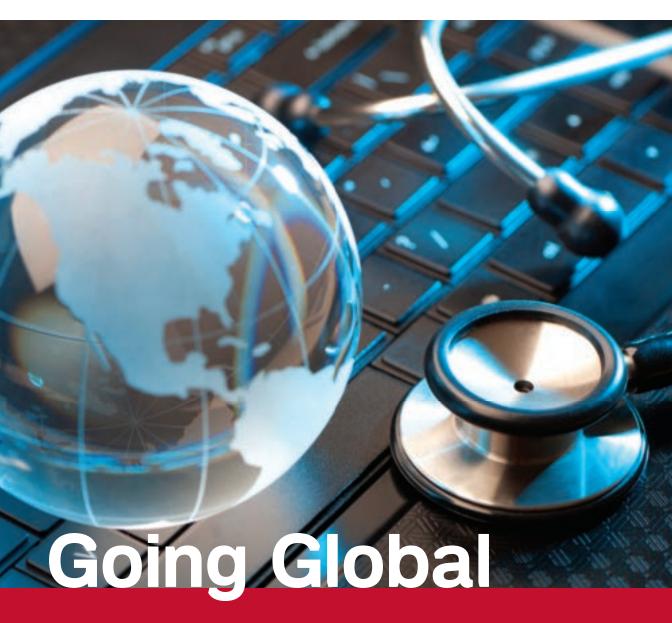


☐ NewYork-Presbyterian



Weill Cornell Medicine and the Department of Otolaryngology-Head & Neck Surgery have a well-established international reputation that attracts patients, medical students, researchers and physicians from around the world.

Message From the Chair



Dr. Michael Stewart

We are pleased to bring you the latest brochure from our Department. We continue to prosper, and both NewYork-Presbyterian Hospital and Weill Cornell Medical College continue to thrive. Our Department's many subspecialty programs continue to grow, and the Weill Cornell/NewYork-Presbyterian Center for the Performing Artist has helped a large number of performing artists in New York City. We have exciting new programs and leadership opportunities for our faculty, which are featured inside. In particular, I am pleased that after a national search, Dr. Sam Selesnick was named the next Editor-in-Chief of The Laryngoscope journal, which means that our specialty's premier journal will stay in the Department.

We are doing many surgical cases at the Hospital's state-of-the-art ambulatory center, the David H Koch Center. The technology and the patient experience are second to none, and this new Center has been a great addition for our patients, faculty and residents.

Our residency and fellowship programs are also doing extremely well, and we continue to benefit from our unique collaborative relationship with the Department of Otolaryngology-Head & Neck Surgery at Columbia University's College of Physicians and Surgeons, which is also growing under the leadership of Chairman Dr. Larry Lustig.

Thanks again for your interest in our Department, and we hope you enjoy the brochure.

Sincerely,

Michael Stewart, M.D., M.P.H.

Professor & Chairman, Department of Otolaryngology-Head and Neck Surgery Senior Associate Dean for International Affairs

& Affiliations

Weill Cornell Department of Otolaryngology

Current Office Locations

At Weill Cornell Medicine, our faculty members provide the full spectrum of modern care for all Ear, Nose, & Throat issues, from newborns to adults. Hearing testing and hearing aid services are also available, except in our Chappaqua and Sean Parker offices. Our offices are all conveniently located and easily accessible via public transportation.

Upper East Side

1305 York Avenue, 5th Floor at 70th Street New York, NY 10021 646-962-3681

Upper West Side

2315 Broadway, 3rd Floor at West 84th Street New York, NY 10024 646-962-9135

Lower Manhattan

156 William Street, 12th floor New York, NY 10038 646-962-5200

Pediatric Otolaryngology

428 East 72nd Street, Suite 100 New York, NY 10021 646-962-2224

Sean Parker Institute for the Voice

240 East 59th Street, 2nd floor New York, NY 10022 646-962-7464

Facial & Reconstructive Surgery

59 South Greeley Avenue, Suite 4 Chappaqua, NY 10514 646-962-2285

Hearing & Speech Center

Upper East Side Upper West Side Lower Manhattan Pediatric Otolaryngology 646-962-2231

http://ent.weill.cornell.edu



Global Reach

Weill Cornell Medicine and the Department of Otolaryngology-Head & Neck Surgery have a well-established international reputation that attracts patients, medical students, researchers and physicians from around the world.

"We exist within a medical school and a hospital that have extensive global reach," says Dr. Michael Stewart, Chairman of the Department. "Many international patients come to New York to be cared for in our hospital, and our Department has also hosted several international Otolaryngologists from countries such as France, the Czech Republic, Greece, the Canary Islands, Mexico, Uzbekistan, Ukraine and Russia."

