Our future growth relies on competitiveness and innovation, skills and productivity, and these, in turn rely on the education of our people.

– Julia Gillard
Greetings to all. It seems like summer just began and fall is around the corner. It is time for Husker Football Season, which is usually a good signal that summer is coming to a close. This is the beginning of my sixth year as chairman of otolaryngology, and it seems like only yesterday it all started.

This year has been a year of many firsts for the Department of Otolaryngology.

This is the first academic year we have matched three residents per year since 1984. Estelle Chang, MDCM, became the first surgeon in Nebraska and at our institution to do a robotic thyroidectomy avoiding a scar on the patient’s neck. The patient is from central Nebraska and is doing very well. Our first department professorship, The Anthony J. Yonkers Professorship was established and named this year. Jason Talmadge, M.D. was the first resident in our department ever to be named resident of the year for the entire medical center resident population. This is also the first year that the department has had a full time rural resident rotation where our residents spend two months learning in a true rural resident otolaryngology practice. Furthermore, this is the first year our audiology department has had four practicing audiologists.

Finally, this is the first year that our department has EVER been named as a top-ranked program in U.S. News and World Report. This ranking is thanks to the hard work of all nine faculty in our department and our most excellent residents, nurses, audiologists, physician assistants, and administrative support staff. It gives me great honor and pride to work with such an outstanding group of people.

I also want to extend a warm welcome to Zafar Sayed, M.D. who joined our department just this past August 2017. Zafar was born, raised, and resident trained in Indiana. He did his Head and Neck Fellowship at Memorial Sloan in New York City and brings great talent to our department. He will be joined by two more Head and Neck Surgeons in the not too distant future. Soon, there will be 13 faculty in our department, another first.

Thanks to ALL of you who have donated your time for teaching or your money to help move our department forward in these past months. All you do does not go without notice and it is appreciated very much. As always, please let us know how we can help you in your practice or with your complicated patients.

Dwight T. Jones, M.D. FACS
Anthony J. Yonkers Professor and Chair
Zafar Sayed, M.D., joined UNMC/Nebraska Medicine as a practicing head and neck surgical oncologist in August 2017. Dr. Sayed received his medical degree from Indiana University as a member of the Alpha Omega Alpha honor society before completing a five-year residency in Otolaryngology at Northwestern University in Chicago, Illinois. He then went on to pursue one year of advanced head and neck surgical oncology training at Memorial Sloan Kettering Cancer Center in New York, New York. Dr. Sayed treats a variety of head and neck malignancies affecting the oral cavity, oropharynx, larynx, salivary glands, thyroid, and skin. He is originally from Fort Wayne, Indiana.
ENT Earns National Ranking

U.S. News & World Report evaluates more than 4,500 hospitals nationwide to come up with its annual list of Best Hospitals. And once again, Nebraska Medical Center is the No. 1 rated hospital in the state of Nebraska. Additionally, Nebraska Medical Center is nationally ranked in three specialties, including:

- Ear Nose and Throat
- Gynecology
- Urology

Allergy Update

Timothy Knudsen, M.D. and Jenna Kenney PA-C continue to lead the Otolaryngology allergy program. Our allergy program has continued to grow with new allergy patients in need of formal allergy testing and allergy treatment. We are seeing our established patients as well as continued medication management and further evaluation of their seasonal and environmental allergies. We still provide immunotherapy for our patients in need of this treatment option in the form of subcutaneous immunotherapy (SCIT) and sublingual immunotherapy (SLIT). We are now offering more allergy care at our Village Pointe location as well, with new allergy consults, established allergy patient clinic visits, and allergy injections appointments. We are hoping to soon offer formal allergy testing at our Village Pointe location as well.

Cystic Fibrosis Multidisciplinary Clinic

Nebraska Medicine has recently launched a multidisciplinary clinic devoted specifically to patients with cystic fibrosis. This includes a team of a pulmonologist, otolaryngologist, social workers, nutritionists, and endocrinologists who work closely with this population group. This team approach allows more direct collaboration and thorough treatment of this complex group of patients. Patients now receive a complete sinus work-up as part of their visit, this allows enhanced and comprehensive care.

