



American Head and Neck Society Fellowship Programs

**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:

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Beth Israel Medical Center

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Assistant Program Director: Adam S. Jacobson, MD, FACS
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Faculty involved with the fellowship:

Daniel Buchbinder, DMD, MD	Spiros Manolidis, MD
Jean-Marc Cohen, MD	Valerie Maccarone, MD
Bruce Culliney, MD	Jacqueline Mojica
Stewart B. Fleishman, MD	Devin Okay, DDS
Alina Gouller, MD	Mark S. Persky, MD, FACS
Louis Harrison, MD	Raj Shrivastava, MD
Manju Harshan, MD	Abtin Tabaei, MD
Roy Holliday, MD	Theresa Tran, MD
Kenneth Hu, MD	Mark L. Urken, MD, FACS
Adam S. Jacobson, MD, FACS	Michael Via, MD
Azita Khorsandi, MD	Bruce Wenig, MD
Cathy Lazarus, PhD	

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 120 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, inseting, and performing the microvascular anastomosis. The fellow runs the head and neck reconstruction conference on a monthly basis where an analysis of difficult upcoming and past

cases takes place. 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 Beth Israel Medical Center (BIMC) 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 recently opened 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 and Swallowing Therapists.

The group meets weekly for multidisciplinary head and neck tumor board conference to discuss each patient who presents to Beth Israel Medical Center for management of a malignancy of the head and neck. Quarterly, the group meets in conjunction with the New York Eye and Ear Infirmary Department of Otolaryngology – Head and Neck Surgery to discuss complicated head and neck reconstructive surgeries in a case presentation format. Additionally, the group hosts the annual course in “Free Flap Reconstruction of Head and Neck Defects: A Multidisciplinary Approach” as well as the annual course in “Controversies in the Management of Thyroid and Parathyroid Diseases.” The fellow is sponsored to attend this course twice during his/her tenure – the Spring prior to beginning the fellowship as well as the Spring during the fellowship year.

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, MBBS (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 (Fellow 2010-2011) Assistant Professor of Otolaryngology – Head and Neck Surgery, Baylor College of Medicine, Houston, TX.

Sumeet Anand, MD (Current Fellow 2011-2012)

Saral Mehra, MD (Pending Fellow 2012-2013)

Emory University School of Medicine

Program Director: Amy Y. Chen, MD, MPH, FACS
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Effective July 1, 2012: Department of Otolaryngology Head and Neck Surgery
550 Peachtree Road, 9th Floor
Atlanta, GA 30308

Chairman of Department: Douglas Mattox, MD

Faculty Involved with the Fellowship:

Amy Chen, MD, MPH	Douglas Mattox, MD
Mark W. E-Deiry, MD	Charles Moore, MD
William J. Grist, MD	J. Trad Wadsworth, MD

Non-Surgical Faculty Involved with the Fellowship:

Jonathan Beitler, MD (Radiation Oncology)
Steve Budnick, DMD (Pathology)
Edie Hapner, PhD (Speech Pathology)
Patricia Hudgins, MD (Neuroradiology)
Fadlo Khuri, MD (Medical Oncology)
Susan Muller, DMD (Pathology)
Taofeek Owonikoko, MD (Medical Oncology)
Nabil Saba, MD (Medical Oncology)
Doug Shin, MD (Medical Oncology)

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

PROGRAM DESCRIPTION:

Overview: 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. Its Winship Cancer Center is the only NCI designated Cancer Center in Georgia. The Head and Neck Surgery Division (AC, WG, MWE, JTW) cares for over 800 new patients, performs approximately 2500 surgical procedures, and sees over 7400 outpatient visits annually. Our department cares for more head and neck patients than any other institution in Georgia.

The Division includes two primarily ablative surgeons (AC, WG) and two ablative and microvascular reconstruction trained surgeons (MWE, JTW). The Head and Neck Multidisciplinary Tumor Program 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 and 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, thyroid surgery, and microvascular reconstruction. In addition, there are opportunities for training in Transoral Robotic surgery (TORS) and adult airway reconstruction.

Eligibility: To be considered for the position, the candidate for the head and neck fellowship must have completed a 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: 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 50 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 independent outpatient clinical and surgical experience. Teaching opportunities include staffing head and neck surgery cases at Grady Medical Memorial Hospital, 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.

Georgia Health Sciences University/Medical College of Georgia

Program Director: David J. Terris, M.D., F.A.C.S.
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Chairman of Department: David J. Terris, M.D.

Faculty Involved with the Fellowship:

David J. Terris, M.D.,

C. Arturo Solares, M.D.

Edward Chin, M.D.

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

Laura Mulloy, D.O.

Gregory Postma, M.D.

Lana L. Jackson, M.D.

Jimmy J. Brown, D.D.S., M.D.

Rene Harper, M.D.

Darko Pucar, M.D.

Michael Groves, M.D.

Paul Weinberger, M.D.

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

PROGRAM DESCRIPTION:

History and Overview

Georgia Health Sciences University has a rich tradition of world-class thyroid surgery. In 2004 the GeorgiaHealth Thyroid/Parathyroid Center was inaugurated; this represents a collaborative effort between Otolaryngology, Endocrinology, and Nuclear Medicine. GHSU 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 and 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 2 accredited by the American Head and Neck Society and is affiliated with the GHSU Otolaryngology residency program.

Facilities:

The fellow spends time in three hospitals:

- a. Georgia Health Sciences Medical Center - a 520-bed teaching hospital
- b. Children's Medical Center - a 149-bed, nationally acclaimed children's hospital.
- c. Veterans Administration Medical Center - a 155-bed hospital adjacent to GHSU.

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, the half-day weekly head and neck tumor board, two operating room days per week, and one full day at the VA hospital. Exposure to ultrasound techniques occurs throughout the outpatient experience. The fellow takes faculty call from home (approximately 1 week in 12).

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 investigation centers on biomarker discovery and thyroid and parathyroid proteomics.

3. *Procedural expectations*

The following approximate procedural volumes are performed during the fellowship: thyroidectomy: 225; parathyroidectomy: 100; neck dissection: 25; ultrasounds: 100

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 robotic 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., Assistant Professor, GHSU
- 2009 Brent Metts, M.D., Ph.D., private practice in Texas
- 2010 Melanie Seybt, M.D., Assistant Professor, GHSU then private practice in SC
- 2011-2012 Michael Singer, M.D., Assistant Professor, Henry Ford Hospital
- 2012 William Duke, M.D., Assistant Professor, GHSU

Indiana University School of Medicine

Program Director Michael G. Moore, M.D., FACS
Assistant Professor
Director, Head and Neck Surgery
Department of Otolaryngology

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Chairman of Department:
Richard T. Miyamoto, M.D., F.A.C.S., F.A.A.P.
Arilla Spence DeVault Professor and Chairman
Department of Otolaryngology-Head & Neck Surgery

Faculty Involved with the Fellowship:

Michael Moore, MD (HNS)	Romnee Clark, MD (MO)
Joseph Brigance, MD (HNS)	Peter Johnstone, MD (RO)
Chad Galer, MD (HNS)	Mark McDonald, MD (RO)
Taha Shipchandler, MD (HNS)	Mark Henderson, MD (RO)
Edward Weisberger, MD, (HNS)	Mark Langer, MD (RO)

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 Wishard Medical Center, The Indianapolis VA Medical Center, The Riley Hospital for Children, and Methodist Medical Center.

In the IU Department of Otolaryngology-HNS there are both ablative and reconstructive surgeons, with some individuals that perform both. The vast majority of cases that will require

free tissue transfer will be accomplished by way of a two team approach. There are also close interactions between the head and neck surgical team and the neurosurgery and thoracic surgery staff as well, to allow for collaboration during skull base procedures and those that extend into the thoracic cavity, respectively.