One of the reasons Weill Cornell enjoys a worldwide reputation is the outreach work that its clinicians are doing in other countries. "We have collaborations on six continents," Dr. Stewart explains. Weill Cornell has founded successful health care initiatives in developed countries like Qatar, Brazil, Taiwan and South Korea, and also in resource-poor countries like Haiti and Tanzania.

In addition to Weill Cornell Medicine-Qatar — the first American university to offer an M.D. degree overseas — the Department has also collaborated with the ENT Department at Hamad Medical Corporation in Qatar, with visiting professors giving lectures, offering patient consultations and providing assistance with surgery. Hamad Medical Corporation achieved ACGME International accreditation for their otolaryngology residency, making them only one of a handful of ACGME-I accredited program in the world.

For many years, the Department has hosted two annual seminars in Austria

(one in temporal bone surgery, and a second in otolaryngology) as part of the Salzburg Weill Cornell Seminars, which focus on clinicians from former Eastern Bloc nations. Sponsored by the American Austrian Foundation, the two Salzburg Weill Cornell Seminars are having significant real-world impacts: "A doctor from Mongolia learned about cochlear implants and went back to Mongolia to start the first cochlear implant program in Mongolia," Dr. Stewart explains. "She got the idea when she was at the Salzburg seminar."

The Department also has close ties to the city of Paris, where Dr. Samuel Selesnick, Vice Chairman of the Department, is the Senior US Medical Counselor at the American Hospital of Paris and is improving academic coordination between the two institutions. And at the city's Institute Arthur Vernes, a resident exchange program allows residents from that hospital to do elective time with Weill Cornell, whose residents can also visit the Paris hospital. Additionally, the Department is actively exploring possible collaborations with otolaryngology departments in China.

Individual faculty members are also extending the global influence of the Department. "Many of our faculty are known internationally and get invited to be visiting professors around the world," says Dr. Stewart. Faculty members have made presentations in Guangzhou and Hong Kong, China; Tokyo, Japan; Zagreb, Croatia; Cartagena, Colombia; Stockholm, Sweden; Mexico City,



Dr. Michael Stewart, course director of the Salzburg Weill Cornell Seminar in Otolaryngology, with Weill Cornell faculty and his class.

Mexico; and St. Petersburg, Russia – just to name a few.

Among the faculty members active in international research and education, Dr. Selesnick is also the General Secretary of the Politzer Society, the international society for Otology. In that role, he is responsible for helping to organize their international meetings.

Dr. Maria Suurna, Assistant Professor in the Department of Otolaryngology, has been named the Regional Advisor for Europe of the American Academy of Otolaryngology-Head and Neck Surgery and Dr. Joseph Montano, Chief of Audiology and Speech Language Pathology, has been named to the World Health Organization's Working Group on the Rehabilitation Competencies Framework as part of "Rehabilitation 2030: A Call for Action."

These worldwide initiatives enhance Weill Cornell's expanding global reach. "We are fortunate to be in an institution that gives us great international opportunities, and to have faculty who are internationally known" says Dr. Stewart.

Sentinel Node Mapping Using Fluorescent Targeted Silica Nanoparticles

Weill Cornell Medicine and the Department of Otolaryngology-Head & Neck Surgery have a well-established international reputation that attracts patients, medical students, researchers and physicians from around the world.

A new intraoperative procedure for mapping sentinel lymph nodes during head and neck cancer surgery is the focus of a clinical investigation now being conducted by Weill Cornell Medicine in collaboration with Memorial Sloan-Kettering Cancer Center and NewYork-Presbyterian Hospital.

The use of technetium-99m sulfur colloid with or without blue dye in sentinel node mapping is well established, but there are radiation safety protocols and other limitations to its use. Nonetheless, "it's very important from a prognostic standpoint and a treatment standpoint to know which lymph nodes need to be treated," explains Dr. David Kutler, Associate Professor of Otolaryngology and primary investigator in the new research.

Dr. Kutler's new research initiative involves a different type of sentinel node mapping using injections of targeted silica nanoparticles known as cRGDY-PEG-Cy5.5-C dye-labeled particles (dots). This imaging agent was developed by Dr. Michelle Bradbury, Director of Intraoperative Imaging and Dr. Snehal Patel at Memorial Sloan-Kettering Cancer Center. The fluorescent nanoparticles can be injected intraoperatively and are taken up by the lymphatics in about one half-hour.