Patient feedback on this approach is overwhelmingly positive as it allows patients to condense multiple visits into a single visit. It also strengthens the relationship with our pulmonary colleagues and allows for better care overall for our patients.

Sinus Center Opens at Nebraska Medicine

Spring of 2017 marked the implementation of the Nebraska Medicine Sinus Center. This center is designed to provide state of the art sinonasal care for those who suffer from diseases of the nose and sinuses. The center is made up of a team of physicians, physician’s assistants, and nurses trained in adult and pediatric nasal and sinus disease. This team works closely with related specialists in pulmonology, allergy, and immunology to ensure high-quality, fully comprehensive care for our patients.

The sinus center was designed to enhance the patient experience and allow patients to be treated in fewer appointments, but with evidence-based methods and techniques. This begins with a pre-visit phone call where supporting documents are obtained before the visit and when necessary studies can be ordered before the patient seeing his or her new sinus specialist. The sinus center also offers same day or next day appointments for patients who need to be seen acutely and will begin to offer a day of visit CT scans to our patients. In addition to exceptional medical care, the sinus center offers the latest techniques in minimally-invasive sinus surgery and utilizes the newest technologies which improve safety and efficacy in the operating room.

The sinus center will be expanding this summer to include a skull base component in partnership with neurosurgery. Patients with skull base tumors will be treated with the same multidisciplinary approach and with the same ultimate mission to provide comprehensive, evidence based care to our patients.
Fred & Pamela Buffett Cancer Center Opens

The University of Nebraska Medical Center (UNMC) and its clinical partner, Nebraska Medicine, has officially dedicated the new Fred & Pamela Buffett Cancer Center in Omaha. Joe Biden, the former two-term Vice President who headed a National Cancer Moonshot Task Force, served as keynote speaker at the May 2017 ribbon cutting and dedication.

The $323 million facility, which is the largest project ever on the medical center’s Omaha campus, opened its door to its first patients in June 2017. The facility was named in recognition of a gift from Pamela Buffett, through her foundation, the Rebecca Susan Buffett Foundation. Pamela’s husband, Fred “Fritz” Buffett, died in 1997 after fighting kidney cancer.

Mr. Biden called the Fred & Pamela Buffett Cancer Center a “remarkable facility” before an audience of health-care professionals, elected officials, community leaders, and members of the UNMC/Nebraska Medicine community.

The Chihuly Sanctuary, a health care environment structure was created by world-renowned glass artist Dale Chihuly, features 10 site-specific art installations on the second and fourth floors in the heart of the 10-story cancer center. It was designed to provide a place of respite and reflection for patients, families and staff dealing with cancer.
The ENT and Oral Maxillofacial Prosthetics (OFP) clinics on the main campus are now in the Lauritzen Outpatient Center. The facility, situated toward the southern edge of the medical campus, opened to its first patients in November 2016.

While the nearly $71 million, privately funded facility at 4014 Leavenworth St. has plenty of amenities in its 17,000 square foot structure, including phone chargers and restaurant-style booths in waiting areas, its chief appeal may be its ease of access for patients and families. The aim was to create a one-stop shop for outpatient services, including most outpatient surgeries. The new arrangement also allows the organization to differentiate outpatient and inpatient populations. Nationally as well as locally, outpatient services are growing as costs rise for inpatient services and technological advances allow doctors to perform procedures once done in hospitals in outpatient clinics.

Exam rooms throughout the building are arranged in pods around centralized work areas. Patients enter from a public-facing hallway intended to be less busy than those in many such centers. Staff enters through the back from the work areas.

The third floor houses a collection of clinics, including ENT, audiology, oral and maxillofacial surgery, oral facial prosthetics and urology-surgery.

The ENT clinic has 15 exam rooms, three procedure rooms, two nurse stations with 13 computers at each, soiled and sterile rooms for equipment, three hearing booths, 1 VNG room, and two fitting rooms for hearing aids.

