness initiatives or policies being discussed in Washington, DC.

Earlier this year, Representative Joe Knollenberg (R-MI) introduced "The Wellness and Prevention Act of 2007" (H.R. 853). This legislation is aimed at encouraging businesses to offer wellness programs in the workplace. The bill offers companies a \$200 tax credit for every employee who participates in a wellness program that includes screenings for chronic diseases like heart disease and diabetes and educational seminars on healthy eating, exercise, and managing stress. Employees who participate in the program will also receive a \$200 tax credit. Additionally, the bill provides for \$20,000 in loan forgiveness for individuals who pursue a specialty in preventative medicine and achieve board certification between the years of 2008 and 2012.

Update on PQRI 2007

As the Physician Quality Reporting Initiative (PQRI) approaches its final month for 2007, data is still preliminary. The Centers for Medicare and Medicaid Services (CMS) do not know the number or percentage of participants in the program and reporting is modest.

Based on a review of the preliminary PQRI data, CMS is putting out coding tips and other educational materials on the program. CMS wants to reach out to practitioners who are not aware of PQRI, who chose not to participate, and who started to participate and then dropped out. The agency intends to put out a call for ideas on PQRI tools to make participation easier.

The final specifications on the 2007 PQRI measures are available on the CMS web site: www.cms.hhs.gov/PQRI. CMS has chosen 119 quality measures for 2008.

Childhood Obesity Prevention Initiative

On November 27th, the Department of Health and Human Services (HHS) announced a new program aimed at promoting healthy weight in children. First Lady Laura Bush was present at the National Prevention Summit where the announcement was made. In her keynote address, Mrs. Bush pointed out that, "Nearly one in five school-age children in the United States is overweight, and the problem seems to be getting worse."

The chair of the HHS Childhood Overweight and Obesity Coordinating Council, Acting Surgeon General Steven Galson, MD, MPA, will coordinate HHS officials and community stakeholders to develop programs that provide options for community-based interventions.

Some of the projects under evaluation for the childhood obesity program include a school health index, National Institutes of Health activity and nutrition guide, and Native American diabetes prevention activities.

In addition to the new childhood obesity program announced by HHS, Mrs. Bush outlined a National Center for Physical Development and Outdoor Play that will help Head Start programs educate children and their families about physical activity and a healthy diet.

AHIC Recommends E- Prescribing Guidelines for Medicare

The American Health Information Community (AHIC) recommends that the Department of HHS Secretary seek authority from Congress to mandate e-prescribing in Medicare. According to the recommendation, several requirements should be met, prior to such an authority, including: all pharmacies and pharmacy benefit managers must participate in mandatory e-prescribing, all prescriptions must be electronically transmissible to the pharmacy of the patient's choice, and the Centers for Medicare and Medicaid Services (CMS) should develop and implement incentives for both physicians and pharmacies to adopt certified electronic health records or e-prescribing systems.

Mississippi Senator Trent Lott Retiring

U.S. Senator Trent Lott, the Senate Republican Whip from Pascagoula, Mississippi, announced on November 26th that he will be retiring from his Senate seat just one year into his fourth six-year term by the end of this year.

Senator Lott did not specify what his next move will be aside from jokes about managing his son's music career or coaching at the University of Mississippi. Many politicians speculate that the retirement is timed to allow the senator to work as a lobbyist before new lobbying regulations prevent him from taking that position.

For 35 years, Trent Lott has been an active member of the U.S. Congress. His first position in Congressional leadership came in 1981, when he served as the House Republican Whip. Seven years later, Lott was elected to the U.S. Senate. In 1996, Lott was chosen to serve as the Senate Majority Leader where he worked alongside House Speaker Newt Gingrich. Currently, Senator Lott serves on the powerful Finance Committee.

Senator Lott joins five other Republican senators departing from the Senate by January of 2009.

Hill Fact: Senators with the Most Gavels

In Congress, one measure of a politician's power is the number of committee and subcommittees he/she chairs. The following members of the Senate currently hold the highest number of gavels for the leadership of full committees, subcommittees and joint committees in the Senate - five.