For the Phase II clinical investigation, patients will be injected with technetium-99m sulfur colloid prior to surgery as part of their standard of care, and those images will be acquired about two hours later using a gamma probe. Additionally, each patient

will receive injections of cRGDY-PEG-Cy5.5-C dots in four quadrants around their tumor about 30 minutes prior to their surgical operation. Imaging of this agent using a hand-held camera system and video monitoring will continue throughout the biopsy procedure.

The potential advantages to using these targeted silica nanoparticles are numerous. Because they are fluorescent, real-time imaging with a hand-held fluorescence imaging camera can be used during surgery.



It's helpful in that we can limit the amount of surgery we do if we can easily find the lymph nodes that the tumor drains to.



Dr. David Kutler Associate Professor of Otolaryngology

Additionally, the use of the targeted silica nanoparticles obviates the need for the precautions typically associated with technetium-99m sulfur colloid or other radioactive tracers, so their use "might be safer because you don't have to expose the staff or the patient to radioactivity," Dr. Kutler adds. "It's also potentially more sensitive in finding the lymph nodes."

Real-time Intraoperative Optical Imaging of SLN Metastases



The clinical investigation is currently recruiting up to 60 patients with melanoma and oral cavity squamous cell carcinoma and is expected to last about two years. Due to the novelty of using targeted silica nanoparticles for oral cavity cancers, "it's not yet approved by the FDA for this particular purpose. It's been used for other things — mostly for

melanoma — but not for head and neck cancers," Dr. Kutler explains. "It's completely new. It's not being done anywhere else."

Craniofacial Program

Since 2012, when the Department of Pediatric Otolaryngology assumed responsibility for the craniofacial program at Weill Cornell Medicine, the Cleft and Craniofacial Team has experienced impressive growth. "We've built it into a multidisciplinary program and received accreditation from the American Cleft Palate-Craniofacial Association (ACPA)," says Dr. Vikash Modi, Co-Director of the Cleft and Craniofacial Team.



The program achieved tremendous growth after the team received accreditation.



Dr. Vikash Modi Chief, Pediatric Otolaryngology

"Before 2012, the team saw less than 30 patients a year and performed fewer than 10 craniofacial surgeries annually. Now we see over 100 patients annually, and we're performing over 70 craniofacial surgeries annually. We are now a regional referral center and are attracting patients from other institutions as well as overseas."

The Cleft and Craniofacial Team's growth has been matched by an excellent surgical success record and use of innovation. "Palatal fistulas can be a concern in cleft palate surgery, but our fistula rate is less than five percent, one of the lowest fistula rates in the country," Dr. Modi says. "Our Cleft and Craniofacial Center is also unique in that we are the first institution to implement polysomnography-guided mandibular distraction, eliminating the guess work, and introducing precision with distraction."

Helping families through a trying period can begin before birth by providing prenatal consultations. "Whenever an ultrasound is suggestive of a cleft lip or a cleft palate, we meet the parents prenatally to provide support and prepare them for the road ahead " says Dr. Modi.

Much of the team's success can be attributed to the comprehensive array of specialists now housed under one roof at the Pediatric Cleft and Craniofacial Center on East 72nd Street in Manhattan. "We have a fantastic team which includes facial plastic surgeons, pediatric sleep medicine specialists, oral surgeons, orthodontists, speech and swallow therapists, neurodevelopmental pediatricians, neurosurgeons, prosthodontists, pediatric dentists and otolaryngologists — it's a big group of people who all work together for a common goal," says Dr. Modi.

Additionally, an estimated 20 percent of children who have cleft palate surgery will need specialized speech therapy to address velopharyngeal insufficiency (VPI). "Our Pediatric Cleft and Craniofacial Center is unique in that we have a VPI center within our team that provides care for kids with VPI speech problems," Dr. Modi adds.

A team of dedicated professionals needs a coordinator who can keep everyone moving ahead. Amanda Neilan, NP, who is also a pediatric nurse practitioner, is the clinical coordinator for the Cleft and Craniofacial Team and is responsible for providing continuity of care among the different specialties and helping patients and their families understand which appointments are upcoming and how to prepare for them. For families and children facing complex medical procedures, "its often overwhelming," says Dr. Modi. "It can be challenging to navigate all the different caregivers and specialists. A clinical coordinator provides support for the families and creates a comprehensive roadmap for their care."