Though occupying less space than they had in their previous OFP dwellings, new equipment, and floor plan improvements have contributed to what has been a relatively seamless transition. The enhanced spirit of multidisciplinary camaraderie and teamwork has inevitably heightened the patient experiences. The OFP clinic is comprised of two new dental operatories, a retrofitted third operatory, and a newly equipped facial prosthetic room that is supported by an up-to-date three-bench prosthodontic laboratory.
Robotic Thyroid Surgery
Doesn’t Leave a Visible Scar

Nebraska Medicine is One of a Few Academic Medical Centers Offering Robotic Thyroidectomies

Katie O’Callaghan was working the checkout line at her parents’ grocery store in Hastings, Nebraska when a customer noticed a lump on O’Callaghan’s neck. The 24-year-old, who was four months pregnant with her first child, brought it up at her next OB/GYN appointment. A biopsy later revealed she had thyroid cancer.

“I couldn’t believe it,” says O’Callaghan. “Being pregnant with my first child was intimidating enough, let alone discovering I had cancer.”

Wanting a second opinion, O’Callaghan was referred to Estelle Chang, MDCM, an otolaryngology head and neck surgeon at Nebraska Medicine, who completed a six-month Advanced Robotic Head and Neck Endocrine Surgery Fellowship at Severance Hospital of the Yonsei University Health System in Seoul, South Korea. During her fellowship, Dr. Chang studied the latest, minimally invasive, thyroid and parathyroid surgery techniques.

“Traditionally, thyroidectomy has been performed using a 4 to 8-centimeter incision in the front of the neck, which can leave a visible scar,” explains Dr. Chang. “Robotic thyroidectomy is a minimally invasive surgical technique that is used to remove all or part of a thyroid gland without leaving a visible scar. This is the future, and we should be at the forefront.”

At Nebraska Medicine, three robotic thyroidectomy approaches are offered for patients:

- Underarm
- Facelift (behind the earlobe)
- If the patient wants a complete facelift at the end of the procedure, that’s a possibility
- Through the mouth

Katie O’Callaghan was shocked to learn at 24 years old; she had thyroid cancer.

“We can tailor to the patient, depending on the size of the tumor and the patient’s physical characteristics,” explains Dr. Chang. “This type of surgery is a great option for Caucasians who tan easily, African-Americans and Asians. They all tend to have a difficult time with scarring.”

Not wanting a scar on her neck, O’Callaghan opted for Dr. Chang to perform the facelift approach. For the safety of the baby, surgery was put on hold until after O’Callaghan gave birth to her son. On May 22, O’Callaghan became the first patient to undergo a robotic thyroidectomy at Nebraska Medicine. Dr. Chang made the incision behind O’Callaghan’s earlobe, and surgery took approximately three hours. O’Callaghan was kept overnight for observation and released the next day.

“I knew I was in good hands at Nebraska Medicine,” says O’Callaghan. “Currently, I have no cancer in my body, and I feel great. By looking at me, you’d never know I had thyroid surgery. I’m really happy with the outcome.”

Nebraska Medicine is one of a few academic medical centers in the country offering robotic thyroidectomies. Patients with multiple medical problems who shouldn’t be under anesthesia for extended periods of time are not ideal candidates. Robotic surgery can also be used to remove other benign masses of the neck, such as lipomas and thyroglossal duct cysts.
In January 2017, Wes Heckman, M.D. participated in a craniofacial surgical trip to India. This trip was sponsored by the International FACE to FACE program through the American Academy of Facial Plastic and Reconstructive Surgery Foundation in collaboration with the Healing the Children Organization (Northeast chapter).

The two sites that our team traveled to were Ujjain and Indore, India. Both are rural cities in the central province of Madhya Pradesh. Facial plastic surgeons, anesthesiologists, pediatricians, nurses, speech pathologists, and administrators volunteered their time, resources, and expertise to make this trip a success.

The need for craniofacial care in India is enormous. Poor rural areas with minimal health care infrastructure have exceptionally high rates of unrepaired cleft lip and palate as well as other craniofacial abnormalities. The goal of this trip was to establish sites of care in more rural areas of the country and help facilitate sustainable health care through coordinated efforts with local medical providers and education efforts.

