

American Head and Neck Society Fellowship Programs 2017

The Advanced Training Council For Approval of Training in Head and Neck Oncologic Surgery

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For fellowship match information and application, please go to the American Head and Neck Society website at www.ahns.info or contact JJ Jackman at the American Head & Neck Society - jj@ahns.info

HEAD & NECK FELLOWSHIPS

Beth Israel Medical Center

Program Director: Mark L. Urken, MD, FACS

Assistant Program

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Faculty involved with the fellowship:

Daniel Buchbinder, DMD, MD	Neil Leapman, MD
Raymond Chai, MD	Valerie Maccarone, MD
Jean-Marc Cohen, MD	Devin Okay, DDS
Bruce Culliney, MD	Stimson Schantz, MD, FACS
Alina Gouller, MD	Abtin Tabaee, MD
Manju Harshan, MD	Mike Turner, MD
Roy Holliday, MD	Mark L. Urken, MD, FACS
Azita Khorsandi, MD	Michael Via, MD
Cathy Lazarus, PhD	Beverly Wang, MD
Ilya Likhterov, MD	Bruce Wenig, MD

Director of Research: Cathy Lazarus, PhD

Other Parallel Fellowships: none

Total Number of Positions Available per Year: One 1-year position.

PROGRAM DESCRIPTION:

Objectives: The program is designed to provide advanced clinical training in head and neck oncologic and microvascular reconstructive surgery as well as thyroid and parathyroid surgery. The program also offers extensive research opportunities in the areas of head and neck and thyroid cancer which will support the development of those candidates planning an academic career.

Overview: The fellow plays an integral role on both our oncologic and reconstructive surgery teams. With a team of six residents, two full-time nurse practitioners and a full-time physician assistant, the fellow is able to take the lead role in managing head and neck oncology and reconstruction patients as well as thyroid and parathyroid surgical patients. Over 80 free flaps are performed annually with the fellow acting as first surgeon on all reconstructive cases. The experience is graduated throughout the year from assistant to taking the lead on harvesting, insetting, and performing the microvascular anastomosis. Additionally the fellow plays a key role in our weekly head and neck tumor board where we discuss upcoming cases and determine the treatment plan.

Duties and Responsibilities of Trainees: The fellow is committed for a full year at Mount Sinai/Beth Israel Medical Center and is involved in all aspects of head and neck patient care. The participant evaluates patients preoperatively in the office and actively participates in the work-up and treatment plan.

The fellow meets all patients on the day of surgery, and is actively involved in each major head and neck ablation and reconstruction. The participant manages all patients during the recovery period and evaluates them in the office during the post-operative period.

The Fellow enhances resident education by rounding daily with the team and performing informal didactics on resident rounds.

Research Opportunities: Research is encouraged and expected to be an important part of the fellow's growth throughout the training period. The THNRC (Thyroid, Head and Neck Research Center) provides the fellow with a unique opportunity to investigate functional outcomes. The THNRC was developed with the intent of performing critical assessments of patients before and after treatment for head and neck and thyroid cancer. Our in-house lab studies the impact of various treatments including surgery, radiation, chemotherapy and prosthetic rehabilitation on patient's function and quality of life. The research center will assess outcomes with statistical significance to guide the future of patient care in head and neck and thyroid cancer. The fellow will have an integral role in ongoing research performed at the THNRC. Attendance and presentations at national meetings are encouraged and funding is available.

Strengths: The Institute for Head, Neck and Thyroid Cancer is composed of a team of world renowned specialists who have integrated their respective expertise into a multidisciplinary team to approach cancers of the head and neck. The group of more than 20 doctors and healthcare professionals is composed of Otolaryngologists, Head and Neck Radiologists, Oral-Maxillofacial Surgeons, Maxillofacial Prosthodontists, General Surgeons, Thoracic Surgeons, Neurosurgeons, Plastic and Reconstructive Surgeons, Endocrinologists, Oculoplastic Surgeons, Dentists, Head and Neck Pathologists, Psychiatrists, Nutritionists, Pain Management Professionals and Speech Language Pathologists.

The group meets weekly for multidisciplinary head and neck tumor board conference to discuss patients who present to Mount Sinai/Beth Israel Medical Center for management of a malignancy of the head and neck.

Careers of Former Fellows:

Jonathan E. Aviv, MD (Fellow 1990-91) Adjunct Professor of Otolaryngology/Head and Neck Surgery, Mount Sinai School of Medicine, New York, NY.

Juan F. Moscoso, MD (Fellow 1991-92) Attending in Otolaryngology – Head and Neck Surgery in Panorama City, California.

Neal D. Futran, MD (Fellow 1992-93) Professor of Otolaryngology and Chairman, University of Washington, Seattle, Washington.

Steven H. Sloan, MD (Fellow 1993-94) Attending in Otolaryngology – Head and Neck Surgery, San Francisco, California.

Keith Blackwell, MD (Fellow 1994-95) Associate Professor of Otolaryngology, University of California, Los Angeles.

Uttam Sinha, MD (Fellow 1995-96) Vice Chairman, Department of Otolaryngology, University of Southern California, Los Angeles, California.

Christopher Shaari, MD (Fellow 1996-97) Attending in Otolaryngology in Hackensack Hospital, New Jersey.

Edgar Lueg, MD (Fellow 1997-98) Attending in Otolaryngology in Los Angeles, California. John Chaplin, MBBCh (Fellow 1997-98) Attending in Otolaryngology at Green Lane Hospital in Auckland, New Zealand.

Eric Genden, MD (Fellow 1998-99) Professor and Chairman of the Department of Otolaryngology – Head and Neck Surgery, Mount Sinai School of Medicine, New York, NY.

Andrew Bridger, MBBS, FRACS (Fellow 1999-2000) Attending, Sutherland Hospital and Prince of Wales Hospital, Sydney, Australia.

Jeff Harris, MD (Fellow 2000-2001) Attending in Otolaryngology at University of Alberta, Edmonton, Alberta, Canada.

Derrick Wallace, MD (Fellow 2001-2002) Attending in Otolaryngology at Robert Wood Johnson Medical School, NJ.

Rod Rezaee, MD (Fellow 2001-2002) Assistant Professor in Otolaryngology at Case Western Reserve University, Cleveland, OH.

Kevin Higgins, MD (Fellow 2002-2003) Attending at Stony Brook Hosp, U of Toronto 2002-2003. Bryant Lee, MD (Fellow 2003-2005) Attending in Otolaryngology at the St Barnabas Hospital in New Jersey.

Charles "Chuck" Stewart IV, MD (Fellow 2005-2006) Assistant Professor of Surgery, Division of Otolaryngology – Head and Neck Surgery, Loma Linda University Medical Center, Loma Linda, California.

Michael Most, MD (Fellow 2006-2007) Attending, Division of General Surgery at Maimonides Medical Center, Brooklyn, New York.

Matthew Bak, MD (Fellow 2008-2009) Assistant Professor of Otolaryngology – Head and Neck Surgery, East Virginia Medical School, Norfolk, Virginia.

Eran Alon, MD (Fellow 2009-2010) Attending Physician, Department of Otolaryngology Head Neck Surgery, The Chaim Sheba Medical Center, Tel Hashomer, Israel

Jose Zevallos, MD, MPH, FACS (Fellow 2010-2011) Assistant Professor of Otolaryngology – Head and Neck Surgery, UNC School of Medicine.

Sumeet Anand, MD (Fellow 2011-2012)

Saral Mehra, MD (Fellow 2012-2013) Assistant Professor of Surgery (Otolaryngology) – Head and Neck Cancer Reconstructive Surgery, Yale University, School of Medicine

Jerry Castro, MD (Fellow 2013-2014) Consultant to the Guam Memorial Hospital, Guam E.N.T. Ilya Likhterov (Current Fellow 2014-2015)

Cleveland Clinic Foundation

Program Director: Brian B Burkey, MD, MEd, FACS

Head & Neck Institute (HNI) 9500 Euclid Avenue, A-71 Cleveland, OH 44195 Phone: 216-445-8837

Fax: 216-445-9409 Email: burkeyb1@ccf.org

Institute Chair: Michael S Benninger, MD Fellowship Duration: One year – Clinical Number of Positions per Year: One Faculty involved with Fellowship:

Brian Burkey, MD FACS
Mumtaz J Khan, MD FACS
Head & Neck Surgery

Michael Fritz, MD Facial Plastics & Microvascular Eric Lamarre, MD Head & Neck Surgery/Microvascular

Myung Chang, DDS

David Adelstein, MD

Toby Nwizu, MD

John Greskovich, MD

Shlomo Koyfman, MD

Maxillofacial Prosthodontics

Hematology Oncology

Radiation Oncology

Radiation Oncology

Aaron Hoschar, MD Pathology
Debra Chute, MD Pathology
Aliye Bricker, MD Radiology

Claudio Milstein, PhD Speech Pathology

James Kaltenbach, PhD Research

Program Description:

Medical Center:

Cleveland Clinic is rated among the top four hospitals in the United States. The focus of all practices at the Cleveland Clinic is on providing world class care to all patients. The Clinic is one of the biggest employers of the state with almost 40,000 employees and 3000 staff physicians in the health system. The main hospital has a capacity of over 1200 beds, of which almost 45% are intensive/critical care beds, making it the largest tertiary critical care center in the country. According to the US News and World report, the Cleveland Clinic is the number one hospital in the state of Ohio, and 14 specialties are rated among the top ten in their field in the United States, including the Head and Neck Institute (HNI).

The Taussig Cancer Center at the Cleveland Clinic is a renowned cancer center, which participates in numerous multi-institutional clinical trials from across the country and is at the forefront of ground breaking cancer research and treatment protocols. It is part of the Case Comprehensive Cancer Center, a NCI-designated cancer center.

Head & Neck Institute:

The Head & Neck Institute has been consistently rated in the top ten otolaryngology programs in the country for the past several years. The Institute includes the disciplines of Otolaryngology-Head & Neck Surgery, Dentistry, Oromaxillofacial Surgery, Audiology and Speech and Communicative disorders, comprising 60 staff physicians. The HNI sponsors an ACGME-approved otolaryngology residency training program that graduates three trainees annually.

Eligibility:

A candidate must be Board Certified or Board Eligible in Otolaryngology. An Ohio state medical license is required before the start of fellowship. All interested US and Canadian fellowship applicants are required to be registered with the Match Program of the Advanced Training Council for Approval of Training in Head and Neck Oncology Surgery (sponsored by The American Head and Neck Society). Those applicants who are not eligible for the Match Program are required to undergo the same application process by filling out the AHNS application with references and directly sending them to the Head and Neck Institute (c/o Dr. Burkey). All qualified applicants will receive consideration without regard to age, race, color, religion, sex, national origin, or handicap.

Fellowship Description:

The CCF Head & Neck Fellowship is freshly added to the pool of fellowships approved by the American Head and Neck Society. The fellowship director has over a 20-year experience of directing head and neck oncologic surgery and microvascular reconstructive surgery fellowships. This fellowship will provide an intensive year-long training program for those in pursuit of a career in academic head and neck surgery. It will provide training in both the multidisciplinary non-surgical treatment of head and neck cancer patients as well as the advanced surgical management of head and neck tumors and cancers. This is designed to go beyond the more basic procedures taught in otolaryngology residency. Furthermore, the fellow will gain experience and establish competence in advanced head and neck reconstruction, including microvascular reconstruction. Finally the fellow will complete didactic and experiential training in the fundamentals of clinical research design and methodology.

This fellowship is primarily clinical in nature and there is not an additional expectation for laboratory research. However, the fellow will be expected to develop and complete at least one clinical or basic science research project that will likely result in a scientific presentation and/or publication. This will be developed with the HNI staff and research mentor, and the project will be due by the end of the fellowship year. The fellow will also gain gradual experience in the running of a multidisciplinary head and neck tumor board throughout the year, such that s/he will be expected to organize it with minimal oversight by the year's end.

The head and neck fellow will be expected to teach the Otolaryngology residents, specifically in the area of head and neck oncology and reconstruction. This will be done through occasional lectures, clinical oversight in the clinics and hospital wards and operative instruction in the operating room. The fellow will aid in resident education by being the teaching surgeon in more routine head and neck cases and thereby allow the expansion of the attending practices, while allowing the fellow to gain experience in the teaching which s/he will be expected to do in academic practice. The fellow will therefore complement the residency education in head and neck surgery rather than compete with it.

The fellow will be hired as a Cleveland Clinic staff physician, with standard otolaryngology privileges since s/he will be either certified by or eligible for ABOto certification. However, the fellow will not be given privileges for procedures which are a part of the fellowship training, which include advanced head

and neck oncologic surgery, skull base surgery and microvascular surgery. They will be allowed to cover departmental call, as do other staff members and other HNI fellows, but will have backup from the fellowship's faculty.

Past Fellows:

Samer Al-Khudari, MD – Assistant Professor, Rush University, Chicago, IL

Emory University School of Medicine

Program Director:

J. Trad Wadsworth, MD, MBA, FACS
Vice Chairman of Clinical Operations
Associate Professor
Director of Head & Neck / Microvascular Fellowship
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Chair of Department: Douglas Mattox, MD

Primary Surgical Faculty involved with Fellowship

J. Trad Wadsworth, MD, MBA Mark W. El-Deiry, MD Mihir Patel, MD Michael Baddour, MD Amy Y. Chen, MD, MPH

Non-surgical faculty involved with Fellowship

Patricia Hudgins, MD (Neuroradiology)
Ashley Aiken, MD (Neuroradiology)
Kristen Baugnon, MD (Neuroradiology)
Kelly Magliocca, DDS, MPH (H&N Pathology)
Jonathan Beitler, MD, MBA (Radiation Oncology)
Kristin Higgins, MD (Radiation Oncology)
Nabil Saba, MD (Medical Oncology)
Dong Shin, MD (Medical Oncology)
Meryl Kaufman, M.Ed., CCC-SLP (H&N Speech Pathology)

Total number of positions available per year: One (1) position per year **Parallel Fellowships:** Laryngology Fellow, Rhinology Fellow

Program Description:

Overview:

The Emory Department of Otolaryngology Head and Neck Surgery is a vibrant department in Atlanta, Georgia. Its residency program is only one of two programs in the state of Georgia with 4 residents per year. Its Winship Cancer Center is the only NCI designated Cancer Center in Georgia. The Head and Neck Surgery Division (AC, MWE, JTW, MP, MB) cares for nearly 1000 new patients, performs approximately 2500 surgical procedures, and sees over 7400 outpatient visits annually in a brand new state-of-the-art surgical and clinical facility. Our department cares for more head and neck patients than any other institution in the region and consists of four surgeons, two outpatient nurse practitioners, one inpatient nurse practitioner and three H&N specialist speech pathologists.

The Division includes two microvascular reconstruction trained surgeons (MWE, JTW, MB) as well as two surgeons specializing in endocrine surgery (AC, JTW) and burgeoning high volume TORS and translational research programs (MP, JTW). It is also actively involved with the Emory Head & Neck SPORE Grant with both institutional and cooperative group clinical trials. The Head and Neck Multidisciplinary Tumor Board is a robust, collaborative program that includes surgeons, medical oncologists, radiation oncologists, pathologists, speech pathologists, nurses, social workers, nutritionists, oral surgeons, and neuroradiologists. The HN Tumor Conference meets weekly to discuss head and neck patients, presenting usually 15-20 patients per week. The Thyroid Tumor conference meets monthly.

Objectives: The one year fellowship is designed to provide a comprehensive program in clinical head and neck ablative surgery, microvascular reconstruction, Transoral Robotic surgery (TORS), and thyroid/parathyroid surgery.

Eligibility: To be considered for the position, the candidate for the head and neck fellowship must have completed an ACGME accredited residency in Otolaryngology and must be qualified to sit for the American Board of Otolaryngology written and oral exams. The candidate must be able to secure a Georgia Medical License. Salary is commensurate with PGY level.

Duties and Responsibilities of Trainee: The Head and Neck Surgery Fellow will be appointed Instructor in the Department of Otolaryngology Head and Neck Surgery. The Fellow is expected to be a Primary or Teaching surgeon in head and neck surgery ablative cases and microvascular reconstruction cases. It is estimated that the Fellow will be primary surgeon or teaching surgeon on at least 500 cases and at least 100 free flap cases. The Fellow will care for the patients postoperatively with the HN Team and be expected to discuss management with the Attending Physician in order to maximize educational opportunities. In addition, the Fellow will be in the Call Pool for Attending Faculty in the Department and will have an independent outpatient clinical and surgical experience. There are also opportunities for autonomous free flap cases commensurate with experience and skill. Teaching opportunities include staffing head and neck surgery cases at Grady Memorial Hospital and VAMC, resident lectures, journal clubs, and a Grand Rounds presentation. The Fellow is expected to produce at least one abstract for a national meeting and/or a manuscript during the year, but ample opportunity for more research is provided. The Fellow is also expected to assist with teaching at the Annual Cadaveric Dissection Workshop as well as an Annual Microvascular Suturing Technique course.

http://otolaryngology.emory.edu/ed and train/fellowship/head-neck-oncologic-surgery-fellowship.html

Indiana University School of Medicine

Program Directors Cecelia E. Schmalbach, MD MS FACS

Professor of Otolrayngology

Vice Chairman, Clinical Affairs, Oto-HNS Chief, Dept of Otolaryngology, Eskenazi Health

Avinash Mantravadi, MD Assistant Professor

Department of Otolaryngology-Head & Neck Surgery

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Chairman of Department:

Marion Couch, M.D., F.A.C.S.

Richard T. Miyamoto, M.D. Professor and Chairman Department of Otolaryngology-Head & Neck Surgery

Faculty Involved with the Fellowship:

Marion Couch, MD (HNS)
Chad Galer, MD (HNS)
Sara Grethlein (MO)
Avinash Mantravadi, MD (HNS)
Taha Shipchandler, MD (HNS)
Mark Langer, MD (RO)
Cecelia Schmalbach, MD (HNS)
Jon Ting, MD (HNS/ Skull Base Surgery)

HNS-Head and Neck Surgery, MO-Medical Oncology, RO-Radiation oncology

Total Number of Positions Available per Year: One position per year

PROGRAM DESCRIPTION:

Overview:

Indiana University Medical Campus is the only academic medical center in the state of Indiana and serves the head and neck cancer patients of this population of over 6 million people. The primary head and neck cancer service at Indiana University School of Medicine is located at the IU Health University Hospital. Physically attached to this building is The Indiana University Simon Cancer Center, an NCI-designated cancer center since 1999. At this location, patient care is provided by all members of a multidisciplinary

team including representatives from head and neck surgery, radiation and medical oncology, oral pathology, neuroradiology, dental, oral maxillofacial prosthodontics, neurosurgery, and thoracic surgery. Additional hospitals on campus include Eskenazi Medical Center, The Indianapolis VA Medical Center, The Riley Hospital for Children, and Methodist Medical Center.

Strengths:

The primary strength of the program stems from the enthusiasm of the faculty and the breadth and depth of the patient care and teaching experience. The trainee will gain exposure to all aspects of advanced head and neck surgery including advanced ablative and endocrine procedures, open and endoscopic skull base surgery, head and neck reconstruction including a large volume of free tissue transfers, as well as transoral approaches to throat malignancies (both CO2 laser and transoral robotic surgery).

In addition, a significant emphasis will be placed on the fellow's role in the education of others in an attempt to prepare them to transition from being a trainee to being a trainer. By finishing the year as an instructor for the annual IU Anatomy and Histopathology Course, the fellow will also be able to reinforce the knowledge gained from the year as they prepare for the next phase of their career.

Objectives:

We offer a one year clinically oriented fellowship focused on developing skills in assessment, treatment strategies, and surgical techniques utilized in the management of advanced head and neck malignancies and certain traumatic, infectious, and benign neoplastic conditions. The main goal will be to provide an experience that will prepare the trainee to enter into a career in academic head and neck surgery. On top of developing proficiency in head and neck oncologic and reconstructive surgery, the participant will also be integrated into the multidisciplinary team at Indiana in an effort to emphasize the importance of this comprehensive approach to care.

Outside of clinical duties, a strong emphasis will be placed on the fellow's role as a future educator. This part of the experience will come through interactions with residents and medical students and will culminate at the end of the year where the fellow will participate in the annual discussion and dissection free flap cadaver course. The goal of this activity will be to solidify their knowledge of these techniques at the end of their fellowship to best prepare them to transition into practice.

Eligibility:

The applicant must have completed an accredited residency in Otolaryngology-Head and Neck Surgery, General Surgery, or Plastic Surgery and must have passed or attained qualification to sit for the American Board of Otolaryngology, Surgery, or Plastic Surgery. Canadian applicants must have passed or attained qualification to sit for the Royal College of Surgeons of Canada Exam.

Duties and Responsibilities of Trainees:

The head and neck fellow will be involved in all major head and neck surgical cases. They will assist in the training of senior residents in moderately complex head and neck procedures, while being the primary surgeon/first assistant for free flap harvests and most components of head and neck reconstructive procedures. Each week, they will have their own outpatient clinic for one-half to one full day, where they will see patients with general otolaryngology and head and neck disorders, and they will be provided one-half to one full day per week to schedule their own operative procedures from this practice. At any time, the fellow can approach other staff from the institution to assist with or provide surgical back-up for the procedures. The fellow will also assist with staffing of inpatient consults at the IU Health University Hospital.

Regarding floor care, the resident team, headed by the chief resident, will have primary responsibility of day-to-day patient care, however, the fellow will be asked to actively follow all major head and neck patients and oversee their care with additional attending supervision.

During the course of the year, the fellow will be required to generate and complete a clinical research project worthy of submission for publication and/or presentation at a national or international meeting. In addition, the fellow will be given the opportunity to spend two weeks on the medical oncology service (primarily in clinic) and an additional two weeks in clinic with the head and neck radiation oncology team to gain a more in-depth appreciation for these aspects of cancer therapy.

Supervision, Teaching and Call:

On the head and neck surgical team, there is one chief resident (PGY-5) and one senior resident (PGY-4). The integration of the head and neck surgical fellow will be with the goal of optimizing the training experience to all involved, while improving patient care. Once proficiency has been demonstrated by the fellow, they will be allowed to transition into a supervised staff role where they will instruct residents on moderately complex head and neck surgical procedures such as neck dissections, thyroidectomies, and salivary gland surgery. The fellow will work with the head and neck surgical staff for all free flap harvests and microvascular anastamoses, with senior residents being incorporated, when appropriate. Regarding patient care, the chief resident will have the primary responsibility of dictating patient care, with the fellow in direct communication with the team on all major head and neck cases. The fellow will be intimately involved in training of residents and medical students during the fellowship experience. This education will be in the form of didactic teaching at the head and neck departmental lecture series (will teach approximately one lecture every three months). They will be given additional opportunities to provide supervised and unsupervised (when appropriate) instruction in the clinic, operating room and on the wards of the hospital. The head and neck fellow will also be asked to organize and run the head and neck surgery team's presentations at the weekly tumor board discussion. At the completion of the academic year, the fellow will be given the opportunity to teach a portion of the head and neck reconstructive section of the annual IU Basic Science and Cadaver Dissection Course. This will allow for the fellow to reinforce their experience in free flap harvest and head and neck reconstructive theory. The head and neck reconstructive staff will be available to provide teaching materials/framework so this will not produce an unreasonable burden on the fellow as they approach the end of their experience.

The fellow will be included in the staff otolaryngology call schedule and will cover approximately 4 weeks of call during the year. The also will be asked, within reason, to be available for active issues that arise with in-patient major head and neck cancer patients.

Johns Hopkins University

Program Director: Wayne M. Koch, MD FACS

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Baltimore, MD, 21287

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 E:mail:
 wkoch@jhmi.edu

Chairman of the Department: David Eisele, MD

Faculty involved with the Head and Neck Surgical Oncology Fellowship: A=Ablative, M=Microvascular, R=Research

David Eisele, M.D. (A)
Wayne M. Koch, M.D. (A)
Christine Gourin, M.D. (A)
David Sidransky, M.D. (R)
John Saunders, M.D. (A)

Ray Blanco, M.D. (A)

Patrick Byrne, M.D. (M)

Kofi Boahene, M.D. (M)

Ralph Tufano, M.D. (A)

Carole Fakhry, M.D. (A, R)

Total number of positions available per year: One (one year) position available, option of either ablative or ablative/micro. There is an option of an additional research year which must be partially/wholly funded.

Other parallel fellowships: Pediatrics, Otology/Neuro-otology, Facial Plastic and Reconstructive Surgery, Rhinology, Laryngology

PROGRAM DESCRIPTION:

Objectives:

The objective of the Head and Neck Surgical Oncology Fellowship at Johns Hopkins is to promote and develop leaders in the field of Academic Head and Neck Oncology. Emphasis is on broad clinical training including all aspects of head and neck surgical oncology. Fellows will have a faculty appointment at the Instructor level that includes a mentored experience focused on a transition to independence. In particular fellows develop skills in clinical teaching within the context of our residency program. During the clinical year, fellows will participate in clinical and surgical care of patients within the faculty practices, but will also have an individual, mentored clinical surgical practice. Fellows completing the program will have finely honed skills in surgical diagnosis and treatment of tumors of the head and neck. Training will cover the entire gamut of head and neck surgery including endocrine, robotic, skull base, and minimally-invasive approaches.

Interested fellows may choose to do an additional year of research. We offer a rich environment of translational research bridging surgical oncology and molecular biology pertaining to head and neck cancer. The research training may serve as the basis to seek grant funding in order to facilitate the

initiation of an academic career and is particularly attractive to those candidates seeking a career as a clinician-scientist. Fellows may set up an individualized research training experience in consultation with the fellowship director. Often fellows will perform research in molecular biology of head and neck cancer. Other studied areas have included bioinformatics and a variety of opportunities are available throughout Johns Hopkins University.

History:

The Head and Neck Oncology Fellowships at Johns Hopkins began in 1986. It received approval of the American Head and Neck Society in 1993.

Requirements:

Board eligibility in Otolaryngology, General Surgery or Plastic Surgery

Description of Medical Center:

The Johns Hopkins Medical Institutions are world renowned for leadership in clinical medicine, public health and basic biomedical research. Johns Hopkins is a busy regional referral medical center encompassing the full range of clinical medicine with training programs for medical students, residents, and fellows in all major fields. The Head and Neck Oncology Service performs more than half of all major head and neck resections in the state of Maryland as well as drawing from four state regions. Over 500 new cases of HNSCC are managed each year at Johns Hopkins Hospital. The fellowship also supports Johns Hopkins Head and Neck Surgery at GBMC, a regional medical center with a well-developed head and neck center that sees approximately 250 new cases of head and neck cancer for all sites annually.

Fellowship Caseload:

The following is a list of all cases available to the head and neck fellow for the fellowship period. During the year, the fellow performed approximately 400 cases, of which 300 were major procedures. Approximately 20% of all cases are performed by the fellow as primary attending with mentorship support provided by a faculty mentor.

Available cases include: Salivary gland surgery: 143

Nose and paranasal sinus and skull base surgery: 89

Lip surgery: 14

Oral cavity surgery: 144 Neck surgery: 336

Larynx and pharynx surgery: 333 Thyroid and parathyroid surgery: 234

Tracheal surgery: 82

Ear and temporal bone surgery: 15 Regional/myocutaneous flaps: 45 Microvascular Reconstruction 107

Strengths

We offer one of the largest head and neck oncology teams in the country with a very busy clinical service. The fellow will develop increasing comfort in managing complex head and neck oncology patients within a multi-disciplinary framework. Dedicated clinical faculty provides mentorship to help develop skills and knowledge needed for an academic career. The academic milieu includes one of the finest Otolaryngology residency programs in the country, with excellence in every aspect of the field. The tumor biology research program of the Johns Hopkins Department of Otolaryngology is world renowned

as a leader in clinical translational research pertaining to HNSCC. Trainees have been highly successful in launching clinical translational academic careers.

Careers of Former Fellows:

Glen Peters, M.D. - Chief of Otolaryngology, University of Alabama

Wayne M. Koch, M.D. - Professor of Otolaryngology, Johns Hopkins

Richard Scher, M.D. - Faculty, Duke University

Joseph Brennan, M.D. - Air Force

Shelly McQuone, M.D. - Faculty, University of Pittsburgh

Michael Spafford, M.D. - Faculty, University of New Mexico

David Goldenberg, M.D. – Faculty, Penn State Hershey Medical Center

Patrick Ha, M.D. – Faculty, Johns Hopkins

Edward Stafford, M.D.- private practice

Melonie Nance, M.D. – Faculty, University of Pittsburgh Medical Center

Kavita Pattani, M.D. – Faculty, MD Anderson Cancer Center, Orlando

Martin Curry, D.O- Colonel, United States Army

Geoffrey Young, MD - Mayo Clinic, Jacksonville, FL

Ryan Sobel, MD – Inova Fairfax, VA

M.D. Anderson Cancer Center

Program Director: Amy C. Hessel, M.D.