Sen. Daniel K. Akaka, D-HI
Sen. Byron L. Dorgan, D-ND
Sen. Tim Johnson, D-SD
Sen. John Kerry, D-MA
Sen. Dianne Feinstein, D-CA

AOCOO-HNS Executive Vice President (CEO)

The American Osteopathic Colleges of Ophthalmology and Otolaryngology-Head and Neck Surgery is seeking an experienced and dynamic physician-leader to serve as the Executive Vice-President (CEO) for the AOCOO-HNS Board of Governors. This would entail a period of time serving in a mentorship program with the current EVP prior to assuming the position.

The principle responsibilities of the position include:

- Oversee staff employees
- Carry out administrative work of the corporation
- Establish administrative policies
- Implement directives of the Board
- Coordinate meetings and activities of the Board
- Prepare annual budgets and review of financial activities
- Maintain fiscal responsibility of all Colleges' activities
- Maintain close working relationships with the AOA and activities of the Colleges
- Serve, together with the president, as spokesperson for the Colleges and Foundation
- Maintain the legal integrity of the corporation
- Work with the Boards to plan meetings and develop strategies and agendas
- Attend all College associated meetings with the AOA as needed
- Perform all on-site inspections of proposed meeting locations.

Interested candidates should have a working knowledge of the AOA and, in particular, the workings of the Bureau of Education, its committees, and the AOA Board of Trustees.

Please request an application form, which is to be sent together with your current CV to Carlo DiMarco, DO, a/o AOCOO-HNS at 4764 Fishburg Road, Suite F, Huber Heights, OH 45424.

Direct all inquiries in writing to the Search Committee chairman, Carlo DiMarco, DO at the address listed above.



1st Annual Faculty Development Seminar

As ophthalmology and otolaryngology/facial plastic surgery program directors, you are called upon to be skilled in a great number of different areas. Residency training prepares us to be knowledgeable surgeons, skillful at procedures, good communicators, and effective at multi-tasking. Rarely, however, does it prepare us to be educators and program administrators.

Faculty development is a term used to describe growth as educators. The goal of this seminar is to provide a guide for program directors to advance their skills as educators and program administrators.

SATURDAY, FEBRUARY 9TH

12:00 noon Registration
 12:30-12:45 Official Opening and Review of Program-
 12:45-2:15 **ROBERT A. CAIN, DO** - "The Competency Quagmire: Implementing Competency-Based Residency Training"
 2:15-2:30 Break
 2:30-3:00 **BENJAMIN W. MURCEK, DO** - "AOA Bureau of Osteopathic Specialists Update and It's Impact on Resident Education"
 3:00-3:45 **GREGORY E. STONE, PhD** - "How to Prepare Residents to Take Certifying Examinations"
 3:45-4:00 Break
 4:00-5:30 **FRANKLIN J. MEDIO, PhD** - "The Good, the Bad and the Ugly: Evaluations, Feedback and Remediation"
 5:30-6:00 Break
 6:00-8:30 Reception/Dinner/Guest Lecture: **JEAN EDWARDS HOLT, MD, MHA** - "American Medicine vs. American Health Care: Teaching Residents the Business Side of Medical Practice"

SUNDAY, FEBRUARY 10TH

7:00am Continental Breakfast
 7:30-9:15 **DON KAVENY** - "Conducting an Effective/Successful Training Program Site Review"
 9:15-9:30 **CHARLES W. GUY II, DO & KAREN A. ALVAREZ, DO**, Council of Residents and Fellows Update
 9:30-9:45 Break
 9:45-11:15 **BRYAN KANE, MD** - "Transforming a Journal Club into a Research Project"
 11:15-12:30 Program Summary-Moderator

Attendees should plan to fly in Saturday morning and fly out Sunday late afternoon/early evening.

CME Credits The attendees of this program will be required to sign in both days. Attendees will also have program evaluation forms and a CME credit statement included in their registration packets. The evaluation form and CME credit statement **MUST** be completed and returned in order to receive CME credits.