Over 500 patients were screened at the two locations over the course of 2-3 days. Priority was given to younger patients and those with unrepaired orofacial clefting. Pathology varied and included cleft lip and palate, Tessier clefts, macrostomia, microtia, severe burns of the face and neck, vascular malformations, and congenital ptosis. During the next 5-6 days, over 100 operations were performed to repair the various pathologies we encountered. The facilities and equipment in the operating rooms of the hospitals were outdated and dilapidated at best. While in Ujjain, our supplies narrowly survived a flood in the operating rooms and on several occasions the power would temporarily go out during surgery. The team gracefully overcame such obstacles and provided excellent care for the patients.

Planning for future trips are already in progress and will focus on strengthening relationships with local physicians and health care providers, increasing access to screening, expanding services, and establishing telehealth communication. Dr. Heckman states, “It goes without saying that the experience was extremely gratifying and humbling. I look forward to continuing to participate in such trips and helping establish sustainable and accessible health care in rural areas of India where it is so desperately needed.”
Oral Facial Prosthetics Volunteers in Guatemala

Jeffery C. Markt, D.D.S. of the department’s oral maxillofacial prosthetic division joined several colleagues in early February 2017 for a mission trip to Huehuetenango, Guatemala. At an altitude of slightly more than 6,000 feet, Huehuetenango, the capital of the country’s department of Huehuetenango, has a population of approximately 80,000 and is situated in the nation’s western highlands. Though this was Dr. Markt’s maiden voyage with the group, the team has annually been visiting Huehuetenango for nearly a decade. Led by Deb Dunkhase of the Iowa Children’s Museum and John W. Canady, M.D., the 37-member crew was comprised of four otolaryngologists, two anesthesiologists, a team of surgical and perioperative nurses, a band of otolaryngology and anesthesia residents, several medical students, a dental student, a yeoman’s team of nonmedical supporters, and William Gates, D.D.S. of Durham, North Carolina, another maxillofacial prosthodontist. As in the past, the troupe was graciously co-sponsored and hosted by the local Iowa City and Huehuetenango Rotary International Clubs.

Though in the country for nine days, the group’s five-day medical component was devoted to the surgical and prosthetic habilitation of children affected by congenital clefting conditions. The first two of those days was occupied by setting up an operational environment in the local Hospital Especialdades and screening patients. This effort was followed by three surgical days in two operating rooms. While Drs. Markt and Gates and their dental student fashioned several obturators and removable dental prostheses using some relatively primitive methodology, most of their care involved extracting diseased teeth near alveolar clefts to prepare patients for bone grafting procedures anticipated during the 2018 excursion.
Mission Trip to Honduras

Christopher Bingcang, M.D. traveled to La Ceiba, Honduras in March 2017 for a week’s medical/surgical mission, led by Dr. Michael McDonald, an otolaryngologist in Madison, Wisconsin. This is his 4th trip with this group that travels there annually. The Hackett Hemwall Foundation sponsored the trip. The group performed over 30 operations, including tympano-mastoidectomies, thyroidectomies, endoscopic sinus surgeries, and micro laryngeal surgery to patients who could not afford the operations. The audiology arm of the group fitted over 200 people suffering from hearing loss with hearing aids. He plans on traveling back to La Ceiba, Honduras this upcoming March.
Our wall of donations has been updated to include a new donor to the $1000-$9,999 category: Nebraska Academy of Otolaryngology

Thank you to all of the donors for your support to Otolaryngology-Head and Neck Surgery.

Please contact Meg Johnson, Director of Development at the University of Nebraska Foundation, at 402-502-4107 or meg.johnson@nufoundation.org for gifting opportunities.

The Empowerment Network started its Step-Up Omaha summer jobs program for youths in 2008, intending to replicate federal youth employment programs that no longer were funded. Step-Up was seen at first as a violence-prevention program. The first 15 youths recruited into it were “active shooters on the street,” said coordinator Jami Anders-Kemp.