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 day, where they will see patients with general otolaryngology and head and neck disorders, and they will be provided one-half 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 anastomoses, 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 not be included in the staff otolaryngology call schedule, but they will be asked to be available (within reason) for active issues that arise with in-patient major head and neck patients.

Johns Hopkins University

Program Director: Joseph Califano, M.D.
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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)	Kofi Boahene, M.D. (M)
Wayne M. Koch, M.D. (A)	Jeremy Richmon, M.D. (A,M)
Christine Gourin, M.D. (A)	Ralph Tufano, M.D. (A)
David Sidransky, M.D. (R)	Sara Pai, M.D. (A,R)
Joseph Califano, M.D. (A,R)	Patrick Ha, M.D. (A,R)
John Saunders, M.D. (A)	Nishant Agrawal, M.D. (A,R)
Ray Blanco, M.D. (A)	Carole Fakhry, M.D. (A, R)
Patrick Byrne, M.D. (M)	

Total number of positions available per year: One (two year) position with first year research followed by one year clinical.

Director of Research: David Sidransky, M.D.

Other parallel fellowships: Pediatrics, Otolaryngology/Neurotology, Facial Plastic and Reconstructive Surgery, Rhinology

PROGRAM DESCRIPTION:

Objectives:

The objectives 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 includes all aspects of head and neck surgical oncology. Fellows will have a faculty appointment as Instructor that includes a mentored experience focused on a transition to independence. In particular fellows are developed in terms of 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 faculty practices, but will also have an individual clinical surgical practice that is mentored to become an individual head and neck surgical oncology practice. Research focus includes a rich environment of translational research bridging surgical oncology and molecular biology pertaining to Head and Neck cancer. Fellows completing the program will have finely honed skills in surgical diagnosis and treatment of tumors of the head and neck and will have been introduced to basic laboratory research leading to publication of novel translational findings. Fellows will be comfortable in a

teaching role and will have already developed these responsibilities in an academic setting. The research training may serve as the basis to seek grant funding in order to facilitate the initiation of an academic career.

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 300 new cases of HNSCC are managed each year at Johns Hopkins Hospital. The fellowship also support Johns Hopkins Head and Neck Surgery at GBMC, a regional medical center with a well developed head and neck center that sees approximately 200 new cases of head and neck cancer for all sites annually.

Outline of the program:

The first year – is focused on clinical advanced specialty training pertaining to medical, and surgical treatment of Head and Neck tumors, both benign and malignant. Those applicants choosing to focus in microvascular reconstruction will continue this focus during the second year of fellowship. Exposure to medical and radiation oncology are included, as well as elective time in endocrinology, pathology, and radiology. Fellows will have a clinical role at both Johns Hopkins east Baltimore campus and at GBMC with attending faculty clinical practices, as well as a mentored individual clinical practice at Johns Hopkins east Baltimore campus.

The second year – is optional depending on the individual goals of the fellow. A second year of fellowship is not required, but is arranged according to the career goals of the individual fellow. Often this year is dedicated to research and/or microvascular reconstruction. 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, or clinical trailas methodology. Other studied area have included bioinformatics, and a variety of opportunities are available throughout Johns Hopkins University. Training in free tissue transfer may be arranged for selected applicants, and will be carried out throughout both years of the fellowship if this option is selected.

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

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. Dedicated clinical faculty provide 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.

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

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
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Email: ahessel@mdanderson.org
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
klmiskesk@mdanderson.org

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

Faculty Involved with the Fellowship:

Amy C. Hessel, M.D.	F. Christopher Holsinger, M.D.
Jeffrey N. Myers, M.D.	Michael Kupferman, MD
Gary Clayman, M.D., D.D.S.	Carol Lewis, MD
Eduardo M. Diaz, Jr., M.D.	Stephen Lai, MD
Paul W. Gidley, MD	Erich M. Sturgis, M.D.
Ann M. Gillenwater, M.D.	Randal S. Weber, M.D.
Ehab Hanna, M.D.	Mark Zafereo, MD

Total Number of Positions Available per Year: Three positions – could include:

- 1 year clinical fellowship
- 2-3 year combined research – clinical fellowship
- 2 year combined head & neck and micro vascular fellowship
- Additional 1 year endocrine specialization

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. If interested, we have developed an outcomes based research tract which would allow for the pursuit of additional education such as a Masters in Public Health which would be obtained through the available graduate education facilities in the Houston area. During the clinical year, a HNS faculty mentor is assigned to every fellow for counseling and review of progress.

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, they 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 teaching 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 Specialties. The specialties of General Surgery, Otolaryngology, and Plastic Surgery share, in common, this sub-specialty 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 Health.

There is a **two-year** fellowship in Head and Neck Surgical Oncology and Micro vascular 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.

After the completion of any of the above fellowships, there is the opportunity to apply for and participate in an additional **one-year** of endocrine specialization. This fellowship year is a combined year with the General Surgery Oncology department which focuses on acquiring an advanced body of knowledge and level of skill in the surgical and multidisciplinary management of endocrine tumors in order to assume a leadership role in teaching and research in the field. The fellowship year focus upon primarily upon the disorders, genetics, interdisciplinary management, and research associated with thyroid and parathyroid diseases.

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 Dept of Head & Neck Surgery UT MD Anderson Cancer Center	Assistant Professor
1998-2000	Paul M. Spring Otolaryngology - HNS Metairie, LA	Private Practice
1999-2000	Amy C. Hessel Department of Head and Neck Surgery UT M.D. Anderson Cancer Center, Houston, TX	Associate Professor
1998-2001	Amy Y. Chen Department of Otolaryngology-HNS Emory University, Atlanta, GA	Professor
1999-2001	Mike Yao Department of Otolaryngology-HNS Scarsdale, NY	Assistant Professor
1999-2001	Eric J. Lentsch Department of Otolaryngology-HNS Medical University of South Carolina, SC	Assistant Professor
2001-2003	F. Christopher Holsinger Department of Head and Neck Surgery UT M.D. Anderson Cancer Center, Houston, TX	Assistant Professor
2001-2003	Bryan Potter Coshocton, OH	Private Practice
2001-2003	Hernan E. Gonzalez Santiago Chile	Private Practice
2002-2003	Christian Simon Unknown	
2002-2004	Kristen B. Pytynia Dept Otolaryngology-H&N Surgery University of Illinois, Chicago. IL	Assistant Professor
2002-2004	Bradley A. Schiff Department of Otolaryngology-H&N Surgery Albert Einstein Medical Center, New York, NY	Assistant Professor

2003-2005	Brian A. Moore	Major, Medical Corps Dept of Otolaryngology-HNS, US Air force Eglin Air Force Base, Pensacola, FL
2004-2005	Kenneth Newkirk	Assistant Professor Department of Otolaryngology-H&N Surgery Georgetown University Hospital, Wash DC
2004-2005	William J. Harb	Private Practice Cumberland Surgical Associates Nashville, TN
2004-2006	Christopher Klem	Major, Medical Corps Department of Otolaryngology-HNS, US Army Tripler Army Medical Center, Honolulu, HI
2003-2006	Seungwon Kim	Assistant Professor Department of Otolaryngology-H&N Surgery University of Pittsburgh, Pittsburgh, PA
2003-2006	Thomas D. Shellenberger	Assistant Professor Department of Head & Neck Surgery M.D. Anderson Cancer Center, Orlando, FL
2004-2006	Michael E. Kupferman	Assistant Professor Department of Head and Neck Surgery UT M.D. Anderson Cancer Center, Houston, TX
2006-2007	Allison Lupinetti	Assistant Professor Department of Otolaryngology-HNS University ENT of Northeastern NY, Albany, NY
2005-2008	Andrew Sikora	Assistant Professor Department of Otolaryngology-HNS Mount Sinai School of Medicine, New York, NY
2006-2009	Chad Galer	Assistant Professor Department of Otolaryngology-HNS VA Medical Center, Indianapolis, IN
2006-2009	Mauricio Moreno	Assistant Professor Department of Otolaryngology-HNS Univ of Arkansas Medical Sciences, Little Rock, AR
2007-2008	Gabriel Calzada	Private practice Kaiser Permanente, Otolaryngology-HNS Downey, CA