Address: Department of Head and Neck Surgery

University of Texas M.D. Anderson Cancer Center

1515 Holcombe Blvd. Box 441

Houston, TX 77030 (713) 563-9413 (713) 794-4661

Email: <u>ahessel@mdanderson.org</u>

Website: http://www.mdanderson.org/education-and-

research/departments-programs-and-labs/departments-and-

divisions/head-neck-surgery/fellowship/index.html

Program Coordinator: Kelley Mikeska

klmikesk@mdanderson.org

Chairman of Department: Randal S. Weber, M.D.

Faculty Involved with the Fellowship:

Amy C. Hessel, M.D.

Jeffrey N. Myers, M.D.

Gary Clayman, M.D., D.D.S.

Eduardo M. Diaz, Jr., M.D.

Paul W. Gidley, MD

Ann M. Gillenwater, M.D.

Ehab Hanna, M.D.

Carol Lewis, MD

Stephen Lai, MD

Erich M. Sturgis, M.D.

Randal S. Weber, M.D.

Mark Zafereo, MD

Kristen Pytynia, MD

Shirley Su, MD

Micheal Kupferman, MD

Phone: Fax:

Total Number of Positions Available per Year: Three (3) positions available:

2 positions that are 1-year clinical HNS 1 position that is 2-year HNS & PRS

PROGRAM DESCRIPTION

Goals and Objectives: The goals and objectives of the MD Anderson Head and Neck Surgical Oncologic Fellowship are to train individuals to provide state of the art multidisciplinary care for patients with head and neck cancer, develop leaders in the field of head and neck oncologic surgery, and provide a rigorous academic experience in which fellows can participate in clinical, outcomes, translational, and/or basic science research under the guidance of a suitable mentor(s) with the ultimate goal of attaining support for future research endeavors upon the completion of training.

Criteria for Selection of Trainees: To be considered for a position, the candidate for the head and neck fellowship must have completed a residency program in Otolaryngology, General Surgery or Plastic Surgery. The time frame must be equivalent to the requirement to become, at minimum, chief resident; and preferable, should have attained Board eligibility. Candidates must have completed at least PGY V level of surgical education. The candidates are selected through a process that involves review of a written application, including letters of reference from past mentors and program directors, followed by a personal interview.

Final selections are made at the time of the AHNS Match process and in the following 2-3 months in order to fill all of the open positions. All interested US and Canadian fellowship applicants must be registered with the Match Program of the Advanced Training Council for Approval of Training in Head and Neck Oncology Surgery (sponsored by The American Head and Neck Society) to be considered for a position. Those applicants who are not eligible for the Match Program are required to undergo the same application process by filling out the AHNS application with the references and forwarding them directly to the Department of Head & Neck Surgery at MDACC, c/o Kelley Mikeska.

All qualified applicants will receive consideration without regard to race, color, religion, sex, national origin, age, handicap, sexual orientation, or veteran status.

Duties and Responsibilities of Trainees: For those fellows doing a 2 or 3 year fellowship, the first 12 to 24 months of non-clinical training are under the mentorship and supervision of research faculty within the institution and associated with the Department of Head and Neck Surgery. During the clinical year, a HNS faculty mentor is assigned to every fellow for counseling and review of progress. In addition, there are research tracts which allow for the pursuit of additional education such as a Masters in Public Heath which would be obtained through the available graduate education facilities in the Houston area. During the clinical rotation, the fellows' primary responsibilities are in the field of patient care. The Department of Head and Neck surgery faculty are divided into 4 clinical teams; each comprising of 3-5 surgeons. The fellows rotate through each of the teams twice throughout the year, and have exposure to all faculty members equally during the 12 months of clinical fellowship. The fellows will be the leaders of the team, and are expected to supervise residents as well as see new and follow-up patients in the clinic, manage as the inpatient service as well as the consultations for the clinical team. While on each service, the fellow will have hands-on operative experience with each faculty in their areas of specialty or expertise. They will serve as first assistants or primary surgeons in the operating room under the constant supervision of the faculty surgeon.

In addition to the hands-on experience in the operating room, clinic, and inpatient floor, the trainees are required to attend the educational activities of the week which include a Tuesday Didactic lecture, Wednesday Core Curriculum lecture and Friday morning Chairman teaching rounds. The subjects of the lectures and rounds are related to Head and Neck Oncology and related subspecialties and are meant to complement the practical learning. The theoretical instruction of the lecture series is well defined. The Didactic lectures are trainee-run grand round style lectures as well as literature reviews, clinic-radiologic-pathologic correlates and morbidity/mortality conferences. The Core Curriculum lectures are given by faculty either from the MDACC staff or from guest lectures. The topics include a rotating two year schedule for important topics for the Head and Neck oncology education.

In addition, the fellow will be expected to participate in the clinic research activities of the department. They will be asked to choose a supervising mentor and a clinical research project which can be completed during the year. They will be expected to participate in the IRB process, data collection, analysis and paper writing. In order to receive a Certificate of Completion from The University of Texas MD Anderson Cancer Center, the will have to submit a written paper suitable for peer-reviewed. "Moonlighting" is not allowed.

Supervision: Each of the fellows will be exposed to and participate in the care of approximately 350 newly referred patients annually. The fellow will participate with the senior staff in all decisions relative to the prescribed treatment. The fellow's operative responsibility will be assigned commensurate with ability. Residents and medical students are also assigned to the team, giving the Head and Neck fellow the opportunity to demonstrate leadership and educational skills.

Evaluation: Trainees are evaluated every three months by an instrument that was developed by the research section of the Office of Academic Affairs of the University Of Texas M.D. Anderson Cancer Center. There is an interim assessment after six months and an exit interview and questionnaire. The trainees and the program are both evaluated by the Advanced Training Council of the American Head and Neck Society.

Accreditation Status: Head and Neck Surgical Oncology is not a separate Board of Medical Specialities. The specialties of General Surgery, Otolaryngology, and Plastic Surgery share, in common, this subspecialty and, at the present time, the subspecialty is only certified by a committee or training council of the American Head and Neck Society. The application form for accreditation by the Joint Council for Approval of Advanced Training in Head and Neck Surgical Oncology can be found on the AHNS website at: www.ahns.info.

Duration of Program: Our fellowship program is either one, two, or three years long. All of these programs are accredited by the Joint Council for Approval of Advanced Teaching in Head and Neck Surgical Oncology. The **one-year** fellowship is a pure clinical position which emphasizes a multidisciplinary approach to the management of head and neck cancer. Surgical experience involves all aspects of head and neck surgical oncology, including skull base surgery, robotics, and other micro invasive techniques.

The **two-year** position provides a one year of dedicated clinical, outcomes, basic science, and/or translational research and one year of clinical training. The **three-year** position provides two years of dedicated research time and one year of clinical training. The research years are under the direct guidance of an appropriate mentor in the area of interest within the MDACC institution. In addition, there are research tracts which allow for the pursuit of additional education such as a Masters in Public Heath.

There is a **two-year** fellowship in Head and Neck Surgical Oncology and Microvascular Reconstructive Surgery which is a unique fellowship offering intensive training in each discipline. The first year is a pure HNS clinical year as described above. The second year is a pure reconstructive experience directed and supervised by the Department of Reconstructive and Plastic Surgery.

The positions available at the UT MDACC Department of Head & Neck Surgery will vary from year to year depending on which positions are held by the current fellows. Please e-mail Dr. Amy Hessel (ahessel@mdanderson.org) or Kelley Mikeska (klmikesk@mdanderson.org) for further information regarding which positions are open for the upcoming fellowship year.

Careers of Former Fellows: 1997-2000	Erich M. Sturgis. MD
	Dept of Head & Neck Surgery UT MD Anderson Cancer Center
1998-2000	Paul M. Spring. MD Otolaryngology - HNS Metairie, LA
1999-2000	Amy C. Hessel. MD Department of Head and Neck Surgery UT M.D. Anderson Cancer Center, Houston, TX
1998-2001	Amy Y. Chen, MD Department of Otolaryngology-HNS Emory University, Atlanta, GA
1999-2001	Mike Yao, MD Department of Otolaryngology-HNS Scarsdale, NY
1999-2001	Eric J. Lentsch, MD Department of Otolaryngology-HNS Medical University of South Carolina, SC
2001-2003	F. Christopher Holsinger, MD Department of Otolaryngology - HNS Stanford University, Palo Alto, CA
2001-2003	Bryan Potter, MD Coshocton, OH
2001-2003	Hernan E. Gonzalez, MD Santiago Chile
2002-2003	Christian Simon, MD Department of Otolaryngology Washington University School of Medicine
2002-2004	Kristen B. Pytynia. MD Department of Head and Neck Surgery UT MD Anderson Cancer Center, Houston, TX
2002-2004	Bradley A. Schiff. MD Department of Otolaryngology-H&N Surgery Montefiore Medical Center
2003-2005	Brian A. Moore, MD Dept of Otolaryngology-HNS,

	Oschner Medical Center, New Orleans, LA
2004-2005	Kenneth Newkirk, MD Department of Otolaryngology-H&N Surgery Georgetown University Hospital
2004-2005	William J. Harb, MD Cumberland Surgical Associates Nashville, TN
2004-2006	Christopher Klem, MD Department of Otolaryngology-HNS, US Army Tripler Army Medical Center, Honolulu, HI
2003-2006	Seungwon Kim, MD Department of Otolaryngology-H&N Surgery University of Pittsburgh, Pittsburgh, PA
2003-2006	Thomas D. Shellenberger, MD Department of Head & Neck Surgery Banner Hospital, Phoenix, AZ
2004-2006	Michael E. Kupferman, MD Department of Head and Neck Surgery UT M.D. Anderson Cancer Center
2006-2007	Allison Lupinetti, MD Otolaryngology – HNS Albany, NY
2005-2008	Andrew Sikora, MD Department of Otolarynoglogy-HNS Mount Sinai School of Medicine, New York, NY
2006-2009	Chad Galer, MD Department of Otolaryngology-HNS VA Medical Center, Indianapolis, IN
2006-2009	Mauricio Moreno, MD Department of Otolaryngology-HNS Univ of Arkansas Medical Sciences, Little Rock, AR
2007-2008	Gabriel Calzada, MD Kaiser Permanente, Otolaryngology-HNS Downey, CA
2007-2008	Umamaheswar Duvvuri, MD Department of Otolaryngology-HNS University of Pittsburg Medical Center, Pittsburgh, PA
2007-2010	Zvonimir Milas, MD

	Department of General Surgery Charlotte, NC
2008-2009	Yitzchak Weinstock, MD Department of Otolaryngology-HNS University of Texas Medical Center, Houston, TX
2008-2010	Genevieve Andrews, MD Department of Otolaryngology- HNS Temple University, Pittsburg, PA
2008-2010	Carol Lewis, MD Department of Head and Neck Surgery UT M.D. Anderson Cancer Center, Houston, TX
2009-2010	David Grant, MD Department of Otolaryngology-HNS
2009-2011	Mihir Bhayani, MD Department of Otolaryngology-HNS North Shore Medical Center, Chicago, IL
2010-2011	Charley Coffey, MD Department of Otolaryngology – HNS UC – San Diego, San Diego, CA
2010-2011	Rafeal Toro-Serra, MD Norman Parathyroid Center Wesley Chapel, FL
2010-2011	Mark Zafero, MD Department of Head and Neck Surgery UT MD Anderson Cancer Center, Houston, TX
2009-2012	Thomas Ow, MD Department of Otolaryngology - HNS Albert Einstein University, Bronx, NY
2011-2012	Shirley Su, MD Department of Head and Neck Surgery UT MD Anderson Cancer Center, Houston, TX
2012-2013	Steve Chang, MD Department of Otolaryngology- HNS Henry Ford University, Detroit, MI
2012-2013	Constance Teo, MD Department of Otolaryngology – HNS Singapore General Hospital, Singapore

Massachusetts Eye & Ear Infirmary/Harvard Medical School

Program Directors: Daniel G. Deschler, MD and Derrick T. Lin, MD

Address: Massachusetts Eye and Ear Infirmary

243 Charles Street Boston, MA 02421

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Email: <u>Daniel_Deschler@meei.harvard.edu</u> <u>derrick_lin@meei.harvard.edu</u>

Website: www.meei.harvard.edu

Chairman of Department: Joseph B. Nadol, MD

Program Coordinator: Melanie Pina – melanie pina@meei.harvard.edu

Faculty Involved with the Fellowship:

Glen Bunting, MS
Paul M. Busse, MD
Hugh Curtin, MD
William T. Curry, MD
John R. Clark, MD
Daniel G. Deschler, MD
Kevin Emerick, MD
Matthew Jackson, DMD
Derrick T. Lin, MD
James Rocco, MD
Lori Wirth, MD

Total Number of Positions Available per Year: One Position

PROGRAM DESCRIPTION

Overview: The Head and Neck Fellowship program at the Massachusetts Eye and Ear Infirmary provides advanced clinical training in head and neck oncology, microvascular free flap reconstruction, advanced skull base surgery, transoral robotic surgery, and thyroid and parathyroid surgery. In conjunction with the Massachusetts General Hospital Cancer Center, the fellow will receive comprehensive multidisciplinary training in the management of patients with advanced head and neck cancer.

Eligibility: The fellow candidate must have completed residency in Otolaryngology. Candidates should be board certified or board eligible and be eligible for Massachusetts State Medical Licensure.

Clinical Experience: The fellow will oversee the care of all head and neck cancer patients being treated at the Massachusetts Eye and Ear Infirmary/Massachusetts General Hospital. The fellow will assist with the teaching of residents in ablative head and neck surgical procedures. He/she will receive extensive training in free flap reconstruction, skull base surgery, and transoral robotic surgery. The fellow is expected to participate in tumor board, multidisciplinary clinic, resident teaching rounds, and skull base tumor conference.

Research Opportunities: All fellows are expected to participate in clinical projects throughout the year. Fellows in the past have all presented at national meetings and published their work. Basic science research opportunities are available through the mentorship of Dr. James Rocco.

Strengths: The Division of Head and Neck Oncology at the Massachusetts Eye and Ear Infirmary serves as the premier referral center for advanced head and neck cancer care in New England. The high clinical volume provides the fellow with extensive experience in the management of these patients. As an Eye and Ear Infirmary, the fellow will have the unique opportunity for close interaction with national leaders in the fields of radiology, pathology, and speech and swallow therapy, while the collaborative efforts with the Massachusetts General Hospital will provide experience with radiation and medical oncology, neurosurgery, thoracic surgery, and surgical oncology.

Careers of Former Fellows:

Vicente Resto, MD, PhD - Chair, Associate Professor, University of Texas, Galvaston Jose Sanclement, MD – Assistant Professor, University of Oklahoma Jeremy Richmon, MD – Assistant Professor, Johns Hopkins University Anthony Nichols, MD – Assistant Professor, University of Western Ontario Vasu Divi, MD – Assistant Professor, Stanford University Medical Center Audrey Erman, MD – Assistant Professor, University of Arizona

Mayo School of Graduate Medical Education Rochester, MN

Program Director Eric J. Moore, M.D.

Professor, Otolaryngology

Mayo Clinic

Address: 200 First Street Southwest

Rochester, MN 55905

Phone: 507-284-3521 Fax: 507-538-7926

Email: moore.eric@mayo.edu

Website: http://www.mayo.edu/msgme/residencies-

fellowships/otolaryngology/advanced-head-and-neck-oncologic-and-reconstructive-surgery-fellowship-

minnesota

Chairman of Department: Colin L.W. Driscoll, M.D.

Faculty Involved with the Fellowship:

Jeffrey R. Janus, M.D. Jan L. Kasperbauer, M.D. Eric J. Moore, M.D. Kerry D. Olsen, M.D. Daniel L. Price, M.D.

Total Number of Positions Available per Year: 1 one-year clinical fellowship in advanced head and neck reconstructive surgery, including microvascular reconstruction and transoral oncologic surgery. [include any specifics about the positions – length, focus, etc]

PROGRAM DESCRIPTION:

Overview:

Fellowship training takes place in a high-volume quaternary health care facility and includes head and neck oncologic surgery, transoral laser microsurgery for head and neck cancer, transoral robotic-assisted surgery for head and neck cancer, reconstructive head and neck rehabilitative surgery, including microvascular free flap reconstructive surgery and exposure to multidisciplinary head and neck cancer care.

Fellows participate in all aspects of patient care and are expected to function independently in routine surgical cases including preoperative and postoperative care of patients. In addition to the clinical experience, fellows in the Advanced Head and Neck Oncologic and Reconstructive Surgery Fellowship participate in didactic activities and have an average of 1 day/week of protected time to pursue basic science and translational research in a variety of labs.

Strengths:

Mayo Clinic has been designated by the National Cancer Institute as a comprehensive cancer center. We have one of the largest head and neck oncology surgery practices in the country. We also have the unique opportunity to care for many international patients. Patients are referred internally throughout Mayo Clinic based on the patient's cancer type. Interdepartment referral is the norm of this multidisciplinary practice. A weekly head and neck conference including physicians in radiation oncology, medical oncology, radiology, pathology, is conducted to discuss patients who present to the

Head and Neck Division for treatment of their head and neck malignancy. A liberal travel policy is provided for the fellow to attend and/or present at major meetings.

Objectives:

The Advanced Head and Neck Oncologic and Reconstructive Surgery fellowship at Mayo Clinic is a one year program designed to train subspecialty fellows in the broad scope of advanced head and neck oncologic practice including microvascular reconstruction and transoral robotic-assisted oncologic surgery.

Eligibility

U.S. applicants to the fellowship program must have completed an ACGME accredited residency program and be qualified to sit for the American Board of Otolaryngology certification examinations. The applicant must meet the eligibility requirements set by the Mayo School of Graduate Medical Education for obtaining and maintaining the appropriate residency permit or medical license while enrolled in the program. Foreign medical graduates will be considered, but applicants must have passed Step I and 2 of the USMLE prior to being considered for the fellowship.

Duties and Responsibilities of Trainees:

The fellow participates in all complex head and neck operative cases under the supervision of faculty. This includes large volume ablative surgery as well as reconstruction requiring local pedicled flaps or free tissue transfer.

The fellow participates in morning rounds, specifically offering assistance and guidance to the junior resident. The fellow focuses on rounds for patients on which he/she has operated, while also educating the junior resident on complex issues that arise with other patients.

The fellow's time is 20% research, 20% pre/post-operative care and head and neck clinic and 60% operative. The fellow has one day a week of dedicated research time, one day a week of outpatient clinical time, and three days a week of operative time.

During operative time, the fellow functions as primary surgeon on free flap cases and complex ablative cases, and supervises/educates the junior resident on more routine cases (i.e. thyroids, simple oral cavity cases, neck dissections, etc). In clinic, the fellow focuses on new cases, exercising the principles of appropriate oncologic workup and operative decision-making with the oversight of staff, and follows the patients in their postoperative care to evaluate the outcomes of this treatment. The fellow will assist the residents on the head and neck services in the clinic and supervise the oncologic surveillance of selected patients.

Supervision, Teaching and Call:

The fellow provides a significant portion of patient care under the direction and supervision of the faculty. In the outpatient setting, the fellow evaluates patients. In the operating room, the fellow participates in all complex head and neck operative cases under the supervision of faculty. The fellow acts as an educator for the current residents, particularly on straightforward cases. At the discretion and under the supervision of the staff, the fellow will perform routine cases as the supervisor/educator and the resident as the primary surgeon.

The fellow presents at the department's Grand Rounds, attends and participates appropriately in the weekly multidisciplinary head and neck tumor conference, participates and presents at the weekly group meeting following hospital rounds. The fellow does not have call responsibilities other than to provide pager call during the annual otolaryngology training exam to allow the otolaryngology residents to participate in that activity.

Medical University of South Carolina

Program Director: Terry A. Day, M.D.

Address: Head & Neck Tumor Center

Hollings Cancer Center

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Charleston, SC 29425

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 (843) 792-0546

 Email:
 headneck@musc.edu

Website: www.muschealth.com/headneck

Chairman of Department: Paul R. Lambert, M.D.

Program Coordinator: Ann Durgan: <u>durguna@musc.edu</u>

Faculty Involved with the Fellowship:

Terry Day, MD	Head & Neck Surgery
M. Boyd Gillespie, MD	Head & Neck Surgery
Joshua Hornig, MD	Head & Neck Surgery/Microvascular
Eric Lentsch, MD	Head & Neck Surgery
David Neskey, MD	Head & Neck Surgery
Judith Skoner, MD	Head & Neck Surgery/Microvascular
Roy Sessions, MD	Head & Neck Surgery
Krishna Patel, MD, PhD	Facial Plastic & Reconstructive Surgery
Anand Sharma, MD	Radiation Oncology
Jennifer Harper, MD	Radiation Oncology
Keisuke Shirai, MD	Medical Oncology
Paul O'Brien, MD	Medical Oncology
Bonnie Martin Harris, PhD	Speech Pathology
Betsy Davis, DMD	Maxillofacial Prosthodontics
Martin Steed, DDS	Oral & Maxillofacial Surgery
Mary Richardson DDS, MD	Head & Neck Pathology
Brad Neville DDS	Oral Pathology
Gisele Matheus, MD	Head & Neck Radiology
Vittoria Spampinato, MD	Head & Neck Radiology
Jyotika Fernandes, MD	Endocrine Oncology
Alex Vandergift, MD	Neurosurgery/Skull Base Surgery
Sunil Patel, MD	Neurosurgery/Skull Base Surgery
Joel Cook, MD	Mohs & Dermatologic Oncology
Katherine Sterba, PhD	Quality of Life and Survivorship
M Rita Young, PhD	Head & Neck Immunology
Besim Ogretmen, PhD	Lipidomics in Head and Neck Cancer
Keith Kirkwood, PhD	Head & Neck Tumor Biology
Steve Rosenzweig, PhD	Signaling in Head and Neck Cancer
Viswanathan Palanisamy, PhD	Craniofacial Biology

Total Number of Positions Available per Year: Two one year clinical fellowships

PROGRAM DESCRIPTION

Overview:

Clinical:

The Head and Neck Tumor Center at the Medical University of South Carolina (MUSC) is one of the largest programs in the US devoted to the care of the head and neck cancer patient. The program is based within the Hollings Cancer Center at MUSC, the only NCI-designated cancer center in South Carolina. The focus of the MUSC Head and Neck Tumor Center is on providing compassionate, comprehensive and innovative care to all patients and their families. Overall, 750 – 800 new patients with head and neck cancer are evaluated at MUSC annually. The MUSC Head and Neck Tumor Center has a strong multidisciplinary focus, with providers from Head and Neck Surgery, Radiation Oncology, Medical Oncology, Maxillofacial Prosthdontics, Speech/ Swallowing Therapy, Dental Oncology, Nutrition, Social Work and related fields working together to provide the optimal care for head and neck cancer patients. In 2011, the Head and Neck Tumor Center was cited as the best interdisciplinary clinical program at MUSC. The Head and Neck Tumor Center also has an extremely robust research portfolio. Currently, the program has 15 open clinical trials in head and neck cancer, along with 10 NIH-funded basic science laboratories or translational research programs with over four million dollars annually in research funding. The MUSC Head and Neck Tumor Center is a division of the MUSC Department of Otolaryngology-Head and Neck Surgery but was approved as an institutional center at MUSC crossing many disciplines. The Department of Otolaryngology – HNS at MUSC is ranked 10th nationally among Otolaryngology departments for NIH funding, with over \$5.5 million in current grants. The most recent US News & World report study ranked the MUSC Department of Otolaryngology as #2 in the Southeastern US.

The Fellowship in Surgical Oncology and Microvascular Reconstruction of the Head and Neck at MUSC provides the highest level of training in the management and surgical treatment of head and neck cancer. Each Fellow enters as Clinical Instructor level faculty and performs approximately 280 major cases per year as primary surgeon. Depending on their level of interest, fellows will participate in 50 – 100 cases of microvascular free tissue transfer for head and neck reconstruction. Fellows also have the opportunity to perform surgical procedures with surgeons from other specialties, including Facial Plastics, Dermatologic Surgery, Oral and Maxillofacial Surgery, Ophthalmology, Thoracic Surgery, and Vascular Surgery. In addition to working with senior faculty in a clinical setting, each Fellow also has an independent head and neck cancer clinic and is not responsible for general otolaryngology patients. In this setting, fellows evaluate new patients each week and have primary management responsibility for all patients seen in their clinic. All patients evaluated in the Fellows' clinic who require surgical intervention are operated upon by the Fellows with the supervision or assistance of senior faculty as appropriate. In this manner, Fellows have the opportunity to function largely independently as junior faculty in accordance with their skill and experience levels. Fellows also have short clinical rotations with specialists from Radiation Oncology, Medical Oncology, Oral Pathology, Head & Neck Pathology, Maxillofacial Prosthodontics and Speech Pathology. Research opportunities abound. Fellows participate in all Head and Neck Clinical Trials meetings and are required to complete at least one translational research project during the fellowship along with other clinical studies or review projects. For those interested in undertaking more dedicated research time, there is the option to devote an additional year exclusively to research.

Research:

Steve A. Rosenzweig, Ph.D.
Professor
Department of Cell & Molecular Pharmacology:

Research is focused on the role of the insulin-like growth factor (IGF) system in cancer progression, metastasis and therapeutics in solid tumors, with particular emphasis on IGF-1R crosstalk to vascular endothelial growth factor receptors. This work combines basic, mechanistic experimentation with animal studies and translational approaches using human specimens, thereby providing an optimal environment for students, postdoctoral fellows and junior faculty to pursue successful research projects. In particular, we are examining the mechanisms by which VEGF signaling in head and neck squamous cell carcinoma regulates invadopodia formation and invasive activity. In a second project, we are developing IGFBP-2 as a therapeutic that would have utility in a number of cancers in which IGF-1 receptor signaling leads to enhanced tumorigenicity.

Viswanathan Palanisamy, Ph.D. Associate Professor Department of Oral Health Sciences:

Research is focused on investigating the post-transcriptional changes that regulate the gene expression patterns during oral cancer and mucositis development. My primary research interest is to investigate the post-transcriptional changes that regulate the gene expression patterns during oral cancer and mucositis development. I have the expertise in RNA and salivary biology, oral cancer, leadership skills and scientific determination to pursue academic research as a career will help me to successfully carry out the proposed grant application. Specifically, I have a strong background in studies aiming at post-transcriptional gene expression in oral cancer with special training and expertise in genomics and transcriptomics of oral health research. Given my Biochemistry and Molecular Biology training, and interests in oral health and oncology research, I am well-suited as an investigator training head and neck surgical oncology fellows. With a strong working knowledge in RNA biology, I teamed up with Drs. Terry Day, Marion Boyd Gillespie and David Neskey to study post-transcriptional regulation in head and neck squamous cell carcinoma.

M. Rita I. Young, Ph.D. Associate Chief of Staff for Research Ralph H. Johnson VAMC

Research focus is in the area of Oncology, with particular emphasis on immune regulation in patients with squamous cell carcinoma of the head and neck (HNSCC). Immunotherapy for cancer patients is a treatment approach that has been the thrust of my studies. However, stimulation of anti-cancer immune reactivity is hampered by the severe immune dysfunction in cancer patients. The studies in my lab have identified several mechanisms by which to overcome this immune dysfunction so that subsequent immune vaccines can be effective. Toward this goal, my basic science laboratory studies have progressed into several clinical trials with HNSCC patients. The present study aims to capitalize on an immune stimulatory phenotype that is present in the early stages that lead to HNSCC development. This translational study to sustain an immune stimulatory environment so as to limit tumor progression is expected to lead to novel approaches for patients who are at high risk of developing oral cancer. I have been an independent PI for more than 25 years with national, peer-reviewed funding from VA, NIH,

DOD, and others. I am well qualified to serve as a mentor and oversee the training of head and neck surgical oncology fellows.