But over time, the program has evolved and grown. It focuses on showing low-income youths ages 14 to 21 what it means to hold a job, giving them an income, exposing them to a variety of career fields, and teaching entrepreneurship. Dozens of Omaha employers and organizations provide paid summer work opportunities, which range from grounds keeping and construction to office work at businesses, non-profits, and government agencies. “Some of these kids had not seen work modeled in their lives and did not know what it looks like,” Anders-Kemp said. “They didn’t realize they could own their own business or could work fixing computers.”

Serving 150 youths the first year, Step-Up stepped up considerably in 2012 when the city began kicking into the program a portion of its federal block grant funding. This summer, more than 500 youths are enrolled.

The Otolaryngology-Head and Neck Surgery department has participated in the Step-Up Omaha program for 3 years. The program teaches Omaha youth about administrative functions and how the behind the scenes work affects patient care, education, and research.
2017-2018 will be an exciting year for the Otolaryngology-Head & Neck Surgery residency program at the University of Nebraska Medical Center. This year we welcome our first three resident intern class after our approved increase by the ACGME last year. This is also an exciting year in that we are offering a new and improved rotation schedule. In addition to the robust standard rotations, this new schedule will highlight dedicated rotations with facial plastics, OMFS, and a new 2-month rural rotation in Kearney Nebraska for the senior residents.

We are particularly excited about the Kearney rotation as it will allow our residents exposure to a rural, private practice setting and demonstrate how different practice in this setting is from the academic center where they are trained. They will be working with three busy general otolaryngologists and will get a broad and robust experience. Another new addition to the schedule will be a chief pick month that will allow our chief residents to explore further an area of interest that will better prepare them for practice or fellowship.

This year we are also improving our academic and didactic schedule to include lectures from experts in various inter-related disciplines. We also will be focusing more on making the most out of our didactics and supplemental learning opportunities such as the academy’s home study course.

Again this year we will be offering several key resident courses including our annual head and neck anatomy cadaveric course, pediatric and adult airway course, temporal bone course, and advanced sinus and skull base surgery course. We hope to work closely in the coming year with the members of our new Michael F. Sorrell Clinical Simulation laboratory to further enhance the training experience of our residents. This new state of the art simulation center will allow our department to expand our courses to the regional and national programs and will allow a richer experience for the participants.

We are extremely proud of the high caliber of the new chief class. Two of our four upcoming chiefs have or will be applying for fellowships in the upcoming year in rhinology and neurology respectively, while the other two will be joining private practices in the Midwest, one here in rural Nebraska.

As you can see the department is growing in ways that will only enhance our resident experience. This department has a strong dedication to providing exceptional training; we believe these new changes will further enhance this academic mission.

Wishing you all the best in 2017-2018.

Sincerely,

Sam Pate, M.D.
Vice Chairman & Residency Director
RRC Approves Rural Rotation

The department is proud to announce that in July 2017, our residents began rotating in Kearney, Nebraska. The rotation is a rural rotation with three busy board-certified otolaryngologists. This rotation offers our residents a unique opportunity to experience practice in a non-academic hospital and the invaluable experience of witnessing how private practices can be successful. These two aspects of the rotation are not provided in their current rotations. Their experience is limited to the academic model at Nebraska Medicine, and their current understanding of an otolaryngologic practice is of one that includes representation in all of the sub-specialties in otolaryngology including neuro-otology, laryngology, facial plastics, rhinology, pediatrics, and head and neck surgery. Over 50% of graduating otolaryngology residents in the U.S. will go into general practice often in a private practice setting, therefore the opportunity to see how such a practice runs is a crucial part of their training that was missing until now. Rural community otolaryngologists often have very broad practices and are often asked to tackle problematic patients without the support and resources of a large academic institution; this is the case with the three otolaryngologists in Kearney. We believe the rotation with this group will aid in teaching the residents these important skills.

Kearney Nebraska is located in central Nebraska, approximately 181 miles from Omaha. In the fall of 2016 Program Director, Dr. Sam Pate, Associate Program Director, Dr. Christie Barnes and Program Coordinator, Vanessa Larson had the pleasure of visiting Kearney, Nebraska. They saw first hand where the residents will live and work. They found the staff and hospital administration to be welcoming, kind and supportive of this prospect.