2007-2008	<p>Umamaheswar Duvvuri Assistant Professor Department of Otolaryngology-HNS University of Pittsburg Medical Center, Pittsburgh, PA</p>
2007-2010	<p>Zivonimir Milas Assistant Professor Department of Head & Neck Surgery M.D. Anderson Cancer Center, Orlando, FL</p>
2008-2009	<p>Yitzchak Weinstock Assistant Professor Department of Otolaryngology-HNS University of Texas Medical Center, Houston, TX</p>
2008-2010	<p>Genevieve Andrews Assistant Professor Department of Otolaryngology- HNS Temple University, Pittsburgh, PA</p>
2008-2010	<p>Carol Lewis Assistant Professor Department of Head and Neck Surgery UT M.D. Anderson Cancer Center, Houston, TX</p>
2009-2010	<p>David Grant Assistant Professor Department of Otolaryngology-HNS Mayo Clinic, Jacksonville, FL</p>
2009-2010	<p>Mihir Bhayani Assistant Professor Department of Otolaryngology-HNS North Shore Medical Center, Chicago, IL</p>

Massachusetts Eye & Ear Infirmary/Harvard Medical School

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

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Derrick_Lin@meei.harvard.edu

Website:

Program Description: Coming Soon

Medical University of South Carolina

Program Director: Terry A. Day, M.D.
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 Hollings Cancer Center
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 Charleston, SC 29425
Phone: (843) 792-8363
Fax: (843) 792-0546
Email: headneck@musc.edu
Website: www.muschealth.com/headneck

Chairman of Department: Paul R. Lambert, M.D.
Program Coordinator: Ann Durgan: durguna@musc.edu

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
Barry T. Malin, MD, MPP	Head & Neck Surgery/Microvascular
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
Keisuke Shirai, MD	Medical Oncology
Paul O'Brien, MD	Medical Oncology
Bonnie Martin Harris, PhD	Speech Pathology
Betsy Davis, DMD	Maxillofacial Prosthodontics
Mary Richardson DDS, MD	Head & Neck Pathology
Brad Neville DDS	Oral Pathology
Zoran Rumboldt, MD	Head & Neck Radiology
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
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

Total Number of Positions Available per Year: One position

PROGRAM DESCRIPTION

Overview:

The Head and Neck Tumor Program 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 Program 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 Program has a strong multidisciplinary focus, with providers from Head and Neck Surgery, Radiation Oncology, Medical Oncology, Maxillofacial Prosthodontics, 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 program was cited as the best interdisciplinary clinical program at MUSC. The Head and Neck Tumor Program also has an extremely robust research portfolio. Currently, the program has 25 open clinical trials in head and neck cancer, along with 10 NIH-funded basic science laboratories or translational research programs with over \$4 Million annual in research funding. The MUSC Head and Neck Tumor Center is a division of the MUSC Department of Otolaryngology-Head and Neck Surgery but 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.

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. 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 approximately 400 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, Charleston, SC.

Akash Anand, M.D. – Ochsner Health System/Tulane Medical Center New Orleans, LA.

Memorial Sloan-Kettering Cancer Center

Program Director: Jay O. Boyle, M.D.
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New York, NY 10021
Phone: (212) 639-2221
Fax: (212) 717-3302
Email: boylej@mskcc.org
Website: www.mskcc.org

Chairman of Department: Jatin P. Shah, M.D.

Faculty Involved with the Fellowship:

Jay O. Boyle, M.D.	Snehal Patel, M.D., M.D., FACS
George Bosl, M.D.	David G. Pfister, M.D.
Lanceford Chong, M.D.	Jatin P. Shah, M.D.
Andrew Dannenberg, M.D., Ph.D.	Ashok R. Shaha, M.D.
Yuman Fong, M.D.	Bhuvanesh Singh, M.D., Ph.D.
Joseph Hurn, D.D.S.	Y. Bernard Su, M.D.
Dennis H. Kraus, M.D.	Suzanne Wolden, M.D.
Nancy Lee, M.D.	Richard J. Wong, M.D.
Ashwatha Narayana, M.D.	Michael Zelefsky, M.D.

Total Number of Positions Available per Year: Three (1 to 2.5-year) positions.

PROGRAM DESCRIPTION

Overview: Memorial Sloan-Kettering Cancer Center is the world's largest private, non-profit cancer center. The institution is dedicated to patient care, research, and education. Memorial Hospital is a referral center for patients from the greater New York area, the United States, and throughout the world. Established in 1915, the Head and Neck Service cares for more than 2,000 new patients, performs approximately 1,400 surgical procedures, and manages over 22,000 outpatient follow-up visits each year. The faculty members are amongst world leaders in head and neck surgery, and hold academic appointments at Cornell University.

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 2.5 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 oncology and basic research to prepare the individual for an academic career. Two new fellows are appointed each year. Trainee salary, subsidized housing, and health insurance are provided.

Duties and Responsibilities of Trainees: Clinical rotation consists of a 12-month 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 250 to 300 procedures during the year of clinical rotation. Fellows work with a multidisciplinary team

of physicians and professionals specializing in head and neck oncology to ensure the optimal treatment for each patient. Our integrated treatment team 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, an audiologist, and nursing staff. A one-month rotation in Radiation Oncology, medical oncology, and Pathology is available. The research rotation consists of six to eighteen months, depending upon individual interests, performing 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, and experimental therapeutics. 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 and travel awards. Fellows are encouraged to apply to granting agencies and national societies for support.

Supervision: All fellows are given an opportunity to help supervise and instruct residents on the Head and Neck Service, as well as 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.

Careers of Former Fellows: Upon completion of this fellowship program, all of the graduates have been able to secure full-time academic appointments.

Mount Sinai School of Medicine

Program Directors: Brett A. Miles, DDS, MD and Eric Genden, MD
Address: Department Otolaryngology/Head and Neck Surgery
Mount Sinai School of Medicine
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New York, NY 10029
Phone: 212-241-7063
Fax: 212-369-5701
Email: Brett.miles@mountsinai.org
Website: www.mssm.edu/departments-and-institutes/otolaryngology

Program Coordinator: Heather Joseph
Email: Heather.Joseph@mountsinai.org

Chairman of the Department: Eric Genden, MD

Faculty Involved with the Fellowship:

Eric Genden, MD
Vivek Gurudutt, MD
Brett A. Miles, DDS, MD
Anthon Reino, MD
Joshua Rosenburg, MD
Andrew Sikora, MD, PhD
Marita Teng, MD

Director of Research: Anthony Sikora, MD, PhD

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. Ideally candidates should be board eligible and 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 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 reference and forwarding them directly to the Department of Head and Neck Surgery, c/o Heather Joseph. 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.

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 the 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: 130
 Nose and paranasal sinus and skull base surgery: 255
 Oral cavity surgery: 108
 Neck surgery: 297
 Larynx and pharynx surgery: 149
 Thyroid and parathyroid surgery: 450
 Tracheal reconstruction: 48
 Ear and temporal bone surgery: 22
 Regional/myocutaneous flaps: 128
 Microvascular tissue transfer: 133
 Transoral robotic procedures: 65

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	Annual	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 lab, 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.