Besim Ogretmen, Ph.D.
Professor
Department of Biochemistry & Molecular Biology

Research is focused on the molecular mechanisms of the regulation of telomerase and telomeres by ceramide signaling. Furthermore we are investigating the mechanisms of ceramide-mediated regulation of PP2A by lipid-protein interactions along with the regulation of ER stress and apoptosis by sphingolipid metabolism. We have are also studying the mechanisms of lipid-regulated cancer metastasis and drug resistance in HPV associated head and neck squamous cell carcinoma. Given my background in biochemistry and lipid metabolism along with my ongoing collaborations with Drs. Terry Day and David Neskey I am well-positioned to provide mentorship to head and neck surgical oncology fellows interested in pursing a career as a surgeon scientist. With a strong working knowledge in RNA biology, I teamed up to study post-transcriptional

David M. Neskey, M.D.
Assistant Professor
Department of Otolaryngology
Division of Head and Neck Surgical Oncology
Department of Cell and Molecular Pharmacology:

Research is focused on the impact of mutations in the tumor suppressor, *TP53*, on tumor progression and metastases. This work combines a translational component including the analysis of clinical and genomic data with preclinical modeling including *in vitro* assays of cell proliferation, migration, and invasion and *in vivo* experiments including orthotopic mouse models of oral cancer and tail vein metastatic models. We are currently investigating novel mechanisms associated with oncogenic characteristics of p53 mutations, which combines genomic sequence analysis with high throughput screens of candidate genes. The goal of these studies is to identify novel targets for potential therapeutic intervention. A second project investigates the role Myosin IIA, a nonmuscle myosin recently identified as tumor suppressor in HNSCC, in the oncogenic properties of mutant p53. My role as a surgeon scientist focused on translational research provides a great opportunity for aspiring surgeon scientists specifically with my expertise in cellular biology, genonomics, clinical outcomes research.

Goals and Objectives:

The goals and objectives of the Fellowship in Surgical Oncology and Microvascular Reconstruction of the Head and Neck are as follows:

- 1.) Provide comprehensive, hands-on training in Head and Neck Surgery including the treatment of complex endoscopic and open aerodigestive, cutaneous, endocrine and skull base neoplasms.
- 2.) Establish a strong foundation in research methods in preparation for a career in academic Head and Neck Surgery.
- 3.) Instill a team-based multidisciplinary approach and philosophy for addressing the most complex issues confronting the Head and Neck surgeon.

4.) Provide thorough training in microvascular techniques for reconstruction of head and neck defects.

Eligibility:

Applicants for the head and neck oncologic and reconstructive fellowship must have completed a residency program in Otolaryngology, General Surgery or Plastic Surgery. The applicant should have significant experience in surgery of the head and neck and be BC/BE in Otolaryngology, General Surgery, or Plastic Surgery. A South Carolina medical license must be obtained prior to the fellowship year as well as VA privileges. Applicants are required to complete a written application, including three letters of reference, and a personal on-site interview. All interested US and Canadian fellowship applicants must be registered with the Match Program of the Advanced Training Council of The American Head and Neck Society to be considered for a position. The Medical University of South Carolina is an equal opportunity affirmative action employer. Women and minorities are encouraged to apply.

Supervision:

The Fellow will participate in the outpatient evaluation and treatment, inpatient care, and surgical treatment of over 700 new patients per year. The Fellow will work under the supervision of senior faculty, but will also have the opportunity to increasingly function independently during the course of the training year as appropriate. Trainees are evaluated monthly by program faculty and semiannual reviews are performed with the Program Director in person.

Accreditation Status:

The Fellow will be provided a certificate of completion of the fellowship upon satisfactory achievement of required goals and objectives by MUSC. In addition, Fellows are expected to apply for accreditation and membership in the American College of Surgeons and the Advanced Training Council of the American Head and Neck Society.

Careers of Former Fellows:

2002-2003

Michael Burnett, M.D. - New York Otolaryngology Group, New York, NY.

2003-2004

Serap Koybasi, M.D. - Abant Izzet Baysal University, Bolu, Turkey.

2004-2005

Joshua D. Hornig, M.D. - Medical University of South Carolina, Charleston, SC.

2005-2006

Allen O. Mitchell, M.D. - Naval Medical Center, Portsmouth, VA.

2006-2007

Oleg N. Militsakh, M.D. - University of Nebraska Medical Center, Omaha, NE.

2007-2008

Luke O. Buchmann, M.D. - University of Utah, Salt Lake City, UT.

2008-2009

Nadia Mohyuddin, M.D. - Baylor College of Medicine, Houston, TX.

2009-2010

Tanya Fancy, M.D. - West Virginia University Health Sciences Center, WV.

2010-2011

Wayne Cardoni, M.D. - National Naval Medical Center, Bethesda, MD.

Trinita Cannon, M.D. - University of Oklahoma Health Sciences Center, Oklahoma City, OK.

2011-2012

Barry T. Malin, M.D., M.P.P. - Medical University of South Carolina, SC.

Akash Anand, M.D. – Private Practice, Metairie, LA.

2012-2013

Arnaud Bewley, M.D. – University of California, Davis

Mayuri Rajapurkar, M.D. - Private Practice, Nadiad, Gurarat, India.

2013-2014

Jeffrey Houlton, M.D. - University of Washington, Seattle, WA. **Paul Tennant, M.D.** - University of Louisville, Louisville, KY.

Memorial Sloan-Kettering Cancer Center

Program Director: Jay O. Boyle, M.D.

Address: Head and Neck Service, Department of Surgery,

Memorial Sloan-Kettering Cancer Center.

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 Email:
 boylej@mskcc.org

Website: https://www.mskcc.org/hcp-education-training/fellowships/head-and-neck

Chief of Service: Richard J. Wong, M.D.

Faculty Involved with the Fellowship:

Jay O. Boyle, M.D. Benjamin R. Roman, M.D., M.S.H.P.

Marc A. Cohen, M.D., M.P.H.

Jatin P. Shah, M.D., Ph.D.

Ian Ganly, M.D, Ph.D.

Ashok R. Shaha, M.D.

Ronald A. Ghossein, M.D. Bhuvanesh Singh, M.D., Ph.D.

Nancy Y. Lee, M.D.

Luc G.T. Morris, M.D., M.Sc.

Snehal G. Patel, M.D.

Richard J. Wong, M.D.

David G. Pfister, M.D.

Total Number of Positions Available per Year: Two (1 to 3-year) positions.

PROGRAM DESCRIPTION

Overview: For over a century, the Head and Neck Service at Memorial Sloan-Kettering Cancer Center has provided leadership and innovation in the field of head and neck surgery and oncology. Memorial Hospital is the cradle of modern head and neck surgery with legends in the field such as Hayes Martin, Elliot Strong and Jatin Shah. Today, the service continues this proud tradition with dedication to patient care, research, and education. As one of the largest referral centers in the world, Memorial Hospital receives patients from the greater New York area, the United States, and from all corners of the globe. The Head and Neck Service cares for more than 2,500 new patients, performs approximately 1,900 surgical procedures, and manages over 22,000 outpatient visits each year. The faculty members are world leaders in head and neck surgery, and hold academic appointments at Weill Cornell Medical College.

Eligibility: The Head and Neck Service of the Department of Surgery at Memorial Sloan-Kettering Cancer Center offers a one year, two year and a 3 year senior fellowship in head and neck oncologic surgery to Otolaryngologists, General Surgeons, or Plastic Surgeons who have completed their residency training and attained qualification to sit for the examination of the American Board of Otolaryngology, Surgery, or Plastic Surgery. The fellowship program is designed to offer a comprehensive training program in clinical head and neck surgery and oncology and basic research to prepare the individual for an academic career. Three new fellows are appointed each year. Trainee salary, subsidized housing, and health insurance are provided.

Clinical Training: The fellowship program provides intensive hands-on surgical training in complex ablative head and neck oncologic surgery and minimally invasive techniques. This includes composite resection of tumors of the oral cavity and oropharynx, craniofacial resection of sinonasal tumors, excision of advanced skin cancers, salivary gland tumors, early and advanced laryngeal and hypopharyngeal cancers, parapharyngeal space tumors, advanced thyroid cancers, , Trans Oral Roboticassisted Surgery (TORS), Trans-oral Laser Microsurgery (TLM), and endoscopic skull base surgery including trans-nasal approach to pituitary and other skull base tumors. Local regional and myocutaneous flaps and reconstruction are done by the head and neck service while microvascular free flap reconstruction is performed by the plastic surgery service. The clinical rotation consists of a 12month period wherein fellows are responsible for preoperative and postoperative patient care, and are involved in surgical operations under the direction of the attending surgeons. Each fellow performs 300 to 350 procedures during the year of clinical rotation. Fellows work with a multidisciplinary team of physicians and other professionals specializing in head and neck oncology to ensure the optimal treatment for each patient. Our integrated disease management team (DMT) consists of head and neck surgeons, plastic and reconstructive surgeons, neurosurgeons, medical oncologists, radiation oncologists, maxillofacial prosthodontists, pathologists, radiologists, basic scientists, speech and voice therapists and dedicated nursing staff.

Research Opportunities: The research rotation consists of one to two years, depending upon individual interests, performing clinical or basic research with an opportunity to focus on any aspect of head and neck oncology, including but not limited to genetics, molecular biology, chemo-prevention, experimental therapeutics, and health outcomes and health services research. A NIH funded T32 research grant is available each year for those who are interested in accomplishing two years of full-time basic research. Laboratory support is provided by a multidisciplinary team of collaborative scientists, who mentor fellows in developing a hypothesis, determining focus, developing methodology, interpreting results, and publication of their laboratory work. Special emphasis is placed on developing skills for grant applications. Head and neck fellows have been very successful recipients of research awards during and after training. Fellows are encouraged to apply to granting agencies and national societies for support.

Education: Didactic lectures and clinical case-based learning are emphasized during the fellowship. One key component is participation in tumor board. This is a multidisciplinary tumor board in which complex medical decision-making takes place among the faculty through discussion of the literature and the expected risks, benefits, and alternatives of treatment. Additional weekly lectures are given by the faculty on all subjects within head and neck surgical oncology. Fellows also gain experience by participating in outpatient clinics, rounds, lectures, seminars, journal club, and research conferences. Fellows have access to all conferences at Memorial Sloan-Kettering Cancer Center. There are currently approximately 50 formal conferences and four to six cancer-related lectures each week. Fellows may also enroll to various career enhancement programs at Weill Cornell Medical College. In addition the fellows are invited to participate in external training activities that are organized by the head and neck service and include a Trans Oral Endoscopic Laser Microsurgery Course and the Current Concepts in Head and Neck Surgery Course, both held annually. All fellows are also given an opportunity to supervise and instruct residents on the Head and Neck Service in the operating room and regarding peri-operative care.

Careers of Former Fellows: Over 75 fellows have trained on the Head and Neck Service, many of whom have become leaders in the field, chairs of departments, and hold prominent roles in national and international societies.

Graduate	Start	End	Current Location
Richard A. Lopchinsky	1979	1980	General Surgery, Phoenix, AZ
Gaetano DeRose	1980	1981	General Surgery, London Health Sciences, London, ON, Canada
Ashok R. Shaha	1981	1982	Attending Surgeon, Head and Neck Service, MSKCC, New York, NY
Walter King	1982	1983	Director, Plastic and Reconstructive Surgery, Sanatorium Hospital, Hong Kong
Larry Sheman	1983	1984	ENT, Private Practice, New York, NY
Barry Wenig	1984	1985	Director of the head and Neck Surgery Center, University of Illinois, Chicago, II
Robert T. Parrish	1985	1986	ENT, Midwest ENT Associates, Peoria, II
Soo Khee Chee	1986	1988	Director of the National Cancer Center of Singapore
Jeffrey Spiro	1987	1988	ENT, University of Connecticut, Farmington CT
Thomas R. Loree	1988	1989	Otolaryngology/Surgery, Sisters of Charity Hospital, Buffalo, NY
Sanford Dubner	1989	1990	Head and Neck Surgery, North Shore LIJ, New Hyde Park, NY
Dennis Kraus	1990	1991	Director of the New York Head and Neck Institute, North Shore LIJ, New York, NY
Mark DeLacure	1991	1992	Associate Professor, Otolaryngology, NYU Langone Medical Center, New York, NY
Bruce Davidson	1992	1994	Professor and Chair, Otolaryngology, Georgetown University, Washington D.C.
Christopher Hughes	1993	1994	Consultant Head and Neck Surgeon, St. Vincent's Hospital, Sydney, Australia
Peter Andersen	1993	1995	Otolaryngology, OHSU, Portland, OR
William Lydiatt	1993	1995	Director, Head & Neck Surgery, Vice Chair, Otolaryngology, Univ of Nebraska
Daniel Kelley	1994	1996	ENT Private Practice, Salisbury, MD
Gary Morgan	1995	1996	Clinical Associate Professor, University of Sydney, Australia
Paul Friedlander	1996	1997	Associate professor and Chair of Otolaryngology, Tulane University, New Orleans
Sal Caruana	1995	1997	Otolaryngology, New York Presbyterian, Columbia and Cornell, New York, NY
Dennis Teck-Hock Lim	1996		
	1996	1998 1998	Head and Neck Surgeon, Private Practice, Mt. Elizabeth Hospital, Singapore Vice Chair of Plastic Surgery, Johns Hopkins Medical Center, Baltimore, MD
Anthony Tufaro			
Jay O. Boyle	1996	1998	Associate Attending Surgeon, Head and Neck Service, MSKCC, New York, NY
John Carew	1997	1999	Otolaryngology Head and Neck Surgery, Private Practice, New York, NY
Bhuvanesh Singh	1997	1999	Attending Surgeon, Head and Neck Service, MSKCC, New York, NY
Paul Kedeshian	1998	2000	Head and Neck Surgeon, Ronald Reagan UCLA Medical Center, Santa Monica, CA
Snehal G. Patel	1998	2000	Associate Attending Surgeon, Head and Neck Service, MSKCC, New York, NY
Joseph Califano	1999	2000	Professor of Otolaryngology, Johns Hopkins Medical Center, Baltimore, MD
Richard J. Wong	1999	2001	Chief, Head and Neck Service, MSKCC, New York, NY
Brandon G. Bentz	2000	2003	Otolaryngology, Salt Lake City, UT
Maria Evasovich	2001	2002	Surgical Oncologist, University of Minnesota Medical Center, Minneapolis MN
Erik Cohen	2002	2003	Director of Head and Neck Surgery, Morristown Medical Center, Morristown, NJ
David Kutler	2001	2004	Associate Attending ,New York Presbyterian, Cornell University, New York, NY
Ellie Maghami	2002	2004	Chief, Head and Neck Surgery, City of Hope, Duarte, CA
Kepal Patel	2003	2004	Chief, Division of Endocrine Surgery, NYU Langone Medical Center, New York, NY
lan Ganly	2003	2005	Associate Attending Surgeon, Head and Neck Service, MSKCC, New York, NY
Neil Gross	2002	2005	Head and Neck Surgeon, MD Anderson Cancer Center, Houston, TX
Susan McCammon	2003	2005	Associate Professor of Otolaryngology, U of Texas Medical Branch, League City, TX
Jennifer Bocker	2005	2007	Head and Neck Surgery Private Practice, Golden, CO
Jerry Castro	2007	2009	ENT, Guam Memorial Hospital, Tamuning, GU
Silvio Ghirardo	2008	2009	Attending Surgeon, Mercy Medical Center, Cedar Rapids, IA
Vincent Reid	2007	2009	Attending Surgeon, Mercy Medical Center, Cedar Rapids, IA
Vishal Choksi	2006	2008	Chief of Head and Neck Surgery, Apollo Hospitals, Ahmedabad, India
Ziv Gil	2006	2008	Chairman, Otolaryngology, Rambam Medical Center, Haifa, Israel
Patrick Sheahan	2007	2008	Consultant Otolaryngologist, South Infirmary Victoria Univ Hospital, Cork, Ireland
Benjamin Judson	2007	2009	Assistant Professor of Otolaryngology, Yale School of Medicine, New Haven, CT
Daniel Price	2007	2010	Assistant Professor of Otolaryngology, Mayo Clinic, Rochester, MN
Ben Saltman	2007	2009	Assistant Professor of Otolaryngology, North Shore LIJ, New Hyde Park, NY
Nishant Agrawal	2008	2009	Associate Professor of Otolaryngology, Johns Hopkins Medical Center, Baltimore
Hin Ngan Tay	2008	2009	Otolaryngologist/Head and Neck Surgeon, Mt. Elizabeth Hospital, Singapore
Babak Givi	2008	2010	Assistant Professor of Otolaryngology, NYU Langone Medical Center, New York, NY

Arnbjorn Toset	2009	2010	General Surgery, Private Practice, Long Island, NY
Iain Nixon	2011	2012	Consultant ENT Surgeon, William Harvey Hospital, Kent, UK
Gopal lyer	2009	2010	Consultant Head and Neck Surgeon, Singapore General Hospital, Singapore
Arash Mohebati	2010	2011	General Surgery, John Muir Health, Walnut Creek, CA
Luc Morris	2009	2011	Assistant Attending Surgeon, Head and Neck Service, MSKCC, New York, NY
Rahamtullah Rahmati	2010	2011	Assistant Professor ,New York Presbyterian, Columbia University, New York, NY
James Paul O'Neill	2010	2011	ENT, St. James and The Royal Victoria Eye and Ear Hospital, Dublin, Ireland
Volkert Wreesmann	2011	2013	Head and Neck Surgeon, Netherlands Cancer Institute, Amsterdam, The Netherlands
Natalya Chernichenko	2010	2012	Chief of Head and Neck Surgery, SUNY Downstate Medical Center, Brooklyn, NY
Allen Ho	2011	2014	Attending Head and Neck Surgeon, Cedars-Sinai Medical Center, Los Angeles, CA
Andrew G. Shuman	2011	2013	Assistant Professor of Otolaryngology, University of Michigan, Ann Arbor, MI
Mina Le	2012	2014	Otolaryngology, West Palm Beach VA Medical Center, Riviera Beach, FL
William McNamara	2012	2014	General Surgery, Medical City Hospital, Dallas, TX
Benjamin R. Roman	2012	2015	Assistant Attending Surgeon, Head and Neck Service, MSKCC, New York, NY
Yamil Castillo-Beauchamp	2013	2014	General Surgery, San Juan, Puerto Rico
Pablo Montero Miranda	2013	2015	General Surgery, University Hospital, Santiago, Chile
Andres Lopez-Albaitero	2012	2015	ENT, Private Practice, New York, NY
Laura M. Dooley	2013	2015	Asst Prof of Otolaryngology, Univ of Missouri School of Medicine, Columbia, MO

Moffitt Cancer Center

Program Director: Judith McCaffrey, MD

Department of Head and Neck and Endocrine Oncology

12902 Magnolia Drive, Tampa, FL 33612

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Email: Judith.McCaffrey@moffitt.org

Program Coordinator: Chantal Vazquez

Graduate Medical Education

Phone: (813) 745-2250

Email: <u>Chantal.Vazquez@moffitt.org</u>

Total Number of Positions Available per Year: One (1) position per year

PROGRAM DESCRIPTION

Objectives: The program is designed to give the participant a wide range of expertise in head and neck oncologic surgery, head and neck microvascular reconstruction, and endocrine surgery. Major components include head and neck ablative surgery, endocrine surgery (including parathyroid experience), skullbase procedures, and major reconstruction using microvascular techniques. We emphasize educating our trainees on the collaborative approach to patient care combining the disciplines of Head and Neck Surgery, Endocrinology, Radiation Oncology, Medical Oncology, Radiology, Pathology, and others. Both clinical and basic science research opportunities are also available.

Eligibility: The Moffitt Cancer Center Department of Head and Neck and Endocrine Oncology offers a one-year clinical fellowship training program for physicians who have completed a residency in Otolaryngology or General Surgery, and who have passed or are eligible for the American Board of Otolaryngology or American Board of Surgery certification examinations. The fellowship is designed to expose the candidate to a comprehensive head and neck and endocrine surgical experience with the goal of preparing the individual for a career in academic medicine.

Duties and Responsibilities of Trainees: During the twelve-month rotation, trainees play a key role in the care of all head and neck patients treated at the Moffitt Cancer Center, by the Head and Neck and Endocrine surgical team. This includes clinical evaluation, tumor board presentation, treatment planning, surgery, and postoperative follow-up. The Fellow should expect to finish with between 250 and 300 cases (performed under the supervision of the Head and Neck attending surgeons). Fellows are expected to assist with all major head and neck microvascular reconstructive procedures as well (about 30-35/year). Exposure to the Endocrine Oncology group is available (including Endocrine clinic, thyroid ultrasound and ultrasound-guided fine needle aspiration biopsy training), as are rotations through Radiation Oncology, Medical Oncology, Radiology, and Pathology. Aside from clinical training, fellows are also

expected to participate in at least one research project to be submitted to a peer reviewed journal for possible publication.

Supervision, Teaching, and Call: Fellows are expected to be involved with resident teaching and supervision throughout the fellowship, including operative teaching, overseeing clinical assessments, and participation in the resident didactic lecture series. Fellows are also expected to teach and mentor rotating medical students. Fellows are expected to be available for home call (serving as back-up to the first on-call resident) approximately two weeks/month.

Strengths: The Head and Neck fellowship is based out of the Moffitt Cancer Center in Tampa, Florida. Moffitt Cancer Center is a nationally recognized, state of the art, full service cancer hospital, and is the only NCI-designated cancer center in the state of Florida. The Head and Neck program at Moffitt sees 1,300 new patients per year, performs 3,500 procedures per year, and sees over 5,000 outpatient follow-up visits per year as well. Aside from the traditional Head and Neck surgical oncology experience, we have the unique situation of having a combined Head and Neck and Endocrine Oncology Department comprised of Head and Neck surgeons, Endocrinologists, and a Medical Oncologist. This team-oriented approach affords our trainees to gain experience with the comprehensive management of patients with diseases that range from benign salivary gland neoplasms, parathyroid disease, thyroid nodules, thyroid malignancies and head and neck malignancies. The fellowship allows for highly technical surgical training, combined with medical and clinical management, multidisciplinary team approach, ultrasound training and clinical research.

Mount Sinai School of Medicine

Program Director: Brett A. Miles, DDS, MD, FACS

Address: Department Otolaryngology/Head and Neck Surgery

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New York, NY 10029

Phone: 212-241-7063 **Fax:** 212-241-7063

Email: Brett.miles@mountsinai.org

Website: www.mssm.edu/departments-and-institutes/otolaryngology

Program Coordinator: Arleen Martinez

Email: Arleen.Martinez@mssm.edu

Chairman of the Department: Eric Genden, MD

Faculty Involved with the Fellowship:

Eric Genden, MD Brett A. Miles, DDS, MD Anthony Reino, MD Joshua Rosenburg, MD Marita Teng, MD Mike Yao, MD

Director of Research: Brett A. Miles, DDS MD

Total Number of Position Available per Year: One (12 month clinical)

PROGRAM DESCRIPTION

The Head and Neck Fellowship program at Mount Sinai offers a comprehensive twelve- month experience in the management of patients undergoing head and neck surgery for malignant and advanced benign disease. This concentrated experience includes all aspects of surgical care including diagnosis, treatment planning, ablative and reconstructive surgery and post-operative surveillance. The goal of the Head and Neck Fellowship is to prepare candidates for an academic career in head and neck oncologic surgery. Mount Sinai is committed to providing state of the art surgical training and provides an educational experience that will allow the head and neck fellow to function within a tertiary multidisciplinary system, providing comprehensive management for patients with advanced head and neck pathology. The Head and Neck Fellowship at Mount Sinai conforms to the guidelines required for accreditation from the Advanced Training Council for Approval of Training in Head and Neck Oncologic Surgery.

Polices/Manuals: http://www.mssm.edu/gme/mount_sinai/manual/

Criteria for Candidate Selection:

To be considered for a position, the candidate for the head and neck fellowship must have completed a residency program in Otolaryngology, General Surgery or Plastic Surgery. Candidates must be ABOTO board eligible for New York State Medical Licensure. Candidates are encouraged to spend a one or two-week rotation on the Head and Neck Service at Mount Sinai to evaluate whether the program meets their

educational goals prior to application. Candidates applications will be reviewed and interviews offered prior to the AHNS Match. Final selections are made at the time of the AHNS Match. All interested US and Canadian fellowship applicants must be registered with the Match Program of the Advanced Training Council for Approval of Training in Head and Neck Oncology Surgery (sponsored by The American Head and Neck Society) to be considered or a position. Those applicants who are not eligible for the Match Program are required to undergo the same application process by filling out the AHNS application with the reference and forwarding them directly to the Department of Head and Neck Surgery, c/o Heather Joseph. Candidates who do not qualify for participation in the AHNS match will only be considered in the event the position is unfilled by the match process in a given year. All qualified application will receive consideration without regard to race, color, religion, sex, national origin, age, or handicap that does not prevent performing the duties expected of the position.

Responsibilities of the Fellow:

The Head and Neck Fellow will:

- 1. Participate in all major head and neck operative cases including microvascular reconstruction. The fellow will have the opportunities to select the case most appropriate to his training goals if multiple major head and neck cases are occurring simultaneously. He/She also has the freedom to select cases of interest which are performed at our affiliated sites.
- 2. Participate in Multidisciplinary Head and Neck Oncology Clinic (see weekly schedule)
- 3. The fellow will take call at faculty level in rotation with the faculty of the Head and Neck Service. The fellow is supervised by the faculty while on call for the Head and Neck Service. The fellow (with faculty supervision) is responsible for operative management of acute complications/free tissue compromise related to head and neck reconstructions. Weekend call is approximately every four weeks. Weekday evening call is one in every four to five weeks.
- 4. Provide one half day per week of clinical outpatient services at Mount Sinai Hospital

Surgical training experience will include:

- Full Scope ablative Head and Neck Oncology experience including mucosal, paranasal/skullbase, salivary, and cutaneous disease.
- Reconstructive experience including local, regional, and free tissue transfer for ablative defects of the head and neck
- Transoral robotic and laser surgery for head and neck malignancies including oropharyngeal, tongue, larynx
- Extensive endocrine experience including management of thyroid and parathyroid malignancies
- Management of advanced benign lesions of the head and neck including salivary, schwannoma, paraganglioma, etc.
- Comprehensive surgical management of the head and neck oncology patient including ancillary procedures such as airway reconstruction, voice restoration, facial nerve re-animation, etc.

Supervision:

The clinical/surgical responsibilities of the fellows and resident are shared experiences at the discretion of he head and neck faculty. Major ablative head and neck surgery and microvascular reconstruction cases are performed by attending staff, the head and neck fellow, and the residents in a graded, experience based approach. In general, fellow will have the opportunity to select the cases most appropriate to his training goals if multiple major head and neck cases are going on simultaneously. He/she also has the freedom to select cases of interest, which occur at our affiliated sites. The fellow will also be responsible for resident supervision and surgical training in a capacity commensurate with the ability of the fellow.

Surgical Experience (Cases available for Fellow Participation, Last 12 Months):

Salivary gland surgery: 115 Skull base surgery: 24 Oral cavity surgery: 131 Neck surgery: 326

Larynx and pharynx surgery: 135 Thyroid and parathyroid surgery: 402

Tracheal reconstruction: 32

Ear and temporal bone surgery: 24 Regional/myocutaneous flaps: 48 Microvascular tissue transfer: 112 Transoral robotic procedures: 57

Teaching Conference Schedule

Type of Conference	Frequency	Role of Fellow
Grand Rounds	Qweek	Attend/Present Biannual
Tumor Board	Qweek	Attend/Present
Working Tumor Board	Qweek	Attend/Present
Microvascular Lab	Q2weeks	Micro Techniques
Clinical Rounds	Qdaily	Attend (Faculty supervised)
Head/Neck Journal Club	Q6weeks	Attend/Present
10 week HN Anat. Course	Annuel	Attend./Teach (Faculty supervised)
Clinical Trials Meeting	Q2weeks	Attend (Trial design/execution)
Basic Science Meeting	Qmonth	Attend (Trial design/execution)

Teaching Responsibilities of the Fellow

- Participates in AM daily clinical rounds with the faculty, residents and rotation medical students.
 Responsible for inpatient management decisions and resident teaching on the head and neck service.
- Acts as teaching faculty for head and neck surgical cases, with resident supervision, under the supervision/discretion of the head and neck faculty
- Residents teaching for clinical consultations for the head and neck service.
- Participates in the annual maxillofacial reconstruction/plating courses, which includes hands-on application of hardware and cadaver dissections.
- Participates in 10-week head and neck anatomy course for residents, which includes lectures, and surgically focused anatomical cadaver dissections.
- Participates in monthly microvascular la, which includes resident teaching on basic microvascular, microneural suturing techniques.
- Annual Grand Rounds presentation on topics related to head and neck oncology given to the Department of Otolaryngology/Head and Neck Surgery.
- Annual Grand Rounds presentation on the diagnosis and management of oral cavity malignancy to the Division of Oral/Maxillofacial Surgery and Dental Service.
- Primary supervising faculty for head and neck journal club series, reviewing current literature related to head and neck oncology
- Assistant during head and neck cadaver dissections undergraduate Gross Anatomy course for Mount Sinai School of Medicine.

Nebraska Methodist Hospital / Midwest Head and Neck Surgical Oncology

Program Director: Russell B. Smith, M.D.