Also, we expect by working with these busy private practice individuals that they will increase their KIP numbers in all areas, especially endocrine, facial trauma, head and neck and rhinology. Their experience will be very hands on in both clinical evaluation, decision-making, and primary surgical skill improvement. We also plan to pursue rural outcomes research as part of this rotation.

Resident of the Year

Congratulations to Jonathan Yoon, M.D. for being voted “Department Resident of the Year” by the Otolaryngology department residents for 2016-2017.

Being nominated as “Resident of the Year” is based on a few categories throughout the academic year which would include their presentations, in service scores, professionalism, integrity, and their excellence in other tasks such as teaching and organizing.

Department Teacher of the Year

Christine Barnes, M.D.

Congratulations to Christie Barnes, M.D. for being voted “Department Teacher of the Year” by the Otolaryngology department residents for 2016-2017.

Teacher of the Year is chosen by the resident group. All residents are encouraged to cast their vote for the faculty that has helped them grow professionally, surgically, and clinically. The top three names are then voted on, and the winner is announced at graduation.
Chief Corner

2017 Graduate

Kyle Stansifer, M.D. graduated on Saturday, June 3, 2017. He has joined ENT Specialists in Omaha, NE.

Welcome New Residents

In July 2017, we had three new residents join the ENT residency program.

Kleve Granger, M.D. from Pauline, SD
Lauren Klute, D.O. from Bradshaw, NE
Matt Solverson, M.D. from Grafton, WI

The Department of Otolaryngology- Head and Neck Surgery is proud to announce that Jason Talmadge, M.D., PGY-5, received the small department House Officer of the Year award for the 2016-2017 academic year.

Dr. Talmadge was nominated by Program Director, Sam Pate, M.D. and Assistant Program Director, Christie Barnes, M.D.

Drs. Pate and Barnes have given high recognition of Dr. Talmadge. “He has an unbelievable natural clinic sense that is something difficult to teach. He has been very productive in research projects, which by the end of his residency, he will have at least three quality publications. He is actively engaged in teaching medical students who rotate within the department, and we frequently get feedback that he is the best teacher of all residents. Dr. Talmadge offers to help junior residents on tough call weekends, taking the pager for a couple of hours while a junior gets a few hours of sleep. He also has been actively involved in implementing bedside tracheostomy at UNMC.”

The purpose of this award is to give recognition to the house officer who in the past years has distinguished him or herself in the areas of clinical excellence, dedication to scholarly activity, excellence as a teacher, and exemplary citizenship.

“We strongly recommend Dr. Talmadge for this award, and he is deserving of recognition for his service to this hospital and our patients,” stated Drs. Pate and Barnes.
Resident Research Symposium

The Department of Otolaryngology-Head and Neck Surgery hosted their Resident Research Symposium in April 2017. Each resident gave a presentation and they are all listed below.

- **Kyle J. Stansifer, M.D.**  
  Post-tonsillectomy pain control in adults: a randomized prospective study

- **Paul Judge, M.D.**  
  Can the video head impulse test define severity of bilateral vestibular hypofunction?

- **Jonathan Yoon, M.D.**  
  A retrospective evaluation of minimally invasive ponto surgery

- **Kimberly Joynt, D.O.**  
  Outpatient parotidectomy in the United States: national trends and safety profile

- **Jason Talmadge, M.D.**  
  Comparison of spreader graft outcomes and operative times based on open versus endonasal approach

- **Andrew Logeman, M.D.**  
  Comparison of liposomal bupivacaine to normal marcaine

- **John Blecha, M.D.**  
  Impact of baby shampoo rinses on SNOT-20 scores in cystic fibrosis patients

- **Brandon Wachal, M.D.**  
  Otolaryngology diagnoses in pediatric intestinal transplant recipients: a 23-year experience

- **Tyler Bliss, M.D.**  
  Dentures as foreign bodies

- **Matthew Miller, M.D.**  
  Effect of BMI on outcomes in congenital neck mass surgery
Exciting News

Our Research program is expanding and there have been several outstanding publications from our residents this year, due largely to the promotion of Karli Davis, MPH, our Program Development Coordinator. She has been crucial to the success of resident and faculty projects and is helping to expand our research presence.

