



THE MICHIGAN DIFFERENCE

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NEWS AND NOTES

ISSUE 4 • WINTER 2012



Auld Lang Syne

As you may recall, Robert Burns wrote the Scottish poem Auld Lang Syne, and it seems fitting to mention it not only at this time of year, but also as I announce my real retirement this time! Traditionally used to celebrate the start of the New Year or as a farewell or ending, Burn's song begins by asking a rhetorical question as to the value of remembering old times and calls us to remember long-standing friendships. Indeed that is exactly what this position has embraced, and yes – I hope we all agree, it has been fun and has value! Some old times are never forgotten, and those times and the people in them are a part of who we each are, and part of what we will become collectively. Amidst all this are coming and goings, beginning and endings... transitions – hmm, that's the preferred word. Anyway, when Carol hired me in June 2009, we had agreed on a 2-year part-time position. Time has flown by, and somehow that time has passed! Thus I share with you my retirement letter to Dr. Bradford:

Executive Officers of the University of Michigan Health System: Ora Hirsch Pescovitz, Executive Vice President for Medical Affairs; James O.Woolliscroft, Dean, U-M Medical School; Douglas Strong, Chief Executive Officer, U-M Hospitals and Health centers; Kathleen Potempa, Dean, School of Nursing

Regents of the University of Michigan: Julia Donovan Darlow, Laurence B. Deitch, Denise Ilitch, Olivia P. Maynard, Andrea Fischer Newman, Andrew C. Richner, S. Martin Taylor, Katherine E. White, Mary Sue Coleman, ex officio

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Dear Carol,

Indeed it is with mixed emotions that I remind you of my plan to retire on December 14, 2011. In my nearly 30 years at UM, I have always considered Oto to be my "home," and feel particularly blessed that I am finishing up my working career here. Having worked in several other units during my UM tenure, I can assure you that this is truly a unique Department – unparalleled in the spirit of compassion, conscience, and camaraderie that abounds among this exceptional group of clinicians, trainees, and staff. I have been proud to have heard this from many patients and colleagues as well, so it is indisputable!

I smile broadly as I think of my uncanny "re-landing" here...headed for retirement nearly three years ago, and then you called! What tremendous fun it has been to come back and see all the old timers, you in your new role as Chair, meet the new folks, see how the Department has grown, etc. To be able to rejuvenate relationships with our faculty, staff, alumnae, friends, and supporters has been such incredible fun – more like a party than "work" some days! And yes – although I admittedly am friendly and a "people person," I truly had no real experience at alumnae relations, newsletters, marketing, or philanthropy. So although I was a bit nervous at the beginning, I have savored the challenge in developing these skills, and am so appreciative of your willingness to take a risk. Moreso, I am deeply grateful for your faith and confidence in me as we "grew" this position together. I have learned and loved much!

That said, I am excited now to have more time for several volunteer interests, my aging mother and our adorable grandchild, "getting dirty" in my garden, competitive tennis, and travels with my husband. We are avid campers and bikers, and look forward to many "active" adventures.

Again, heartfelt thanks for all that is "Oto." My work here has been sheer joy, and know that I will keep the Oto family close to my heart and look forward to remaining involved in any way that might be helpful.

With deep appreciation,
Becki

Editor's Note: Although this newsletter issue is primarily dedicated to our new pediatric clinic and the new Mott Hospital, I would be remiss if I didn't brag about the incredible and persistent achievements of our research faculty at the Kresge Hearing Research Institute. They continue to be at the forefront of ground-breaking discovery.

BE A PART OF OUR PROGRESS

Philanthropy is a vital resource that allows the Department of Otolaryngology–Head and Neck Surgery to do more teaching and learning and to transfer ground-breaking research into life-saving clinical applications. We rely on private support to help us with this vital work. If you would like to make a gift online, or if you would like to learn about the many opportunities for giving, please visit www.med.umich.edu/oto/giving/.

Amanda Kay Thatcher
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Thank you for your confidence in us and for your support of our work. There is no more gratifying gift than one that improves the health and health care of our patients.



Message From The Chair

I must confess that as I complete my third year of leading this extraordinary department, it truly has become both a whirlwind and a labor of love. Clearly, wonderful and remarkable things are happening all around us – each and every day!

Most notably, the glorious new C.S. Mott Children's Hospital and Von Voigtlander Women's Hospital recently opened, and thus we have moved into our beautiful new pediatric otolaryngology and audiology clinics. We have launched our new Pediatric Audiology program, and will be doing both diagnostic testing and hearing aid rehabilitation at this location. We have new multi-disciplinary programs in genetic hearing loss, pediatric sleep apnea, and pediatric upper aerodigestive tract disorders, and are confident that extraordinary medicine, teaching, and discovery will happen here.

On September 16th, we hosted our inaugural Pediatric Otolaryngology Symposium and welcomed back to Ann Arbor numerous alumni, colleagues, and friends. Amelia Drake, M.D. (residency training completed 1987) honored us as keynote speaker and distinguished

Lamberson Lecturer. The day was truly special for me and for all attendees. I encourage you to "friend" us on Facebook where you will find some terrific pictures that will hopefully bring back fond memories of this time spent in Ann Arbor (<http://www.facebook.com/MichiganOtolaryngology>).

In closing, I remind you that we are in the home stretch of completing both the Merle Lawrence and Charles J. Krause Endowed Professorships. Please consider a gift to both honor and remember these extraordinary past leaders of our Kresge Hearing Research Institute and the clinical Department. These giants in our specialty, among others, truly established the foundation for greatness here by building one of the finest otolaryngology training programs in the country. These professorships will allow us to not only honor them in perpetuity, but to continue building upon this legacy to create the future of ear, nose and throat care through discovery and education.

Warmly,

Carol R. Bradford, MD
Professor and Chair

News From The Chief

This is an exciting time for the Division of Pediatric Otolaryngology as we make our long-anticipated move into the new C.S. Mott Children's Hospital and Von Voigtlander Women's Hospital. After nearly 10 years of planning, we are thrilled to have new state-of-the art facilities in which to take care of our patients. Our new clinic is much larger and includes 5 new audiology booths. Our surgery schedulers will no longer have to meet with patients in the former supply closet, and we will actually have a team room for clinic providers. Having endured many years of bed shortages and OR time crunches, we are looking forward to increased capacity in the intensive care units and to performing surgery in our beautiful new operating rooms. We encourage everyone to come and take a tour! To celebrate the new hospital opening, we had our first-ever pediatric otolaryngology symposium, masterminded by the unflappable Becki Spangler (retiring Alumni Relations Director). It was wonderful to have so many of our distinguished alumni, former faculty, residents, and fellows in attendance - many of whom had not returned to UM since turning in their pager and badge years ago! We are grateful to Pat Warner, Executive Director of Mott Hospital, who gave us an exciting virtual tour of the new hospital, and I appreciate the enthusiastic support of our Chair, Dr. Carol Bradford, who helped make this event a resounding success.