Ohio State University

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

Program Director: Amit Agrawal, M.D.
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Phone: (614) 293-8074
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Email: Amit.Agrawal@osumc.edu
Website: <http://ent.osu.edu>

Faculty Involved with the Fellowship:

David E. Schuller, M.D.	Enver Ozer, M.D.
Amit Agrawal, M.D.	Dennis K. Pearl, Ph.D.
Mario Ammirati, M.D.	David M. Powell, M.D.
E. Antonio Chiocca, M.D., Ph.D.	Patrick Ross, Jr., M.D.
L. Arick Forrest, M.D.	William L. Smead, M.D.
John C. Grecula, M.D.	Stephen P. Smith, M.D.
James C. Lang, Ph.D.	Gary D. Stoner, Ph.D.
Susan Mallery, D.D.S., Ph.D.	Donald L. Stredney, M.S.
John M. McGregor, M.D.	Christopher M. Weghorst, Ph.D.
Anterpreet Neki, M.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 holds 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 David E. Schuller, M.D. The overall majority of operative and clinical patient interactions for the fellow are done in conjunction with Dr. Schuller, Dr. Agrawal, Dr. Ozer, 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.
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PROGRAM DESCRIPTION: Coming Soon

Roswell Park Cancer Institute

Program Director: Wesley L. Hicks, Jr., M.D.
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Buffalo, NY 14263
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Email: Wesley.hicks@roswellpark.org
Website: www.roswellpark.org

Chairman of Department: Thom R. Loree, M.D., F.A.C.S.

Faculty Involved with the Fellowship:

Wesley L. Hick, Jr., M.D.
Ann Marie Bauer, R.N.-C.S., F.N.P.
Thom R. Loree, M.D., F.A.C.S.
Juliet Marczak, A.N.P.-C.
Maureen A. Mure, A.N.P.-C., R.N.F.A.
Saurin R. Popat, M.D., F.A.C.S.
Nestor R. Rigual, M.D.
James M. Smaldino, M.D., C.C.C.:S.L.P.
Alice Spies, R.N., R.N.F.A., C.N.O.R.
Paul I. Tomljanovich, M.D.

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

PROGRAM DESCRIPTION:

Overview: Roswell Park Cancer Institute, founded in 1898, by Dr. Roswell Park, is the oldest and one of the largest cancer research, treatment, and educational facilities in the world. It is devoted to the concept of total care of the cancer patient and has attained international prominence in oncology research and treatment. The Institute is a Public Benefit Corporation. It has a staff of 100 physicians and 150 scientists. At RPCI, oncology research, treatment, and education blend together to offer the best possible comprehensive care for those afflicted with cancer. The Institute maintains a 138-bed hospital where approximately 5,000 patients are admitted each year. Over 94,000 outpatient visits are accommodated in the outpatient facilities each year. The Institute is a teaching hospital of, and has academic affiliation with, the State University of New York at Buffalo. The Head and Neck Service 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 General Surgery, Otolaryngology, and Plastic and Reconstructive Surgery. As such, the complete range of ablative and reconstructive surgery (including microsurgical free tissue transfer and skull base surgery) is performed within the department.

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, as recently mandated by the Advanced Training Council of the American Head and Neck Society. The structure of the two-year curriculum and its specific content are developed by the program director, attending staff and fellow to provide the most meaningful experience possible. As such, the two-year tenure is a combination of clinical and research activities, with a minimum of 12 months of clinical rotation. 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. Research activities include NIH grant-supported basic science research within the department. Related basic science research opportunities are also available through the Division of Surgical Oncology and the Institute's basic science departments. In addition to the head and neck fellow, the department provides training to fellows in the Surgical Oncology program and rotating surgical residents.

Duties and Responsibilities of Trainees: For the head and neck fellow, in-depth experience is gained in all aspects of head and neck surgery, reconstruction, and oncology. The fellow is intimately involved in the assessment, preoperative care, postoperative care, rehabilitation, and long-term follow-up with patients. The fellow works with the attending staff in the operating room, outpatient facilities, and inpatient units. A didactic educational program is offered by the attending staff. In addition, during the fellowship tenure, there is ample opportunity and support provided to the fellow to participate in clinical research, presentation, and publication. Over 800 operative procedures are performed on the Head and Neck Service each year.

**Southern Illinois University School of Medicine
Simmons Cooper Cancer Institute**

Program Director: K. Thomas Robbins, MD
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Phone: (217) 545-6818
Fax: (217) 545-0057
Email: trobbins@siumed.edu
Website: <http://www.siumed.edu/>

Chairman of Department:

Faculty Involved with the Fellowship:

Richard Bass, MD	James P. Malone, MD
Michael Brenner, MD	Yin-Yuan Mo, PhD
Cathy Dlausen, MD	Michael Neumeister, MD
Sandra Ettema, MD	Sophia Ran, PhD
Theodore Gleason, MD	Krishna Rao, MD, PhD
John Godwin, MD	K. Thomas Robbins, MD
Paul Kay, MD	Bruce Shevlin, MD

Total Number of Positions Available per Year: One position

PROGRAM DESCRIPTION: Coming shortly

Stanford University

Program Director: Michael J. Kaplan, M.D.
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Stanford University Medical Center
Stanford, CA 94305-5739
Phone: (650) 725-6500
Fax: (650) 725-8502
Email: mjkaplan@stanford.edu
Website: www.stanford.edu

Chairman of Department: Robert Jackler, M.D.

Faculty Involved with the Fellowship:

Michael J. Kaplan, M.D.	Jack Koumjian, D.D.S., M.S.D.
Edward J. Damrose, M.D.	Barton Lane, M.D.
William E. Fee, Jr., M.D.	Quynh Le, M.D.
Nancy Fischbein, M.D.	Billy W. Loo, Jr., M.D., Ph.D.
Richard L. Goode, M.D.	Harlan A. Pinto, M.D.
Robert K. Jackler, M.D.	Ian Zlotlow, D.D.S.
Charlotte Jabobs, M.D.	

Director of Research: Stefan Heller, Ph.D.

Other Parallel Fellowships: Facial Plastic and Reconstructive Surgery

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

PROGRAM DESCRIPTION:

Objectives: The overall objective of the fellowship for advanced head and neck oncologic surgery at Stanford University is to prepare recently trained otolaryngologists, plastic surgeons, or general surgeons for a career in academic head and neck surgery. This is accomplished by providing outstanding clinical training (including both decision-making and technical expertise), encouraging teaching, and developing a scientific and investigative framework for a future of research.

History: Fellowship training at Stanford University began with a multidisciplinary fellowship in Advanced Head and Neck Oncology and Facial Plastic and Reconstructive Surgery, which was co-administrated by Dr. William E. Fee, Jr. and Dr. Richard L. Goode, M.D., and inaugurated in 1978. In 1988, the fellowship was segregated and individual programs in Head and Neck Oncology and Facial Plastic Surgery were formed. The head and neck fellowship received accreditation from the Joint Council on Advanced Head and Neck Oncology Training in 1978, and a total of 17 individuals have completed the fellowship. In 1994, construction was completed on the Molecular Biology Laboratory at Stanford University, thereby providing an outstanding research program to complement the historically strong clinical training. The major basic science research effort in head and neck cancer today is focused on adult cancer stem cells.

Requirements of Applicants: Completion of training is an accredited residency program in Otolaryngology-Head and Neck Surgery, General Surgery, or Plastic Surgery. Equivalently trained international candidates are also given strong consideration.

Description of Medical Center and Academic Affiliation: Stanford University Medical Center is a 611-bed tertiary care facility, with emphasis on clinical excellence and superior research programs. The University ranks second in the nation in endowment, and in the top five sponsored research. The medical center merged in 1996, with the Lucille Salter Packard Children's Hospital. Other teaching affiliates include the Palo Alto Veteran's Medical Center and the Santa Clara Valley Medical Center. There are eleven full-time faculty members in the Division of Otolaryngology-Head and Neck Surgery, twelve residents, six fellows, and approximately fifteen research associates.

Strengths: The head and neck fellowship at Stanford differs from most other programs in its level of autonomy. While sufficient guidance is provided, the fellows are given staff physician appointments by the hospital and therefore may evaluate, admit, and operate on patients in the absence of direct faculty supervision (when appropriate). With Stanford's recent faculty expansion, there is also enhanced skull base surgery. The one or two-year fellowship combines research and clinical care.