Publications

UNMC’s Global Center for Advanced Interprofessional Learning is expected to open in the Fall 2018. iEXCEL stands for the Interprofessional Experiential Center for Enduring Learning. It is a bold initiative that engages learners in real-life scenarios using simulation and virtual reality technology, which enables them to acquire skills and knowledge before encountering real-life scenarios. The proposed three-story, 125,000-square foot facility is planned for the southeast corner of 42nd and Emile street.

The facility will be capable of virtual immersive reality environments for both individual and interprofessional learning, and have tele-education, telepresence (visualization) and telehealth networking capabilities. This initiative enables UNMC to centralize state-of-the-art learning technologies and serve as a statewide resource to UNMC campuses in Lincoln, Kearney, Norfolk, and Scottsbluff, as well as other health care partners. It enables existing health care providers and military personnel across the nation to master and upgrade skills by practicing real life scenarios in a simulated and virtual environment.

Our department plans to work closely with the team at iEXCEL to take our resident educational courses to another level. With more cadaveric stations, and the advanced simulation available in this building, the residents will receive an experience that is truly unmatched in our hospital’s history.
Residents get exposed to a lot of different surgeries as they work toward being seasoned and competent surgeons. It means a lot of hours getting the right kind of experiences.

But sometimes, certain complicated cases are uncommon during their training. This is where labs and simulation play a key role in preparing residents for any situation when they go into practice after graduation.

In May 2017, faculty from the UNMC Department of Otolaryngology-Head and Neck Surgery hosted a two-day advanced course that provided residents the experience they need for certain complicated cases. They learned the latest techniques to remove tumors or masses from the base of the skull that affect the ear and nerves of hearing.

Guest faculty from eight states who are leaders in the field joined UNMC to train 19 residents from otolaryngology-head and neck surgery and neurosurgery, as well as residents from academic medical centers in Missouri and Iowa.

“Residents outside Nebraska normally would have to travel to the coasts to receive a course of this kind,” said Christie Barnes, M.D. Funded by a grant, UNMC used a Mobile Operating Room Experience for the first time. It enabled the department to train more residents.

The lab, owned by Stryker, a medical technology company, is a 76-foot state-of-the-art semi-truck with expandable sides that make the lab 32-feet wide. Equipped like an operating room, the mobile lab features eight operating room stations.

UNMC also used the 10 stations in the department’s state-of-the-art labs on campus.

“UNMC is on the forefront of resident education and is dedicated to training future ear, nose and throat physicians to be the best in the field,” Dr. Barnes said. “UNMC offers five courses a year in addition to our regular curriculum. This is far more than any regional or national programs.

“UNMC’s goal is to become a regional leader in resident education. This is one step closer to achieving the goal,” she said.

Jason Talmadge, M.D., said faculty put on fantastic education courses that benefit residents throughout the year.

“Bringing the mobile dissection lab increased available space to allow nationally known otolaryngologists and neurosurgeons to also attend this advanced skull base surgery course. It was great to learn alongside all these experienced surgeons.”
Pediatric Eye, ENT Symposium draws more than 100

The 2017 Midwest Pediatric Specialty Symposium: Pediatric Eye, Ear, Nose, and Throat was held in March 2017 at UNMC.

The symposium included clinical updates, didactic lectures and case-based clinical discussions regarding pediatric ophthalmology and otolaryngology.

The event drew more than 125 participants, including pediatricians, family practice physicians, and other health professionals. Participants came from eight states, and there were eight poster presentations at the event.

“Dr. Suh and I were pleased at the vast turnout we received for our first Midwest Pediatric Specialty Symposium,” said Dwight Jones, M.D., who co-directed the event with Donny Suh, M.D., associate professor at UNMC and chief of pediatric ophthalmology and adult Strabismus at Children’s Hospital & Medical Center. “I would like to thank everyone who attended especially our guest speakers from Boston Children’s Hospital, Harvard Medical School, and Children’s Mercy Hospital as well as Boys Town National Research Hospital and our very own from UNMC. I hope everyone took away key points that they can use in their practice, and we are excited for our next specialty meeting in 2018.”