It is truly a privilege to work with our outstanding faculty, whose diverse talents include wide-ranging clinical expertise, distinguished scholarship and academic achievements, dedicated commitment to training residents, students, and fellows, and exceptional service to local, national, and international organizations. Charlie Koopmann MD is nationally recognized for his expertise in practice management and payment policy, having served as a representative to the AMA-RUC (Relative Value Scale Update Committee) for over 15 years. Glenn Green MD is a true renaissance man who brings an innovative surgical



approach to airway disorders and longstanding clinical expertise in craniofacial syndromes and hereditary hearing loss. We all benefit from the practical knowledge and "real-world" clinical experience that Pete Passamani MD brings us from his years of experience in private practice. Marc Thorne MD is pioneering the use of sialadenoscopy for pediatric salivary gland disorders, and both Dr. Thorne and David Brown MD, are investigating the uses of simulation for surgical education. We are also grateful to Susan Garetz, MD, board-certified in Sleep Medicine, for leading our efforts to develop a Multidisciplinary Pediatric Sleep Clinic. This collaboration between Pediatric Otolaryngology, Pediatric Neurology, and Pediatric Oral and Maxillofacial Surgery will reach "beyond adenotonsillectomy" to focus on children with sleep apnea and upper airway obstruction who require further intervention. Our program in Pediatric Airway, Voice, Communication and Swallowing Disorders has always been a virtual one due to space constraints; we now look forward to establishing this multidisciplinary clinic within our division. David Brown MD, Medical Director of the Pediatric Otolaryngology ACU (Ambulatory Care Unit) is leading this effort, drawing on his experience leading a similar program in Wisconsin.

Expert peds tracheotomy care is provided by Nurse Practitioners Kristi Vander Hyde and Diane Kemp, and Physician Assistant

Tina Cordero. Pam Kuzel ably maintains our trach database. Speech pathologist Lynn Driver (MA, CCC-SLP) has been an invaluable colleague for many years with her expertise in pediatric voice and speech and swallowing - particularly for children with tracheotomies and behavioral issues.

Alex Arts, MD from our Otolaryngology and Neurotology division will also see pediatric patients with otologic disorders in the new clinic space. Audiology services will include behavioral audiometry, auditory brainstem response testing, hearing aid fitting, and a new program for dispensing hearing aids. Meanwhile, I am grateful to Peds ACU audiologists Katie Kuboushek AuD and Kristy Winters AuD for so expertly coordinating our audiology services the past several years, and for their ideas and vision about our new audiology needs. We plan to feature more about pediatric audiology programs and staff in the next newsletter. The new Multidisciplinary Hearing Loss Clinic will include our faculty and many new audiology staff, as well as speech pathologists Ellen Thomas (MA, CCC-SLP) and Kelly Starr (MA, CCC-SLP). Patients will also have the opportunity to obtain genetic testing and to participate in genetic research.

With help from Marc Thorne MD, Associate Residency Program Director, we have applied for ACGME accreditation for our pediatric otolaryngology fellowship, now in its 4th year. Along with our division clinical faculty, the participation of the Director of Pediatric Audiology Jaynee Handelsman, PhD and Cochlear Implant Program Director Teresa Zwolan, PhD will greatly enhance the educational opportunities for our fellows.

I would like to thank all of our amazing staff for their daily dedication to the care of children and their families, and most recently for their thoughtful advice and herculean efforts in making the transition to the new clinic run smoothly. Huge thanks to Opera-



*"I'm very excited
for this opportunity
and to be part of
this exceptional department.
I look forward to meeting
and working
with everyone here."*

We are pleased to announce

the newest member of our department, **Amanda Thatcher**, as our Communications Specialist. This role is an expansion of our alumni relations coordinator position, which was pioneered by the recently retired Becki Spangler.

Amanda's role will promote departmental initiatives and accomplishments, as well as support our alumni relations efforts. Her responsibilities will include event planning, publication development, website management, implementing social media tactics and introducing new, creative communications and marketing methods to "get the word out" about the great work we do every day.

Amanda graduated from Michigan State University (2007) with a B.A. in journalism and external specialty in political science. Upon graduation, she and her husband, Aaron Thatcher, moved to Columbus, Ohio, where she worked as the communications director for the Bishoff Financial Group. Amanda then took her skills to the healthcare field, where she worked as a communications and marketing program manager for The Ohio State University Medical Center's department of nursing. In June 2011, Amanda and Aaron moved to Ann Arbor for Aaron's otolaryngology residency. Once in Ann Arbor, Amanda began a short-term appointment providing communications support for the University of Michigan North Campus Research Complex. She is excited to use these experiences to advance our department's promotional and alumni relations efforts.

When Amanda isn't working, she enjoys spending time with Aaron and their new baby girl, Sophia. They look forward to discovering Ann Arbor as a family of three.

We are thrilled to welcome Amanda to our team and look forward to the knowledge and expertise she will contribute.

Awesome Accomplishments!

We are proud of the many honors, awards, and accomplishments of so many of our faculty and staff who work tirelessly and joyfully to make a great team and to make our Department the top-notch one that it is. Read on for these important reflections of our collective work and progress.

Steve Chinn, MD (HO IV) was selected as a resident member of the ACGME Residency Review Committee for otolaryngology.

Susan Shore, PhD (Kresge Hearing Research Institute) has been recommended by the Board of Regents and then duly appointed to the Medical School Executive Committee for a three-year term. The governing body of the Medical School, this committee advises the Dean and is charged with formulating educational and instructional policies for faculty consideration. This is quite an honor – congratulations Susan! We know you will be excellent in this role.

Garrett Griffin, MD, Clinical Lecturer and our T32 Research Fellow, has received a grant from the Clinical Simulation Center here to develop a moderate-fidelity neck dissection simulator, to be available for use in July 2012. The goal of the simulator will be to allow specialty surgery residents to interact with relevant anatomy and to practice the steps of a procedure prior to operating on a live patient. The Center offers free training programs to all healthcare professionals from UM for maintaining and developing critical clinical skills.

Steven Telian, MD was elected to serve on the Board of Directors of the American Board of Otolaryngology. The ABO examines and certifies residency graduates who have met the professional requirements of training and knowledge in our specialty.

On October 10th, **Vicki Bennett** was honored for 30 years of service to the University of Michigan (12 in Oto) at the annual staff awards dinner, and **Deborah DeGuire** was honored for her 10 years of service. Vicki serves as Education Coordinator for our residency training program. As an Administrative Assistant Senior, Deb DeGuire supports the clinical staff at the center for Facial Cosmetic Surgery. Congratulations ladies – your loyalty is deeply appreciated!

Paul R. Kileny, PhD, professor of otolaryngology and director of audiology and electrophysiology, has been given the highest honor given by ASHA (the American Speech-Language-Hearing Association) for his long and accomplished career in clinical audiology. Dr. Kileny received the Honors of the Association award at the recent ASHA convention in San Diego. Kileny graduated from the audiology program at the University of Iowa, where ASHA was founded. Paul, warmest congratulations on this wonderful recognition!

Debbie Colesa, chief technician and Research Laboratory Specialist in Dr. Bryan Pfingst's laboratory (Kresge Hearing Research Institute), is the recipient of this year's Jody C. Ungerleider Memorial Award for outstanding contributions to the humane care and treatment of animals used in biomedical research. Way to go Debbie!

Professor **Lawrence Marentette, MD** was awarded the John Dickinson Teacher Award at the September meeting of the American Academy of Facial Plastic and Reconstructive Surgery (AAPRS). The award honors a fellow or member of the Academy for sharing knowledge about facial plastic surgery with effective use of audiovisual aids. Larry used video and Power Point to show his cutting edge techniques in anterior cranofacial/skull base surgery.