The Craniofacial Program by the Numbers

Craniofacial Surgeries 2008-2018

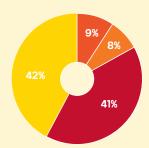




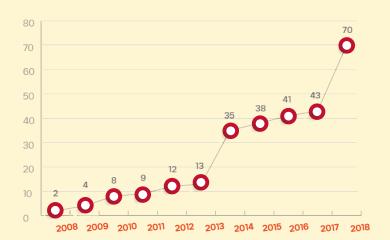
Mandibular Distractions

Cleft Palate/VPI

Cranial Vault



Craniofacial Surgeries by Year



VPI & Cleft Palate Repairs 2008-2019

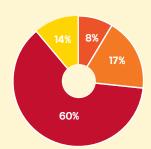
Key

Pharyngoplasty

Pharyngeal Flap

Palatoplasty

Injection Pharyngoplasty



VPI & Cleft Palate Repairs by Year



Sean Parker Fellowship

The Sean Parker Fellowship in Laryngology, now in its second year, is a unique two-year training program that was established to satisfy an unmet need in laryngological research.

"As laryngology matures as a subspecialty, clinicians trained to a high level in clinical investigation become more and more important," explains Dr. Lucian Sulica, the Sean Parker Professor of Otolaryngology and Director of the Sean Parker Institute for the Voice. "The poorly-received 2009 Clinical Practice Guideline for Hoarseness did serve to highlight the lack of high powered clinical research to inform patient care in our field." Taking on the task of training individuals to carry out such work was a natural fit for The Sean Parker Institute, combining its missions for research and education. "In the long term, of course, it also serves our primary mission, which is patient care," observes Dr. Sulica.

The Sean Parker Fellowship grants participants a Master of Science degree in Clinical and Translational Investigation, in addition to the usual clinical training. "The Sean Parker Fellowship is an endowed fellowship unlike any other in the country," says Dr. Sulica. "It's conceived for people who want to be future thought leaders in our field. We don't expect it to appeal to everyone - only a subset of the candidate pool in any given year gets excited by the opportunity, but this is for them."

A commitment to that research work drives Dr. Keith Chadwick, the first holder of the Sean Parker Fellowship. His Masters' project examines KTP laser and its success rate in treating benign vocal fold lesions in awake patients in the office, when compared to traditional microlaryngoscopy surgery. Regarding the KTP laser, Dr. Chadwick says, "It's become widely used, driven by convenience and the ability to avoid general anesthesia, despite the lack of data to show that results are truly equivalent to microsurgery. Even



small differences may be of consequence to some patients, like the many performers treated at the Sean Parker Institute for the Voice."

Indeed, KTP surgery has not been the subject of prospective, comparative evaluation. Dr. Chadwick is enrolling patients for such a study. "We're following them over a certain amount of time to assess the appearance of the surgical site, their voice quality, and how their voice is functioning for them and then comparing those outcomes," Dr. Chadwick explains. "It's a fundamental kind of study, but it hasn't yet been done."

As a former actor and singer himself, Dr. Chadwick brings an insider's perspective to his work with performing artists. "I did a lot of performing when I was younger, then I took a year off before I started med school, and during that time I did some professional musical theater performance," he explains. "I think it gives me some unique insight with our performing voice patients. And I feel like I can connect with them and their concerns a little bit better because of that."

National Leadership Update

The physicians in the Department of Otolaryngology at Weill Cornell Medicine are recognized internationally as leaders in their field. Many serve in prominent positions within professional medical associations, where they continue to set the standards for research, education and clinical care.

Michael Stewart, M.D., M.P.H., has been appointed the Executive Vice President of the American Rhinologic Society (ARS), where he will serve as the organization's main operating officer. Dr. Stewart was appointed by the board of the ARS — the principal professional association in the United States for rhinologists — for a renewable term of three years. Additionally, he is a Past President of the American Board of Otolaryngology - Head and Neck Surgery, where he was the Director of the Board for several years.

Samuel Selesnick, M.D., has been selected to be the Editor-in-Chief of the journal The Laryngoscope following a year-long search. First published in 1896, The Laryngoscope is the journal of The Triological Society and remains the leading source for information on new developments in the diagnosis and treatment of head and neck disorders. Dr. Selesnick is also a Past President of both the American Otological Society and the American Neurotology Society. Dr. Selesnick succeeds Michael Stewart, M.D., M.P.H. who served as the publication's Editor-in-Chief for 8 years.

Anaïs Rameau, M.D., has been awarded a CTSC KL2 Career Development Award for the proposal, "Bedside aspiration screening using artificial neural networks in the recognition of the 'wet' voice," for the award period July 1, 2018, through June 30, 2020.

Selected Faculty Publications 2018-19

Rudmik L, Beswick DM, Alt JA, Bhattacharyya N, Chester AC, Gray ST, Poetker DM, **Stewart MG**, Smith TL. Appropriateness Criteria for Surgery in the Management of Adult Recurrent Acute Rhinosinusitis. Laryngoscope. 2019 Jan;129(1):37-44.