Outline of the Program: The daily schedule in a one-year fellowship includes professor rounds with Residents, Research work, lecturer for Medical Students, attending Research conferences, work on the Tumor board, as well as organizing H&J Journal Clubs, organizing of the Grand Rounds once per year and presenter, Direct H&N Tumor Board and you are expected to produce two published papers.

Careers of Past Fellows:

James Brown, M.D., Assistant Professor of Surgery, King/Drew Medical Center
Larry Burgess, M.D., Chief of Surgery, Tripler Medical Center
Richard Chafoo, M.D., Private practice
Edward Gabalski, M.D., Private practice
Wesley L. Hicks, Jr., M.D., Associate Professor, Roswell Park Cancer Institute
Allen Hillel, M.D., Professor, University of Washington-Seattle
Hani Ibrahim, M.D., Assistant Professor of Surgery, Rush Medical College
Paul Levine, M.D., Chairman, Otolaryngology/Head and Neck Surgery, University of Virginia
Peter Martin, M.D., Chief of Otolaryngology, Navel Base, San Diego
Glen Misko, M.D., Private practice
Ranjiv Sivanandan, M.D., Consultant Surgeon, Singapore General Hospital
Lee Smith, M.D., Private practice
Victor Stelzow, M.D., Private practice
Joseph Steiniger, M.D., Private practice
David J. Terris, M.D., Professor and Chairman of Otolaryngology/Head and Neck Surgery, Medical College of Georgia
Edward Tsong, M.D., Private practice

Thomas Jefferson University

Program Director: William M. Keane, MD
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www.jeffersonhospital.org/headandnecksurgery

Program Coordinator: Karen Keane
Karen.keane@jefferson.edu

Faculty Involved with the Fellowship:

William M. Keane, MD	Edmund A. Pribitkin, MD
David M. Coggnetti, MD	Joseph M. Curry, MD
Ryan N. Heffelfinger, MD	Howard Krein, MD, PhD

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. 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 three 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 85-100 free flaps per year. Such cases are performed on 2 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

Faculty Involved with the Fellowship:

Ruth Aponte
Walter Bell
James Bonner
William R. Carroll
J. Scott Magnuson
Benjamin McGrew

Lisle Nabell
Glenn Peters
Nasser Said
Sharon Spencer
Brad Woodworth

Director of Research: Eben Rosenthal

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

PROGRAM DESCRIPTIONS

Overview: The University of Alabama - Birmingham provides high-volume clinical experience and broad research opportunities in head and neck oncology. The fellowship year is characterized by a balance of mentorship and autonomy. Early on, close faculty supervision will be provided. As the clinical year progresses, the fellow will function more as a junior faculty member, leading residents through surgical procedures and determining treatment plans more independently. A weekly half-day Fellow's clinic provides additional opportunity for autonomy in patient management and independently scheduling and completing surgical cases with faculty on stand-by. 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.

Appointment/Requirements: 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 one of the busiest. 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.

Clinical Volumes: 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

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

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

Chairman of Department: Hadi Seikaly, M.D.

Faculty Involved with the Fellowship:

Jeffrey R. Harris, M.D.	Matt Parliament, M.D.
Mike Allegretto, M.D.	Rufus Scrimger, M.D.
Neil Chua, M.D.	Dave Williams, M.D.
Naresh Jha, M.D.	J. Wolfhardt, M.D.
Daniel O'Connell, 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 our 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.
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Chairman of Department: Hilary A. Brodie, M.D., Ph.D.

Otolaryngology Faculty Involved with the Fellowship:
Paul J. Donald, M.D.
D. Gregory Farwell, M.D.
Quang Luu, M.D.

Other Parallel Fellowships: Facial Plastic and Reconstructive Surgery, Laryngology

Total Number of Positions Available per Year: Two

PROGRAM DESCRIPTION:

Objectives: The Head and Neck Oncologic and Skull Base Surgery Fellowship is a one or two-year fellowship position with salary support through the resources of the University of California at 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 one-year 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 surgery, and endocrine surgery.

Duration of the fellowship: Currently, we offer two AHNS approved fellowships per year with exposure to the entire gamut of head and neck oncology and reconstructive surgery. Most fellows choose to do a one-year fellowship but select candidates may be allowed to do a second year depending upon their clinical and academic desires. 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) has had a head and neck oncologic surgery program for the past 34 years. The hospital 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 have 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, 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, plastic surgery, 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. UCDCMC is unique in having this program in northern California, and there are few such centers in the western United States.

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:

2011: Deborah Amott University of Melbourne, Australia

2010: Scott Fuller, M.D. Mather Veterans Administration Hospital, Sacramento; UC Davis

2010: Rony Aouad, M.D. University of Kentucky

2009: Steven Brigance, M.D., University of Indiana

2008: Quang Luu, M.D., University of California, Davis

2006: Kevin Brumund, M.D., University of California, San Diego

2005: Chetan Gujrathi, M.D., Barrows Institute, Phoenix

University of Cincinnati

Program Director: Keith W. Wilson, M.D.
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Application Deadline: As per AHNS Match timetable

Starting Date: July 1

Duration of Fellowship Program: One Year

University Affiliation: University of Cincinnati Medical Center

Accreditation: The American Head and Neck Society

Licensing Requirements: Ohio license required (fees are paid by the department)

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

Appointment: Clinical instructor

PROGRAM DESCRIPTION:

Operating Privileges and Operative Experience: Full privileges as a junior at University Hospital, VA Medical Center, Christ Hospital, Jewish Hospital and Good Samaritan 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 non-surgical 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

Clinical Responsibilities: Clinical responsibilities include overseeing care of all head and neck surgery patients at the University Hospital, VA Hospital, affiliated with Christ Hospital, Jewish Hospital and Good Samaritan Hospital. 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 day per week. The clinic is staffed by otolaryngology residents, and the fellow serves in a supervisory role.

The head and neck fellow is also responsible for coordinating Chart Rounds. This is a conference that reviews the management plans for all head and neck patients that are currently on the inpatient service at all of the participating hospitals. In addition, the fellow organizes the Head and Neck Tumor Board, a multidisciplinary conference that allows for interaction with the radiation therapists, medical oncologists, pathologists and radiologists.

Research opportunities are abundant. The department encourages and supports development of clinical research projects. An 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, and live music venues. 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:

Mikhail Vaysberg, DO- Assistant Professor, University of Florida, Gainesville

Judy McCaffrey, MD- Associate Professor, University of South Florida

Tapan Padhya, MD- Assistant Professor, University of South Florida

University of Iowa Hospitals and Clinics

Program Director: Kristi Chang, M.D.
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Chairman of Department: Bruce J. Gantz, M.D.

Faculty Involved with the Fellowship:

Gerry F. Funk, M.D.	Scott Graham, M.D.
John Buatti, M.D.	Henry T. Hoffman, M.D.
John W. Canady, M.D.	John H. Lee, M.D.
Kristi E. Chang, M.D.	Jeffrey C. Markt, D.D.S.
Gerald Clamon, M.D.	Douglas K. Trask, M.D., Ph.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 Clinical Cancer Center and the associated Iowa City Veteran's Administration Medical Center. The objectives of the program including mastering the examination and diagnosis of benign and malignant lesions 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 treatment for particular neoplasms. The fellow will coordinated 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, highly ranked nationally, is a very strong department within the University of Iowa 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 new University of Iowa Hospitals and Clinics surgical ward, which opened in 1991, consists of 24 operating suites. The new Otolaryngology- Head and Neck Surgery Clinic opened in January 2000.

Requirements of Applicants: Fellowship candidates must either be board certified or board eligible on 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.