Two of our ambulatory care satellite units have received top patient satisfaction scores in the spring 2011 patient satisfaction survey. Our Center for Facial Cosmetic Surgery and the Vocal Health Center, both located in Livonia, are fine examples of our “patients first” ethic and service. Congratulations to all for making our patients so happy!

The Department celebrated Halloween by making it “Employee Appreciation Day.” A wonderful catered lunch and creative décor made for a festive occasion. **Tara Ford, MA** created the winning pumpkin, assisted by the whole Medical Assistants team; **Sue Gorman, Bridgette McGlinnen, Theresa Miller, Michelle Moll, Sue Nichols, Tammi Sanderson, Samantha Southwell, Jenny Stanley, and Staci Strable**. Admin Assistant **Sarah Judson** took 1st place in the pie-baking contest with her wonderful coconut custard, followed closely by **Dr. Carol Bradford** (2nd place, apple pie) and **Dr. Paul Kileny** (3rd, pecan pie).



Once again, the Otolaryngology – Head and Neck Surgery Resident Football Team was successful in defeating the Department of Neurosurgery in a close 10-9 victory! This flag football game has become a fond tradition among resident colleagues from other disciplines. Go team OTO!

tions Manager Elly Samuels and Clinic Manager Rob Valdes, as well as front desk staff Heidi Wilson, Lorene Nolan, and Kim Creaney. Also to Medical Assistants Angela Amy and Stephanie Rau, RNs Aurora Stienstra and Kate Michael, and administrative assistants Sonya Fritz and Mary Anne Stoner (who logged many hours in her hard hat and safety goggles giving innumerable tours). Special thanks to surgery scheduler Pam Keith-McGee, who provided critical assistance during Elly's maternity leave.

We have an immense responsibility and enjoy a great privilege when parents entrust the care of their children to us. The rewards of our work are beautifully expressed in this favorite quotation of Charles Stewart Mott, the philanthropist whose gift helped found Mott Hospital in 1969: “We approach all problems of children with affection. Theirs is the province of joy and good humor. They are the most wholesome part of the race, for they are the freshest from the hands of God.”

Wishing you joy and blessings in the year ahead,

Marci M. Lesperance, MD
Professor and Division Chief,
Pediatric Otolaryngology

Department Hosts Inaugural Pediatric Otolaryngology Symposium



Pictured L to R: Ilaaf Darrat, John Babyak, David Brown, Jimmy Scott Hill, Bob Weatherly, Amelia Drake, Charlie Koopmann, Susan Garetz, Jill Beck, Anna Meyer, Brian Wiatrak, Duane Hartshorn, Marci Lesperance, Paul Hoff, Marc Thorne, Ron Bogdasarian, Fred Grimmer, David Merrell, Jaynee Handelsman, Joe Taylor, Vivian Wu, Bob Jensen, Ericka King, Carol Bradford, Marc Nelson, Benn Gilmore, Glenn Green, Pete Passamani.

On September 16, 2011, we hosted our first ever symposium dedicated to pediatric otolaryngology, “Updates in Pediatric Otolaryngology,” in conjunction with celebrating the opening of the new Mott Children’s Hospital and our new space there. Our all-day lectureship featured 13 nationally known pediatric otolaryngologists, all of whom are alumni or former faculty from our department. Our keynote speaker and Distinguished Lamberson Lecturer was alumna Dr. Amelia Drake, Distinguished Professor of Otolaryngology and Executive Associate Dean of Academic Programs at the University of North Carolina at Chapel Hill.

A crowd of nearly 100 was informed, educated and inspired by an interesting variety of talks targeted for a diverse audience of clinical staff, trainees, and referring physicians.

For many attendees, the variety of presentations helped them realize the wide range of challenging problems that pediatric otolaryngologists face each and every day. Our own faculty, trainees, and staff who attended savored the opportunity to reconnect with colleagues and old friends. That evening, we filled the lovely Mercy’s Restaurant and continued their reminiscing and story-telling well into the night. The weekend culminated with the Michigan football game, where the UM Wolverines trounced the Eastern Michigan University (EMU) Eagles 31-3.

We are hoping to host this type of event at least every other year, if not every year. If you have positive thoughts or ideas about this or suggestions for funding such a tradition, please let us know!

SAVE THE DATE

- **ARO Midwinter Meeting**
February 25-29, 2012
San Diego
- **Temporal Bone Course**
March 12-16, 2012
Ann Arbor
- **Charles J Krause Lectureship and R-5 Graduation**
Friday, June 22, 2012
- **Triological Society Annual Meeting**
April 18-22, 2012
San Diego
- **COSM Spring Meetings**
April 18-22, 2012
San Diego
- **AHNS 8th International Conference on Head & Neck Cancer**
July 21-25, 2012
Toronto
- **Michigan Work Society Meeting**
November 9-10, 2012
Ann Arbor
- **2012 Kemink Memorial Lecture**
Friday, November 16th
and Saturday, November 17th, 2012
Distinguished Guest Lecturer:
Dr. Carl Heilman,
Chief of Neurosurgery
at Tufts-New England Medical Center

Our Peds Oto Team



Marci M. Lesperance, MD
Division Chief

Dr. Lesperance is a Professor of Pediatric Otolaryngology and has served as Division Chief since 2003. She received her medical degree and completed her residency training at the University of Michigan, and did fellowship training at Children's National Medical Center in Washington DC and at the National Institutes of Health (NIH). Her clinical interests include pediatric ear disease, hearing loss, and craniofacial anomalies. Her research is focused on identifying genes that cause hereditary hearing loss, and translating genetic research into clinical practice. Dr. Lesperance has directed the Pediatric Otolaryngology Fellowship since 2008, and is also the Director of the Advanced Research Training in Otolaryngology Program, which is supported by a T32 grant from NIH. She currently serves as Secretary for the American Society of Pediatric Otolaryngology. She is a Senior Examiner for the American Board of Otolaryngology, on the Board of Scientific Counselors for the National Institute on Deafness and Other Communication Disorders, and is on the editorial board for *Archives of Otolaryngology-Head and Neck Surgery*.



David J. Brown, MD

Dr. Brown is Clinical Associate Professor and our ACU (Ambulatory Care Unit) Medical Director, as well as the leader for the Department's diversity initiatives. He is also developing a pediatric aerodigestive disorders clinic. Dr. Brown's clinical practice focuses on adenotonsillar disease, airway disorders, and congenital head and neck masses. His research interests include these areas, as well as an interest in surgical competency and outcomes in children with dysphagia and vocal fold paralysis. He graduated from Harvard Medical School and did his residency training here with us at UM, so we are delighted to have him back on our team as a faculty member! He also represents us well on professional committees, where he serves on the Education Committee and Nominating Committee for the American Society of Pediatric Otolaryngology (ASPO), and in several other capacities for the Academy (AAO-HNS).



Susan L. Garetz, MD, MS

Dr. Garetz graduated from the Yale School of Medicine and then completed both her otolaryngology residency and a master's degree in anatomy and cell biology here at the University of Michigan. She has been a member of our faculty since 1996 and is board certified in both otolaryngology and sleep medicine. Her primary clinical and research interest is the diagnosis and treatment of obstructive sleep apnea – especially the impact of sleep apnea on behavior and neurocognition in children. She is currently the surgical core director of the Childhood Adenotonsillectomy Study (CHAT), an NIH funded multi-site, randomized controlled study on the effects of pediatric adenotonsillectomy for mild to moderate sleep apnea. In addition, she is a member of the International Surgical Sleep Society and Associated Professional Sleep Societies (APSS).