The AOCOO-HNS designates this educational program activity as a 1A CME opportunity, offering up to 12 hours in ophthalmology and otolaryngology.

Hyatt Reservation The AOCOO-HNS Administrative Staff will prepare a reservations list for all guest room reservations. **No reservations will be accepted by the Hyatt Regency from individuals.** After your Registration Form has been received (you must indicate your arrival and departure dates), a reservation will be confirmed for you, and your Hyatt Regency confirmation number will be emailed to you. Upon your arrival at the Hyatt Regency, a reservations specialist will request your credit card for payment. **OVERNIGHT ROOM RATE IS \$186.00—DEADLINE for confirmed reservations is JANUARY 22, 2008.**

REGISTRATION FORM

_____		_____	
		DATE	
Name (indicate first and last for name badge)		Specialty	AOA #
Mailing Address		City	State Zip
Telephone Number		Email Address	



FOR YOUR **HYATT** RESERVATION YOU MUST PROVIDE: Arrival Date _____ Departure Date _____

REGISTRATION FEE: \$365.00 - If you register before January 1st \$390.00 - If you register after January 2nd

METHOD OF PAYMENT _____ Check (Make check payable to: AOCOO-HNS)

_____ Credit Card _____ MasterCard _____ Visa _____ Discover _____ American Express

ACCT. # _____ EXP. DATE _____

SECURITY CODE (3 or 4 digit number on back of card) _____

Signature: _____

Return your registration to: AOCOO-HNS, 4764 Fishburg Road, Suite F, Huber Heights, OH 45424 or FAX to **937-233-5673**

Ophthalmology Opportunities

COLORADO

- Established Ridgway, Colorado integrative medical clinic seeks doctors/practitioners to compliment our coalition of independent professionals offering comprehensive, personalized holistic health care. Stellar reputation, spectacular setting, superb quality of life—973-626-9877.

KENTUCKY

- Excellent opportunity to join a solo ophthalmologist, desiring to slow down. Opportunity for partnership after one year. Competitive salary and benefit package. Brand new office equipment. New office building. Associate with optometrist. New hospital with state-of-the-art outpatient surgery. Call Dr. Kay Hazelett 606-424-8721.

MICHIGAN

- Ophthalmologist wanted to join growing practice in Big Rapids, Michigan. Guarantees salary, opportunity for partnership. Please contact Ralph Crew, DO., 2310796-0010 or email: ralphcrew@hotmail.com.

NEVADA

- Established otolaryngology/ophthalmology practice seeking BC/BE ophthalmologist to compliment group. The practice has three state-of-the-art offices in Henderson and Southwest Las Vegas Valley. All offices are located in community oriented high profile areas with one of the offices adjacent to the Seven Hills Surgery Center and the new Southwest office, located next to the new Southern Hills Hospital. Practice partnership and ASC opportunities available. Contact Judy Duncan at jduncan@nveyepa.com or 702-492-6928.

OHIO

- Excellent anterior segment/glaucoma surgeon needed for group practice in Maumee, Ohio. Practice in a new state-of-the-art facility and ambulatory surgery center with all amenities. Salary plus incentive with buy-in after two years. Send CV to Ronald M. Kendrick, DO, 3509 Briarfield Blvd., Maumee, Ohio 43537. Phone 1-800-782-9214, FAX 419-865-3451.

PENNSYLVANIA

- Opening in a busy ophthalmology practice. Contact: Jane Kokinakis, DO, office # 800-845-8424.

WEST VIRGINIA

- Glaucoma specialist wanted. Join a team of two ophthalmologists and one optometrist bringing high quality care to Southern West Virginia. Best equipment available. Starting salary up to \$250,000.00. Shape your own practice but surgical opportunities are limited only by your skills. Contact mkrasnow@marshall.edu or call Bettie Chapman at 304-697-0393.

WASHINGTON

- OPH wanted in beautiful Washington State. Opportunity for someone interested in aggressively expanding a practice, or someone interested in working half-time and sharing the practice. A new DO medical school is being built in Yakima. There is opportunity for any level of participation. Hospital owned ASC with all new equipment. Call Dr. Leo Figs 509-952-8545.