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 coordinate the multidisciplinary Head and neck Cancer Tumor Board. He/she is also required to attend regular departmental meetings, including Grand Round, Morbidity and Mortality Conferences, Head and Neck Oncology Rounds, and Head and Neck Plastics Conferences, as well as other selected conferences available to the fellow throughout the year. 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 contemporary head and neck oncologic surgery. Fellows will have the opportunity to participate in skull base resection, advanced techniques in laryngeal rehabilitation, and multidisciplinary cases involved the Neurosurgery, Oculoplastics, Oral and Maxillofacial, and Cardiothoracic Services. In addition, the head and neck oncologic and reconstructive fellow routinely performs between 50 and 60 free tissue transfer procedures during one year of clinical training.

Research Opportunities: A variety of research opportunities are 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, 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. Five of the last six 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: Douglas A. Girod, M.D., F.A.C.S.
Assoc. Prog, Director: Yelizaveta (Lisa) Shnayder, M.D., F.A.C.S.
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Program Coordinator: Paula Cranmore, pcranmore@kumc.edu

Chairman of Department: Douglas A. Girod, M.D., F.A.C.S.

Faculty Involved with the Fellowship:

Dianne Durham, Ph.D.	Hinrich Staecker, M.D., Ph.D.
James D. Garnett, M.D.	Kevin J. Sykes, M.P.H.
Christopher Lominska, M.D.	Terance T. Tsue, M.D.
Prakash Neupane, M.D.	Fen Wang, M.D.
Ania Pollack, M.D.	Stephen Williamson, M.D.

Other parallel fellowships: Pediatric Otolaryngology

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

PROGRAM DESCRIPTION:

Objectives: The Head and Neck Fellowship is a comprehensive one year 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 DaVinci technology
- Management of skin cancers, including melanoma, and sentinel lymph node biopsy

Requirements: 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 539-bed hospital with a 21-bed Surgical Intensive Care Unit and a 26-bed OTO-HNS Ward. The patient accrument 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 300 new Head and Neck cancer cases presented each year. A multidisciplinary Thyroid Tumor Board is held monthly to discuss new and recurrent thyroid malignancy patients.

Duties and Responsibilities of Trainees: 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 resident/medical student lectures and at least one major Grand Rounds presentation. 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 CME meeting at Vail, 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 a medical mission trip in a developing country with department faculty and residents.

Careers of Former Fellows:

Dr. Jeffrey Jorgensen is currently a busy academic Head and Neck/Microvascular surgeon at the University of Missouri/Columbia Department of Otolaryngology.

Dr. Konstantinos Kourelis 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 returned to his position of Chief of Otolaryngology – Head and Neck Surgery at Kaiser Permanente Northwest in Portland, Oregon.

Cancer Care Manitoba, University of Manitoba

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

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

Chairman of Department: Richard W. Nason, MD, FRCSC

Faculty Involved with the Fellowship:

Richard W. Nason, MD, FRCSC

Paul Kerr, MD, FRCSC

K. Alok Pathak, MD, FRCSC

Donna Sutherland, MD, FRCSC

Norbert Viallet, MD, FRCSC, Assistant
Program Director

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

James B. Butler, MD, FRCPC

Ahmet Leylek, MD, FRCPC

Shaun Loewen, 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 group at Cancer Care Manitoba comprises of 3 Otolaryngologists and 2 General Surgeons who see over 1000 new patients and 7000 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, thoracic services, 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 900 head and neck surgical procedures performed every year. We have a strong minimally invasive Head and Neck Surgical Oncology program that encompasses CO2 laser excisions, radio-guided sentinel node biopsies, endoscopic thyroidectomies and parathyroidectomies and endoscopic sinus surgery. 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, help and supervise them through the surgical procedures and be involved in different teaching courses organized by the Head and Neck Surgical Oncology program. Fellow is expected to be on 1:4 call rotation.

University of Miami Hospital and Clinic

Program Director: Francisco J. Civantos, M.D., F.A.C.S.
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Chairman of Department: Fred F. Telischi, MEE, MD, FACS

Faculty Involved with the Fellowship:

Francisco J. Civantos, M.D., F.A.C.S.	Brian Jewett, M.D.
David J. Arnold, M.D., F.A.C.S.	Donna Lundy, Ph.D.
Roy Casiano, M.D.	Arnold Markoe, M.D.
Elizabeth Franzmann, M.D.	Khaled Tolba, M.D.
W. Jarrard Goodwin, M.D., F.A.C.S.	Giovana Thomas, M.D.
Georges Hatoum, 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: Douglas B. Chepeha, M.D., M.SP.H.
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Chairman of Department: Gregory T. Wolf, M.D.

Faculty Involved with the Fellowship:

Douglas B. Chepeha, M.D., M.SP.H.
Carol R. Bradford, M.D.
Thomas E. Carey, Ph.D.
Avriham Eisbruch, M.D.
Norman Hogikyan, M.D.
Jennifer Kim, M.D.
Teresa Lyden, S.L.P.
Tamara Miller, B.S.N.
Jeffrey Moyer, M.D.
Suresh Mukherji, M.D.
Mark Prince, M.D.
Theodoros N. Teknos, M.D.
Jeffrey Terrell, M.D.
Gregory T. Wolf, M.D.

Other Parallel Fellowships: Skull Base Surgery, Facial Plastic and Reconstructive Surgery

Total Number of Positions Available per Year: Two 1-year positions. After matching a second research year can be arranged.

PROGRAM DESCRIPTION:

Objectives: The objective of the Fellowship for Advanced Training in Head and Neck Oncologic Surgery is to train academic head and neck oncologic surgeons with expertise in management of all facets of reconstruction in the head and neck, including local, regional, and free tissue transfer, as well as exposure and expertise in approach and the management of skull base neoplasms.

Requirements of Applicants:

1. Work-up and follow all previously untreated head and neck squamous carcinoma patients seen during multidisciplinary clinic.
2. Assist in all major surgical cases.
3. Assist in all microvascular surgical cases.
4. Supervise at the VA Hospital 1 day per week.
5. Summarize cases at weekly Tumor Board.

6. Attend head and neck rehabilitation rounds.
7. Prepare and submit fellowship thesis/research project.
8. Present research at the annual Lamberson Lectureship.
9. Participate in all Cancer Center activities related to the Head and Neck Oncology Program.
10. Participate with faculty in student and resident teaching including several formal lectures at tumor conferences.
11. Daily rounds with responsible faculty.
12. Participate in “on-call” responsibilities.
13. Attend one national scientific meeting per year.
14. Attend the monthly meeting of the Cancer Center Head and Neck Oncology Program.
15. Attend the annual Head and Neck Oncology Program Retreat.
16. Prepare annual operative list and list of publications.

Description of Medical Center and Academic Affiliation: The Medical Center is comprised of the University of Michigan Hospital, Taubman Center (outpatient care), Mott Children’s Hospital, Holden Women’s Hospital, and Turner Geriatrics and Cancer Center. The Medical Center has 865 beds (licensed and unlicensed) and 27 operating rooms. The Department of Otolaryngology-Head and Neck Surgery sees nearly 50,000 outpatients per year with over 400 major head and neck cancer patients treated annually. The Head and Neck Division staff is dedicated to the training of residents and fellows in the diagnosis, treatment, and rehabilitation of head and neck patients. We are also the lead department in the Head and Neck Oncology Program within the University of Michigan Cancer Center and coordinate multidisciplinary Head and Neck Cancer Clinics. We have a large SPOR grant from the NIDCR/NIH to study the molecular basis of head and neck cancer therapy. We are affiliated with the Veterans Affairs Medical Center.

Outline: The first year of the two-year fellowship is 80% clinical and 20% research. The second year if you chose after the match is 80% research and 20% clinical. The fellow interested in microvascular training participates in all relevant cases, as well as the microvascular teaching lab.