Glenn E Green, MD

Dr. Green received his medical degree at the University of Michigan and did his residency training at Wayne State University. He completed a fellowship in pediatric otolaryngology at the University of Iowa, and joined our faculty in 2003. His clinical interests are complex pediatric airway, hearing and language development, and congenital syndromes. Dr. Green helped pioneer cricotracheal resection and hilar release for airway reconstruction in tracheotomy-dependent children. This procedure has been nearly 100% successful and life-changing for these patients who now live tracheotomy-free. His research interests focus around syndromic and non-syndromic deafness, particularly age-related hearing loss. He serves locally on the Pediatric Critical Care Joint Practice Committee, as well as the Pediatric Otolaryngology Clinical Operations Committee.



Peter P. Passamani, MD

Dr. Passamani is a Clinical Assistant Professor who earned his medical degree and did his otolaryngology residency training at the University of Michigan. His practice focuses on endoscopic sinus surgery and chronic ear disease, and he practices both at the main Mott campus as well as the Livonia Center for Specialty Care. Dr. Passamani helps train residents and fellows rotating through pediatric otolaryngology inpatient and outpatient settings, and he sits on the Pediatric Otolaryngology Outpatient Committee.

COMINGS AND GOINGS

■ **Cynthia Bender** retired on August 31st, but continues to work as a temporary on an as-needed basis. Cynthia served the UM for 31 years, all of them in Otolaryngology! She is enjoying her "phased" retirement, and although she looks forward to full retirement, we are happy to still have her in our clinic 1 to 2 days each week.

■ A warm welcome to **Margot Beckerman, AuD**, who will be our new Assistant Director of the Vestibular Testing Center. Margot has been the audiology program manager at Allegiance Hearing Center for 11 years, so she brings extensive managerial and operations experience with her. She has initiated collaborations between audiology and physical and occupational therapy that allow for comprehensive evaluation and management of patients with dizziness, imbalance, and fall risk. We are excited for all that Margot will bring to this position, knowing she will be a great asset to our Department.

■ **Harold Gatewood** has accepted a position in Chicago, here he will work for the Advocate Medical Clinic. We are grateful for Harold's 12 years of wonderful service to Oto, and though we will miss him, we celebrate this new opportunity with him. Best wishes Harold!

■ **Ben Wightman, AuD, CCC-A** has joined our audiology division in the adult clinic. A graduate of Northwestern's clinical doctoral program, Ben has previous experience in the VA system. He has expertise in diagnostics and personal amplification, with a clinical interest in tinnitus. Welcome, Ben!

■ We welcome **Kate Michael, RN** to our Peds Oto team. Kate comes with considerable Mott experience, where she currently serves on the Mott 6 Leadership Team and Pediatric Ethics Committee. We will all benefit from Kate's expertise as we move into our new Mott space.

■ We are pleased to have added a second Surgery Scheduler for Pediatric Otolaryngology to our growing team. With a long tenure in the health system, **Laura Jamnick** comes to us from Internal Medicine, where she was an experienced patient services associate and surgery scheduler. Welcome aboard Laura!

■ **Stephanie Rau, MA** has joined the pediatric team of our Ambulatory Care Unit (ACU). We are grateful for the experience she brings from working in an external medical office, and we look forward to orienting her to our new pediatric clinic.

COMINGS AND GOINGS

■ We are pleased for **Ellen Locke**, who has recently left her administrative position here in order to pursue her medical assistant education program. It is the wonderful role models of our own Medical Assistants and the impact they have on our patients that propelled Ellen to this career change. Best of luck, Ellen!

■ **Pat Milkovich** has joined us as an incoming Call Center Supervisor. Pat brings extensive customer service experience to us, which will help her in supervising all agents and managing the general operations of the call center at the North Campus Administrative Complex. Welcome, Pat!

■ We are delighted to welcome **Katie Sowards** as another new Call Center staff. Katie has been working at St. Joseph's Hospital for the past year as a patient service representative. She is an experienced customer service agent and will be a great asset to both our adult and pediatric clinics. Glad to have you join us, Katie!

■ After 13 years of loyal service to our Department, Administrative Assistant **Janice Capler** is retiring. Janice has supported a number of our clinical faculty over the years, but is now ready to spend more time with her husband and grandkids, travel, and, she says, ...Become a snowbird!" Best wishes Janice!

■ **Amy Buege**, currently one of our capable surgery schedulers, has accepted a promotion to become our newest administrative assistant. Amy will support Drs. Divi, McKean, McLean and Rizvi. We know that her many skills with patients will suit her beautifully in her new role. Congratulations, Amy!

Oto Outreach – Staff Member Honored by Teen Center



On October 18, 2011, Patient Services Associate DiOnna Jordan was a special honoree at the Ann Arbor Neutral Zone's 13th birthday celebration. Founded in 1998 by DiOnna and several friends, NZ is a diverse, youth-driven teen center actively focused on promoting personal growth and self-esteem for teens through artistic expression, ideas exchange, and opportunities for community leadership. As a teenaged student in 1998, DiOnna was busy – captain of the cross country team, on the basketball team, and vice-president of the senior class. In her “spare” time, she was also an active member of the Ann Arbor Area Community Foundation’s Youth Council, through which she and her friend Emily Dengiz lobbied and made presentations to area organizations, asking for their support in funding a teen center. More than just a hangout for after school and on weekends, they wanted a place that would promote new friends, new ideas, and new understanding among teens and would teach them new skills as well – all in a teen-driven environment. The founders wrote a mission statement, submitted a grant, and with the help of parents and friends, an old warehouse was renovated and the Neutral Zone was born! From a handful of teens back then, attendance is now over 18,000 visits a year, and NZ has evolved into not just Michigan’s most successful teen center, but one of the few spaces of its kind in the country. NZ offers in-house teen concerts, free tutoring and academic support, and classes in community leadership, literary arts, music, and visual arts.

On the occasion of DiOnna’s recognition, distinguished guests and speakers included Michigan’s First Lady, Sue Snyder, and Kenneth Fischer, President of the University Musical Society. As they both attested, the evening was to honor those who devoted their time and talents to make something amazing happen. “Every day, the feet of hundreds of teens pound the Neutral Zone’s floors. Some show up simply to find a place to be themselves, some to pursue an artistic vision, and some to lead their community through big changes. All of them show up to make a difference.” We are so very proud of DiOnna for making this happen, and for her continued work with the Neutral Zone. She continues to serve NZ as active member of freNZ – a group of young professionals who cultivate financial and volunteer supporters to contribute to Neutral Zone with their time, talents, and money. Congratulations DiOnna on this wonderful and richly deserved honor, and “Thanks!” on behalf of all the youth in our community.

COMINGS AND GOINGS

■ **Kristen Kowalski** has joined our pediatric audiology staff and will be a welcome addition to our needs in the new clinic and hospital. While Kristen’s skills cover a broad range of audiology practice, she is passionate about her desire to work with children. Welcome, Kristen!

■ **Sonya Fritz** joined our team in Peds Oto as an administrative assistant, where she will support the pediatric ambulatory care unit and pediatric audiology. Sonya received a BS degree in special education and hearing impairment from Eastern Michigan University so her unique qualifications will suit her well in this role. Welcome aboard, Sonya!