Address: Midwest Head and Neck Surgical Oncology

Nebraska Methodist Hospital 8303 Dodge Street, Suite 304

Omaha, NE 68114

Phone: (402) 354-5048 **Fax:** (402) 354-2585

Email: russell.smith@nmhs.org

Faculty Involved with the Fellowship:

Andrew Coughlin, M.D.

Randall Duckert, M.D.

Apar Ganti, M.D.

Whitney Goldner, M.D.

Tien-Shew Huang M.D.

Robert H. Lindau, M.D.

Chandy Lockman Hoke, RD

Daniel D. Lydiatt, M.D.

William M. Lydiatt, M.D.

Jeffrey Markt, DDS

Oleg N. Militsakh, M.D.

Alireza Mirmiran, M.D.

Aru Panwar, M.D.

Nicole Shonka, MD

Russell B. Smith, M.D.

Ann Sporkman-Link, MA, CCC-SLP

Yungpo (Bernie) Su, M.D.

Elizabeth Van Winkle, M.D., CCC-SLP

Weining (Ken) Zhen, M.D.

Total Number of Positions Available per Year: One position.

PROGRAM DESCRIPTION:

Overview: Midwest Head and Neck Surgical Oncology consists of 7 faculty members that are leaders in head and neck cancer, coming from diverse backgrounds. The Division is involved in patient care through two institutions: Estabrook Cancer Center at Nebraska Methodist Hospital and the Fred and Pamela Buffet Cancer Center at Nebraska Medicine. The majority of clinic activities will be conducted at Nebraska Methodist Hospital. The Division's referral area includes not only Nebraska, but also Iowa, Kansas, Missouri, North Dakota and South Dakota. The Division cares for approximately 1,250 new cancer patients per year and surgically treats approximately 650 cancer patients per year. In addition to head and neck cancer, the program is a high volume head and neck endocrine surgery.

Outline: The fellowship is designed to offer a comprehensive clinical experience in multidisciplinary care of head and neck cancer patients and to develop surgical expertise in ablative and reconstructive procedures. The fellow works closely with the entire faculty and plays an important role in treatment

planning. The fellow will be responsible for the daily activities of the service and supervises residents and medical students to ensure excellent patient care and a quality educational experience. The fellow will have a progressive operative experience commensurate with their ability and be prepared for a future career in academic medicine. Salary and health insurance will be provided.

Eligibility: The Head and Neck Surgical Oncology and Advanced Head and Neck Reconstruction fellowship is offered to Otolaryngologists, General Surgeons, and Plastic Surgeons that have completed their residency training program and who are eligible for or have obtained board certification.

Duties and Responsibilities: The fellow's experience will consist of a 12-month clinical experience in the multidisciplinary care of head and neck cancer patients. The fellow will spend appropriate time in the outpatient clinic as well as in the operating room with each faculty developing expertise in head and neck surgical oncology and reconstruction. The fellow will play a critical role in the perioperative care of patients, including the multidisciplinary tumor boards, with the goal that the fellow has the opportunity to see a multitude of patients through the entire process. It is expected that the fellow will perform approximately 300-350 operations during the fellowship. Additionally, the fellow will have time dedicated to the collaborating specialties of the multidisciplinary team including radiation oncology, medical oncology, prosthetics, endocrinology, speech and language pathology, and nutrition. The fellow will participate in a structured didactic curriculum, a reading program, and a variety of educational symposiums. The fellow will attend a national head and neck oncology conference during the year. It will be required that the fellow complete one clinical research project during the year. Both Thyroid Nodule and Cancer as well as Head and Neck Cancer registries are available to support research projects. The fellow will be responsible to the Head and Neck service and not be involved in the clinical activities of the other Otolaryngology services. The fellow will have call responsibilities for the Head and Neck service, but will not participate in the faculty call schedule.

Strengths: The program will allow the fellow to experience a multidisciplinary approach to all areas of head and neck oncology including significant exposure to endocrine surgery, skull base surgery, transoral robotic and laser surgery, and microvascular reconstruction. The fellow will have the opportunity to develop expertise in head and neck ultrasounds as part of the program.

The program also offers the fellow the unique opportunity to provide multidisciplinary care in a high volume private cancer center as well as an academic medical center.

Ohio State University

Arthur G. James Cancer Hospital and Richard J. Solove Research Institute

Program Director: Amit Agrawal, M.D. Address: The Ohio State University

Starling-Loving Hall

320 West Tenth Avenue, B221

Columbus, OH 43210

James Cancer Hospital 460 West Tenth Avenue Columbus, OH 43210

Phone: (614) 293-9215 **Fax:** (614) 293-7457

Email: Amit.Agrawal@osumc.edu

Website: http://ent.osu.edu

Faculty Involved with the Fellowship:

Amit Agrawal, M.D. Anterpreet Neki, M.D. Mario Ammirati, M.D. Matthew Old, M.D. Ricardo Carrau, M.D. Enver Ozer, M.D. E. Antonio Chiocca, M.D., Ph.D. Quintin Pan, Ph.D. Dennis K. Pearl, Ph.D. L. Arick Forrest, M.D. Maura Gillison, M.D., Ph.D. James Rocco, M.D., Ph.D. John C. Grecula, M.D. Patrick Ross, Jr., M.D. William L. Smead, M.D. Mozaffarul Islam, Ph.D. Bhavna Kumar, M.S. Stephen P. Smith, M.D. Pawan Kumar, Ph.D. Gary D. Stoner, Ph.D. James C. Lang, Ph.D. Donald L. Stredney, M.S. Susan Mallery, D.D.S., Ph.D. Theodoros N. Teknos, M.D. John M. McGregor, M.D. Christopher M. Weghorst, Ph.D.

Total Number of Positions Available per Year: One (1 or 2-year) position.

PROGRAM DESCRIPTION

Overview: The Ohio State University was founded in 1870, as the Ohio Agricultural and Mechanical College, a land grant institution. In 1878, the Ohio General Assembly changed the college's name to The Ohio State University. The Ohio State University is the major comprehensive university in the state of Ohio and has developed numerous outstanding and innovative programs. Students at Ohio State can take advantage of more than 170 undergraduate majors, 122 programs leading to the masters, and 98 programs leading to the doctorate. The Ohio State University Medical Center dates back to 1834, with the founding of the Willoughby Medical University of Lake Erie in Willoughby, Ohio. In 1846, Willoughby moved to Columbus to expand and improve its clinical facilities, renamed Starling Medical College, and became the first teaching hospital in the United States. In 1914, the trustees of the Starling Medical College transferred all of their properties to the State of Ohio to establish a College of Medicine at the

Ohio State University. At that time, a hospital was also established, which later became University Hospitals. In 1993, University Hospitals, the College of Medicine, and the Arthur G. James Cancer Hospital and Richard J. Solove Research Institute introduced the University Medical Center concept representing a level of care unmatched in central Ohio. Today, the University of Medical Center is well established as a leading medical center in Columbus, the Midwest, and the country with an unparalleled combination of expertise and services. The Ohio State University College of Medicine and Public Health is the nation's fourth largest, and consistently ranks among the top academic medical school. There are 24 departments and schools within the College of Medicine and Public Health with programs in all medical specialties. Postgraduate training within the College of Medicine and Public Health includes residency training programs, as well as programs leading to the doctor of medicine degree, post-M.D. education, masters of science, and doctor of philosophy.

Outline: The Head and Neck Oncologic Surgery Fellowship is designed for advanced complementary training in head and neck oncologic surgery and conforms to the guidelines from the Advanced Training Council for Approval of Training in Head and Neck Oncologic Surgery. The fellowship is designed for those individuals who are planning a full-time academic career with a special interest and emphasis in head and neck surgery. The Head and Neck Oncology Section of the Department of Otolaryngology-Head and Neck Surgery sees more than 3,500 outpatient cancer visits each year with approximately 350 to 500 patients treated annually. This comprises the vast majority of head and neck oncology patients referred to Ohio State. The fellow will be exposed to and participate in the care of approximately 350 newly referred patients annually. The fellow participates with the senior staff in all decisions relative to the prescribed treatment. Operative responsibility is assigned commensurate with ability. Otolaryngology residents and medical students are also assigned to the team giving the head and neck fellow extensive opportunities to teach. The fellow is given time to attend advanced sessions sponsored by the Comprehensive Cancer Center for all oncology fellows. Participation in a project, either in clinical or bench-type research, is required of each fellow, and a manuscript accepted for publication in a peer-reviewed journal is expected prior to the issuance of a certificate from the Ohio State University.

Duties and Responsibilities of Trainees: The fellows assist faculty with resident and medical students surgical teaching and with patient care. They are also responsible for coordinating the third and fourth year medical students who have elected to participate in a rotation entitled, "Comprehensive Care of the Cancer Patient". This is a four-week course designed to give an overview of the multidisciplinary care of the cancer patient. In addition to these teaching responsibilities, the fellows are asked to give lectures throughout the medical center to other faculty and staff. It has always been the policy of the fellowship director to give the fellows the opportunity to pick the particular area(s) of research within the Head and Neck Oncology Program that olds the greatest interest for them. However, all of the fellows have been involved with ongoing clinical research. The fellows participate in the writing of clinical protocols, as well as the registration of patients to local/national clinical trials and their subsequent continued follow-up. Fellows also travel to Southwest Oncology and American College of Surgeons Oncology Group meetings as a means of becoming more familiar with the workings of a large national cancer cooperative group. The fellow works closely with the interdisciplinary teaching faculty. The fellow's primary relationship is with Amit Agrawal, M.D. The overall majority of operative and clinical patient interactions for the fellow are done in conjunction with Dr. Agrawal, Dr. Carrau, Dr. Old, Dr. Ozer, Dr. Teknos, Dr. Forrest, or other teaching faculty. The Head and Neck Oncology Group consists of 23 faculty from eleven departments and five colleges. The fellow never operates independent of teaching faculty and only occasionally is involved with seeing patients in the Head and Neck Oncology Ambulatory Center without

teaching faculty. The fellow acts as operating surgeon, as well as in a supervisory role, for surgery in which residents are involved and assistant to other teaching faculty. The head and neck oncology fellow participates in no Otolaryngology-Head and Neck Surgery Clinics and is not involved with any on-call rotations with the residents. It is, however, expected that the fellow will be involved in all emergencies involving the head and neck cancer patient population.

Strengths: The interdisciplinary surgical activities exist primarily with members of the Divisions of Neurological Surgery, Thoracic Surgery, and Vascular Surgery. A cranial base surgical team has been active for approximately 28 years with faculty primarily from the Departments of Otolaryngology-Head and Neck Surgery and Neurosurgery. That cranial base activity continues with the fellow frequently acting as first assistant during the neurosurgical component and as the operating surgeon during the head and neck portion of the procedures. Interdisciplinary activities with faculty from the Division of Thoracic Surgery relate primarily to those times when certain mediastinal procedures are performed. During these procedures, the fellow usually acts as the second assistant during the thoracic component and as the operating surgeon during the head and neck portion of the procedure. Interdisciplinary activities exist with vascular surgeons whenever there is concern about disease involving the carotid arteries. The most common clinical situation is metastatic squamous cancer involving the carotid artery system. In this situation, the fellow acts as the operating surgeon when the neck surgery is done that mobilizes all of the tissue until it is attached only to the carotid artery. The fellow then acts as first assistant to the vascular surgeon when the artery is resected and replaced with a saphenous vein graft. This type of carotid artery resection and replacement occurs for patients with isolated neck disease and also those with concurrent pharyngeal resection. Microvascular surgery is performed by faculty in the Department of Otolaryngology-Head and Neck Surgery. During procedures where free flaps are utilized, the fellow works primarily on the reconstructive team either as operating surgeon or first assistant and is not involved in the resection. The resection and free flap harvesting typically occur concurrently utilizing two surgical teams.

Careers of Former Fellows:

Amit Agrawal, M.D., Assistant Professor, The Ohio State University

Carl M. Bier-Laning, M.D., Assistant Professor, Loyola University

Jeffrey R. Haller, M.D., Private practice

James P. Malone, M.D., Assistant Professor, University of Southern Illinois-Springfield

Ernest C. Manders, M.D., Assistant Professor, University of Cincinnati

Rodney E. Mountain, M.B., Ch.B, Consultant ENT Surgeon, University of Dundee Scotland

Roy E. Nicholson, M.B., Ch.B., Royal Melbourne Hospital Australia

Enver Ozer, M.D., Assistant Professor, The Ohio State University

Pramod K. Sharma, M.D., Private practice

Norbert Viallet, M.D., Faculty, University of Manitoba, Canada

Keith M. Wilson, M.D., Associate Professor, University of Cincinnati

Oregon Health & Sciences University

Program Director: Peter Andersen, M.D.

Assistant Program Director: Daniel Clayburgh, MD, PhD

Address: 3181 SW Sam Jackson Park Rd, PV-01

Portland, OR 97239

 Telephone:
 503-494-5355

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 503-494-4631

 E-mail:
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Website: http://www.ohsu.edu/xd/health/services/ent/services/head-

and-neck-surgery-cancer/index.cfm

Faculty:

Peter Andersen, MD Mark Wax, MD Joshua Schindler, MD James Cohen, MD, PhD Paul Flint, MD Maisie Shindo, MD Mira Milas, MD

Molly Kulesz-Martin, PhD Daniel Clayburgh, MD, PhD Daniel Brickman, MD

Justin Cetas, MD

John Holland, MD

Director of Research: Molly Kulesz-Martin, PhD

Other Parallel Fellowships: none

Total Number of Positions Available per Year: One 1-year position.

PROGRAM DESCRIPTION:

Objectives: The program is designed to provide advanced clinical training in head and neck oncologic surgery as well as thyroid and parathyroid surgery. The program also offers extensive research opportunities in the areas of head and neck and thyroid cancer which will support the development of those candidates planning an academic career.

Overview: The fellow will be a key member of the patient care team with their own dedicated clinical and operative in addition to time spent with the faculty. The fellow will work with a team of four residents, eight speech language pathologists and fellows and faculty from numerous other services. The fellow will be able to take the lead in the day to day management of all patients on the service.

The fellowship offers an extensive experience in head and neck surgery with over 600 new tumor patients seen per year with an extensive experience in thyroid and parathyroid surgery. Over 150 free flaps are performed per year. An in depth experience will be offered in endoscopic skull base surgery with over 60 cases per year and sialoendoscopy.

An extensive experience in transoral robotic surgery is offered and the fellow will graduate credentialed in the procedure.

The fellow will be in charge of running our multidisciplinary planning conference and tumor boards and will have an extensive opportunity to develop their teaching skills.

Duties and Responsibilities of Trainees: The fellow is committed for a full year at Oregon Health and Science University and is involved in all aspects of head and neck patient care. The fellow will be appointed at the rank of Clinical Instructor. The fellow will be able to participate in the evaluation and treatment planning for all patients treated and will manage all patients during the recovery period. The Fellow enhances resident education by rounding daily with the team and performing informal didactics on resident rounds.

Research Opportunities: Research is encouraged and expected to be an important part of the

Fellow's growth throughout the training period. The fellow will have an integral role in ongoing research performed and will be encouraged to develop new research interests during the fellowship. Attendance and presentations at national meetings are encouraged and funding is available.

Roswell Park Cancer Institute

Program Director: Hassan Arshad, M.D.

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Reconstructive Surgery Elm & Carlton Street Buffalo, NY 14263

Phone: (716) 845-3158 or (800) 685-6825

Fax: (716) 845-8646

Email: Hassan.Arshad@roswellpark.org

Website: www.roswellpark.org

Chairman of Department: Wesley L. Hicks, Jr., M.D., F.A.C.S.

Faculty Involved with the Fellowship:

Hassan Arshad, M.D.

David M. Cohan, M.D., F.A.C.S.

Vishal Gupta, M.D.

Wesley L. Hicks, Jr., M.D., F.A.C.S.

M. Abraham Kuriakose, M.D.

Robert Lohman, M.D.

Wong Moon, M.D.

Can Ozturk, M.D.

Cemile Nurdan Ozturk, M.D.

Paul I. Tomljanovich, M.D.

Sarina Cieri, P.A. – C

Ashley Jezierski, P.A. – C

Janice Proy, F.N.P. – B.C.

Jennifer Reynolds, A.G.N.P.

James M. Smaldino, M.D., C.C.C./S.L.P.

Amy Sumbrum, M.A., C.C.C./S.L.P.

Lindsay Wachowiak, M.A., C.C.C./S.L.P.

Total Number of Positions Available per Year: Two positions (1 position (1 year clinical) and 1 position (1 year clinical; 1 year research)

PROGRAM DESCRIPTION:

Overview: Roswell Park Cancer Institute, founded in 1898, by Dr. Roswell Park, is the oldest cancer center in the United States and has been a National Cancer Institute-designated Comprehensive Cancer Center since 1974. The Institute is a teaching hospital and has an academic affiliation with the State University of New York at Buffalo. The Head and Neck Surgery/Plastic and Reconstructive Surgery Department is committed to the comprehensive care of the head and neck oncology patient. The department works closely with the Departments of Radiation Oncology, Medical Oncology, and Dentistry and Maxillofacial Prosthetics to provide this care. In addition, the department provides comprehensive rehabilitation and speech therapy. The surgical staff members are fellowship-trained Head and Neck Surgeons with backgrounds in Otolaryngology, General Surgery, and Plastic and Reconstructive Surgery. The department offers

the complete range of ablative and reconstructive surgery (including major resections, microvascular free flap reconstruction, endoscopic and open skull base surgery, transoral laser and robotic surgery, and photodynamic therapy). In addition to the head and neck fellows, the department provides training to residents in general surgery and otolaryngology.

Eligibility: The Head and Neck Department offers a one-year clinical and two-year clinical and research fellowship in Head and Neck Surgery and Oncology. Positions will be filled through the American Head and Neck Society Fellowship Match. The fellowship is open to qualified applicants who have completed a residency program in Otolaryngology, Plastic and Reconstructive Surgery, or General Surgery. The fellowship is approved by the Advanced Training Council on Oncologic Surgery of the American Head and Neck Society.

Duties and Responsibilities of Trainees: For the head and neck fellow, in-depth experience is gained in all aspects of head and neck surgery (major ablative surgeries, skull base surgery, transoral robotic and laser surgeries) and reconstruction (including free flap surgery). The fellow is involved in the assessment, preoperative care, postoperative care, rehabilitation, and long-term follow-up with patients. Weekly Multidisciplinary Tumor Board Conferences are run by the fellow. The 1-year (clinical) fellow is expected to have one clinical research project for the year. The structure of the two-year curriculum and its specific content are developed by the program director, attending staff and is a combination of clinical and research activities, with a minimum of 12 months of clinical rotation. Research activities include NIH grant-supported basic science research within the department, as well as, clinical research.

Thomas Jefferson University

Address:

Program Director: David M. Cognetti, MD FACS

Associate Professor, Dept of OTO-HNS

Co-Director, Jefferson Center for Head & Neck Surgery Department of Otolaryngology-Head and Neck Surgery

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Email: David.Cognetti@jefferson.edu

Website: www.jeffersonheadandnecksurgery.com

Program Coordinator: Mary Beier

mary.beier@jefferson.edu

Faculty Involved with the Fellowship:

William M. Keane, MD

David M. Cognetti, MD

Ryan N. Heffelfinger, MD

Joseph M. Curry, MD

Howard Krein, MD, PhD

Adam Luginbuhl, MD

Edmund A. Pribitkin, MD Ubaldo Martinez Outschoorn, MD

Number of Positions Available Per Year: One

PROGRAM DESCRIPTION:

Overview/Objectives: Fellow will participate in comprehensive, specialized care for patients with benign and malignant tumors of the head and neck. Our department offers high volume TORS, microvascular free flap reconstruction, endoscopic skull base surgery and minimally invasive thyroid and parathyroid surgery. We have one the busiest endoscopic skull base programs in the region and the fellow will have exposure to these cases if interested. All of the open skull base surgeries will be part of the clinical experience. In addition to the clinical responsibilities, fellow will be responsible for teaching of residents and medical students and will be provided the title of Clinical Instructor as a member of the faculty of the Department of Otolaryngology-Head and Neck Surgery.

Criteria for Selection of Trainees: To be considered for the position, the candidate for the head and neck fellowship must have completed an ACGME accredited residency in Otolaryngology and must be qualified to sit for the ABO written and oral exams. The candidate must be able to secure a Pennsylvania Medical License.

Duties and Responsibilities: Operative:

The operative experience consists of four days per week. The fellow would be expected to obtain a rounded experience with at least some experience in ablative upper aerodigestive malignancy, endocrine and salivary gland surgery, as well as to obtain open, endoscopic and robotic experience. The department has robotic block time and performs TORS on a weekly basis. The fellowship offers a microvascular reconstructive option. We would prefer to have fellows interested in learning microvascular techniques,

including the harvest of a variety of flaps, microvascular anastomosis and flap inset. Our current pace is 100-125 free flaps per year. Such cases are performed on 2-3 days per week regularly. The fellow will participate in any and all cases in which they are available and desire to participate, with their role being primary surgeon and teaching surgeon under the guidance of the attending.

Office hours: The fellow is expected to attend office hours for one day weekly with one of the head and neck faculty. This will include full interview and examination of all new patients, and participation in their care on the level of an attending. They will subsequently follow such patients clinically and operatively throughout their course.

Inpatient responsibility: No explicit inpatient duty is assigned to the fellow (such as rounding at resident level, writing notes, etc). However, they are encouraged to round regularly on patients on whom they have operated. Clinical Instructor privileges would allow for the fellow to perform relevant inpatient consultations.

Call Responsibility: Clinical instructor privileges would allow for the fellow to perform attending level call for two-four weeks in the 12 month period.

Research: It is expected that the fellow produce at least one relevant project for presentation at a meeting and publication during the fellowship. Attendance is financially supported to any meeting at which a departmental project is accepted. Assistance through our departmental research coordinator will be available for establishing the necessary IRB or other paperwork prior to the fellow's arrival, should they wish to initiate a new project; however, numerous clinical and translational projects are currently in progress. Should the fellow choose to join an existing project the expectations of producing one paper during the year remains. Currently, all of the residents in our program are expected to participate in our yearly resident research symposium and competition. The fellow would participate as well.

Teaching: The Fellow is expected to participate in teaching of the residents, medical students, as well as the staff. The fellow is to present grand rounds once during the year. Additionally, regular teaching is expected on rounds and in the operating room on a daily basis in an informal format. Formal resident and student teaching responsibility includes providing at least a total of three hours of lecture time during the course of the year during resident education hours. This may be in any format that the fellow chooses so long as it consists of educations of material relevant to the fellowship.

University of Alabama- Birmingham

Fellowship Program Director: William R Carroll MD

Director of Research: Jason Warram, PhD

Address: BDB Suite 563

1530 3rd Avenue South

Birmingham, AL 35294

Phone: (205) 934-9766 Fax: (205) 934-3993

Faculty Involved with the Fellowship: (alphabetically) James Bonner **Radiation Oncology** William R. Carroll Otolaryngology Benjamin Greene Otolaryngology Otolaryngology **Brian Hughley** Benjamin McGrew Otolaryngology Medical Oncology Lisle Nabell Glenn Peters Otolaryngology **Radiation Oncology** Sharon Spencer Brad Woodworth Otolaryngology

Total Number of Positions Available per year: 1 position per year- Clinical (optional two additional years basic research training)

PROGRAM DESCRIPTIONS

Overview: The University of Alabama - Birmingham provides high-volume clinical experience and mentored research opportunities in head and neck oncology. The fellowship includes broad experience in ablative surgery, endocrine surgery and microvascular surgery. The fellowship year is characterized by a balance of mentorship and autonomy. Faculty members provide close supervision early in the year. Later on, the fellow will function more as a junior faculty member, leading residents through surgical procedures and determining treatment plans more independently. All fellows participate in clinical research projects. Fellows interested in additional basic research training may elect to complete an additional two-year NIH funded research training program. The faculty of the head and neck program are committed to making this fellowship an exceptional training opportunity.

<u>Appointment/Requirements</u>: The fellow will be appointed as a Clinical Instructor at the University of Alabama Birmingham and must be board certified or board eligible in Otolaryngology, General Surgery or Plastic Surgery.

Clinical Experience: The scope of clinical experience is broad, including classic extirpation of head and neck tumors, microvascular reconstructive surgery, extensive thyroid/parathyroid surgery and minimally invasive surgery of the skull base. The H&N robotic surgery program was among the first in the US and remains very active. The breadth and depth of clinical opportunity allows the trainee a degree of latitude to individualize the training experience. The fellow will spend ten months of the clinical year on required rotations with the head and neck service. These rotations will include inpatient and outpatient clinical care, operating room experience and patient care conferences. Elective rotations in Radiation Oncology, Medical Oncology, Surgical Oncology and Pathology will be available the final two months of the year.

<u>Clinical Volumes</u>: The Head and Neck Oncology service at University of Alabama Birmingham evaluates over 1700 new cases annually. Over 1700 major head and neck operations are completed annually. The head and neck oncology service performs 150-180 microvascular reconstructions annually allowing generous exposure for the fellow interested in learning reconstructive microsurgery. A faculty head and neck surgeon will always be present in the OR at the University of Alabama Birmingham. Autonomy of the fellow in the operating room will vary with experience and demonstrated competence.

Research: During the fellowship year, each Fellow will participate in clinical or basic research. The fellow will choose a topic of investigation and the Research Committee of the Otolaryngology Division will monitor progress. A research mentor will be chosen from the Head and Neck faculty. The fellow will attend monthly research meetings where the committee will review progress and recommend changes as needed. The fellow will present the completed project at the annual "Research Day" held in May of the year. Prior to presentation, the project must be written in manuscript form suitable for submission for publication. Each Head and Neck faculty member has active research interests. These include clinical trials, outcomes studies, health services research, population/community based studies and applied laboratory research. UAB has a rich basic science research community with ample opportunity for a broad range of cancer related investigation. During the clinical year, one day each week will be set aside to pursue research activities. Trainees interested in additional research training will be eligible to participate in a two-year, NIH sponsored T-32 training grant for basic science research.

Evaluations: Bi-monthly evaluations will be provided in verbal and written form

University of Alberta Hospital

Program Director: Daniel O'Connell, M.D. M.S.c **Address:** 1E4.29 Walter C. Mackenzie Center

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Email: dan.oconnell@ualberta.ca

Website: http://www.surgery.ualberta.ca/Otolaryngology/residency.htm

Chairman of Department: Hadi Seikaly, M.D. M.A.L.

Faculty Involved with the Fellowship:

Daniel A. O'Connell M.D. M.S.c

Hadi Seikaly M.D. M.A.L

Jeffrey R. Harris, M.D. M.H.A.

Vincent Biron, M.D. PhD

Mike Allegretto, M.D.

Neil Chua, M.D.

Naresh Jha, M.D.

Matt Parliament, M.D.

Rufus Scrimger, M.D.

Dave Williams, M.D.

J. Wolfhardt, M.D.

Erin Wright, M.D.

Total Number of Positions Available per Year: One (1 to 2-year) position.

PROGRAM DESCRIPTION:

Objectives: The goal of this Fellowship is to provide comprehensive, multidisciplinary training to individuals who are committed to a career in head and neck surgical oncology. The fellowship training will provide a broad exposure to the full range of clinical problems encountered in a tertiary head and neck oncology practice. Upon completion of a one-year fellowship, the surgeon will possess the following characteristics:

- 1. Expertise in the multidisciplinary management of patients with head and neck cancer
- 2. Knowledge and skills in skull base surgery.
- 3. Knowledge and skills in microvascular free flap reconstruction.
- 4. Board-based knowledge and comprehension of principles of: radiation oncology, medical oncology, maxillofacial prosthetics, oncologic nutrition, head and neck pathology, diagnostic radiology/nuclear medicine and rehabilitation of speech and swallowing.
- 5. Expertise in conservation and surgical procedures.
- 6. Judgment and ability to perform complex tumor resections and an understanding of the technical limitations of the procedures.
- 7. Comprehension of head and neck cancer biology.
- 8. Appreciation of scientific methodology, study design, clinical trials and data analysis.
- 9. Ability to practice effectively in an academic, tertiary care setting and to participate in medical education and translational research.

The Fundamental Components of the Fellowship are as follows:

- 1. The fellow will participate in the evaluation, management and care of a minimum of 400 head and neck neoplasm cases (benign or malignant, including endocrine and salivary gland).
- 2. Participation in a minimum of 300 surgical procedures, representing the full scope of head and neck surgical oncology.
- 3. Intensive exposure to the interdisciplinary management of head and neck oncologic patients (regular tumor board participation).
- 4. Participation in the development and implementation of head and neck oncologic research.