Ophthalmology Fellowship OHIO

- Refractive fellowship position available, LASIK Plus, Cincinnati, Ohio. Contact Vincent Marino, DO at 513-652-9585 or email marino@fuse.net.

Otolaryngology Opportunities

ALASKA

- ENT wanted. Kenai Peninsula, S.W. of Anchorage. Excellent salary and benefits. Call or email: James Zirul, DO, 220 Spur View Drive, Kenai, AK 99611, call 907-283-5400, email jzirul@acsalaska.net.

ARIZONA

- 320 days of sunshine per year! Become part of a busy, expanding otolaryngology/head and neck/facial plastic surgery practice with full audiology services in the metropolitan Phoenix area. Seeking a BC/BE associate with early partnership opportunity to join our successful team. Competitive salary and benefits. Attractive lifestyle. Please contact Dr. David Mendelson (480) 894-5550 or fax CV to (480) 894-9469 or email to info@entsoa.com.

CALIFORNIA

- Unique opportunity in private practice for well-trained BE/BC physician in general otolaryngology or subspecialty in this premier coastal community north of Los Angeles. Office is fully equipped. Includes audiology, sound booths and HAD dept. Adjacent to Outpatient Surgi-Center and area's major hospital. For more information, contact Joseph DiBartolomeo, MD, 2420 Castillo Street, Santa Barbara, CA - 805-563-1111, or email: dibartolomeomd@aol.com.

COLORADO

- Dr. Patrick Henderson is looking for an otolaryngologist to join established practice in beautiful Montrose, CO. Small and growing community at the base of San Juan mountain Range. Within 1 hour drive of Telluride Ski Resort, hiking, trophy fishing, mountain biking and camping facilities. Town of Montrose is top 10 growing communities in the nation with abundant sunshine for outdoor enthusiast. Call office (970) 249-6968 or email coentpc@frontier.net.

- Established Ridgway, Colorado integrative medical clinic seeks doctors/practitioners to compliment our coalition of independent professionals offering comprehensive, personalized holistic health care. Stellar reputation, spectacular setting, superb quality of life—973-626-9877.

FLORIDA

- Central Florida Otolaryngology group is recruiting BC/BE otolaryngologist to join rapidly expanding practice. Two clinic sites, Leesburg and The Villages and our main OR site has accreditation from AAAASF. We have four BC ENT physicians, one of which is BC in Facial Plastic & Reconstructive Surgery. We have an Allergy department and complete audiology services with two doctors of audiology and a BC hearing aid specialist on staff plus electronic medical records. We offer good schools with a suburban lifestyle in beautiful Lake County. Excellent salary with partnership anticipated. Contact info: michelle.lakeent@earthlink.net or call 352-728-2404.

- Outstanding opportunity to join very busy otolaryngology/facial plastic surgery practice with partnership track income. Hollywood — Pembroke Pines, Florida. Contact: Dr. Craig Shapiro, 954-437-5333 or fax: 954-437-6252, shap62@aol.com.

- ENT job opportunity located in Ocala, Florida, one hour north of Orlando. Practice is looking for BC/BE general ENT/facial plastic surgeon to join group of 3 general ENT's. Contact Dr. Scott Nadenik, cellular 362-895-0285.

MASSACHUSETTS

- Work in the heart of beautiful New England. Extremely busy practice in North Central Massachusetts seeking associate. Currently one physician doing all aspects of general ENT. Shared call with three others. Community hospitals. This is an excellent opportunity with close proximity to mountains, beaches, and Boston. Contact Dr. Daniel Ervin at (978) 874-7368.

MICHIGAN

- Northwest Michigan practice opportunity. A busy 2 physician practice seeking BC/BE ENT to join practice affiliated with 2 community-based hospitals. For further information contact Andrew Mendians, DO at 231-843-6557 or mendians@voyager.net.

- Wanted: ENT associate to join busy 2 office practice with 1 in 6 call. Unique opportunity for new graduate to work into a busy practice with fast track to partnership. In Mid-Michigan with easy access to northern Michigan outdoor activities. Contact R. Borenitsch, DO at rborenitsch@hotmail.com.