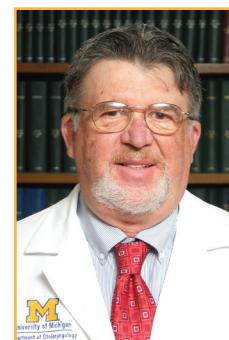
■ **Rob Valdes** has transitioned to Pediatric Otolaryngology Clinic Manager – a newly created position concurrent with our move to new space in the new C.S. Mott Children’s Hospital. Rob has a long and appreciated history in our department so we know this new position will suit him perfectly!

■ **Dianne Hoehn** has joined our Audiology Division as an Administrative Assistant, where she supports the Director (Paul Kileny, PhD) and Assistant Director (Bruce Edwards, AuD) of Audiology, as well as the Director of the Cochlear Implant Program (Theresa Zwolan, PhD, CCC-A). Welcome aboard, Dianne!

■ **Amanda Weasel** joins the team at the Hearing Rehabilitation Center, where she will serve as Referral and Processor Coordinator. The skills she developed in her prior role as Patient Services Assistant make her well-suited for this newly created position where she will obtain procedure and insurance authorizations for cochlear implants. Good luck Amanda!

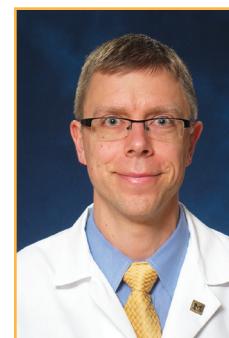
■ We are pleased with 5 new hires to our Adult Otolaryngology Clinic team. **Sharonda Points, Latisha Peters, Pam Cochran, and Jackie Jewel** will help patients check in and out; **Lisa Mac Doug Riddle** will help with surgery and clinic authorizations. As we all know, these folks are the “spokes that turn the wheel” in our clinics, and we are grateful for their knowledge and hard work in serving our many patients.

■ **Emily Cooper**, our department’s financial consultant for nearly 14 years, has retired to join her husband and soak up the Florida sun. Her warm, friendly service will be missed by all, but we are delighted for her as she begins this new phase in her life. Enjoy every minute, Emily!



Charles F. Koopmann, Jr., MD, MHSA, MS

Dr. Koopmann earned his medical degree at Northwestern University and completed his internship, residency, and MS at the University of Iowa. After serving in the US Air Force, he joined the faculty at the University of Arizona, where he was instrumental in starting a residency program in Otolaryngology. Dr. Koopmann joined our faculty in 1986 and served as Chief of Pediatric Otolaryngology until 2003. During this time he received a degree in Health Service Administration from the UM School of Public Health, and has done additional training in biomedical ethics at the University of Washington. Dr. Koopmann is currently Professor and Associate Chair of the Department of Otolaryngology. He is also a charter member of the American Society of Pediatric Otolaryngology. His clinical interests include cleft lip and palate disorders and children’s airway problems, head and neck masses, and sinus disorders. He serves on a host of professional committees, including the Faculty Group Practice Executive Leadership and the Medical School Compliance and Patient Access and Financial Clearance Committees.



Marc C. Thorne, MD, MPH

Dr. Thorne returned to us after completing a pediatric otolaryngology fellowship at Children’s Hospital of Philadelphia. He earned his medical degree at Washington University, and received his Master of Public Health degree from the Johns Hopkins University. His residency training was at the University of Michigan. Dr. Thorne’s clinical interests focus on pediatric otologic disease, cochlear implants, pediatric airway disorders, and salivary gland disorders. He currently serves as Associate Residency Program Director for the Department and Associate Director of the Pediatric Otolaryngology Fellowship Program. He also sits on the Department’s Graduate Medical Education Committee. His research interests focus on clinical outcomes and educational research, including the role of surgical simulation in resident education.



Good Moves!

We are delighted that **Jayne Handelsman, PhD** accepted our offer to become the new Director of Pediatric Audiology. Jaynee has served admirably as the Assistant Director of the Vestibular Testing Center

(VTC) since September, 2002. Although her tenure at the VTC focused on balance disorders, her clinical work prior to coming to Michigan embraced the broad spectrum of audiology practice. She has experience in routine adult and child audiology and electrodiagnostic evaluations, including newborn hearing screenings. Earlier in her career, she provided speech therapy services to children with hearing loss and auditory processing disorders.

Jayne earned her BA in Speech Pathology from the University of Michigan, an MA in Audiology from the University of Kansas, and a PhD in Speech Pathology and Audiology from the University of Kansas. In 2010, she was elected as the Vice President for Professional Practice in Audiology for the 140,000-member American Speech-Language-Hearing Association (ASHA). Clearly, Jaynee brings intellect, energy, enthusiasm, and strong credentials to this distinguished position.

Dr. Handelsman will continue to serve as Assistant Director of the Vestibular Testing Center until her replacement arrives and the transition for the daily operations of the VTC is complete. Now that our Pediatric Otolaryngology division has just made the “big move” to the new C S Mott Children’s Hospital, the Pediatric Audiology Operations Committee will serve in an advisory capacity to Jaynee in her new role.

Jayne stated that, “This is an important time for audiology and all audiologists at Michigan, and I am excited about the opportunity to be involved in the expansion of pediatric audiology services here, as well as facilitating the growth of a cohesive and effective team.”

Congratulations Jaynee! We are excited to begin this new journey with you!



Mott surgeons pioneer procedure for children to lead tracheotomy-free lives

Procedure has the highest success rate in enabling children to speak and lead successful tracheotomy-free lives

Dr. Green's patient Ayonna Green, age 6, is now tracheotomy-free.

Surgeons at the University of Michigan's C.S. Mott Children's Hospital have discovered a procedure to close tracheotomies in children. Thus far, it has been 100% successful! "We've pioneered a way to get the tracheotomy tube out and free children of the care that would have been required over their lifetime, with the added benefit of enabling them to talk," says pediatric otolaryngologist Glenn E. Green, M.D.. "For these children and their families, this is life-changing."

A tracheotomy is used to bypass damaged airways that are the result of motor vehicle accidents, or as a result of premature birth – where kids are sometimes born unable to breathe on their own and need to be on a vent or intubated. About one percent of premature babies receive tracheotomies in order to breathe. A tracheotomy tube is inserted in a child when the airway is too damaged and the child is unable to breathe through the mouth. An opening is made through the neck in order to allow breathing. Children who need tracheotomy tubes to breathe typically live with significant limitations. They have difficulty speaking or are unable to speak at all. They can't swim or engage in water activities. Caring for a tracheotomy is also difficult. Children need frequent suctioning and the tracheotomy tube needs to be cleaned out and changed. Heavy scarring also can occur along the trachea over time, which can lead to other medical complications.

The procedure to reconstruct the airway is two-pronged and involves a cricotracheal resection and a hilar release. A cricotracheal resection is a surgery in which the narrowed, stenotic, or damaged part of the airway below the voice box is removed and the voice box and wind pipe (or trachea) are sewn back together. The hilar release essentially makes additional incisions within the chest to allow doctors to elevate the lower windpipe from the chest up into the neck. Green first tried the procedure on a pregnant woman who had a very damaged airway and whom he was trying to keep

alive until her baby was born. The procedure worked. She and the baby both survived and have gone on to live normal lives. "We're doing about ten major reconstructions a year," says Green about the new procedure. "We would like to let others know what we've learned so that it can be offered to more children. So far we have been extremely successful and have the highest success rate reported for the most difficult problem: long-segment, complete stenosis," Green says.