The Fellowship will provide clinical and/or didactic exposure to the following:

- 1. Head and neck pathology
- 2. Radiation biology and therapeutic radiation oncology
- 3. Head and neck medical oncology
- 4. Maxillofacial prosthetics
- 5. Oncologic nutrition
- 6. Head and neck diagnostic radiology and nuclear medicine
- 7. Speech and language reconstruction
- 8. Head and neck reconstruction
- 9. Paranasal sinus malignancy
- 10. Head and neck melanoma
- 11. Skull base neoplasms
- 12. Head and neck sarcoma
- 13. Non-melanoma skin cancer
- 14. Salivary gland neoplasms
- 15. Oral cavity cancer
- 16. Partial laryngeal surgery
- 17. Laryngeal cancer
- 18. Role of neck dissection
- 19. Oropharyngeal cancer
- 20. Hypopharyngeal cancer
- 21. Cervical esophageal cancer
- 22. Thyroid and parathyroid neoplasms
- 23. Morbidity and mortality conferences
- 24. Journal clubs
- 25. Clinical research protocol

Requirements of Applicants: Completion of an Otolaryngology-Head and Neck Surgery, General Surgery, or General Plastic Surgery residency training program. Documented experience and ability in the management of head and neck cancer patients, through letters of reference and the applicants' personal statement, are required. Successful completion of an interview with the Fellowship Director is also required. Ideally, this will include a one or two week elective at the University of Alberta hospital. This will allow the candidate an opportunity to evaluate the program as well as allowing the faculty an opportunity to evaluate the candidate.

Research Opportunities: It is expected that all fellows will be involved in clinical research projects and participate in the presentation/publication of the results. It is recommended that fellows in 24-month programs should have dedicated (protected or block) time available for laboratory research.

There is a strong expectation for research productivity from the Head and Neck Oncology Fellow. At the very least, we expect publication of one paper and a presentation at out Canadian Society of

Otolaryngology meeting. Our preference is to have multiple publications as well as several presentations over the course of the year. There is dedicated research time for the fellow, giving them a minimum ½ day a week available for academic and research activities.

Strengths: The Advanced Head and Neck Oncology and Microvascular Reconstruction Fellowship at the University of Alberta provides a high volume experience in the treatment of patients. In addition to resections, the fellow can expect to perform a minimum of 100 microvascular reconstructions in their one-year fellowship. Research opportunities are available and encouraged. Involvement in our prospective functional outcomes lab is expected and will provide an excellent opportunity to learn an appropriate and comprehensive approach to treating patients in a manner to provide optimal function and survival.

Careers of Former Fellows: The Advanced Head and Neck Oncology and Microvascular Reconstruction Fellowship's goal is to train surgeons for academic careers in Head and Neck Oncology. All of our fellows have gone on to careers in academic medicine. Contact information for prior fellows is available through the program director and we encourage candidates to contact our fellows to discuss the fellowship experience.

University of California – Davis

Program Director: D. Gregory Farwell, M.D. FACS

Address: Department of Otolaryngology- Head and Neck Surgery

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Website: http://www.ucdavis.edu/index.html

Chairman of Department: Hilary A. Brodie, M.D., Ph.D.

Otolaryngology Faculty Involved with the Fellowship: Arnaud Bewley, M.D. Paul J. Donald, M.D. D. Gregory Farwell, M.D. Scott Fuller, M.D.

Other Parallel Fellowships: Facial Plastic and Reconstructive Surgery, Laryngology, Pediatric Otolaryngology

Total Number of Positions Available per Year: One

PROGRAM DESCRIPTION:

Objectives: The Head and Neck Fellowship is a one year position with salary support through the resources of the University of California, Davis, Department of Head and Neck Surgery. The objectives of the training program are to produce exceptionally-skilled clinicians, teachers, and investigators in the field of head and neck oncologic, skull base, and microvascular surgery.

History: The history of head and neck fellowship program dates back to 1987. It began as a oneyear training program in advanced head and neck oncologic surgery. It also included some plastic and reconstructive surgery and surgery for facial trauma. The program has continued uninterrupted to date but has greatly expanded since its inception to cover all forms of extirpative surgery including a special emphasis in skull base surgery, minimally-invasive laser and robotic surgery, microvascular and reconstructive surgery (including trauma), and endocrine surgery.

Duration of the fellowship: Our fellowship is a one-year comprehensive exposure to the entire gamut of head and neck oncology and reconstructive surgery. Candidates for the fellowship position must have completed their residency training program in an ACGME- approved or equivalent program in otolaryngology-head and neck surgery, plastic surgery, or general surgery.

Description of Medical Center and Academic Affiliation: The University of California at Davis Medical Center (UCDMC) is a 645-bed hospital that functions as the tertiary-care center for central California. Head and neck oncologic patients come principally from northern and central California, southern Oregon, and western Nevada, but we have a worldwide referral base for skull base surgery patients. The Head and Neck Oncology Service has its own floor and Intensive Care Unit, and sees from 450 to 600 new cases of head and neck tumors per year. A vigorous didactic and

multidisciplinary Head and Neck Oncology Conference is held on Tuesday, attended by otolaryngologists, radiation oncologists, medical oncologists, a neuroradiologist, a pathologist, a clinical nurse specialist, clinical social workers, dentist/prosthodontists, and dieticians. All new cases are discussed and treatment recommendations are made. Monthly skull base conferences are held attended by neurosurgeons, neuroradiologists, radiation oncologists, otolaryngologists, nurse specialists, and coordinators and monthly endocrinology tumor conferences are also held staffed by otolaryngologists and endocrinologists. The didactic program is rounded out by morbidity and mortality conferences, grand rounds, and journal clubs.

Strengths: The University of California at Davis has had a long history of an integrated skull base surgical team composed of otolaryngology, neurosurgery, pathology and neuroradiology that meets on a regular basis to review the skull base surgical cases that are seen during this period. Preoperative management and strategies are discussed, and definitive treatment is planned. UCDMC is unique in having this program in northern California, and there are few such centers in the western United States. Other strengths include

- Extensive and extremely broad clinical experience given the wide catchment area and diverse population served
- Comprehensive microvascular exposure to the breadth of free tissue transfer donor sites
- Large endocrine practice
- Minimally invasive surgical practice including transoral laser, robotic and endoscopic skull base surgery
- Fresh anatomical specimens available for surgical dissection
- Tremendous translational, functional, and big-data research opportunities.

Supervision: The fellowship allows for a graduated increase in responsibility as the fellow's surgical acumen allows. It is anticipated that upon completion of the fellowship, the graduate will be comfortable and more importantly competent in head and neck surgery. As most of our fellows continue in academic medicine, it is also stressed that the fellow develops and improves their teaching abilities by leading conferences, giving lectures and teaching routine cases to the residents.

Careers of select former recent fellows:

- 2015: Patrik Pipkorn, MD Washington University
- 2014: Vincent Biron, MD., University of Alberta
- 2014: Nathaniel Peterson MD., Loma Linda University
- 2013: Jon Burton, MD. University of South Florida
- 2012: Andrew Cho, MD., University of Aukland
- 2011: Lawrence Yen, M.D. Yangming Medical University, Taipei, Taiwan
- 2011: Deborah Amott University of Melbourne, Australia
- 2010: Scott Fuller, M.D. Mather Veterans Adminstration Hospital, Sacramento; UC Davis
- 2010: Rony Aouad, M.D. University of Kentucky
- 2009: Steven Brigance, M.D., University of Indiana
- 2008: Ouang Luu, M.D., University of California, Los Angeles
- 2006: Kevin Brumund, M.D., University of California, San Diego
- 2005: Chetan Gujrathi, M.D., Barrows Institute, Phoenix

University of California- San Francisco

The Bryan Hemming Endowed Fellowship in Head and Neck Cancer Program Director: Steven J Wang, MD FACS Address: 2233 Post St, 3rd Floor

San Francisco, CA 94115

Phone: (415) 885-7521 Fax: (415) 885-7546

Email: steven.wang@ucsf.edu

Chair of Department: Andrew Murr, MD

Other Parallel Fellowships: Laryngology, Facial Plastic and Reconstructive Surgery,

Pediatric Otolaryngology

Total number of positions available per year: One

Faculty involved in Fellowship:

Dept of Otolaryngology-Head and Neck Surgery

Jolie Chang, MDMedical OncologyIvan El-Sayed, MDAlain Algazi, MDJonathan George, MD, MPHAdil Daud, MD

Patrick Ha, MD

Chase Heaton, MD
Daniel Knott, MD
Speech-Language Pathology
Joey McGovern Laus, MA

William Ryan, MD Rahul Seth, MD

Rahul Seth, MD Dental School

Steven Wang, MD

Daniel Ramos DDS Oral Medicine
Arun Sharma DDS Maxillofacial

Radiation Oncology Prosthetics

Sue Yom MD Richard Jordan DDS PhD Oral

Jeanne Quivey MD Pathology

<u>Radiology</u>
Christine Glastonbury MD

<u>Dermatology</u>
Siegrid Yu, MD

Isaac Neuhaus, MD
Pathology Sarah Arron, MD

Annemieke VanZante MD PhD Susana Ortiz-Urda, MD

PROGRAM DESCRIPTION:

The head and neck fellowship program at UCSF provides advanced clinical training in head and neck oncologic surgery, microvascular reconstructive surgery, open and endoscopic anterior skull base surgery, transoral robotic surgery, head and neck endocrine surgery, melanoma and cutaneous oncology, sialendoscopy, and head and neck ultrasonography.

Eligibility:

Fellows will receive an appointment of Clinical Instructor in the UCSF Dept of Otolaryngology-Head and Neck Surgery and take attending staff call at UCSF and UCSF-affiliated hospitals. Applicants must be a BE/BC otolaryngologist by the fellowship start date.

Strengths:

UCSF is a tertiary referral center for complex head and neck surgery patients. Most referrals come from general otolaryngologists throughout Northern California and beyond; additional referrals are from medical oncologists, endocrinologists, dermatologists, and primary care physicians. We see more than 500 new head and neck cancer consults per year. Highlights of our previous year's oncologic case volume include 125 salivary gland surgeries, 150 thyroid or parathyroid surgeries, 100 microvascular free flap surgeries, 30 TORS cases, and 60 anterior skull base surgeries. There is opportunity for intensive hands-on training in minimally invasive endoscopic skull base surgery (Dr. El-Sayed), microvascular free flap reconstructive surgery (Dr. Knott, Dr. Seth, Dr. Wang), head and neck ultrasonography (Dr. George, Dr. Ryan, Dr. Chang), and transoral robotic surgery (Dr. Wang, Dr. Ryan). Depending on interest, the fellow may attend an animal lab course in robotic surgery and an on-campus microvascular surgery workshop with rat lab. There are multiple multidisciplinary conferences including a weekly head and neck tumor board where all new head and neck cancer patients are presented, weekly melanoma tumor board, monthly thyroid cancer tumor board, and monthly visible tumor conference (for nonmelanoma skin cancers). The new NCI designated UCSF Helen Diller Family Comprehensive Cancer Center opened on the UCSF Mission Bay campus in February, 2015. The medical center features lasers, robotics, telemedicine systems and other state of the art technology.

Fellow Service Expectations:

The fellow will have his/her own clinic 1 day (or two half-days) a week, to see new head and neck cancer patients and have primary responsibility for their care, with head and neck surgery faculty support. The fellow will spend a cumulative total of 1 day per week in the head and neck surgery faculty clinics and 1 to 3 days per week in the OR with the head and neck surgery faculty attendings. Depending on the fellow's interest, there is opportunity to obtain more in-depth experience with minimally invasive endoscopic skull base surgery (Dr. El-Sayed), microvascular free flap reconstructive surgery (Dr. Knott, Dr. Seth, Dr. Wang), head and neck ultrasonography (Dr. George, Dr. Ryan, Dr. Chang), and transoral robotic surgery (Dr. Wang, Dr. Ryan). The fellow will have 1 - 2 days per week doing cases from his/her own clinic as attending surgeon, which is an opportunity to gain experience teaching operative techniques to otolaryngology residents. The fellow will take attending faculty night/weekend call for the UCSF otolaryngology-head and neck surgery service approximately 4 weeks per year.

The fellow will work with the Head and Neck Surgery attendings and their patients; have responsibility for his or her own cancer patients; and actively participate in weekly tumor board, which discusses an average of 10 new patients and 20 patients total weekly. In the fellow's own clinic, there are typically 2-3 new patients per week requiring primary cancer management and care. In the course of outpatient care, the fellow will acquire proficiency in ultrasonography of the head and neck. There will be the opportunity to follow selected patients through their non-operative treatment, with Medical Oncology and Radiation Oncology.

Teaching Responsibilities:

The fellow plays an instrumental role in teaching activities of the department, including a primary responsibility during the Otolaryngology resident lecture series. In addition, the fellow has responsibility similar to all faculty members to provide evidence-based teaching and discussions to medical students and residents on rounds and in the clinical and operating room settings. The fellow has primary responsibility for collecting patient data, records and imaging studies for the weekly Head and Neck Tumor Board. In addition, the fellow has teaching responsibilities associated with Journal Club, the head and neck cadaver

dissection course, and departmental grand rounds. The fellow collaborates with the Chief Resident to organize and direct Journal Clubs related to Head and Neck Oncology.

Research:

The fellow is expected to become involved in the varied clinical research activities available within the department itself or in other programs at UCSF. It is expected that the fellow will take primary responsibility for at least one clinical research project, in collaboration with a head and neck surgery faculty mentor, which would be presented at a national meeting and lead to publication in a peer-reviewed journal. Although laboratory opportunities are also available for trainees with the appropriate background, the fellowship is primarily clinical.

Past fellows:

2002-2003 Ivan El-Sayed MD, Associate Professor, UCSF

2003-2005 Young Oh MD, Kaiser Permanente, Anaheim, CA

2006-2008 Vivek Gurudutt MD, private practice, Pennsylvania

2009-2010 Ted Leem MD, Assistant Professor, University of Colorado

2010-2011 William Ryan MD, Assistant Professor, UCSF

2011-2012 Joshua Sckolnick MD, Palo Alto Medical Foundation/Burlingame, CA

2012-2013 Gabriel Tsao MD, Kaiser Permanente, Fremont, CA

2014-2015 Chase Heaton MD, Assistant Professor, UCSF

2015-2016 Daniel Flis MD (Current fellow)

2016-2017 Jon Mallen St. Clair (Incoming fellow)

University of Cincinnati Medical Center

Program Director: Keith M. Wilson, M.D.

Address: Department of Otolaryngology-Head and Neck Surgery

P.O. Box 670528 Cincinnati, OH 45267

 Phone:
 (513) 558-0017

 Fax:
 (513) 558-5203

 Email:
 keith.wilson@uc.edu

 Website:
 http://www.ent.uc.edu/

Program Coordinator Deana Brown (deana.brown@uc.edu)

Starting Date: July 1 **Duration of Fellowship Program:** One Year

University Affiliation:

Accreditation:

Licensing Requirements:

University of Cincinnati Medical Center
The American Head and Neck Society
Ohio license required (fees are paid by the

department)

Total Number of Positions Available per Year:

Appointment:

One (1-year) position. Clinical Instructor

Department Chairperson: Myles L. Pensak, M.D.

Faculty Involved in Fellowship: David L. Steward, Lee A. Zimmer, Yash J. Patil,

Jonathan R. Mark, MD, Sid Khosla, MD

PROGRAM DESCRIPTION:

Operating Privileges and Operative Experience: Full privileges as a junior Faculty at University of Cincinnati Medical Center and West Chester Hospital.

Operative Experience: Approximately 380 as either primary surgeon or first assistant to a resident.

Program Description: This one-year program familiarizes the fellow with the surgical and nonsurgical therapy of head and neck tumors and the philosophy of management. It aims to train superb clinical surgeons proficient in ablative and reconstructive surgery of the head and neck. Four main clinical components are emphasized:

- 1 Ablative head and neck oncologic surgery, including organ preservation laryngeal surgery.
- 2 Thyroid and parathyroid surgery, including minimally invasive approaches.
- 3 Reconstructive surgery of the head and neck, including microvascular tissue transfer as well as traditional reconstructive techniques.
- 4 Adult airway reconstruction
- 5 Transoral Robotic Surgery

Clinical Responsibilities: Clinical responsibilities include overseeing care of all head and neck surgery patients at the University of Cincinnati Medical Center. The fellow serves a role as leader of the oncology team. Clinical responsibilities of the fellow in the operating room include participating in the majority of head and neck oncology cases, supervising senior residents, and operating as a primary surgeon on more complicated oncologic cases.

The fellow is responsible for the head and neck oncology clinic at the Barrett Cancer Center one half day per week. The clinic is staffed by otolaryngology residents, and the fellow serves in a supervisory role.

The fellow organized the Head and Neck Tumor Board, a multidisciplinary conference that allos for interaction with the radiation therapists, medical oncologists, pathologists, radiologists and clinical trials staff.

Research opportunities are abundant. The department encourages and supports development of clinical research projects. Enrichment fund for \$2,500 is set forth for the fellow's educational activities, conferences, and books. The fellow has a personal office with a designated computer station and secretarial support. All licensing fees are paid by the department. The fellow has no call responsibility. Moonlighting is permitted in off duty hours.

Benefits: Health and Dental Insurance, Paid time off, Life Insurance, Long-Term Disability Insurance, Short-Term Disability Insurance, Pension Plan and Professional Liability Insurance

Living in Cincinnati: The greater Cincinnati area is very affordable. It offers a full array of cultural activities including: symphony, theatre, live music venues and a rejuvenated downtown social and business district. Cincinnati has a world class zoo and nationally regarded aquarium (Northern Kentucky). Cincinnati has two professional sports teams: the Cincinnati Reds (MLB) and the Cincinnati Bengals (NFL). There are outstanding institutions of higher learning. Cincinnati is fortunate to have many restaurants featuring diverse cultural cuisines. This is a very easy area in which to live. You never are more than 20 minutes away from where you want to go.

Former Head and Neck Fellows:

Aviv Heiman - Private Practice - Granite City, IL

Howard A. Tobin – Associate Professor – University of Texas Southwestern Medical Center

Robin T. Cotton - Professor - University of Cincinnati College of Medicine & Cincinnati Children's Hospital

Ivor A. Emanuel - Assistant Professor, University of California, SF and Clinical Faculty, Stanford University

Melvin Wiederkehr – Private Practice – Brooklyn, NY

Jagdev Singh – Private Practice – Fresno, CA

Frederick M. Silver - Associate Professor - University of South Alabama

Jeffrey F. Morgan – Private Practice – Warren, PA

Kevin A. Shumrick - Tri-Health Physicians - Group Health Associates - Cincinnati, OH

Mark C. Weissler - Professor - University of North Carolina

Robert J. Stegmoyer – Private Practice – Cleveland Heights, Ohio

Loren W. Savory – ENT Consultants – St. John's, Newfoundland

Robert P. Zitsch – Professor and Chair – University of Missouri – Ellis Fischel Cancer Center

Markus Gapany – Associate Professor – University of Minnesota

Louis G. Portugal – Professor – University of Chicago

Paul D. Righi – Private Practice - Dartmouth-Hitchcock Medical Center

Lyon L Gleich - Presently Director of Medical Affairs, Medpace, Previously - Faculty - University of Cincinnati

Michael K. Farrell – Currently in Australia

Judith M. Czaja-McCaffrey, MD - Assistant Professor- USF Morsani College of Medicine

Tapan A. Padhya, MD - Professor - USF Morsani College of Medicine

Michael J. Wolfe, MD – Pacific Medical Centers, Seattle, Washington

Mikhail Vaysberg, DO - Assistant Professor - University of Florida Health Cancer Center

Alexander Senchenkov, MD - Associate Professor - University of Tennessee Health Sciences Center

 $\textbf{Eyad Khabbaz, MD} - Associate \ Professor - University \ of \ Pittsburgh \ Medical \ Center$

Rizwan Aslam, DO – Assistant Professor – Tulane School of Medicine

Nidhi Gupta, MD - Assistant Professor - Albert Einstein College of Medicine - Jacobi Medical Center

Julie Goddard, MD – Assistant Professor – University of California, Irvine

Eric J. Thorpe, MD – Assistant Professor – Loyola University Stritch School of Medicine

Jonathan R. Mark, MD - Assistant Professor - University of Cincinnati College of Medicine

University of Iowa Hospitals and Clinics

Program Director: Kristi E. Chang, M.D.

Address: Department of Otolaryngology- Head and Neck Surgery

200 Hawkins Drive Iowa City, IA 52242

Phone: (319) 384-6657 **Fax:** (319) 356-4547

Email: kristi-chang@uiowa.edu

Program Coordinator: Amanda Marble

Email: amanda-marble@uiowa.edu

Phone: 319-356-1744

Website: www.uihealthcare.com/depts/med/otolaryngology/index.html

Chairman of Department: Bruce J. Gantz, M.D.

Faculty Involved with the Fellowship:

Nitin Pagedar, M.D. Rodrigo Bayon, M.D. Steven Sperry, M.D. Henry T. Hoffman, M.D. John Buatti, M.D. Carryn Anderson, M.D. Gerald Clamon, M.D. Scott Graham, M.D.

Total Number of Positions Available per Year: One position.

PROGRAM DESCRIPTION:

Objectives: The fellowship is carried out at the University of Iowa Hospitals and Clinics, including the Holden Clinical Cancer Center and the associated Iowa City Veteran's Administration Medical Center. The objectives of the program include mastering the evaluation and management of patients with benign and malignant neoplasms involving the head and neck, including the upper aerodigestive tract, sinuses, orbits, soft tissues, and skin. The fellow will learn the most contemporary, effective, and efficient means of diagnosis and treatment for particular neoplasms. The fellow will participate in an interdisciplinary Head and Neck Cancer Tumor Board, and become proficient in the multidisciplinary management of complex head and neck cancer cases. The fellow will learn appropriate reconstruction and rehabilitation techniques used in the management of these patients, including free tissue transfer. During the fellowship, a clinical and/or basic science research project relating to the field of head and neck oncology is completed by the fellow.

History: The Head and Neck Oncologic and Reconstructive Surgery Fellowship at the University of Iowa has a long and rich tradition. A number of distinguished head and neck oncologists have completed this fellowship. The Department of Otolaryngology-Head and Neck Surgery at the University of Iowa, which is highly ranked nationally, is a very strong department within the University of Iowa Carver College of Medicine. The University of Iowa Hospitals and Clinics serve as a major tertiary care center in the

Midwest. Approximately 25% of the 35,000 yearly outpatient visits to the Department of Otolaryngology-Head and Neck Surgery are cancer related. Approximately 500 patients are referred to the University of Iowa every year for management of a head and neck tumor. Approximately 300 of these patients are treated surgically. Patients are housed in the Clinical Cancer Center, which was opened in 1994. The University of Iowa Hospitals and Clinics surgical facility consists of 30 operating suites, including dedicated robotic surgical suites.

Requirements of Applicants: Fellowship candidates must either be board certified or board eligible in Otolaryngology-Head and Neck Surgery, General Surgery, or General Plastic Surgery. The fellowship candidate must be able to obtain a license to practice medicine in the State of Iowa. Documented experience and ability in the management of head and neck cancer patients, through letters of reference and the applicant's personal statement, are required. The fellowship participates in the AHNS Fellowship Match.

Duties and Responsibilities of Trainees: The clinical work will be performed primarily under the supervision of the fellowship director and the head and neck oncologic faculty within the department. The fellow will evaluate new and recurrent head and neck cancer patients under the direction of the faculty. The surgical responsibilities of the fellow will increase with his/her demonstrated abilities, and the fellow will perform and/or assist with procedures under the direction of the attending faculty. The fellow is expected to participate in the multidisciplinary Head and neck Cancer Tumor Board. He/she is also required to attend regular departmental meetings, including Grand Rounds, Morbidity and Mortality Conferences, and Head and Neck Oncology Rounds, as well as other selected conferences available to the fellow throughout the year. The fellow also participates in the annual Iowa Head and Neck Cancer Course, a week-long didactic and cadaver dissection course. The fellow is expected to actively participate in the education of residents and medical students in the operating room, on the wards, and in the clinics. The fellowship experience at the University of Iowa consists of a very large clinical experience, encompassing all aspects of contemporary head and neck oncologic surgery. Fellows will have the opportunity to participate in a broad range of advanced ablative procedures, including skull base resections, advanced techniques in laryngeal rehabilitation, and transoral robotic surgery, as well as endocrine surgery, and multidisciplinary cases involved the Neurosurgery, Oculoplastics, Oral and Maxillofacial, Dermatology and Cardiothoracic Services. In addition, the head and neck oncologic and reconstructive fellow routinely performs between 60 to 70 free tissue transfer procedures during one year of clinical training.

Research Opportunities: A variety of research opportunities is available in the field of outcome evaluation and quality of life assessment for head and neck cancer patients. In addition, the fellow has a variety of basic science laboratories available within which the fellow may coordinate research projects under the mentorship of the distinguished researchers at the University of Iowa.

Strengths: One of the greatest strengths of the fellowship training at the University of Iowa is the extensive collaboration that the otolaryngology-Head and Neck Surgery Service has with the other surgical subspecialties. Routine collaboration with the Cardiothoracic Surgery, Neurosurgery, Oculoplastics Surgery, Oral and Maxillofacial Surgery, Dermatology and General Surgery Services are undertaken. The fellow gains a tremendous depth of understanding for all aspects of management of head and neck cancer patients through these rich collaborative relationships. Additionally, the fellow functions as a junior faculty member, and is responsible for coordinating the management of the head and neck inpatients with the residents. This experience serves as an excellent preparation for transition into independent practice. The majority of the last ten head and neck oncologic and reconstructive surgery fellows are currently in academic positions. A number of previous head and neck fellows from the University of Iowa have gone on to assume positions of national and international leadership within the field of head and neck oncology.

University of Kansas Medical Center

Program Director: Yelizaveta (Lisa) Shnayder, M.D., F.A.C.S.

Address: Department of Otolaryngology – Head and Neck Surgery

3901 Rainbow Boulevard

Mail Stop 3010

Kansas City, KS, 66160

Phone: (913) 588-6719 Fax: (913) 588-4676 E-mail: yshnayder@kumc.edu

Website: http://www2.kumc.edu/otolaryngology/

Program Coordinator: Samantha Hall

Email: shall7@kumc.edu

Chairman of Department: Daniel Bruegger, MD, F.A.C.S.

Faculty involved with the Fellowship:

David Beahm, MD Endoscopic Skull Base Surgery

Paul Camarata, MD Neurosurgery

Sufi Thomas, Ph.D. Director of Basic Science Research in H&N cancer

James D. Garnett, M.D. Laryngology

Douglas A. Girod, M.D.

Kiran Kakarala, MD

Prakash Neupane, M.D.

Christopher Lominska, M.D.

Yelizaveta (Lisa) Shnayder, M.D.

Jason Sokol, MD

Head and Neck Surgery

Medical Oncology

Radiation Oncology

Head and Neck Surgery

Oculoplastic Surgery

Hinrich Staecker, M.D., Ph. D. Neuro-Otology/Skull Base Surgery

Kevin J. Sykes, M.P.H. Director, Clinical Research Terance T. Tsue, M.D. Head and Neck Surgery

Leonard Lausten, D.D.S. Prosthodontics

Other Parallel Fellowships: Pediatric Otolaryngology

Total number of positions available per year: One (12-month) position

Program Description

Objectives: The Head and Neck Fellowship is a comprehensive one year clinical fellowship, encompassing a full spectrum of Head and Neck Oncology, interdisciplinary management of head and neck cancer patients, with clinical research involvement.

Clinical focus includes:

- Head and Neck Oncologic Surgery
- Microvascular Reconstructive Surgery

- Skull Base Surgery (anterior & lateral), including endoscopic approaches to the skull base
- Minimally Invasive Endocrine Surgery
- Transoral Laser Surgery of Larynx and Oropharynx
- Transoral Robotic Surgery using Da Vinci technology
- Multidisciplinary management of skin cancers, including melanoma, and sentinel lymph node biopsy

<u>Requirements:</u> Admission to the fellowship is contingent upon completion of one of the ACGME-approved residencies in Otolaryngology, Plastic Surgery or General Surgery and eligibility to sit for board examination in applicant's respective specialty. All applicants must be eligible for a medical license in the state of Kansas.

Overview: The University of Kansas Medical Center is a 697-bed hospital with a 21-bed Neuro-Intensive Care Unit and a 26-bed OTO-HNS Ward. The patient accruement area includes all of Kansas and part of Western Missouri. All patients are presented prospectively at the weekly Multidisciplinary Head and Neck Oncology Tumor Board, to obtain a consensus opinion on treatment. This is the busiest Tumor Board at the Medical Center, with more than 450 new or recurrent Head and Neck cancer patients presented each year. A multidisciplinary Thyroid Tumor Board is held monthly to discuss new and recurrent thyroid malignancy patients. A multidisciplinary Melanoma Tumor Board is held monthly to discuss management of melanoma patients.