The keynote speakers were Robert Weatherly, M.D., section chief-otolaryngology, Children’s Mercy Hospital and professor, University of Missouri-Kansas City School of Medicine; and David Hunter, M.D., Ph.D, ophthalmologist in chief and Richard Robb Chair in Ophthalmology, Boston Children’s Hospital, president, Children’s Hospital Ophthalmology Foundation, and professor and vice chair of ophthalmology, Harvard Medical School.

The 2018 Midwest Pediatric Specialty Symposium: Pediatric Eye, Ear, Nose, and Throat will be held on Friday, April 6th, 2018 from 7:30AM – 4:00 PM. It is designed for pediatricians, family practice physicians, nurses, advanced practice providers, residents, and fellows caring for children with eye, ear, nose, or throat complaints. The Symposium will include clinical updates, didactic lectures, and case-based clinical discussions regarding pediatric ophthalmology and otolaryngology.

Please visit https://www.unmc.edu/cce/catalog/clinicmed/peent/index.html for more information and to register.
Impact in Education: Alan T. Richards, M.D.

Our department own, Alan T. Richards, M.D., is one of the recipients of the Office of Academic Affairs inaugural Impact in Education Awards.

You are the recipient of the Valor in Educational Service Award. How is volunteer service impactful in health care education?

Volunteers are usually retired members of the medical community. They have a lifetime of experience and knowledge to impart to the students.

Describe your proudest moment as an educator:

Being awarded the Student Senate Distinguished Teacher Award in 2016. This told me that what I was doing with the students was of value to them.

What advice would you give other faculty members who want to have an impact in education?

• Always be available to teach the students.
• Be up to date with current knowledge.
• The approach should be as an equal, not as a superior.

Do you have a favorite quote or philosophy on teaching?

• “The busiest man has the most time.” Dr. Charles Saint, chairman, surgery department, Cape Town University, South Africa
• “The person who says he/she knows everything isunteachable!” Dr. Bert Myburgh, chairman, department of surgery, Witwatersrand University, Johannesburg, South Africa
• “There are no mysteries in surgery; only mysterious surgeons!” Dr. Sonny du Plessis, chairman emeritus, department of surgery, Witwatersrand University, Johannesburg, South Africa

Valor in Educational Service Award

This award recognizes a volunteer, emeritus, or adjunct faculty whose daily service to our learners exemplifies the spirit of outstanding teaching or clinical supervision.
Faculty

Christie Barnes, M.D.
Assistant Professor
Specialty:
Sinus/Nasal Disorders
Skull Base Surgery

Christopher M. Bingcang, M.D.
Assistant Professor
Specialty:
Laryngology

Estelle (Eun Hae) Chang, M.D., C.M., MPH
Specialty:
Robotic Endocrine Head and Neck Surgery
Thyroid & Parathyroid Disorders
General Otolaryngology

Wesley Heckman, M.D.
Assistant Professor
Specialty:
Facial Plastic and Reconstructive Surgery
Rhinoplasty
Aesthetic Surgery
Rehabilitation for Facial Nerve Paralysis
Skin Cancer
Maxillofacial Trauma

Dwight T. Jones, M.D.
Chairman & Professor
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Pediatric general Otolaryngology
Pediatric Sinus Disorders
Pediatric Airway Disorders
Pediatric Cystic Fibrosis
Pediatric Sleep Disorders

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Thyroid & Parathyroid Disease
Otolaryngic Allergy

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Oral Facial Prosthetics
Dental Oncology

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Professor
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Otolaryngology/Neurotology
Lateral Skull Base Surgery
Vestibular Surgery
Schwannomas
Cochlear Implants
Hearing Restoration
Surgery
Vestibular Surgery
Vertigo and Balance Disorders
Facial Nerve Disorders

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Head and Neck Surgical Oncology

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Sinus/Nasal Disorders
Ear Disease Surgery
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Pediatric Airway Disorders
Pediatric Cystic Fibrosis
Pediatric Sleep Disorders
Advanced Practice Providers

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