A study that looked at cases involving this procedure – a reconstruction of the damaged airway – can be found in *Archives of Otolaryngology Head and Neck Surgery* (PMID 20231643). In this study, doctors looked at 16 child patients between January 2004 and December 2008 who had undergone a cricotracheal resection and a hilar release. All of these subjects had a high level of narrowing or obstruction in the trachea. The doctors looked at decannulation and rupture rates to determine the best course of treatment to repair the narrowed or obstructed airway. In all but one case, subjects had successful removal of their tracheotomy tube. The exception was a quadriplegic child who remains on a ventilator and for whom speech was restored.

Six-year old Ayonna Green of Troy, MI was one of the young patients for whom Green was able to free of her tracheotomy tube and whose case was included in this study. Born prematurely and with a very damaged airway, Ayonna's family was told by local doctors they would be unable to do more for Ayonna and that she would more than likely not survive, even with a tracheotomy. The family sought the help of U-M and Dr. Green took her case, operating on her five years ago. She has been able to breathe tracheotomy-free ever since and do most things that a typical child her age can do. "She is in kindergarten, she can swim, she's talking and taking voice lessons to get some volume," says her Dad. "I am so grateful."

Article excerpted from UMHS Newsroom

Dr. Pynnonen Shares Extracurricular Experiences



2011 Cochrane Colloquium participants from left: Peter Hwang MD, Melissa Pynnonen MD, Sujana Chandrasekhar MD and Rich Rosenfeld MD

Having recently returned from the 19th annual Cochrane Colloquium in Madrid, Melissa Pynnonen, MD shares her experience. The Cochrane Collaboration is an international non-profit network of 28,000+ world-wide researchers, providers, practitioners and patients who work in equal partnerships to promote healthcare decision-making based on the best available research evidence throughout the world. Named after British epidemiologist Archie Cochrane, the Collaboration is funded by a variety of sources. Members affiliate themselves to an "entity" based on their interests, expertise, or geographical location, and produce the Cochrane Reviews, which have become the benchmark for high quality information about the effectiveness of health care.

While at the conference, Dr. Pynnonen attended poster sessions, scientific proceedings, and workshops designed to teach systematic review and evidence-based medicine. She learned a new interactive method for having residents review journal articles, using systematic review and meta-analysis so that residents can achieve the learning before actually reading the journal article.

Dr. Pynnonen has also been accepted into the 2-year Robert Wood Johnson Clinical Scholars Program, where she will integrate her clinical expertise with training in program development and research methods in order to help address challenges in the U.S. healthcare system, as well as in community health and health services research. She will also earn a master's degree. Dr. Pynnonen's research project pertains to understanding the determinants and consequences of medical uncertainty in rhinosinusitis care. From her study, she has learned that primary care providers treat the majority of patients with chronic sinusitis, and that they manage these patients quite differently than otolaryngologists, particularly with regard to the use of imaging studies.

We are grateful that we are in a community where opportunity abounds and many of our institution's faculty and trainees are chosen for special study. We are grateful for Dr. Pynnonen's energy in tackling these extracurricular activities in addition to her busy clinical practice, and we wish her much success in these endeavors.



Sudden Deafness Treatment Trial Completed

After seven years of collaboration among 16 academic and community-based otology practices, a large multi-institutional clinical trial has been completed to compare oral versus intratympanic steroid treatment for sudden sensorineural hearing loss (SSNHL). The results have shown comparably effective outcomes for each modality.

The Otolaryngology-Neurotology division at the University of Michigan participated in the design and conduct of this study. Dr. Steven Telian, the principal investigator for our site, notes that this is the best designed and largest treatment trial so far conducted to study this condition. Described in the *JAMA* article *Oral vs. Intratympanic Corticosteroid Therapy for Idiopathic Sudden Sensorineural Hearing Loss* (PMID 21610239), the researchers compared the effectiveness of oral versus intratympanic steroid injections to treat sudden sensorineural deafness. Approximately 2400 patients were screened in order to enroll 250 eligible subjects with sudden deafness. These were randomized to receive either oral prednisone or four injections of methylprednisolone directly injected into the middle ear over two weeks, and then were followed carefully for six months. Direct injection of steroids into the middle ear for sudden deafness has been an increasingly popular treatment modality, and is believed to offer higher concentrations of steroids at the target site. It also has fewer systemic side effects relative to those that are associated with oral steroid use. However, intratympanic injections are more expensive, can be painful, and require repeated clinic appointments with a recovery period after each injection. Although both treatments were safe and generally well-tolerated, some IT patients had pain at the injection site, eardrum perforations, or otitis media.

Interestingly, the study revealed that the outcomes were comparable between these two modalities in restoring hearing to the study participants. Given the study results, the authors conclude that "Overall, intratympanic methylprednisolone was shown to be not inferior to oral prednisone for treatment of idiopathic sudden sensorineural hearing loss.... The comfort, cost, and convenience of oral prednisone are better than intratympanic treatment. Intratympanic treatment is a suitable alternative if there are medical contraindications to oral prednisone."

This study provides important information for primary care physicians and specialists who must evaluate and treat acute-onset hearing loss. The investigators hope that publication of this study in *JAMA* will result in broader recognition and earlier treatment of this disorder by US health care providers, especially given that early treatment is very critical to successful hearing restoration.

I. Rauch et al. Oral vs. Intratympanic Corticosteroid Therapy for Idiopathic Sudden Sensorineural Hearing Loss. *JAMA* 2011; 305(20): 2071-2079.

The “Small World” Phenomenon

It's always fun when the "small world" phenomenon occurs, as was the case at our September symposium, Updates in Pediatric Otolaryngology. Brian Wiatrak (MD, FAAP, FACS), a former clinical faculty member here and currently the Director of Pediatric Otolaryngology at the Children's Hospital of Alabama (Birmingham), was attending the symposium as one of our distinguished guest speakers. He was looking forward to seeing old friends and colleagues, but did not anticipate the surprise in store for him. As Brian tells it:

Summer 1990. - I had just finished my residency and fellowship training at the University of Cincinnati, and I was returning to Ann Arbor. It was an exciting time for me, as I'd landed a faculty position at Michigan with Dr. Charles Krause - a man I'd looked up to ever since my UM medical school days. The week I arrived, Dr. Krause called me to his clinic to see a pediatric patient. Five year-old Aaron Thatcher had a history of recurrent respiratory papillomas for which he'd undergone numerous laser procedures on his larynx ever since he was very young. He now presented with progressively worsening stridor.

I examined young Aaron utilizing flexible laryngoscopy, and noted a very thick and extensive glottic web. Over the next year he



went to the operating room on multiple occasions to undergo staged endoscopic repair of the web and control of the remaining papillomatosis. After a year or so, the glottis web had not recurred, the papillomas had gone into remission, and I lost touch with the family. Then in 1993 I had my last contact with the family that I recall – a phone call to Aaron's Mom for a status report, when she told me that his voice quality was great, his breathing was excellent, and that he had "moved on. I did as well, as that same year I moved to Alabama to direct the pediatric otolaryngology program at Children's Hospital.