<u>Duties and Responsibilities of Trainees</u>: The Head and Neck Fellow will be appointed as a Clinical Instructor at the Department of Otolaryngology – Head and Neck Surgery. The Fellow is expected to be involved as a primary or assisting surgeon in all microvascular reconstructive cases as well as transoral robotic resections and skull base cases. The fellow will follow the pre-operative as well as post-operative course of at least 200 head and neck cancer patients. The patients will be discussed with the attending physician in a manner to maximize a teaching experience for the Fellow, while encouraging increasing autonomy and responsibility.

The Fellow will also have didactic teaching responsibilities including Summer Head and Neck Anatomy Course, resident/medical student lectures, and at least one major Grand Rounds presentation as well as a research presentation at the Alumni Day in June. He/she will be expected to act as a teaching physician to a resident during the more straightforward part of a complex head and neck resection, or routine cases such as uncomplicated neck dissections, thyroidectomies, glossectomies or parotidectomies.

The Head and Neck Fellow will attend the "Introduction to Clinical Research" course at the School of Medicine. The Fellow is expected to complete a research project to be presented at a national meeting as well as submitted for publication.

Strengths of the Program:

Our high clinical volume program creates an ideal combination of supervision and autonomy, preparing fellows for an independent career in academic Head and Neck Surgery and microvascular reconstruction. Strengths of the training program include:

-microvascular animal laboratory dissection course to be completed at the beginning of the fellowship

-training in Transoral Robotic surgery for benign and early malignant tumors of the oropharynx and larynx utilizing Da Vinci technology

- -"Introduction to Clinical Research" course, which is administered by the School of Medicine and runs from August to December. This course is free to faculty and fellows, and may be taken for a grade or a certificate. A certificate is given after completing a research proposal, written as a short version of a grant proposal.
- -multiple conferences including intra-departmental Grand Rounds/teaching conferences, annual three-day winter retreat CME meeting in Copper Mountain, Colorado, basic and advanced AO courses on principles of maxillofacial trauma and reconstruction, two-day endoscopic thyroid dissection course and annual alumni day research conference.
- -one day a week will be devoted to elective time in the morning and research time in the afternoon. The Fellow will complete electives in Nuclear Medicine, Radiation Oncology, Medical Oncology and Head and Neck Radiology.
- -Kevin Sykes, MPH, Director of Clinical Research at the Department of Otolaryngology, is a great resource for the H&N Fellow in terms of help with IRB submission, statistical analysis, clinical trial design and administration, getting started with new study protocols as well as preparing poster and oral scientific presentations.
- -opportunity for the Fellow to participate in one medical mission trip in a developing country, with KUMC Otolaryngology faculty and residents.

Careers of Former Fellows:

Dr. Jeffrey Jorgensen (2009) is an academic Head and Neck/Microvascular surgeon at the University of Missouri/Columbia Department of Otolaryngology.

Dr. Konstantinos Kourelis (2010) has also completed an advanced fellowship in endoscopic/skull base surgery in Baltimore, MD. He returned to Patras, Greece to practice Head and Neck Surgery.

Dr. Mark Furin (2011) returned to his position of Chief of Otolaryngology – Head and Neck Surgery at Kaiser Permanente Northwest in Portland, Oregon.

Dr. Yogesh More (2012) is a Head and Neck/Microvascular surgeon at Cleveland Clinic, Abu Dhabi.

Dr. Issam Eid (2013) is an academic Head and Neck/Microvascular surgeon at the University of Mississippi at Jackson Department of Otolaryngology.

Dr. Levi G. Ledgerwood (2014) is a Head and Neck/Microvascular surgeon at Kaiser Permanente in Sacramento, California.

Cancer Care Manitoba, University of Manitoba

Program Director: K. Alok Pathak, MD, FRCS(Glasg), FRCSEd, FRCSC

Program Coordinator: Andrea Roskevich

Address: ON 2048, CancerCare Manitoba

675 McDermot Avenue Winnipeg R3E 0V9

Canada

Phone: (204) 787-1340 Fax: (204) 787-2768

Email: apathak@cancercare.mb.ca

Website: www.cancercare.mb.ca; www.umanitoba.ca

Chairman of Department: Jack McPherson, MD, FRCSC

Faculty Involved with the Fellowship: Richard W. Nason, MD, FRCSC K. Alok Pathak, MD, FRCSC Adnan A. Shah, MDS, FDSRCS Edward W Buchel, MD, FRCSC Thomas E Hayakawa, MD, FRCSC Vallerie Gordon, MD, FRCPC Andrew Maksymiuk, MD, FRCPC William D. Leslie, MD, FRCPC Ahmet Leylek, MD, FRCPC Andrew Cooke, MD, FRCPC

Total Number of Positions Available per Year: One per year

PROGRAM DESCRIPTION

Overview: Cancer Care Manitoba is the tertiary referral centre for cancer patients from the provinces of Manitoba, Nunavut, Western Ontario and Saskatchewan in Canada providing cancer care to a population of around 1.3 million. Head & Neck Surgical Oncology service at Cancer Care Manitoba comprises 2 fellowship trained Head and Neck Surgical oncologists who see over 700 new patients and 5000 follow up patients every year. About 425 proven cancer cases receive multi-disciplinary treatment every year based on the recommendations at weekly head and neck disease site group case conferences. Being a part of a University Hospital enables access to other services like reconstructive surgery, neurosurgery, throracic surgery, vascular surgery and rehabilitation services to name a few at any time. Manitoba Institute of Cell Biology is housed in the same premises, which provides provides interested fellows an easy access to basic laboratory research facilities. Cancer Care Manitoba also houses the Manitoba Cancer registry which is one of the oldest population based registries in the world. This makes clinical research and outcome analysis possible on a population based cohort.

Strengths: Head and Neck Surgical Oncology program operates from two university teaching hospitals - Health Sciences Centre and St. Boniface General Hospital with over 700 head and neck surgical procedures performed every year. We have a strong minimally invasive Head and Neck Surgical Oncology program that encompasses minimally invasive thyroidectomies and parathyroidectomies, CO₂ laser excisions and radio-guided sentinel node biopsies. Fellows are also expected to be actively involved

in complex surgical procedures requiring multidisciplinary participation like micro-vascular reconstructions, skull base surgeries, mediastinal lymph node dissections and major vascular interventions.

Objectives: At the end of their fellowship, our fellow will have the knowledge and experience to determine stage and treatment options for individual head and neck cancer patients; broad knowledge of other cancer treatment modalities including, but not limited to: radiotherapy, chemotherapy, immunotherapy and endocrine therapy; expertise in the selection of patients for surgical management of head and neck cancer as a component of a multi-disciplinary treatment plan; knowledge of the benefits and risks associated with a multi-disciplinary approach; experience in palliative techniques as they apply to head and neck cancer patients including proper selection of patients, proper performance of palliative surgical procedures and knowledge of non-surgical palliative treatments and finally a clear understanding of tumor biology, carcinogenesis, epidemiology, tumor markers and tumor pathology.

Eligibility: Cancer Care Manitoba offers a one year fellowship in head and neck surgical oncology to Otolaryngologists, General Surgeons, or Plastic Surgeons who have completed their residency training and have passed or attained qualification to sit for the examination of the Royal College of Surgeons of Canada or American Board of Otolaryngology, Surgery, or Plastic Surgery. The fellowship program is designed to offer a comprehensive training program in clinical head and neck oncology to prepare the individual for an academic career.

Duties and Responsibilities of Trainees: During the twelve month rotation fellows will be provided with ample opportunities to participate in Multidisciplinary Clinics and Conferences to help them in developing clinical and technical skills for providing comprehensive care to head and neck cancer patients. The fellow will be provided the opportunity to either perform as surgeon or first assistant about 300 major procedures in the head and neck region. Fellows are encouraged to be involved in our ongoing studies in collaboration with Manitoba Institute of Cell Biology, Manitoba Cancer Registry and University of Manitoba and are expected to develop or participate in at least one research project to be submitted to a peer review journal for possible publication.

Supervision, Teaching and Call: In addition to maintaining and enhancing his/her professional activities through ongoing educational activity, fellows will be involved in training and teaching students, physician assistants, and support staff. Fellow will be responsible for coordinating the academic activity of the service in terms of organizing the journal club, morbidity and mortality conference. Fellow will help in orienting the residents, medical students and trainees during their rotations and supervise them through the surgical procedures and be involved in different teaching courses organized by the Head and Neck Surgical Oncology program.

University of Miami Hospital and Clinic

Program Director: Francisco J. Civantos, M.D., F.A.C.S.

Address: Sylvester Comprehensive Cancer Center (SCCC)

1475 NW 12th Avenue #4027

Miami, FL 33136

Phone: (305) 585-7127 **Fax:** (305) 326-7610

Email: FCivanto@med.miami.edu

Website: www.otolaryngology.med.miami.ed

Chairman of Department: Fred F. Telischi, MEE, MD, FACS

Faculty Involved with the Fellowship:

Francisco J. Civantos, M.D., F.A.C.S.

David J. Arnold, M.D., F.A.C.S.

Roy Casiano, M.D.

Elizabeth Franzmann, M.D.

W. Jarrard Goodwin, M.D., F.A.C.S.

Georges Hatoum, M.D.

Brian Jewett, M.D.

Donna Lundy, Ph.D.

Arnold Markoe, M.D.

Khaled Tolba, M.D.

Giovana Thomas, M.D.

Donald Weed, M.D., F.A.C.S.

Total Number of Positions Available per Year: Two (2) one-year positions. Two-year positions available by special arrangement either for a specific clinical concentration or research.

PROGRAM DESCRIPTION:

Overview: The University of Miami (UM) School of Medicine at Jackson Memorial Hospital and the University of Miami Hospitals and Clinics, offers two Head and Neck Fellowships, which blend an educational program with the responsibilities of a senior staff physician. Our institutions are dedicated to patient care, research, and education. Jackson Memorial Hospital is an accredited, non-profit, tertiary care hospital, serving not only the population of Miami Dade County (approximately five million), but also a hub for South and Central America making us one of the busiest hospitals in the nation. Sylvester Comprehensive Cancer Center handles more than 1,300 inpatient admissions annually, performs 3,000 surgical procedures, and treats 3,000 new cancer patients. In addition, UM/Sylvester physicians and scientists are engaged in 150 clinical trials and receive more than \$30 million annually in research grants.

Objectives: The Head and Neck Fellowship is a one-year program focused on head and neck oncologic surgery. Two positions are available. Fellows will develop expertise in head and neck ablative surgery and reconstruction. High volumes of skull base surgery and microvascular reconstructive surgery are available, and fellows will be well trained in both of these areas. There is also opportunity for subspecialty focus on either of these areas. A second year for increased subspecialization or laboratory research is optional. The fellows will be involved in the microvascular rat lab and will complete the microvascular animal training course. It is expected that, over the course of the fellowship, the fellow will develop the ability to perform microvascular cases independently. Our goal is to train surgeons who will subsequently take positions at referral centers as tertiary head and neck surgeons. This is a hands-on surgical experience with opportunity to function independently and a high surgical volume.

Duties and Responsibilities of Trainees: Our fellowships are designed to be a hands-on learning experience in the multidisciplinary management of patients with Head and Neck Cancer. Fellows should take an academic approach to patient care, discussing cases with the attending, performing literature review on unusual cases, and in the teaching of other residents and fellows. At least one case should be presented weekly at our Tumor Board. For two index cases a year, the fellow should be involved in radiation planning and/or chemotherapeutic dosing and become familiarized with the approach of our colleagues in radiation oncology and medical oncology. During the rotations on both these services, a special focus on these disciplines should occur. Fellows are to attend all didactic sessions pertinent to Head and Neck Surgery including Grand Rounds, Core Curriculum, Tumor Conference, Thyroid Conference, and Journal Club. A research project is designed and an annual presentation is required.

Careers of Recent Former Fellows:

Tareck Ayad- University of Montreal

Deepak Gurushanthaiah- Head & Neck Microvascular Surgeon, Kaiser Permanente San Francisco

Sandeep Samant- Director of Head & Neck Surgery, University of Tennessee Lisa Shnayder- Head & Neck Microvascular Surgeon, University of Kansas Gina Jefferson- University of Mississippi Miriam O'Leary- Tufts University Joseph Curry- Jefferson University

Chetan Nayak- Faculty at University of Miami

Joshua Rosenberg- Mt. Sinai Medical Center, New York

Zoukaa Sargi- Faculty at University of Miami

University of Michigan

Program Director: Mark E. P. Prince, MD, FRCSC

> Professor and Associate Chair for Education Division Chief, Head and Neck Surgery

Asst. Program Director: Kelly M. Malloy, MD, FACS

Assistant Professor

Program Coordinator: Sarah Judson

Address: Department of Otolaryngology-Head and Neck Surgery

> 1500 E Medical Center Drive 1904 Taubman Center, SPC 5312 Ann Arbor, MI 48109-5312

Telephone: (734) 936-3172

Email: mepp@med.umich.edu (Program Director)

(734) 936-9625

kellymal@med.umich.edu (Assistant Program Director)

postmac@med.umich.edu (Program Coordinator)

http://medicine.umich.edu/dept/otolaryngology/education/fello Website:

wships/fellowship-head-neck-oncologic-surgery

Carol R. Bradford, MD, FACS **Chairman of Department:**

Professor and Chair

Parallel fellowships: Facial Plastic and Reconstructive Surgery, Otology/Neuro-otology,

Pediatrics, Skull Base Surgery

Total number of positions

available per year:

Two 1-year positions. After matching, a second research year can be arranged. The first year of the two-year fellowship is 80% clinical and 20% research. An elective second year of fellowship is 80%

research and 20% clinical.

Faculty involved with

fellowship:

Fax:

Clinical Faculty

Matthew E. Spector, MD Andrew G. Shuman, MD Mohannad Ibrahim, MD Ashok Srinivasan, MD Nancy Rogers, RN, BSN, CORLN

Avraham Eisbruch, MD Carol R. Bradford, MD,

FACS

Nancy Wallace, RN, BSN, CORLN Norman D. Hogikyan, MD, FACS Scott A. McLean, MD, PhD, FACS Erin L. McKean, MD, FACS Tamara Miller, RN, BSN, OCN Francis P. Worden, MD Teresa Lyden, MA, CCC-SLP

Gregory T. Wolf, MD, FACS Jeffrey S. Moyer, MD, FACS

Jennifer C. Kim, MD

Jonathan B. McHugh, MD Kelly M. Malloy, MD, FACS Marc Haxer, MA, CCC-SLP

Mark E. Prince, MD, FRCSC

Nonclinical Faculty Thomas E. Carey, PhD J. Chad Brenner, PhD Silvana Papagerakis, PhD

Mary Patterson, RN, BSN, CORLN

Program description:

The University of Michigan's Head and Neck Surgical Oncology and Microvascular Reconstruction Fellowship is designed to provide intensive training in all facets of oncologic care of the head and neck cancer patient. Our goal is to train future leaders in the field of head and neck cancer care, clinical and translational research, and to provide the platform from which a successful academic career is launched. As the major center for head and neck surgery in Michigan, our multidisciplinary team treats many head and neck cancer patients each year, and our fellows are integral participants in caring for these patients. We perform well over 100 free tissue transplants yearly, harvesting from the full breadth of donor sites. Additionally, we have the largest melanoma and Merkel cell carcinoma programs in the United States. In addition to extensive training in head and neck mucosal extirpative surgery, both open and transoral, the fellows are trained in the following specialized areas: microvascular reconstructive surgery, advanced cutaneous malignancy surgery, including sentinel node biopsy, skull base surgery and reconstruction, and salivary and endocrine surgery. Dedicated time is allotted to rotate with our entire multidisciplinary team, including radiation and medical oncology, radiology, pathology, and speech language pathology, as well as any other specialists the fellow may wish to work with. Beyond the clinical experience, we pride ourselves on providing life-long mentorship to our fellow graduates, and our Fellow Alumni group provides additional networking and mentorship opportunities.

Fellow responsibilities:

- 1. Work-up and follow surgical patients while admitted to head and neck service.
- 2. Assist in major surgical cases.
- 3. Assist in microvascular surgical cases.
- 4. Supervise at the VA Hospital 1 day per week (may be shared if 2 fellows are matched in same year).
- 5. Summarize cases at weekly Multidisciplinary Tumor Board.
- 6. Prepare and submit fellowship research project.
- 7. Present research at the Annual Krause Lectureship.
- Participate in all Cancer Center activities related to the Head and Neck Oncology Program, including monthly meeting attendance and the annual Head and Neck Oncology Program Retreat.
- 9. Participate with faculty in student and resident teaching, including several formal lectures at tumor conferences.
- 10. Daily rounds with responsible faculty.
- 11. Participate in "on-call" responsibilities (5-6 weeks/year).
- 12. Attend one national scientific meeting per year.
- 13. Prepare annual operative list and list of publications.

Research opportunities:

The Head and Neck Oncology Program of the University of Michigan is one of the most prolific head and neck cancer research groups in the world. We maintain tumor biology research laboratories both at the University of Michigan Comprehensive Cancer Center

and at the Department of Veteran's Affairs Medical Center. Basic science research opportunities are available in the molecular biology of tumors, predictive biomarkers, stem cell research, genomics and proteomics. We are also national leaders in clinical trials development, outcomes and quality of life research and head services research. Finally, we have burgeoning research programs in quality of head and neck surgical care and in simulation education research that may appeal to fellows with interests in quality improvement/patient safety or graduate medical education. Any or all of these research opportunities are available for the head and neck fellows.

Careers of former fellows:

An overwhelming majority of our head and neck oncology fellows have gone on to academic careers.

Douglas B. Chepeha, MD, MScPH, FRCSC, Professor, University of Toronto

Larry Myers, MD, Associate Professor, University of Texas Southwestern Medical Center

Brian Nussenbaum, MD, FACS, Professor, Washington University in St. Louis

Steven Wang, MD, Associate Professor, University of California, San Francisco

Kevin Fung, MD, Associate Professor, University of Western Ontario

Jeffrey S. Moyer, MD, FACS, Associate Professor, University of Michigan

Christopher D. Lansford, MD, FACS, Clinical Assistant Professor, University of Illinois, Urbana-Champaign College of Medicine

Lance E. Oxford, MD, Private Practice

Amy A. Lassig, MD, Assistant Professor, University of Minnesota

Kevin Emerick, MD, Assistant Professor, Harvard Medical School

Kelly M. Malloy, MD, FACS, Assistant Professor, University of Michigan

Samir Khariwala, MD, Assistant Professor, University of Minnesota

Shamir Chandarana, MD, Msc, FRCSC, Clinical Assistant Professor, University of Calgary

Naweed Raza, MD, Assistant Professor, Wayne State University

Vivian Wu, MD, MPH, Assistant Professor, Eastern Virginia Medical School

Matthew Spector, MD, Assistant Professor, University of Michigan

Chaz Stucken, MD, Clinical Lecturer, The Ohio State University

University of Oklahoma

Program Director: Greg A. Krempl, M.D.

Address: Department of Otorhinolaryngology

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Phone: (405) 271-8047 **Fax:** (405) 271-3248

Email: greg-krempl@ouhsc.edu

Website: http://www.medicine.ouhsc.edu/

Faculty Involved with the Fellowship:

Jesus E. Medina, M.D., F.A.C.S. Carl Bogardus, M.D. Vikki Canfield, M.D. John R. Houck, Jr., M.D. Greg A. Krempl, M.D. Howard Ozer, M.D. Ivan Wayne, M.D.

Director of Research: Ann M. Thompson, Ph.D.

Total Number of Positions Available per Year: One (2-year) position.

PROGRAM DESCRIPTION:

Objectives: The objectives of the program are to provide the fellows with an outline of the basic knowledge, skills, and attitudes they must have at the completion of their training regarding the biology, pathology, and general principles for the prevention, early diagnosis, and treatment of cancer of the head and neck region.

History: The program was established in 1990 and has trained seven fellows.

Requirements of Applicants: Board eligible in Otolaryngology or General Surgery.

Description of Medical Center and Academic Affiliation: The University Hospital currently provides state of the art, multidisciplinary care to approximately 250 new head and neck cancer patients and provides almost 1,000 head and neck cancer-related outpatient visits per year. These services are provided by the members of the faculty of the Department of Otorhinolaryngology in collaboration with members of the faculty of the following departments and sections of the College of Medicine: Radiation Oncology, Medical Oncology, Radiology, Plastic Surgery, Pathology, Neurosurgery, Dermatology, along with various departments within the College of Dentistry. The head and neck cancer patients are treated at the University Hospital, Veterans Administration Medical Center, and Presbyterian Hospital.

Outline: The program enjoys the benefit of a busy clinical practice that includes a variety of cases that cover the full spectrum of head and neck oncology and reconstruction including opportunities for training in microvascular surgery. The program has a strong well-organized

curriculum of academic activities including weekly journal club, multidisciplinary tumor conference, and surgery planning sessions.

Research Opportunities: The primary goal of the Head and Neck Fellowship Research program is to ensure that the fellow has a thorough understanding of the discipline of research. The program will give each fellow the opportunity to expand his/her current knowledge of research design, analysis, and scientific method. The research experience will prepare the fellow for a position in academic medicine.

Strengths: A well thought-out systematic research program is one of the strengths of the program. There are a few unique clinical and research trainings:

- 1. *Masters of Science (M.S.) in Clinical Epidemiology*: As an alternative to the research program, a program for concomitant training in Clinical Epidemiology may be offered to the head and neck fellow. This program is offered through the Department of Biostatistics and Epidemiology of the College of Public Health on the Health Sciences Center campus. The purpose of this program is to provide the fellow with the knowledge base, practical experience, and credentials to properly conduct clinical studies in oncology.
- 2. Collaborative Strengths: The department has a unique Multidisciplinary Head and Neck Cancer Clinic in which new cancer patients and patients that currently are undergoing treatment under a clinical protocol are jointly evaluated by the head and neck surgeons, medical oncologist and radiation oncologist. The program also has strong ties to the Section of Plastic Surgery. This Sections' faculty works with the program's faculty in microvascular surgery for reconstruction, in addition to the services of the Department's own microvascular surgeon. Finally, residents in General Surgery rotate in the Head and Neck Service during their PG2 year of training.

Careers of Former Fellows:

Edgar Boyd, M.D., Air Force Michael Farrel, M.D., Private practice Avi Khafif, M.D., Academic practice Greg A. Krempl, M.D., Academic practice Alfred Park, M.D., Military Nestor Rigual, M.D., Private practice Nilesh Vasan, M.D., Academic practice

University of Pennsylvania

Program Director: Gregory S. Weinstein, M.D.

Address: Head and Neck Oncology & Microvascular Reconstruction

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Philadelphia, PA 19104

Phone: (215) 349-5390 **Fax:** (215) 349-5977

Email: gregory.weinstein@uphs.upenn.edu

Tamika.Singleton@uphs.upenn.edu

Website: http://www.uphs.upenn.edu/pennorl/fellowshiphn.htm

Chairman of Department: Bert W. O'Malley, Jr., M.D.

Faculty Involved with the Fellowship: Gregory S. Weinstein, M.D. Ara Chalian, M.D. Bert W. O'Malley, Jr., M.D. Jason G. Newman, M.D. Christopher Rassekh, M.D. Steven Cannady, MD

Total Number of Positions Available per Year: Two positions.

PROGRAM DESCRIPTION:

Overview: A recent trend in many centers has been to define the role of the head and neck surgeon as a doctor, who diagnoses head and neck squamous cell carcinoma in preparation of non-surgical treatment, such as chemotherapy and radiation, reserving the surgical role for treatment failures. The philosophy of management at the University of Pennsylvania (PENN) is based on a different approach. The Center for Head and Neck Cancer meets weekly and all patients are presented prior to treatment. Our approach is to recommend the best treatment for each patient, either surgical or non-surgical. The overall approach is to focus on cancer control while optimizing functional outcome. At times, surgery is superior in the oropharynx and larynx for both cancer control and better functional outcome. This is accomplished with the judicious use of a variety of surgical approaches, such as endoscopic laser approaches, transoral robotic surgery utilizing the da Vinci Surgical System, transcervical resection, open or endoscopic partial laryngectomy, and free flap reconstructions.

While we fully agree that in many instances non-surgical treatment is the superior treatment option, this is not always the case. In fact, here at PENN we have carried out major chemoradiation trials, and fully support the role of non-surgical management of carcinomas of the head and neck when appropriate. We are uniquely positioned to integrate non-surgical management into our regimens given that, in the Department of Otorhinolaryngology-Head and Neck Surgery at PENN, we employ a full-time clinical medical oncologist.

Nonetheless, a head and neck surgeon should never have to be in a position to offer non-surgical treatment to patients because they do not feel comfortable performing the full spectrum of surgical techniques that are available for their patients. The goal and educational emphasis of our fellowship is to provide a learning environment that allows our fellows to mature into surgeons that view themselves as the advocate for the surgical approaches when surgery is the superior modality for a given patient and cancer.

Requirements of Applicants: Pennsylvania Medical License

Operative Experience: The fellow will have operating privileges. There are 1,200 head and neck procedures annually. The fellow will participate in all aspects of head and neck surgery, including conservation laryngeal surgery, endoscopic skull base surgery, reconstruction, microvascular surgery, and Transoral Robotic Surgery (TORS) utilizing the da Vinci Surgical Robot.

Duties and Responsibilities of Trainees: The Head and Neck Fellowship at the University of Pennsylvania is a clinically oriented 12-month experience, designed to provide advanced training in all aspects of the care of the head and neck cancer patient. During this time, the fellow will be mentored by the full-time head and neck faculty, as well as by a team comprised of medical oncologists, radiation oncologist, pathologists, and radiologists. They will work at, and cover both the Hospital of the University of Pennsylvania and Pennsylvania Hospital. The fellow works closely in the operating room with the supervising attending surgeons, and will actively participate in the training of residents. The fellow is involved in both ablative and reconstructive aspects of patient care. Comprehensive management of the patient is emphasized, and the fellow will be involved in the initial consults, preoperative visits, tumor board discussions, and postoperative care of the patients. This continuity of care allows for a better understanding of the full process of cancer management. Fellows are involved in clinic one-half day per week. They attend meetings of the PENN Center for Head and Neck Cancer, with presentation of approximately 800 new head and neck cases per year. This multidisciplinary treatment conference familiarizes the fellow with both surgical and nonsurgical approaches in the management of head and neck cancer. As a junior member of the faculty, the fellow will also have an independent half-day clinic, and will diagnose, treat, and care for patients in this setting.

Research Opportunities: Research and teaching opportunities are also available and encouraged. The staff is available and interested in fostering clinical research.

Strengths: The clinical strengths of the program include learning a full complement of organ preservation surgery (i.e., supracricoid partial laryngectomy, endoscopic laser laryngeal surgery for cancer), Transoral Robotic Surgery (TORS) utilizing the da Vinci Surgical System, thyroid and parathyroid surgery, parotid surgery, microvascular free flap surgery, and endoscopic and open cranial base surgery. With the outstanding addition of Steve Cannady MD, a Mark Wax MD trained free flap surgeon, together with Ara Chalian DM, our fellows will learn how to perform free flaps efficiently and successfully on a very large number of cases. The graduating fellow will be armed with

the technical and perioperative management skills necessary to treat these complex problems, as well as the skills to manage all aspects of "general" head and neck surgical oncology. The University of Pennsylvania Center for Head and Neck Cancer is the first services in the world to offer Transoral Robotic Surgery (TORS) for the diagnosis and treatment of benign and malignant lesions of the upper aerodigestive tract. Robotic surgery has been found to be an important advance in the management of patients with head and neck cancers, and our fellows will be fully trained robotic surgeons. The TORS training program includes hands on cadaver training in our TORS training laboratory which is located in our department Temporal Bone Lab. We also offer post-graduate TORS training and have regularly scheduled TORS trainings that allow fellows to observe numerous TORS cadaver training sessions as well. It is our opinion that this will create an immediate clinical and research medium for an academic Head and Neck Surgeon. The goal of the program has been to help the recent fellowship graduates to transition into being independent practitioners in head and neck oncology.

Careers of Former Fellows: The program has a very strong track record in academic job placement nationally. For those prospective applicants with an interest in our program the list of prior fellows and their contact information is available from our Staff Assistant, Tamika Singleton (Tamika.Singleton@uphs.upenn.edu)

University of Pittsburgh

Program Director: Robert L. Ferris, M.D., Ph.D., F.A.C.S.