- Detroit Medical Center is looking for a general otolaryngologist. Large referral base; major urban academic medical center; new residency program for support. If interested, please contact Dr. David N. Madgy at 313-745-5402.

NEW MEXICO

- Second BE/BC general otolaryngologist needed for rural practice area in Carlsbad, New Mexico. Mild climate year round in high desert country with nearby mountains and endless outdoor activities. Guaranteed compensation the first year with incentive bonus. Triad owned community hospital. For more information contact Fred Woody, CEO at Carlsbad Medical Center, 505-887-4570.

OHIO

- Seeking an otolaryngologist for position/ownership in an established practice located in Troy, OH. The practice has a well established patient base in Otolaryngology, Allergy and Facial Plastics. The practice has been in this location 20+ years. If interested, please contact Deborah or Georgia at 937-335-7278 or fax to 937-335-1783.

- ENT BC/BE needed in Newark, OH thirty minutes east of Columbus. Need an additional solo practice physician, 167 hospital undergoing continual upgrading. Additional information can be obtained by calling Michael Ehler at 740-788-6010.

- Fabulous opportunity. 36-year-old otolaryngology practice in Stark County, Ohio offering excellent salary benefit. Office fully equipped for allergy and audiology. If interested, please contact Dr. George Vogelgesang at 330-837-3559 or email: drgwv@hotmail.com.

PENNSYLVANIA

- Suburban Philadelphia—4 physician otolaryngology practice looking for highly motivated ENT. Practice includes all phases of otolaryngology, head and neck surgery, otology and allergy. Competitive salary, bonus and benefits, partnership track. Contact Benjamin Chack, DO, 215-280-6993.

- Excellent job opportunity in Chester County, minutes from Philadelphia. Very busy 3 physician ENT practice seeking an additional BC/BE otolaryngologist to join our practice. Unbelievable opportunity for early partnership. Contact Alex Keszeli, DO, at 484-437-8745.

TEXAS

- ENT practice opportunity in Corpus Christi. Large group, full practice with speech, audio, balance center, C.T. MRI and surgery center. Need two ENT and one neuro-otologist. Contact Troy Creamean, DO at 361-854-7000.

WASHINGTON

- Practice opportunity in the beautiful northwest. Seeking associate in general ENT and proficiency/interest in FPS, otology and allergy desirable. New Osteo. Med. School to open fall 2008 with op. for ENT academic position in addition to private practice. Merging two separate ENT groups to form a single group by 2008 that serves 300K regional patient draw with a current ENT manpower shortage. Strong and respected D.O. community, two hospitals and two ASC's. Contact: Palmer Wright, DO, 3999 Englewood Ave. #201, Yakima, WA 98902, 509-453-5300 or email palmer@yvn.com.

Otolaryngology Fellowships MICHIGAN

- Training program in otolaryngic allergy as a one year continuous or two to three year interrupted, program at St. John Oakland Hospital in Madison Heights, Michigan under the direction of Donald M. Rothen, DO. This program became effective July 1, 2001 and is approved by the AOA for three positions. To be eligible, the candidate must be certified in otolaryngology. For further information, please contact Dr. Rothen at 248-541-0100 or email rothenph@hotmail.com.

- Pediatric otolaryngology fellowship available at Children's Hospital of Michigan in Detroit, MI, July 2008. Please contact Dr. Michael Hauptert or Dr. David Madgy at 313-745-5402.

NEW YORK

- Pediatric otolaryngology fellowship starting 2004, 2005, 2006 at the Women & Children's Hospital of Buffalo. Exceptional opportunity for a 1 or 2-year fellowship covering all aspects of pediatric otolaryngology including complex otolaryngology, cochlear implantation, treatment of vascular birthmarks, laser surgery, airway management, maxillofacial trauma, facial plastics and sinus surgery. Clinical and basic science research is encouraged. Practice has five fellowship-trained pediatric otolaryngologists. Address inquiries to Philomena Behar, MD, email: pmbehar@aol.com.