Fast forward 19 years. I am planning my travel back to Ann Arbor to present a paper at the pediatric otolaryngology symposium in September. A few weeks before the meeting,

I get the Department's newsletter with Carol Bradford's photo on the cover. I didn't realize at first that it was from U-M, but that great photo of Carol caught my eye. Otherwise, the magazine might have ended up with all my other junk mail (sorry!). So I start browsing through the news and learning about some of my old colleagues' accomplishments, when I come across a page showing their new oto residents. One is an Aaron Thatcher. Well, how could I forget the name of my very first patient? Could this be the same guy?

I found Aaron on Facebook and sent him a message, briefly telling him "the story" and how amazing it would be if he was that patient, but if not, then please disregard. The next day he responded and sure enough, it was him!! This was indeed a profound moment for me. At the peds oto symposium, I got to reunite with Aaron, and that evening at the dinner I met his lovely wife. It was a great day for me; one I will never forget. Aaron going into otolaryngology at my old program, where we first met as patient\doctor – who would have guessed? He says it was actually his childhood medical issues that not only got him interested in medicine, but specifically, otolaryngology.

I don't know what this all means, but it's sure a great "small world" story!

ETHAN'S STORY

Ever since Ethan Long was a few weeks old, his parents noticed that something was not quite right with his breathing. It seemed as though he struggled to get air through his nose during feeding, and frequently his Mom had to interrupt his feedings so he could catch his breath. He was also snoring loudly, and as he could not taste or smell, he had difficulty gaining weight appropriately. Concerned, Ethan's parents sought answers. They tried all sorts of suggestions from the doctors – a gluten free diet, allergy testing, removing his adenoids at 18 month...yet Ethan's symptoms persisted and it seemed no one could give them answers. Hearing Ethan struggle to get air through his nose was heartbreaking. Frustrated and worried, the Longs decided it was time to seek help from the University of Michigan.

When Dr. Marc Thorne first saw him, Ethan was nearly three years old, and had been to several allergists, an otolaryngologist, and had undergone surgery to remove his adenoids – all without improvement in his nasal obstruction. At his initial visit, Dr. Thorne used nasopharyngoscopy to identify a mass completely filling the back of Ethan's nose. After characterizing the mass with a CT, an expansive lesion was noted in the posterior septum and required further examination. A subsequent MRI identified a large nasal glioma involving the sphenoid sinus, nasal cavity and nasopharynx, and with areas of osseous erosion.



Ethan on his one year post-op visit with Dr. Marc Thorne.

In conjunction with Dr. Erin McKean (Otolaryngology) and Steve Sullivan (Neurosurgery), Dr. Thorne and his team formulated a plan for an endoscopic approach for surgical resection and reconstruction, and in November, 2010 Ethan underwent expanded endoscopic excision of his congenital midline nasal glioma and reconstruction using a vascularized pedicled nasoseptal flap. The nearly 9-hour surgery was completed without complications, and shortly thereafter Ethan was able to breathe without difficulty.

Throughout Ethan's long ordeal, Mr. and Mrs. Long felt the support and caring of the entire pediatric team involved in Ethan's care. During surgery, the doctors called them every couple hours to let them know what part of the nasal cavity they were working on, which Mrs. Long said was reassuring. She says, "There were many steps in the process of figuring out just what was wrong with Ethan, but each step was made so much easier with the kind and caring people on the team. We joke that on the application to work at Mott there must be a requirement for 'being a nice person.'"

Ethan continues to do well, has gained weight, and "is doing great" according to his parents. He is enjoying preschool and enjoys playing with his siblings. Say the Longs, "This has changed Ethan's life, and ours. We now have a healthy and happy little boy!"

From Grieving to Giving – A Golfer's Philanthropy



Marshall Jaeger loved life. He loved his family. And he loved golf. He had hoped to move to San Diego with his wife after retirement so that he could golf every day, but unfortunately, his advanced tongue cancer did not allow him to enjoy those retirement years or realize that dream.

After a courageous three-year battle and his eventual death in June, 2010 from advanced tongue cancer, Marshall Jaeger's family organized a golf outing in his memory and honor. This past July, the first annual Marshall Jaeger Golf Outing was held at Binder Park Golf Course in Battle Creek, MI. It was a delightful success, and a wonderful tribute to Mr. Jaeger from the 50+ friends and family who participated, including Oto's own Drs. Wolf and Prince, Nancy Wallace RN, and Sarah Judson, Administrative Assistant - all of whom participated in Mr. Jaeger's care. Pictured above is Mr. Jaeger's wife, Donna, presenting a check from the golf outing to the Department to establish the Marshall W. Jaeger Head and Neck Cancer Research Fund. With contributions from a large number of friends and family, nearly \$2100 has been raised for head and neck cancer research. We are grateful for the confidence the Jaeger family has shown in our work, and for the opportunities their funding will provide to impact the lives and well-being of patients here and around the world.

Early Detection and Intervention Key to Rehabilitating Infant Hearing Loss

Early intervention and close follow-up are key to rehabilitating hearing loss in children, says Paul R. Kileny, Ph.D., director of the University of Michigan's Audiology and Electrophysiology program. "Timely treatment is crucial," says Kileny, who specializes in hearing problems in newborns and infants. "If treatment is delayed, children can start falling behind in critical milestones for speech and language development, and they may never catch up."

Kileny is concerned that recent national media coverage of "auditory neuropathy" might cause parents to delay treatment, hoping their child will recover naturally. Auditory neuropathy is a relatively rare condition thought to be caused by a malfunctioning auditory nerve or by problems affecting the transmission of information between inner

ear and the nerve. A small number of children diagnosed with it recover their hearing naturally, but most share health histories that also include low birth weight, significant jaundice, or certain respiratory problems. Parents should remember that auditory neuropathy is responsible for only a fraction of hearing loss among infants, and that treatment for auditory neuropathy and more common forms of hearing loss often follow a similar course.

U-M has tested at-risk infants since 1985, and all infants since 2001. If a problem is suspected, a number of tests can determine the nature of the problem, including diagnosis of auditory neuropathy. Tests include testing brain wave patterns in response to sound and electrical responses in various parts of the ear, behavioral hearing testing, and diagnostic imaging. Treatment frequently begins with a closely observed

trial period using hearing aid, or if hearing aids are not effective, the child may be a candidate for a cochlear implant. Either way, published data shows that the majority of infants and children with auditory neuropathy or other hearing loss can benefit significantly from early intervention. As one of our parents writes, "If I could offer a message as a result of our journey, it would be to encourage every parent to advocate for their child – and never stop. It is important to follow up with additional screenings if parents or medical professionals feel concern. We owe so much of our child's success to her perseverance and unrelenting desire to communicate, and most sincerely to the staff at UM audiology who helped my little girl find her voice."

Article excerpted from University of Michigan News Service

Department Receives Multiple Dean's Awards!

Each year the Dean of the Medical School recognizes exceptional accomplishments by faculty and staff in the areas of teaching, research, clinical care, community service, and administration. Dean's Award nominations are submitted by faculty and staff across the health system, and are the highest awards given. In October, winners are honored at a formal dinner and awards presentation that includes their families and their nominators. This year Dean James Woolliscroft, MD had the unique opportunity to present three of these to Otolaryngology – Head and Neck Surgery! (Please read here about two of the honorees. Dr. Gregory Wolf's Distinguished Faculty Lectureship was featured in our Fall 2011 issue.) We are of course proud and honored to share our work with these exceptional individuals, and are grateful for their incredible and inspiring contributions to our department.