UPMC Endowed Professor of Head and Neck Surgery

Vice-Chair for Clinical Operations

Chief, Division of Head and Neck Surgery Associate Director for Translational Research Co-Leader, Cancer Immunology Program University of Pittsburgh Cancer Institute

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200 Lothrop Street Pittsburgh, PA 15213

 Phone:
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 Fax:
 (412) 647-2080

 Email:
 ferrisrl@upmc.edu

Tiffany Terry (Program Coordinator)

Website: http://otolaryngology.medicine.pitt.edu/

Chairman of Department: Jonas T. Johnson, M.D., F.A.C.S.

Faculty Involved with the Fellowship:

Otolaryngology Head and Neck	Neuroradiology Oncology	Medical Oncology
Surgery		
Robert L. Ferris, MD, PhD	Barton F. Branstetter, MD	Julie Bauman, MD
Jonas T. Johnson, MD	Tanya Rath, MD	James Ohr, MD
Eugene N. Myers, MD		
Seungwon Kim, MD	Radiation Oncology	Pathology
Umamaheswar Duvvuri MD, PhD	Dwight E. Heron, MD	Raja R. Seethala, MD
Carl H. Snyderman, MD	David A. Clump, MD, PhD	Robert L. Peel, MD
Melonie Nance, MD		Simon Chiosea, MD
David E. Eibling, MD		

Total Number of Positions Available per Year: Three (1 to 2-year) positions.

PROGRAM DESCRIPTION:

Overview: The Department of Otolaryngology at the University of Pittsburgh School of Medicine offers Fellowship training in Advanced Oncologic Head and Neck, as well as Cranial Base Surgery.

History: Fellowship training in advanced oncologic head and neck surgery was begun at the University of Pittsburgh in the Department of Otolaryngology in 1984. This was merged with the Fellowship program in cranial base surgery in subsequent years.

Requirements of Applicants: Applicants must be Board Certified or eligible for certification in Otolaryngology, Plastic Surgery, or General Surgery. All applicants must be eligible for licensure to practice medicine in the State of Pennsylvania. The fellowship is a minimum of one year in duration. Applicants with a potential for a career in academic surgery are preferred.

Duties and Responsibilities of Trainees: The successful applicant will be appointed as in Instructor in Otolaryngology. Active participation in weekly tumor board and patient planning conference, as well as all aspects of patient care, is anticipated. Training in advanced oncologic head and neck surgery includes teaching head and neck surgery; participating in advanced oncologic head and neck procedures, including surgery of the cranial base; and didactic training in the disciplines of radiation oncology and medical oncology. Currently, the fellow actually participates in a wide variety of surgeries, including cranial base surgery. Many procedures are undertaken in a multidisciplinary environment, including neurosurgery, plastic and reconstructive surgery, and thoracic surgery. The successful applicant must be able to function effectively in a high-volume surgical program with an emphasis on resident training and research. A multitude of opportunities for personal growth are available.

Research Opportunities: Identification of a research project is an essential component of the training program. All fellows are required to design a prospective clinical trial concept during the fellowship year(s). Laboratory investigation may be pursued in a variety of laboratories affiliated with the University of Pittsburgh Cancer Institute or in the Department of Otolaryngology. Under most circumstances, this would require a commitment to a second year of training.

Strengths: Large surgical volume, including transoral robotic (TORS), endoscopic laryngeal, endocrine and sinonasal/skull base case. Multidisciplinary, state-of-the-art management of head and neck cancer. Unique clinical and translational research opportunities, through NIH funded research and training grants, including an NCI-funded SPORE. More information is available on request.

Careers of Former Fellows:

Johannes Fagan, M.D.-Chairman, Groote Schuur Hospital, Cape Town, South Africa

Bert O'Malley, M.D.-Professor and Chairman, University of Pennsylvania, Philadelphia

Lisa Galati, M.D.-Associate Professor, Albany Medical College, Albany, NY

Kristin Gendron, M.D.-Private practice in St. Paul, MN

Christine Gourin, M.D.- Professor, Johns Hopkins

Daniel Nuss, M.D., Professor and Chairman, LSU Medical School

Karen Pitman, M.D.-Professor, MD Anderson Phoenix, AZ

Alfred Simental, MD-Professor and Chairman, Loma Linda University, Loma Linda, CA

John Song, M.D.-Associate Professor, University of Colorado, Denver

Rohan Walvekar, M.D.-Associate Professor, LSU Medical School

Stephen Lai, M.D., Ph.D. Associate Professor, MD Anderson Cancer Center

Lee Zimmer, M.D.-Associate Professor, University of Cincinnati, Cincinnati, OH

David Cognetti, MD- Assistant Professor -Jefferson Medical College

Brain J. Park, M.D. Instructor in Otology and Laryngology, Harvard Medical School

Emiro Caicedo - Granados, M.D. Assistant Professor, University of Minnesota

Apostolos Christopoulos, M.D., Assistant Professor, University of Montreal

Steve C, Lee, M.D., Ph.D., Assistant Professor, Loma Linda University

Alec Vaezi, MD, PhD - Assistant Professor, University of Pittsburgh

Andrew Tassler, MD, Assistant Professor, Montefiore Medical Center, Bronx, NY

Irene Zhang, MD - McMaster University, Head and Neck Service

Chwee Ming Lim, MD - Assistant Professor, Consultant, National Univ. Health System, Singapore

Vikas Mehta, MD, Assistant Professor, LSU Health Shreveport

University of Toronto

Mount Sinai Hospital, Sunnybrook Health Sciences Centre, University Health Network (Toronto

General Hospital/Princess Margaret Hospital)
Program Director: Jeremy L. Freeman, M.D.

Address: Mount Sinai Hospital

Department of Otolaryngology- Head and Neck Surgery

600 University Avenue #401 Toronto, ON M5G 1X5 CANADA **Phone:** (416) 586-4800 Ext. 3236

Fax: (416) 586-8600

Email: jfreeman@mtsinai.on.ca

Chairman of Department: Ian J. Witterick, M.D.

Faculty Involved with the Fellowship:

University Health NetworkMount Sinai HospitalDale Brown, M.D.Jeremy L. Freeman, M.D.Ralph W. Gilbert, M.D.Sunnybrook Health Sciences Center

David Goldstein, M.D.
Patrick J. Gullane, M.D.
Jonathan Irish, M.D.

Danny Enepekidis, M.D.
Kevin Higgins, M.D.

Directors of Research:

Fei-Fei Liu, M.D., at the University Health Network Ranju Ralhan, Ph.D at Mount Sinai Hospital

Total Number of Positions Available per Year: Four (1 to 2-year) positions.

PROGRAM DESCRIPTION:

Overview: The Mount Sinai Hospital, Sunnybrook Health Sciences Center and the University Health Network (Toronto General Hospital/Princess Margaret Hospital) are teaching hospitals within the University of Toronto health sciences complex. Over the past 15 years, the Department of Otolaryngology—head and neck surgery at the University of Toronto has developed a highly integrated multidisciplinary Head and Neck Fellowship Program incorporating these three campuses. The Toronto Western Hospital, where neurosurgical expertise is concentrated serves as the site for any surgery involving the skull base.

This program is recognized internationally for patient care, research, and education, principally involving the disciplines of radiation, medical and surgical oncology; the program interfaces with medical imaging, pathology, dentistry, speech, nutrition, nursing, social work, psychiatry, and research scientists.

The program provides well-balanced exposure to all areas including skull base surgery, microvascular surgery, endocrine surgery, and innovative head and neck research. More recently Head and Neck Oncology has been selected as one of the programs of "Excellence" within the Ontario Cancer Institute/Princess Margaret Hospital. Similarly, Head and Neck Oncology is designated at the Mount Sinai Hospital as a high priority program within the strategic focus of the hospital.

Within the Mount Sinai/UHN, seven hundred new cases of head and neck squamous cell carcinoma (scc) are evaluated in the program per annum at the Princess Margaret Hospital. One thousand major procedures are performed each year within this head and neck site group. Two hundred free tissue

transfers are carried out by the service to reconstruct defects about the head and neck. In addition to the above, seven hundred and fifty thyroid procedures are carried out by the staff. At the Sunnybrook campus approximately four hundred new scc cases are seen and one hundred free tissue transfers are performed in addition to two hundred endocrine cases. The fellow is exposed to a large volume of head and neck related cases; the experience is tailored to the desires and ultimate career goals of the fellow. The fellow is expected to integrate with residents in the teaching program and act as mentor to them.

Fellows are given incremental responsibility according to performance. Supervision is available at all time. Fellows are not required to manage patients outside the scope of head and neck oncology or related diagnoses.

Throughout the academic year there are a large number of teaching rounds, tumor boards, continuing medical education events, courses, and visiting professorship to which the fellow is invited to participate.

The majority of head and neck cases in the Toronto region are seen in the multidisciplinary facilities of the University Health Network (UHN)/ Mount Sinai Hospital and Sunnybrook. Head and neck is considered a tertiary referral program by most community-based physicians and surgeons.

Duties and Responsibilities of Trainees: The program broadly encompasses a wide variety of neoplastic head and neck diagnoses. The major subsites include all head and neck mucosal malignancies. Other subsites include salivary glands, thyroid, complex head and neck skin malignancies, and head and neck sarcoma that are managed by the head and neck surgical group in collaboration with the respective radiation oncology and medical oncology site group members. During the one or two-year fellowship program, the clinical rotations include the University Health Network (UHN), Mount Sinai Hospital, or Sunnybrook. There are four fellowship positions available per year.

The duties of the Head and Neck Oncology Fellow are as follows within the respective institutions:

- 1. Participate in outpatient clinics pertaining to the head and neck.
- 2. Participate in surgical procedures pertaining to the head and neck.
- 3. The "core teaching curriculum" requires that a topic be researched monthly within the Head and Neck Program.
- 4. Completion of at least three clinical-oriented research projects that results in peer-reviewed publications. Opportunity is available for basic science projects. Support is available for presentation of the fellow's work at scholarly meetings.
- 5. Attend weekly interdisciplinary Tumor Board Rounds at The University Health Network, Mount Sinai Hospital or Sunnybrook.
- 6. Present at least one Grand Rounds per year related to the Head and Neck Program and participate at all Tumor Board related rounds at The University Health Network, Mount Sinai Hospital or Sunnybrook.
- 7. Prepare a topic for the fellows' monthly Education Seminar that takes place on the first Monday of each month.

Careers of Past Fellows: Of the fellows who have successfully completed this fellowship program, over 80% of them have pursued academic careers and a significant number are department chairs.

University of Washington

Program Director: Eduardo Mendez, MD, MS, FACS

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 Email:
 edmendez@uw.edu

Website: http://depts.washington.edu/otoweb/

Faculty Involved with the Fellowship:

Neal D. Futran, M.D. Bernardo Goulart, M.D. Robert Rostomily, M.D. Isaac Bohannon, M.D. Jav Liao, M.D. Jeffrey Rubenstein, D.D.S. George Larramore, M.D. Daniel Silbergeld, M.D. Amit Bhrany, M.D. Eric Failor, M.D. Renato Martins, M.D. Lawrence True, M.D. Douglas Wood, M.D. Laura Chow, M.D. Jeffrey J. Houlton, M.D. Kris Moe, M.D. Eugene Zeiler, M.D. Marc D. Coltrera, M.D. Michael Mulligan, M.D. Cristina Rodriguez, M.D. Roberta Dalley, M.D.

Keith Eaton, M.D. Upendra Parvathenini, M.D. Joseph Ghodke, M.D. Christina Rodriguez, M.D.

Director of Research: Bruce Tempel, Ph.D.

Other Parallel Fellowships: Laryngology, Facial Plastic Surgery

Total Number of Positions Available per Year: One (1year) position.

PROGRAM DESCRIPTION:

Objectives: The program is designed to provide advanced clinical training in extirpative surgery, complicated salivary/endocrine surgery, microvascular reconstruction, skull base surgery, and transoral robotic/transoral laser endoscopic approaches. The program also offers intensive research mentoring with the intent to support the development of clinician researchers who are planning an academic career.

Overview: The head and neck fellowship is divided into major areas, including surgical oncology and microvascular reconstruction, TORS, skull base surgery, radiation oncology, and medical oncology. The fellow will be exposed to surgical pathology, maxillofacial prosthetics, and speech rehabilitation.

Duties and Responsibilities of Trainees: During clinical rotations, the fellow will work directly with faculty members in the care of each patient. The fellow will be responsible for overseeing the initial evaluation and work-up of tumor patients, coordination of multidisciplinary care, and inpatient and outpatient follow-up. The fellow will function as either operating surgeon or first assistant under the supervision of the appropriate attending physician. One of the goals of the fellowship is to foster the growth of surgical teaching skills by having the fellow first assist the residents in basic head and neck procedures. The fellow plays a major teaching role in taking residents through many of the standard procedures (parotidectomy, thyroidectomy, neck dissections and the like) as well as intense surgical experience in advanced cases. Participation in microvascular reconstruction is a major component of the clinical experience.

The fellow has attending and admitting privileges. He/she will have one half-day independent clinic per week focusing on general otolaryngology and basic head and neck oncology. Surgical cases derived from this clinic will be performed independently by the fellow. The fellow will also oversee the head and neck service, participate in the weekly head and neck multidisciplinary tumor board, and take part in the attending on call rotation.

Research Opportunities: This training program is intended to foster the fellow's evolution as a clinician investigator. As such, clinical research for this year is a major focus. There is an extensive array of potential research mentors in both basic science and health services research. The fellow may seek a mentor in any appropriate department at the University. After identifying a mentor, the fellow is expected to present a formal research plan to the Head and Neck faculty and Department Research Committee. The Research Committee will continue to critique and monitor the progress of the fellow's research project. We are in the midst of an R-01 grant focusing on molecular profiles and clinical outcomes of oral cavity cancer as well as varied head and neck clinical research activities.

Strengths: The combined hospitals at the University of Washington comprise approximately 1,200 beds and 500 head and neck cancer admissions per year. The fellowship is based at UW Medical Center where the Department of Otolaryngology-Head and Neck Surgery performs 400+ major head and neck resections per year, including 100 microvascular reconstructions, skull base surgery (both endoscopic and open), and transoral robotic/laser extirpations. The fellow is an integral part of the Head & Neck surgical team.

In addition, the Department of Radiation Oncology treats 575 new cancer patients per year and provides exposure to advanced techniques in radiotherapy: IMRT photon, proton, electron, gamma knife, and neutron therapy. UWMC is home to the only neutron therapy capability in the United States. This generates a substantial number of referrals for advanced salivary gland cancers. Coupled with faculty interest in sialoendoscopy, extracapsular dissection, and other advance salivary techniques (salivary gland transfer, etc...), the fellowship will include a robust salivary surgery experience.

In conjunction with Medical Oncology, the fellow will be exposed to a variety of chemo-radiation protocols and accruing clinical trials. With the formation of the Seattle Cancer Care Alliance (University of Washington Medical Center, Fred Hutchinson Cancer Research Center, and Children's Hospital and Regional Medical Center), the UW Head & Neck Oncology program is continuing to grow at both a regional and at a national level.

Careers of Former Fellows:

Nicole Fowler, M. D., Assistant Professor, Otolaryngology-Head & Neck Surgery, Case Western Reserve Chan "Richard" Park, M.D., Assistant Professor, Otolaryngology-Head & Neck Surgery, UMDNJ/Rutgers Eric Lamarre, M.D., Assistant Professor, Otolaryngology-Head & Neck Surgery, Cleveland Clinic T.J. Gernon, M.D., Assistant Professor, Otolaryngology-Head & Neck Surgery, Univ of Arizona Daniel O'Connell, M.D., Assistant Professor, Otolaryngology-Head & Neck Surgery, Univ. of Alberta Davud Sirjani, M.D., Assistant Professor, Otolaryngology-Head & Neck Surgery, Stanford University Michael, Moore, M.D., Assistant Professor, Otolaryngology-Head & Neck Surgery, Indiana University Mark El-Deiry, M.D., Associate Professor, Otolaryngology-Head & Neck Surgery, Emory University Eduardo Mendez, MD MS, Associate Professor, Otolaryngology-Head & Neck Surgery, University of Washington Marita Teng, M.D., Associate professor, Otolaryngology-Head & Neck Surgery Mt. Sinai Hospital, New York

Vanderbilt University Medical Center

Fellowship in Head and Neck Oncologic and Reconstructive Surgery

Program Director James Netterville, MD

Executive Vice Chair, Department of Otolaryngology

Associate Director, Bill Wilkerson Center for Otolaryngology and

Communication Sciences

Mark C. Smith Professor of Otolaryngology

Director, Division of Head and Neck Surgical Oncology

Vanderbilt University Medical Center

Address: 1215 21st Avenue South, Suite 7209

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Clinical/General: (615) 322-6180

Fax: (615) 936-2887

Email: james.netterville@vanderbilt.edu

Chairman of Department: Roland "Ron" Eavey, MD

Faculty Involved with the Fellowship: Robert Sinard, MD, FACS Kyle Mannion, MD, FACS Sarah Rohde, MD, FACS

Total Number of Positions Available per Year: two one-year clinical fellowships, with option for two-year fellowship that combines one clinical year and one research year

PROGRAM DESCRIPTION:

Overview:

The Vanderbilt University Medical Center Fellowship in Head and Neck Oncologic and Reconstructive Surgery provides advanced clinical training in head and neck oncology, microvascular construction, skull base surgery, thyroid and parathyroid surgery, and transoral robotic surgery (TORS).

Strengths:

Vanderbilt serves as the premier referral center for advanced head and neck cancer patients in the Southeast. Fellows gain extensive experience in the management of such patients. Our collaborative team-based approach gives the fellow the opportunity for close interaction with leaders in medical and radiation oncology, speech and swallow therapy, neurosurgery, and thoracic surgery. Fellows also gain experience handling the unique needs of the veteran population through our collaboration with the Veteran's Administration Hospital.

Finally, two medical mission trips to Africa (usually Nigeria and Kenya) occur each year and each fellow participates in at least one of those trips.

Objectives:

Our fellowship/instructorship is a one year program designed to accomplish these major factors:

- 1. Increase proficiency in thyroid and parathyroid surgery and treatment.
- 2. Increase proficiency in cranial base surgery.
- 3. Increase proficiency in microvascular reconstructive surgery.
- 4. Increase proficiency in robotic surgery.
- 5. Increase proficiency in multimodality care of the head and neck oncologic patient.
- 6. Prepare the physician for an academic career in head and neck oncologic surgery.

Eligibility:

Candidate must complete residency in Otolaryngology, and be board certified or board eligible. Additionally, fellows must be able to:

- (1) obtain an unrestricted Tennessee Medical License. At least one year of training in an AMA accredited program in the United States is required for International MD licensure in the state of Tennessee. Requirements for Tennessee Full Medical Licensure are available at http://health.state.tn.us/boards/Me/applications.htm
- (2) obtain a Tennessee DEA. Information on requirements for DEA registration can be found at http://www.deadiversion.usdoj.gov/drugreg/reg_apps/index.html

and (3) provide proof of citizenship or Visa status (if applicable). Visa information (if applicable) should be provided with the application. Please note all of the requirements and be advised that we do not sponsor visas for fellows. The visa you would need to independently acquire must permit you to work and may not be a student visa as this position requires teaching. For Visa information, please consult the US State Department website at http://travel.state.gov/visa/visa_1750.html

Duties and Responsibilities of Trainees:

Each fellow is expected to become proficient in all areas of head and neck extirpative and reconstructive surgery. The two fellows alternate their clinical responsibilities every two months. One rotation involves working primarily with Dr. Netterville and participating in all aspects of the care of his patients. This comprises a wide variety of malignant and non-malignant neoplasms of the upper aerodigestive tract, skull base, salivary glands, endocrine glands and neurovascular structures of the head and neck.

During the alternate rotation, the fellow works with Drs. Sinard, Rohde, and Mannion with a partial emphasis on microvascular reconstruction. On average the head and neck team performs 100-120 free tissue transfers yearly, which are split between the fellows. During the rest of the week the fellow on this rotation participates in a similar variety of head and neck cases with each of these three faculty members.

All fellows have appointments as Instructor within the medical center, which allows them to schedule their own cases and take call as an attending. While emergent cases may be staffed by the fellows, the standard that we have set is for this to be rare, so the fellow can focus on learning from the faculty.

Basic science research opportunities are available if requested by the Instructor/Fellow, including the possibility of extending the fellowship to two years.

Our standard one-year fellowship includes a weekly time allotment primarily for clinical research, of retrospective and prospective research, all of which is required to achieve IRB approval, and with the expectation that a publishable manuscript will result. Additionally, many opportunities for contributing to the literature in the form of book chapters, etc. are provided.

Our two-year fellowship comprises one year of clinical fellowship with the same expectations for productive clinical research as with the one-year fellowship, and a second year that is four-fifths basic science research in a dedicated laboratory and one-fifth clinical duties.

Supervision, Teaching and Call:

At any given time, the head and neck rotation includes a chief resident (PGY-5), two senior residents (PGY-4), one other resident (PGY-2) and one intern. Our head and neck fellows are integrated into this team to optimizing training for all involved. As soon as the surgical and clinical skills of the fellows are established with the faculty, they are expected to act in a supervisory role in the operating room to educate and guide residents (with the exception of free tissue transfer, where the fellow is expected to be the primary surgeon throughout the year). Clinical education of residents and medical students outside of the OR is a continual expectation of the fellows in the clinic, wards, and conferences and is stressed by all four faculty. All fellows are also required to deliver grand rounds once during their fellowship.

One day per week, the fellow is in charge of the head and neck service at the Veteran's Administration Hospital. On this rotation, the fellow is the primary educator and supervising surgeon.

Each fellow is on call one out of every six weekends on average, and serve as the attending on call during these periods.

Washington University School of Medicine

Siteman Cancer Center / Barnes-Jewish Hospital Head & Neck Oncology/Transoral Surgery (TLM & TORS)/Microvascular Reconstructive Fellowship

Program Director Brian Nussenbaum, MD

Professor

Address: 660 S. Euclid Ave

Campus Box 8115 St. Louis, MO 63110

Phone: (314) 362-7511 **Fax:** (314) 362-7522

Email: nussenbaumb@ent.wustl.edu

Fellowship Coordinator Cara Medlock

Fellow/Coordinator Email <u>medlockc@ent.wustl.edu</u>

Website: http://oto.wustl.edu/

Chairman of Department: Craig A. Buchman, MD

Faculty Involved with the Fellowship:

Ryan S. Jackson, MD Brian Nussenbaum, MD Jay F. Piccirillo, MD Jason T. Rich, MD Ravindra Uppaluri, MD

Total Number of Positions Available per Year: 2 positions for one year (clinical)

PROGRAM DESCRIPTION:

OVERVIEW: The fellowship in Head & Neck Oncology/Transoral Surgery (TLM & TORS)/Microvascular Reconstruction Fellowship in the Department of Otolaryngology at Washington University is a longstanding feature of the educational curriculum offered within this academic medical center. Since 1984, 31 fellows have continuously occupied this position. Prior to this the Department offered a Head and Neck surgery fellowship, which concentrated mainly upon resectional techniques, under the direction of Dr. Joseph Ogura. Our intention is to continue the program on into the future in this vital subspecialty of Otolaryngology-Head and Neck surgery. The large majority of candidates have graduated from this program to faculty positions in other academic institutions, where in turn they practice and teach the techniques they have learned.

EDUCATIONAL MISSION STATEMENT: The MISSION of the Otolaryngology Head & Neck Surgical Oncology/Transoral Surgery/Microvascular Reconstructive Fellowship Training Program is to educate and train otolaryngologist in the field of head and neck surgical oncology with state-of-the-art care in all phases of treatment for patients with head and neck cancer.

INSTITUTIONAL COMMITMENT: The Department of Otolaryngology receives comprehensive institutional support from Washington University School of Medicine to fulfill its mission statement. This support includes, but is not limited to:

<u>Institutional Commitment:</u> The sponsoring institution provides sufficient faculty, financial resources, support space, clinical and research facilities and library materials to meet the education needs of the fellows. The governing body of the sponsoring institution grants the Program Director sufficient authority, financial support, and access to facilities to organize and supervise the following activities: the didactic and clinical components of the program including patient management and scholarly activity. There exists sufficient operative time available to ensure an exceptional fellow surgical experience.

STRENGTHS: The broad educational purpose of this fellowship program defined, but not limited to, graduating Otolaryngology-Head and Neck surgeons who have superior proficiency in head & neck surgical oncology, transoral surgery for upper aerodigestive tract malignancies, and achieve an expert level of complex head and neck reconstruction with independent skills in microvascular free tissue transfer. Competence in choice and execution of flaps from all relevant donor sites for reconstruction of a full range of recipient sites is attained.

MULTIDISCIPLINARY ACTIVITIES: Our Head and Neck program has market dominance with evaluating and treating more head and neck cancer patients than any other program in Missouri or Illinois. Referrals typically come into our Head & Neck Cancer Program through direct referrals (inside and outside of our institution) and patient self-referrals. We have all disciplines evaluate all patients with newly diagnosed or recurrent disease, and this is coordinated through the NCI Comprehensive Siteman Cancer Center. Every Wednesday from 12:00 – 1:15pm, our program meets for Multidisciplinary Tumor Board Conference which immediately follows the multidisciplinary head and neck cancer clinic. Members of our head and neck program from otolaryngology, radiation oncology, medical oncology, speech pathology, radiology, and pathology attend this conference. Fellows and residents from all specialties rotating on the head and neck services attend also, along with the clinical trials research coordinators. At this conference, we systematically discuss all treatment options for each presented case, what clinical trials are available for each patient, and whether tissues can be obtained for our tissue acquisition protocol.

SPECIFIC OBJECTIVES INCLUDE MASTERY OF:

- Diagnosis and office management/work up of patients with neoplastic (benign & malignant)
 diseases of the head and neck.
- Surgery for head and neck cancer and other benign tumors of the head and neck, transoral surgery, reconstruction for defects of the head and neck with a special emphasis on microvascular free tissue transfer techniques.
- Post-operative management and rehabilitation of patients with head and neck oncologic conditions and reconstructions.
- Participation in Multidisciplinary Head & Neck Cancer Clinic.
- Participation in management of a multidisciplinary Head and Neck Oncology Tumor Board within an NCI Comprehensive Cancer Center.
- Multidisciplinary treatment planning and coordination with radiation oncology, medical
 oncology, other surgical-medical services (i.e. thoracic surgery, neurosurgery,
 ophthalmology, dermatology, etc.), pathology, radiology, speech pathology, and
 prosthodontics for patients with head and neck neoplastic diseases. This includes neoplastic
 diseases of the upper aerodigestive tract, skull base, thyroid gland, parathyroid glands,
 salivary glands and skin.
- Participation in presentation of a head and neck reconstructive core curriculum lecture program for residents and medical students.

ELIGIBILITY: To be considered for the position, the candidate for the head and neck fellowship must have a degree in medicine, completed and graduated from an ACGME accredited residency in Otolaryngology and must be qualified to sit for the American Board of Otolaryngology written and oral exams. The candidate must be able to secure a Missouri Medical License. Provide the preceptors of the fellowship with three letters of reference, at least two from faculty members of the training program of origin, one of whom is the program chairman. Preference is given to those applicants who have performed exceptionally in their residency program and excelled in the six core competencies. We place an emphasis on 1) a high level of technical proficiency, 2) a keen interest in academic otolaryngology as a future career and 3) a strong track record in teaching and working well with other trainees and faculty. Salary is commensurate with PGY level.

DUTIES AND RESPONSIBILITIES OF TRAINEES: Clinical responsibilities are divided amongst five head and neck surgeons. These clinical responsibilities are divided between the clinic, the operating room, and postoperative care. In a typical week, the fellows' time is divided by approximately 1.5 days per week in the clinic, 3 days in the operating room and 0.5 days for research. The fellow evaluates and manages patients with advanced level head and neck oncologic conditions, including those undergoing transoral surgeries (transoral laser microsurgery or transoral robotic), open partial laryngectomies, surgery for paragangliomas, surgery for skull base malignancies (endoscopic and open), and complex reconstructive surgeries requiring free tissue transfer. All clinical care is done in close collaboration with the otolaryngology residents and under the supervision of the fellowship staff. The fellow has an Instructor position with the medical school and is expected to function at this level. As such for other head and neck cases, the fellow supervises the work of the residents and takes more of a teaching physician role, particularly in the operating room. This includes cases such as laryngectomies, thyroidectomies, parotidectomies, neck dissections, and sentinel lymph node biopsies.