Strengths: The Head and Neck Oncology Program at the University of Michigan Medical Center is a full program within the Comprehensive Cancer Center. This is a facility with state of the art outpatient facilities, as well as research laboratories. The unique clinical training for the head and neck oncology fellow is a busy, cutting-edge, broadly-based head and neck oncology exposure with opportunities to participate in microvascular reconstruction and skull base surgery. We perform over 100 free tissue transfer procedures per year, as well as participating in the multidisciplinary melanoma clinic. We have specialty-trained laryngologists and sinus surgeons as well. We have collaborative strengths with surgical oncologists through the multidisciplinary melanoma clinic and plastic surgery, although, at our institution, the otolaryngology service does essentially all of the microvascular reconstructions on our head and neck patients.

Research Opportunities: We also have head and neck cancer tumor biology research laboratories both at the University of Michigan Comprehensive Cancer Center and at the Department of Veteran’s Affairs Medical Center. Research opportunities are available both in Basic Science Research, including molecular biology of tumors, predictive markers, and animal models, and free flap physiology studies. In addition, we have an active research interest in clinical research, study designs, and quality of life measures. Any or all of these research opportunities are available for the head and neck fellow.

Careers of Former Fellows: An overwhelming majority of our head and neck oncology fellows have gone on to academic appointments in the head and neck oncology field. Elective rotations are offered in medical oncology, radiation oncology, skull base surgery, facial plastic and reconstructive surgery, maxillofacial prosthodontics, diagnostic radiology, and pathology. The Head and Neck Oncology Fellowship at the University of Michigan is designed to train the fellow in interdisciplinary management of head and neck cancer, as well as provide a foundation in relevant research in basic, translational, and/or clinical research of the disease. The fellowship equips the individuals for a career as an academic head and neck surgical oncologist, Clinician/Investigator.

University of Nebraska

Program Director: Russell B. Smith, M.D.
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Chairman of Department: Dwight T. Jones, M.D.

Faculty Involved with the Fellowship:

John Baker, M.D.	Oleg N. Militsakh, M.D.
Apar Ganti, M.D.	Alan T. Richards, M.D.
Whitney Goldner, M.D.	Russell B. Smith, M.D.
Sonny Johannsson, M.D., Ph.D.	Ann Sporkman-Link, MA, CCC-SLP
Robert H. Lindau, M.D.	Yungpo Su, M.D.
Chandy Lockman Hoke, RD	Aaron M. Wieland, MD
William M. Lydiatt, M.D.	Weining (Ken) Zhen, M.D.
Jeffrey Markt, DDS	

Total Number of Positions Available per Year: One position.

PROGRAM DESCRIPTION:

Overview: The University of Nebraska Medical Center is the pre-eminent academic medical center in Nebraska with professional degrees in medicine, pharmacy, nursing, dentistry, physical therapy, and allied health professions. The history of the institution dates back to the late 1800s and now consists of 19 clinical departments that are involved in extraordinary patient care, education, and research. The Division of Head and Neck Surgery consists of 6 faculty members that are leaders in head and neck cancer come from diverse backgrounds. The Division is involved in patient care through three institutions: UNMC, Nebraska Methodist Hospital and Estabrook Cancer Center, and the Omaha VA Medical Center. The Division's referral area includes not only Nebraska, but also Iowa, Kansas, Missouri, and South Dakota. The Division cares for approximately 1,250 new patients per year and surgically treats approximately 650 patients per year.

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 has 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 exposure to the multidisciplinary care of head and neck cancer patients. The fellow will spend appropriate time in the outpatient clinic as well as the operating room with each faculty developing expertise in head and neck surgical oncology. The fellow will play a critical role in the peri-operative 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. The fellow will be responsible to the Head and Neck Surgical Oncology 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 resident 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 both an academic medical center as well as a high volume private cancer center.

University of Oklahoma

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Faculty Involved with the Fellowship:

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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. Krempf, 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.
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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.

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, 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 chemo-radiation 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, 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. The fellow works closely in the operating room with the supervising attending surgeons, and will actively participate in the training of residents. 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 600 new head and neck cases per year. This multidisciplinary treatment conference familiarizes the fellow with both surgical and non-surgical 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. The fellow will also cover operative cases at the Philadelphia VA Hospital. The combination of these two activities allows for a significant degree of attending-level responsibility, which adds greatly to the overall experience. As a fellow, monthly lecturers to the rotating medical students are part of the responsibility, as are one or two Grand Rounds sessions per year.

Research Opportunities: Research and teaching opportunities are also available. 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, microvascular free flap surgery, and endoscopic and open cranial base surgery. 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 promises to be an important advance in the management of patients with head and neck cancers, and our fellows will be the first fully trained robotic surgeons. It is our opinion that this will create an immediate clinical and research nurse 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.

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
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Email: ferrisrl@upmc.edu
Charmaine D. Wallace (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 Surgery	Neuroradiology Oncology	Medical Oncology
Robert L. Ferris, MD, PhD	Barton F. Branstetter, MD	Julie Bauman, MD
Jonas T. Johnson, MD	Tanya Rath, MD	James Ohr, MD
Jennifer R. Grandis, 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		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 an 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. 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 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. More information is available on request.

Careers of Former Fellows:

Aijaz Alvi, M.D.-Associate Professor, Mt. Sinai Hospital, Chicago
Johannes Fagan, M.D.-Chairman, Groote Schuur Hospital, Cape Town, South Africa
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.-Associate Professor, Johns Hopkins
Stephen Lai, M.D., Ph.D. Associate Professor, MD Anderson Cancer Center
Paul Leong, M.D.-Fellow in Facial Plastic & Reconstructive Surgery, Oregon Health & Science
Daniel Nuss, M.D., Professor and Chairman, LSU
Bert O'Malley, M.D.-Professor and Chairman, University of Pennsylvania, Philadelphia
Karen Pitman, M.D.-Professor, University of Mississippi Medical Center, Jackson
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.-Assistant Professor, LSU Medical School
Lee Zimmer, M.D.-Assistant Professor, University of Cincinnati, Cincinnati, OH
David Cognetti, MD- Assistant Professor -Jefferson Medical College
Brain J. Park, M.D. Clinical Instructor in Otolaryngology 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 Prof., Consultant, National Univ. Health System, Singapore
Vikas Mehta, MD, Assistant Professor, LSU Health Shreveport

University of South Florida College of Medicine

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Chairman of Department: Thomas V. McCaffrey, M.D., Ph.D.

Faculty Involved with the Fellowship:

Alec Beningfield, M.D.
Paul K. Boyev, M.D.
Robert Deconti, M.D.
.Kathy L. Hall, M.D.
Judith McCaffrey, M.D.

Thomas V. McCaffrey, M.D., Ph.D.
Tapan Padhya, M.D.
Mark T. Tabor, M.D.
Andrew Trotti, M.D.

Director of Research: Bernd Sokolowskim, Ph.D.

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 and reconstruction. Major components include head and neck ablative surgery, endocrine surgery including parathyroid experience, open and endoscopic skullbase procedures, and major reconstruction using microvascular techniques. Both clinical and basic science research opportunities are available, and fellows are expected to complete one research project during their fellowship.

Eligibility: The University of South Florida Department of Otolaryngology offers a one-year fellowship for physicians who have completed their Otolaryngology residency training, and who have passed or are eligible for the American Board of Otolaryngology Examination. This is a one-year fellowship designed to expose the fellow to a comprehensive head and neck experience in order to prepare the fellow for an academic career.

Duties and Responsibilities of Trainees: During the twelve-month rotation, trainees would be primarily responsible for the care of all head and neck patients treated at the Moffitt Cancer Center through the head and neck surgical service. This includes clinical evaluation, tumor board presentation, treatment planning and ultimately treatment and post op follow-up. The Fellow should expect to finish with between 250 and 300 cases for the year, either as primary surgeon, or under the guidance of the attending physicians. Fellows would also be expected to be involved in all of the microvascular reconstructions being done through the department and should expect to

be involved in 50 to 70 free flap cases including the associated resections throughout the year. The fellow will also conduct their own general otolaryngology clinic one half day a week and be expected to book their own cases for that clinic. The fellow would also be expected to participate in cases performed at the Tampa General Hospital and James A. Haley Veterans Hospital as well. Rotations through Medical Oncology and Radiation Oncology would be available to the fellow also. Fellows would also be expected to participate in at least one research project to be submitted to a peer review journal for possible publication.