Erin L. McKean, MD
Assistant Professor
Medical School Community Service Award

In 2009, Erin McKean assumed the role of faculty advisor and coordinator of the Otolaryngology/ENT Clinic within the Hope Clinic, which provides free otolaryngology health care to uninsured patients or those unable to pay. For several years residents had volunteered at the clinic on Monday evenings, but services were limited by lack of the needed diagnostic tools and other barriers to providing follow-up care. Dr. McKean's leadership helped establish the Hope Otolaryngology Multidisciplinary Clinic on site at the U-M, and residents are now able to refer patients for therapy, pathology and radiology studies, and to perform biopsies and review test results. Nominated by Dr. Melissa Pynnonen, Pynnonen states that "Erin has had a principal role in this effort by providing an opportunity to those interested to participate in a life-changing humanitarian effort." And Hope Clinic's medical director and president write, "Dr. McKean's efforts passionately focus on expanding and improving upon the care of the uninsured, but the effects of her leadership go well beyond the individuals who have been or will be served...." "I have a strong connection with my fellow Michiganders; I believe in giving back to the community that has given me so much," says McKean. She tells younger physicians and researchers: "Do what you love and do it well. And whatever you do, make it better. Never forget how fortunate we are to have a calling that allows us to positively impact the lives of others on a daily basis."

Service has always been part of Erin's career. She participates in the Department's annual medical mission to Honduras, has educated children on the dangers of tobacco and drugs, and has assisted elementary teachers in teaching sexual education.

Erin is currently working on her M.B.A. degree at the Ross School of Business.



Brenda K. Campbell,
Administrative Assistant
Senior Support Staff of the Year Award

After raising two children, Brenda decided to return to work. At the time, she had to decide between a position on Central Campus or one on the medical campus, here in Otolaryngology – Head and Neck Surgery. She chose us! We are thrilled and join her in celebrating the seven years she has shared with us. After meeting the doctors that I support, I knew this was where I wanted to be," Brenda says. "I especially love being able to contribute to the difference they make to their patients. They are amazing, and what they do is amazing, and I get to be a part of that!"

Brenda supports four busy clinical faculty; scheduling all of their academic, patient care and research activities. In addition, she coordinates the Otolaryngology Fellowship Program, and goes far beyond necessity when it comes to helping patients get tests scheduled elsewhere, work-related paper work processed, or just listening to their concerns. Nominated by Professor Steven Telian, MD, whom she supports, Telian says he interviewed Brenda for her position when she first hired in. Now, he says, "Not only has Brenda exceeded my expectations...it is now widely agreed that her performance set the customer service bar for everyone in our department who deals with the public. She is arguably the employee who has most contributed to a positive work environment in the department over the last five years." Department Chair Carol Bradford, MD agrees that Brenda is extremely kind and compassionate in her patient care role, and that she is able to schedule complex procedures for patients with confidence and expertise.

Brenda loves working with the patients and truly cares about the quality of their experience here. She is one of our best ambassadors, and we are delighted that she has been recognized for her many contributions.

Looking Deeper, Learning More

Doctors evaluating then-6-year-old Samantha's hearing problems found something else – a tumor in her brain.

Now she's back on track after surgery, finishing first grade this last spring and sporting a colorful set of hearing aids.



Samantha Provenzano spends time with a special visitor as she recovers in the Pediatric Intensive Care Unit at the University of Michigan C.S. Mott Children's Hospital. Samantha underwent a nearly 10-hour surgery to remove a tumor pressing against her brainstem.

Like most 7-year-olds, Samantha Provenzano is always on the move. She loves rollerblading, riding her bike, playing baseball and practicing Tae Kwon Do with her younger sister. So anyone meeting the Livonia first grader today might find it hard to believe that about a year ago, surgeons at the University of Michigan C.S. Mott Children's Hospital removed a tumor from her brain.

Samantha had failed a routine hearing screening at her school, and her family came to Mott seeking a second opinion. Based on a friend's recommendation, her parents made an appointment with pediatric otolaryngologist and Professor Marci Lesperance, M.D. and pediatric audiologist Katie Kuboushek, Au.D. Upon examination, Samantha's hearing test suggested a more complex reason behind the hearing loss than recurrent ear problems. Dr. Lesperance ordered a CT scan, which confirmed her suspicion for an enlarged vestibular aqueduct on the right side. According to Lesperance, Enlarged Vestibular Aqueduct Syndrome (EVAS) is an abnormality commonly seen on these scans. What isn't common is finding a tumor. The CT also revealed a mass on the left side of Samantha's brain and pressing on her brainstem, but which Lesperance says was not associated with her hearing loss.

"When I see an incidental finding on a CT scan like I did with Samantha, I walk across the hall to our neurosurgeons and say 'Before I talk to the family and tell them what it shows, let me start working on addressing this issue for them,'" says Lesperance. Pediatric neurosurgeon Cormac Maher, MD immediately scheduled a follow-up appointment and MRI. He explained that although the tumor was most likely benign, it needed to be removed due to its location and possible damage to cranial nerves. So in April, Samantha spent more than 10 hours in surgery. Ten weeks later, she walked across her school's stage to receive her kindergarten graduation certificate. Samantha is proud of her scar, although it is longer visible under her golden locks. Samantha's parents are thankful for the doctors who listened to their family's concerns and helped heal Samantha. "If it wasn't for the team of U-M doctors who worked together to find the source of Samantha's hearing loss, we wouldn't have known about the tumor," says her mother. "We're so thankful. They saved our little girl's life." She also states, "The University of Michigan doctors are very good at what they do. They made a very scary situation easier."

Excerpted from an article by Heather Guenther, UM Public Relations & Marketing Communications, April 2011

AVA'S STORY



When Ava was young, she was very shy and quiet. She was late to babble and speak, and her language development seemed below average, as others could not clearly understand her words. Her parents thought this may have been because she was trying to use both English and Polish, or perhaps she was just on the lower curve for language development. She seemed to have trouble hearing

as well. Then one day at a party, a turning point came when Ava's parents had to shout to get her to hear them.

Several medical visits and many ENT tests later 5 year-old Ava and her family were referred to C. S. Mott Children's Hospital by Paul Hoff, MD, a graduate of UM's Otolaryngology residency program, to see pediatric otolaryngologist Marci Lesperance, MD – a renowned specialist passionate in her research on genetic hearing loss. Until recently, little was known about the genetics of hearing disorders, and Dr. Lesperance and her team are one of the few in the world actively researching this area. Ava's blood tests were positive for mutations in a gene called Connexin 26, known to cause hearing loss. Tests also revealed that each of her parents were carriers for one recessive mutation, as well as her younger sister, although she is not hearing impaired. Ava's parents were grateful for this important information not only for planning for Ava's continued management,

but also in consideration of both their daughters' futures as potential mothers.

Now eight years old, Ava is no longer a shy, withdrawn little girl; instead she is a bright, confident, and active participant at her school, often assuming a leadership role. According to her parents, "Ava is doing awesome at school; most people would never know she is hearing impaired." She is an excellent reader, excels at math, and her spoken language skills exceed those normal for her age. With early intervention, leading expertise, and progressive research, children like Ava can overcome obstacles and achieve not only their best possible potential, but their fondest enjoyment as well! Since Ava began using hearing aids, she has now acquired a love for music. Hearing this is music to anyone's ears!

Many thanks to Ava and her parents in sharing her story and assisting with the writing of this article.