The fellow's office responsibilities are to attend and see patients in the preceptor's office 1.5 days per week. In these clinics, the fellow sees patients, both new and return, formulates a plan and presents/discusses the cases with the attending. In addition, the fellow sees new head & neck cancer patients with the residents on an as needed in the Center for Outpatient Health Clinic and prepares patients for surgery and/or presents them with the residents at the weekly multidisciplinary tumor conference.

EDUCATIONAL PROGRAM:

• Transoral Surgery Course Annually
Held in conjunction with Mayo Clinic. Mandatory for fellows - 3 day Course, didactic lectures,
live surgery telecast, and hands-on cadaver lab.

Head and Neck Tumor Conference Every Wednesday 12:00 – 1:15pm Quality Improvement Conference/M&M 2nd Wednesday 7:00-8:00 am **Grand Rounds** 3rd, 4th & 5th Wednesday 7:00-8:00am. 1st Wednesday 7:00 – 8:00 a.m. Journal Club Weekly; 90 minute teaching session Microvascular Syllabus Siteman Head & Neck Focus Group Bi-Monthly Skull Base Conference Monthly Core Curriculum **Bi-Annually** Microvascular Cadaver Lab Training As needed Opportunities for Improved Care Conference As needed

RESEARCH COMPONENT: The fellow is required to allocate approximately 10% of his/her time to research. This involves designing a research project, acquisition and analysis of data. For clinical

research, data is acquired from either computerized databases or patient charts. One written abstract/manuscript is required to be submitted for either a peer-reviewed scientific program or for publication in a peer-reviewed journal. Projects undertaken by fellows have included detailed measurements of flap dimensions for precise planning of head and neck reconstructions, analysis of how preoperative variables correlate with postoperative outcomes, and defining quality metrics for patients undergoing surgery for head and neck malignancies. Data analysis and outcomes of transoral laser microsurgery cases has produced several publications and data is collected on a regular basis for future studies.

SUPERVISION & TEACHING: The fellow works in a teaching and supervisory role to the otolaryngology residents. He/she provides oversight and support to the residents in pre-operative, operative, and post-operative care of the head and neck patient, including regular ward rounds with the residents. During resident-level operative procedures, the fellow acts in a teaching surgeon role to the residents and helps them develop their technical skills. The fellow is also available to provide assistance and supervision to residents for inpatient consultations.

Wayne State University Head & Neck Fellowship

Program Director: John R. Jacobs, M.D. **Address:** 4201 St. Antoine, 5 E-UHC

Detroit, MI 48201

Phone number: (313) 577-0805 Fax number: (313) 577-8555

E-mail: jjacobs@med.wayne.edu

Associate Director: Naweed, Raza, M.D., snraza@med.wayne.edu

Chairman: Ho-Sheng Lin, M.D.

Faculty:

Surgeons Chemotherapy Radiation Therapy John R. Jacobs, M.D. Ammar Sukari, M.D. Harold E. Kim, M.D.

George H. Yoo, M.D. Ho-Sheng Lin, M.D. Michael Carron, M.D. Adam Folbe, M.D. S. Naweed Raza, M.D. Mahdi Shkoukani, M.D. Giancarlo Zuliani, M.D.

Radiology Pathology Primary Research Mentors Natasha Robinette, M.D. Wael A. Sakr, M.D. Fazlul H. Sarkar, Ph.D. Alit Amit-Yousif, M.D. Fulvio Lenardo, M.D. Wei-Zen Wei, Ph.D.

Andrew Fribley, Ph.D.
Zhengqing Hu, Ph.D.
Ho-Sheng Lin, M.D.
Lawrence Lum, M.D., DSc
Paul Montgomery, Ph.D.
Ananda Prasad, M.D.
Roy Sundick, Ph.D.
Michael Tainsky, Ph.D.

Maxillofacial Prosthodontia Mark T. Marunick, D.D.S., M.S.

Total number of positions available per year: One (one to two year) position

The Head and Neck Fellowship at Wayne State University was established in 1994. Although the program prefers a 2 year applicant, a 1 year experience is also offered. The program is clinically based at the Karmanos Cancer Institute. This is one of the first designated comprehensive centers in the National Cancer Institute program. It was so designated comprehensive in 1978. The institute supports over 200 physician scientists, 300 researchers, 5 research programs and 10 core facilities. Fifteen multidisciplinary medical teams treat more than 6,000 new patients annually, of which roughly 400 are head and neck cancer patients. The Karmanos Cancer Institute operates as a free-standing cancer-only inpatient hospital

with 120 beds. This is the only free-standing cancer hospital in the State of Michigan. Roughly 5,000 patients a year are placed in clinical trials.

Appointment Requirements: The fellow must be board-certified or board eligible in Otolaryngology, General Surgery or Plastic Surgery. International applications are welcomed Competitive international applicants are usually already serving as junior faculty at their academic institutions.

Clinical Experience: The scope of clinical practice involves the entire head and neck from skull base down into the chest. Training is provided in classic extirpation, minimally invasive surgery, endoscopic skull base surgery, robotic surgery and microvascular reconstruction surgery. Outpatient experience is limited to the evaluation/management of the head and neck cancer patient. This occurs in the outpatient clinical area of the Karmanos Cancer Institute. The fellow does not see patients independently nor participate on the call schedule with the house staff. It is, however, anticipated that he/she will be available for emergency procedures in the head and neck cancer population.

Research Opportunities: It is anticipated that the fellow will develop and publish clinical manuscripts. For those fellows who are interested and have the appropriate background in the basic sciences, opportunities are available in a wide variety of fields. Block time is available upon the interests and type of project selected. There is an opportunity for mentorship outside of the department, once again depending upon the fellow's interests and background. It is anticipated that the fellow will present at the annual department research day held in the spring of each year. All past fellows have presented their work nationally and internationally in addition. The fellow will also participate in the quarterly research protocol meetings. At these meetings the status of ongoing trials are reviewed, and new potential trials are presented for approval and prioritization by the group. The fellow in addition presents at the multidisciplinary conference which occurs weekly. At this conference all new patients are presented and evaluated as a group. The departments of Radiation Therapy, Medical Oncology, Prosthodontia, Speech Therapy, Nursing, Pathology and Radiology participate. Following that conference a smaller group representing the primary treatment modalities and other services as required meet with the patient and family on an individual basis to discuss the recommended treatment program and the alternatives.

Strengths of the Program: There are strong interdisciplinary clinical activities between members of Radiation Oncology, Medical Oncology, Thoracic Surgery and Neurological Surgery. The fellow will have an opportunity to be trained in all aspects of head and neck cancer management including endoscopic skull base resections, minimally invasive surgical procedures, robotic surgery and microvascular reconstruction. In addition the fellow will have exposure to all aspects of drug development from phase I to phase III trials. There is a long-standing interest in rehabilitation of the head and neck cancer patient with funded research for the interested fellow to participate in. Block time rotations are offered and encouraged in the Medical Oncology and Radiation Therapy Departments.

ENDOCRINE FELLOWSHIPS

Georgia Regents University

Program Director: David J. Terris, M.D., F.A.C.S. **Address:** Georgia Regents University

Department of Otolaryngology

1120 15th St BP-4109 Augusta, GA 30912

Email: dterris@gru.edu Website: www.gru.edu/otolaryngology

Chairman of Department: Stilianos E. Kountakis, MD, PhD

Faculty Involved with the Fellowship:

David J. Terris, M.D. William S. Duke, M.D.

C. Arturo Solares, M.D. Jimmy J. Brown, D.D.S., M.D.

Edward Chin, M.D.

Anthony L. Mulloy, Ph.D., D.O.

Laura Mulloy, D.O.

Kenneth Byrd, M.D.

Rene Harper, M.D.

Darko Pucar, M.D.

Gregory Postma, M.D.

Paul Weinberger, M.D.

Total Number of Positions Available per Year: One position per year

PROGRAM DESCRIPTION:

History and Overview

Georgia Regents University has a rich tradition of world-class endocrine surgery. In 2004 the Georgia Regents Thyroid/Parathyroid Center was inaugurated, representing a collaborative effort between Otolaryngology, Endocrinology, and Nuclear Medicine. GRU has quickly moved to the forefront of academic health centers in pioneering new surgical techniques and perfecting old ones. These include robotic thyroidectomy, endoscopic thyroid and parathyroid surgery, and outpatient endocrine surgery. Some of the technologies that are utilized include ultrasound, laryngeal nerve monitoring, rapid intraoperative PTH, and the daVinci robot.

Duration

The endocrine surgery fellowship is a one-year fellowship (start date of July 1st).

Prerequisite Training/Selection Criteria

- 1. BC/BE otolaryngologists or general surgeons trained in the United States or Canada.
- 2. Graduates of otolaryngology or general surgery residency programs outside the United States and Canada who have passed the USMLE and hold a certificate from the ECFMG.

Goals and Objectives of Training

The fellowship provides comprehensive training in the diagnosis and medical and surgical management of thyroid and parathyroid diseases, with particular emphasis on minimally invasive and function-sparing techniques. Specific surgical techniques that are included in the program are conventional, minimally invasive, endoscopic and robotic thyroidectomy, conventional and endoscopic parathyroidectomy, laryngeal nerve monitoring and selective neck dissections. There is substantial exposure to ultrasound and ultrasound-guided fine needle aspiration biopsies.

Program Certifications

The endocrine head and neck surgery fellowship is one of only 3 accredited by the American Head and Neck Society and is affiliated with the GRU Otolaryngology residency program.

Facilities

The fellow spends time in three hospitals:

- a. Georgia Regents Medical Center a 520-bed teaching hospital
- b. Children's Hospital of Georgia a 149-bed, nationally acclaimed children's hospital.
- c. Veterans Administration Medical Center a 155-bed hospital adjacent to GRU.

Educational Program

- 1. *Clinical* The fellow participates in all aspects of the endocrine program. The schedule consists of two half-day endocrine surgical clinics per week, one half-day per week with the endocrinologists, 3 operating room days per week, and a half day at a satellite office. Exposure to ultrasound techniques occurs throughout the outpatient experience. The fellow participates in the faculty call rotation (approximately 1 week in 10).
- 2. Research There are numerous opportunities for clinical research in the areas of minimally invasive surgery, endoscopic and robotic thyroid surgery, management of thyroid cancer, and novel techniques for the diagnosis and management of patients with endocrine diseases. Basic science investigation centers on biomarker discovery and thyroid and parathyroid proteomics.
- 3. *Procedural expectations* The following approximate procedural volumes are performed during the fellowship: thyroidectomy: 250; parathyroidectomy: 150; neck dissection: 50; ultrasounds: 300.

Evaluations:

The fellow is evaluated on the core competencies. In addition, there is regular feedback and mentorship provided throughout the fellowship period. The fellow also provides written feedback regarding the fellowship faculty and the entire program.

Strengths:

The fellowship provides one of the broadest experiences in endocrine surgery available. Fellows receive advanced training in cutting edge techniques such as endoscopic and minimally invasive surgery and state-of-the art care of primary and renal hyperparathyroidism within a fast-paced academic environment in which most fellows produce 6 to 8 publications.

Careers of former fellows:

2007 Susan Smith, D.O., Assistant Professor, Oklahoma State University

2008 Lana Jackson, M.D., Chief of Head and Neck, University of Mississippi

2009 Brent Metts, M.D., Ph.D., private practice in Texas

2010 Melanie Seybt, M.D., Assistant Professor, GRU, then private practice in SC

2011-2012 Michael Singer, M.D., Assistant Professor, Henry Ford Health System

2013 William Duke, M.D., Assistant Professor, GRU

2014 Katrina Chaung, M.D., private practice in Texas

Johns Hopkins University School of Medicine Head and Neck Endocrine Surgery Fellowship

Program Director: Ralph P. Tufano, MD, MBA, FACS

Johns Hopkins University School of Medicine Charles W. Cummings MD Endowed Professor Co-Director, Multidisciplinary Thyroid Tumor Center Director, Division of Head and Neck Endocrine Surgery Department of Otolaryngology- Head and Neck Surgery

Program Co-Director: David Eisele, MD FACS

Address: 601 N. Caroline St. Suite 6242

Baltimore, MD 21287

Phone: 410-955-3628 Fax: 410-955-0035

Program Director Email: rtufano1@jhmi.edu

Co-Director Email:

Website: http://goo.gl/JIF1SK

Chairman of Department: David W. Eisele, MD

Faculty Involved with

the Fellowship: Ralph P. Tufano, MD, MBA (Fellowship Director)

David W. Eisele, MD FACS (Co-Director)

Martha A. Zeiger, MD Jason D. Prescott, MD, PhD Jeremy D. Richmon, MD Young J. Kim, MD, PhD Carole Fakhry, MD, MPH

Aarti Mathur, MD

Total Number of Positions Available: One (1) position per year

PROGRAM DESCRIPTION:

Overview:

The Johns Hopkins Head and Neck Endocrine Surgery Division was established in 2009. It was founded on the collaborative efforts of otolaryngology - head and neck surgeons, general surgery/endocrine surgeons, endocrinologists, medical oncologists, radiation oncologists, head and neck radiologists, and pathologists. This allowed the establishment of a collaborative, collegial and productive clinical, educational, and research program. The program is designed to provide advanced clinical training in thyroid and parathyroid surgery. The Head and Neck Endocrine Surgery Fellowship was established in 2012. Through extensive clinical training and a strong emphasis on research and teaching we aim to equip those fellowship candidates with the tools necessary to plan a successful academic career.

Strengths:

The program is composed of a team of world renowned specialists who have integrated their respective expertise into a multidisciplinary team. The strengths of our fellowship program are the abundance of endocrine surgical volume and the collegial, collaborative environment. There are a wide variety of

clinical and translational research opportunities. The fellow obtains surgical experience with both Otolaryngology and General Surgery disciplines. The fellow has the opportunity to attend/participate in monthly multidisciplinary thyroid tumor board, head and neck tumor board, research meetings, journal clubs, and the annual Johns Hopkins CME course on Thyroid and Parathyroid surgery, which is codirected by the General Surgery and Otolaryngology departments.

Objectives:

The one-year fellowship is designed to provide comprehensive training of head and neck endocrine surgical fellows in the surgical and medical management of thyroid and parathyroid disease. This is done by exposure to the practices of our endocrine focused surgeons and through interactions with collaborating specialties. In addition to developing proficiency in head and neck endocrine surgery, the fellow will also be integrated into the multidisciplinary team in an effort to emphasize the importance of this comprehensive approach to care. The program also offers extensive research opportunities which will support the development of those candidates planning an academic career.

Eligibility:

- 1. BC/BE otolaryngologists or general surgeons trained in the United States or Canada.
- 2. Graduates of otolaryngology or general surgery residency programs outside the United States and Canada who have passed the USMLE and hold a certificate from the ECFMG.
- 3. A Maryland state medical license is required before the start of fellowship.

Duties and Responsibilities of Trainees:

<u>Clinical</u> – The Head and Neck Endocrine Surgery fellow will be appointed Instructor in the Department of Otolaryngology - Head and Neck Surgery. The fellow participates in management of the thyroid and parathyroid patients. The fellow evaluates, plans, and implements treatment plans for outpatient clinic patients individually for their own clinic, as well as, under faculty supervision. Exposure to ultrasound techniques occurs throughout the outpatient experience. At the end of the fellowship, the fellow is trained to make independent decisions and manage thyroid and parathyroid diseases independently.

<u>Research</u> – The fellow is expected to take an active part in ongoing clinical and translational research projects. The fellow is encouraged to initiate and complete new projects. The fellow actively participates in a monthly thyroid and parathyroid research meeting. She/he is expected to produce at least one abstract for a national meeting and/or a manuscript during the year, but ample opportunity for more research is provided. Attendance and presentations at national meetings is encouraged and funding is available.

Supervision, Teaching and Call:

The fellow will participate with the senior staff in all decisions relative to the prescribed treatment. The fellow's operative responsibility will be assigned commensurate with ability. The Fellow is responsible to teach residents and medical students during rounds, lectures and conferences, clinics, and in the operating room. The fellow is expected to assist residents during surgery and guide them as needed in operating room. The fellow will be in the call pool for attending faculty in the department.

Massachusetts Eye and Ear infirmary/ Harvard University Head and Neck Endocrine- Thyroid and Parathyroid Fellowship

Program Director Gregory W. Randolph, MD FACS FACE

Director, General Otolaryngology

Director, Division of Thyroid and Parathyroid Surgery

Massachusetts Eye and Ear Infirmary Harvard Medical School, Boston, MA

Address: 243 Charles St. Boston, MA 01803

Phone: 617-573-4115 **Fax:** 617- 573-3914

Email: gregory_randolph@meei.harvard.edu

Website:

http://www.masseyeandear.org/forprofessionals/ent/fellowship_program/fellow-in-thy-and-parathy/

Chairman of Department: Dr. D. Bradley Welling. MD PhD

Faculty Involved with the Fellowship:

Dr. Gregory W. Randolph (Fellowship Director)

Dr. Randall Gaz

Dr. Paul Konowitz

Dr. David Lesnik

Dr. Ralph Iannuzzi

Total Number of Positions Available per Year: One position per year

PROGRAM DESCRIPTION:

Background and Overview:

Massachusetts Eye and Ear Infirmary strives to be a world class endocrine surgical center. The Thyroid and Parathyroid Surgery Division was established in 2002, founded on the philosophy of collaboration between thyroid surgeons, radiologists, pathologist and endocrinologists. The Division is at the leading-edge of advances in thyroid and parathyroid surgery and is a world recognized center of intraoperative neural monitoring. The Head and Neck Endocrine (Thyroid and Parathyroid) Surgical Fellowship was established in 2004. It is our intention, with a superb clinical training and strong emphasis on research and teaching, to nurture academic endocrine surgeons.

Strengths:

The primary strengths of Massachusetts Eye and Ear Infirmary as a venue for a Thyroid and Parathyroid Surgical Fellowship are the large endocrine surgical volume, the close multidisciplinary collaborative environment and the wealth of current and potential clinical research. The fellow obtains experience with both adult and pediatric population and is exposed to both otolaryngology and general surgery techniques and rotates between MEEI and Mass General Hospital. The fellow receives advanced training in newer surgical techniques like intraoperative neuromonitoring and state-of-the art care of thyroid cancer patients with academic and research work culminating into publications. The fellow participates in Boston Thyroid Club, held once a month, where endocrinologist and endocrine surgeons discuss clinical problems. He/she also contributes to monthly Endocrine Oncology Conference at MGH. American Academy of Otolaryngology (AAO), American College of Surgeons (ACS), American Head Neck Society (AHNS) meetings are integral parts of fellow's schedule. Fellow has the opportunity to attend Harvard CME course on Thyroid and Parathyroid surgery, which is held since 1996. Fellow may have an opportunity to participate in Global Thyroid Missions where members of the Thyroid and Parathyroid Division not only provide goiter surgery in underserved regions, but also train local physicians to work toward sustainable health care for patients suffering from goiter and other conditions. Dr. Randolph and team members have recently been on Global Thyroid Missions to India and Kenya. Fellow teaches MEEI residents actively through lectures and by helping in OR.

Program Certifications:

The endocrine head and neck surgery fellowship is one of the only 2 accredited by the American Head and Neck Society and is affiliated with the Harvard University Otolaryngology residency program.

Objectives:

To provide comprehensive training of fellows in diagnosis and surgical management of thyroid and parathyroid disease by focused exposure to the clinical practices of our endocrine surgeons in the OR and clinic and through interactions with collaborating specialties.

Eligibility:

- 1. BC/BE otolaryngologists or general surgeons trained in the United States or Canada.
 2. Graduates of otolaryngology or general surgery residency programs outside the United
- 2. Graduates of otolaryngology or general surgery residency programs outside the United States and Canada who have passed the USMLE and hold a certificate from the ECFMG.

Duties and Responsibilities of Trainees:

- 1. Clinical Fellow participates in management of outpatient and inpatient care of all thyroid and parathyroid clinic patients. The fellow evaluates, outlines and implements treatment plans for outpatient clinic patients individually as well as under faculty supervision. Fellow learns and makes independent decisions for patient management and approaches faculty for support and guidance. Fellow performs surgeries and office procedures under supervision as well as independently. At the end of the fellowship, the fellow is trained to make independent decisions and manage thyroid and parathyroid diseases independently and assertively.
- 2. *Research* A four to six hours of research time per week is provided to the fellow. The fellows is expected to take active part in ongoing clinical and basic science research projects.

He/she is encouraged to initiate and complete new projects. He/she actively participates in weekly Thyroid and Parathyroid Research Meeting. The fellow is expected to publish his/her research as well as present his/her research at hospital meetings and other conferences.

Teaching and Call:

Teaching: The Fellow is responsible to teach residents and medical students during rounds and clinics. He/she will teach senior residents through scheduled lectures, usually once/three weeks. Fellow is expected to assist residents during surgery and guide them as needed in operating room. Fellow takes initiative and discusses selected topics powered by literature review on a weekly basis.

Calls: There are no official call requirements

Careers of former fellows:

2005 Cristian Slough, MD, Director Willamette Valley ENT, McMinnville, OR

2006 Lisa Reid, MD (Gen Surg US) Ass Prof. Surgery-specializing in thyroid and parathyroid surgery, Cooper Union University Physicians, Camden NJ

2007 Enoch Sanders, MD Ass Prof. Surgery-specializing in thyroid and parathyroid surgery, Virginia Surgical Associates, Inova Alexandria Hospital, Alexandria VA

2008 David Lesnik, MD Attending Otolaryngologist, specializing in thyroid and parathyroid surgery, MEEI Associates, MEEI Stoneham Center, Stoneham MA, Assistant in Otolaryngology MEEI, Clinical Instructor of Otolaryngology Harvard Medical School, Clinical Associate, Department of Surgery, MGH

2009 Sara Richer, MD Otolaryngologist, Head and Neck Surgeon specializing in thyroid and parathyroid surgery, St Vincents Medical Center, Bridgeport, CT

2010 Marica Zizic, MD, PhD Attending Specialist Otolaryngologist specializing in thyroid and parathyroid surgery, Department of Otolaryngology, University Hospital Sveti Duh, Zagreb Croatia

2011Andre Potenza, MD

Head and Neck Surgery Specialist, General Surgeon at the Albert Einstein Hospital, Alphaville Branch, Barueri, Sao Paulo, Brazil, Volunteer Head and Neck Surgeon at the Hospital das Clinicas of the University of Sao Paulo Medical School, Sao Paulo, Brazil

2012 Mohammed Alzahrani MD

Consultant and Assistant Professor Surgical Oncology specializing in thyroid and parathyroid surgery, King Abdul Aziz Medical City and University of Health Sciences, Riyadh, Saudi Arabia

2013Ashlie Darr, MD Clinical Instructor, Department of Otology and Laryngology, Harvard Medical School

2014 Niranjan Sritharan BSc (Med) MBBS FRACS (ORL) Otolaryngology Head & Neck Surgeon Bankstown Hospital, Sydney, Australia

Penn State Milton S. Hershey Medical Center Head and Neck Endocrine Surgery Fellowship

Program Director: David Goldenberg, MD, FACS

Professor of Surgery and Medicine

Chief, Division of Otolaryngology – Head and Neck Surgery Assoc Director of Surgical Services- Penn State Cancer Institute

Department of Surgery

MC H091

500 University Drive Hershey, PA 17033 P: 717-531-8946 F: 717-531-6160

Email: dgoldenberg@hmc.psu.edu

Associate Program Director: Brian Saunders, MD, FACS

Associate Professor of Surgery and Medicine Director of Undergraduate Surgical Education

Section of Endocrine Surgery

MC H149

500 University Drive Hershey, PA 17033 P: 717-531-5272 F: 717-531-0884

Email: <u>bsaunders@hmc.psu.edu</u>

Chair of Department: Peter Dillon, MD

Faculty Involved with the Fellowship:

David Goldenberg, MD Brian Saunders, MD Melissa Boltz, DO, MBA

Total Number of Positions Available per Year: 1 (duration of 1 year)

PROGRAM DESCRIPTION:

Overview:

The Penn State College of Medicine and the Penn State Milton S. Hershey has had a focus and strength in clinical and academic endocrine surgery since its inception in the late 1960s. The multidisciplinary care for patients with head and neck endocrine surgical diseases has grown up and prospered from clinicians and investigators who are trained through both otolaryngology and general surgery. The head and neck endocrine surgical services perform a high volume of routine, complex, and re-operative thyroid and parathyroid surgeries. Excellent patient outcomes at Penn State result from the highest quality surgical care, and the well-integrated multidisciplinary care afforded to each patient. Close clinical collaboration and educational opportunities exist with adult and pediatric endocrinology, a myriad of other surgical specialists, radiologists, nuclear medicine physicians, head and neck endocrine pathologists, and cancer

geneticists. Robust scholarly investigations into the molecular pathogenesis of thyroid cancer, health economics of thyroid and parathyroid surgical care, and endocrine surgical quality and outcomes abound.

Funding: The fellowship is fully funded by the institution, and with an academic rank of Instructor in Surgery, for one year.

Program Certification: This endocrine head and neck surgery fellowship is one of only three accredited by the American Head and Neck Society, and is affiliated with the Penn State Hershey Medical Center Otolaryngology and General Surgery residency programs. This program was accredited in 2015.

Strengths:

The unique strength of the cutting edge and high volume head and neck endocrine surgery program at Penn State is the true collaborative nature of the excellent patient care offered. The Penn State Head and Neck Endocrine Surgery Fellow will benefit from teaching using the best principles and methods from both otolaryngology and general surgery. This combination will allow the development of future academic leaders in thyroid and parathyroid surgery.

Objectives:

By the completion of the one year Penn State Head and Neck endocrine surgery fellowship, the successful candidate will have mastered the critical thinking and technical skills necessary for the evaluation and surgical management of both benign and malignant, functional and nonfunctional, thyroid and parathyroid disorders. Further, the graduating fellow will have acquired the research skills to pose, investigate and disseminate the answer to at least one previously unanswered question in head and neck endocrine surgical management.

Eligibility:

- 1. BC/BE otolaryngologists or general surgeons trained in the United States or Canada.
- 2. Graduates of otolaryngology or general surgery residency programs outside the United States and Canada who have passed the USMLE and hold a certificate from the ECFMG.
- 3. In some cases IMG will be considered.

Duties and Responsibilities of Trainees; Supervision Teaching and Call:

Fellowship Mission Area:

1. Clinical – The fellow will evaluate adult and pediatric patients with diagnosed, suspected, or established thyroid and parathyroid disease. The fellow will be responsible for determining diagnostic plans, and working alongside fellowship faculty, with the goal of independence in decision making for these patients. The fellow will see patients in clinics with the fellowship faculty, and in her or his own clinic. In-office, surgeon-performed ultrasound for thyroid nodule characterization, cervical lymph node mapping, and parathyroid localization will be a routine part of ambulatory visits. Facility with ultrasound-guided fine needle aspiration will be gained. It is the expectation that the fellow will perform roughly 150 neck ultrasound examinations and 50 FNAs. Opportunities will exist to rotate as well with endocrinology and radiology (diagnostic, nuclear medicine, and biopsy services). The fellow will participate weekly in the operative care of thyroid and parathyroid cases with the fellowship faculty. With demonstration of technical competence, the fellow will operate as primary surgeon with a resident surgeon, always with fellowship faculty immediately available. It is the expectation that the annual operative case load for the fellow will be between 200 and

250 cases. The fellow will direct in-patient care of endocrine surgical patients. The fellow will participate in and rotate with otolaryngology or general surgery faculty for call responsibility. In-house resident support and fellowship faculty backup is uniformly available.

- 2. Research Scholarly work is required during this fellowship. The research experience will be tailored to the fellow's interest, and may include basic science opportunities or outcomes research, to name just two areas. One-half to one full day a week will be protected for academic time. It is expected that the successful fellow candidate will publish at least one manuscript during the fellowship year. Presentation (with departmental funded travel) at one national meeting is expected.
- 3. Teaching The fellow will help to run the in-patient endocrine surgical (through otolaryngology and general surgery) teams. The fellow will supervise and teach the otolaryngology and general surgery house officers, and the Penn State College of Medicine students. The fellow will provide feedback and electronic evaluations of these residents and students. The fellow will participate as a learner and presenter at numerous conferences including, but not limited to: head and neck oncology tumor board, medical/surgical endocrinology case conference, general surgery and otolaryngology M&Ms, Department of Surgery grand rounds, monthly meeting of the program for inherited endocrinopathies, and monthly meeting of thyroid cancer unit.

Evaluations:

The fellow will have regularly scheduled mentoring meetings with the fellowship faculty. The fellow will be evaluated using electronic forms measuring progress in core competencies. Written and verbal formative feedback will be provided regularly to the fellow. Case logs will be kept by the fellow and reviewed regularly to ensure adequate exposure and growth as an independent surgeon. The fellow will provide feedback as well on the fellowship program and faculty.