Supervision, Teaching and Call: Fellows would be expected to be involved with resident teaching and supervision throughout the fellowship. This would extend from taking residents through cases later in the fellowship to being involved in lecture didactics for the residents and medical students. This is an integral part of the fellowship and prepares the fellow for teaching on the attending level. Finally the fellow should expect to be on call for 2 to 4 one week long stints covering trauma at the Tampa General Hospital throughout the year.

Strengths: The head and neck fellowship is primarily based out of the Moffitt Cancer Center in Tampa, Florida and to a lesser extent, Tampa General Hospital and the James Haley VA Hospital. Moffitt is a nationally recognized cancer center that primarily sees patients throughout the state of Florida and the Southwest United States and is beginning to establish a national and international reputation. 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 as well. The Head and Neck team has their primary appointment through the University of South Florida College of Medicine and also practices out of the Tampa General Hospital. Tampa General Hospital is a 877 bed tertiary care and Level I trauma hospital serving the greater Tampa area as well as the rest of Southwest Florida. The Department sees about 400 head and neck patients and performs approximately 1,800 procedures per year through the Tampa General Hospital.

University of Toronto

*University Health Network (Toronto General Hospital/Princess Margaret Hospital),
Mount Sinai Hospital, Sunnybrook, Women's College Health Sciences Centre.*

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Chairman of Department: Patrick J. Gullane, M.D.

Faculty Involved with the Fellowship:

University Health Network

Dale Brown, M.D.
Ralph W. Gilbert, M.D.
David Goldenstein, M.D.
Patrick J. Gullane, M.D.
Jonathan Irish, M.D.
Lorne Rotstein, M.D.

Mt. Sinai Hospital

Jeremy L. Freeman, M.D., F.A.C.S., F.R.C.S.C.
Ian Witterick, M.D.

Directors of Research:

Sylvia Asa, M.D. at the Princess Margaret Hospital
Shereen Ezzat, M.D. at Mt. Sinai Hospital
Suzanne Kamel-Reid, M.D. at the University Health Network
Fei-Fei Liu, M.D., at the University Health Network

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

PROGRAM DESCRIPTION:

Overview: The University Health Network (Toronto General Hospital/Princess Margaret Hospital) and Mount Sinai Hospital are the teaching hospitals of the University of Toronto. Over the past 15 years, the University of Toronto has developed a highly integrated multidisciplinary Head and Neck Fellowship Program. 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 in 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 four 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.

Seven hundred new cases of head and neck squamous cell carcinoma are evaluated in the program per annum. One thousand major procedures are performed each year within the 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 fifty thyroid procedures are carried out by the staff.

The majority of head and neck cases in the Toronto region are seen in the multidisciplinary facilities of both the University Health Network (UHN) and Mount Sinai Hospital. 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 two-year fellowship program, the clinical rotations include the University Health Network (UHN) and Mount Sinai Hospital. There are three fellowship positions available per year. The rotation also included electives in radiation oncology, medical oncology, and a wide assortment of basic science and clinical conferences.

The duties of the Head and Neck Oncology Fellowship are as follows:

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 one, if not two, basic science projects and at least three clinical-oriented research projects that results in peer-reviewed publications.
5. Attend weekly interdisciplinary Tumor Board Rounds at The University Health Network and Mt. Sinai Hospital.
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 and Mt. Sinai Hospital.
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: Neal D. Futran, M.D., D.M.D.
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Faculty Involved with the Fellowship:

Neal D. Futran, M.D.	Kris Moe, M.D.
Peter Capell, M.D.	Michael Mulligan, M.D.
Marc D. Coltrera, M.D.	Upendra Parvatheni, M.D.
Robert Dalley, M.D.	Robert Rostomily, M.D.
Keith Eaton, M.D.	Jeffrey Rubenstein, D.D.S.
Joseph Ghodke, M.D.	Daniel Silbergeld, M.D.
George Laramore, M.D.	Lawrence True, M.D.
David Mankoff, M.D.	Ernest A. Weymuller, M.D.
Renato Martins, M.D.	Douglas Wood, M.D.
Eduardo Mendez, M.D.	Eugene Zeiler, M.D.

Director of Research: Edwin W. Rubel, Ph.D.

Other Parallel Fellowships: Laryngology, Facial Plastic Surgery

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

PROGRAM DESCRIPTION:

Objectives: The program is designed to provide advanced clinical training in extirpative surgery, microvascular reconstruction, and skull base surgery. 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 blocks, including surgical oncology and microvascular reconstruction, skull base surgery, radiation oncology, and medical oncology. The fellow will be exposed to surgical pathology, prosthetics, and speech rehabilitation. For two-year fellows, the one-year research block is free of significant clinical responsibility. As of 2002, the AHNS grants certification after one year of clinical fellowship. At the University of Washington, candidates have the option of one or two-year fellowships. A full year of research is included in the two-year fellowship.

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. Participation in microvascular reconstruction is a major component of the clinical experience. The fellow will also have one half-day of clinic per week.

Research Opportunities: This training program is intended to foster the fellow's evolution as a clinician investigator. As such, research 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 Department Research Committee. The Research Committee will continue to critique and monitor the progress of the fellow's research project.

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 350 major head and neck resections per year, including 80 to 100 microvascular reconstructions and skull base surgery. The fellow is an integral part of this team. The Department of Radiation Oncology treats 575 new cancer patients per year and is one of three in the United States with neutron therapy capability. In conjunction with Medical Oncology, we are involved in various chemo-radiation protocols. 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 involved institutions expect a substantial increase in cancer patient volume.

Careers of Former Fellows:

Marc D. Coltrera, M.D., Professor, Otolaryngology-Head & Neck Surgery, University of WA
Maek El-Deiry, M.D., Assistant Professor, Otolaryngology-Head & Neck Surgery, University of South Florida

T.J. Gal, M.D., Head & Neck Surgical Oncologist, Wilford Hall Air Force Med. Center

Mark Izzard, M.D., Assistant professor, University of Auckland, New Zealand

Steven Shimotakahara, M.D., Private practice

Brendan Stack, M.D., Professor, Otolaryngology-Head & Neck Surgery, University of Arkansas

Marita Teng, M.D., Assistant professor, Mt. Sinai Hospital/Elmhurst, New York

Douglas Villaret, M.D., Associate professor

Trad Wadsworth, M.D., Assistant professor, Otolaryngology-Head & Neck Surgery, Eastern Virginia University

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George H. Yoo, M.D.		
Robert H. Mathog, M.D.		
Ho-Sheng Lin, M.D.		
Adam Folbe, M.D.		
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Radiology	Pathology	Primary Research Mentors
Imad Zak, M.D.	Wael A. Sakr, M.D.	Fazlul H. Sarkar, Ph.D.
Natasha Robinette, M.D.	Fulvio Lenardo, M.D.	Wei-Zen Wei, Ph.D.
		Zhengqing Hu, Ph.D.
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		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 (1 or 2-year) position.

PROGRAM DESCRIPTION:

The Head and Neck Fellowship at Wayne State University was established in 1991. 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

independent 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 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. The 2008-2010 fellow performed close to 800 major surgeries.

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 along with protected time dependent 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, of course, microvascular reconstruction. In addition the fellow will have exposure to all aspects of drug development from phase I to phase III trials. The only superconducting cyclotron with intensely modulation capability in the United States today is based at the Karmanos Cancer Institute. Research continues to the role of neutron therapy in the head and neck cancer patient population along with exploration of the role of radiosensitizers and radioprotectors. 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.

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