Lin K, Stewart C, **Selesnick SH**. Incidence of prolonged systemic steroid treatment after surgery for acoustic neuroma and its implications. *Journal of Neurological Surgery Part B: Skull Base* December 2018;79: 559-568.

Lin J, **Kacker A**. Management strategies for recurrent acute rhinosinusitis. *Laryngoscope Investig Otolaryngol* 2019 Apr 10;4(4):379-382.

Alalade AF, Ogando-Rivas E, Forbes J, Ottenhausen M, Uribe-Cardenas R, Hussain I, Nair P, Lehner K, Singh H, **Kacker A**, et al. A Dual Approach for the Management of Complex Craniovertebral Junction Abnormalities: Endoscopic Endonasal Odontoidectomy and Posterior Decompression with Fusion. *World Neurosurg X*. 2019 Jan 24; eCollection 2019 Apr. PMID: 31218285

Sclafani AP, Kim M, Kjaer K, **Kacker A**, **Tabaee A**. Postoperative pain and analgesic requirements after septoplasty and rhinoplasty. *Laryngoscope* 2019;129:2020-25.

Riley CA, Soneru CP, **Tabaee A**, **Kacker A**, Anand VK, Schwartz TH. Technological and Ideological Innovations in Endoscopic Skull Base Surgery. World Neurosurg 2019 Jan 29. pii: S1878-8750(19)30220-7. PMID: 30708082

Riley CA, Kim M, **Sclafani AP**, Kallush A, Kjaer K, **Kacker AS**, Tabaee A. Opioid analgesic use and patient-reported pain outcomes after rhinologic surgery. *Int Forum Allergy Rhinol* 2019;9(4):339-344.

Li C, Awad M, **Maresh AM**. .A Complicated Case of Congenital Nasal Pyriform Aperture Stenosis: Use of a Long-term Unilateral Nasal Stent. Cleft Palate *Craniofac J.* 2019;56(9):1239-42.

Heacock RM, **Montano JJ**, Preminger JE. Adult Children's Perspectives on Their Role in Their Parent's Hearing Healthcare Processes. J Am *Acad Audiol* 2019;30(10):871-82.

Wise SK, Lin SY, Toskala E, Orlandi RR, Akdis CA, Alt JA, Azar A, Baroody FM, Bachert C, Canonica GW, Chacko T, Cingi C, Ciprandi G, Corey J, Cox LS, Creticos PS, Custovic A, Damask C, DeConde A, DelGaudio JM, Ebert CS, Eloy JA, Flanagan CE, Fokkens WJ, Franzese C, Gosepath J, Halderman A, Hamilton RG, Hoffman HJ, Hohlfeld JM, Houser SM, Hwang PH, Incorvaia C, Jarvis D, Khalid AN, Kilpeläinen M, Kingdom TT, Krouse H, Larenas-Linnemann D, Laury AM, Lee SE, Levy JM, Luong AU, Marple BF, McCoul ED, McMains KC, Melén E, Mims JW, Moscato G, Mullol J, Nelson HS, Patadia M, Pawankar R, Pfaar O, Platt MP, Reisacher W, Rondón C, Rudmik L, Ryan M, Sastre J, Schlosser RJ, Settipane RA, Sharma HP, Sheikh A, Smith TL, Tantilipikorn P, Tversky JR, Veling MC, Wang Y, Westman M, Wickman M, Zacharek M. International Consensus Statement on Allergy and Rhinology: Allergic Rhinitis. Int Forum Allergy Rhinol 2018 Feb;8(2):108-352.

He YT, Christos PJ, **Reisacher WR**. Airborne and food sensitization patterns in children and adults with eosinophilic esophagitis. *Int Forum Allergy Rhinol* 2018;8(5):571-576.

He YT, **Reisacher WR**. Sensitivity, Specificity and Predictive Value of Oral Mucosal Brush Biopsy for the Diagnosis of Peanut Allergy. *Int Forum Allergy Rhinol* 2019;9(6):624-28.

Ramaswamy AT, **Reisacher WR**, No JS, et al. Esophageal IgE, IgG4 and Mucosal Eosinophilia in Individuals with Dysphagia. *Int Forum Allergy Rhinol* 2019;9(8):870-5.

Lee DJ, Yang W, Propst EJ, **Rosenblatt SD**, Hseu A, Wolter NE. Tracheo-innominate fistula in children: A systematic review of literature. *Laryngoscope* 2020;120(1):217-24.

Selected Faculty Publications 2018-19

Silva Merea V, **Sadoughi B**. Type I Posterior Glottic Stenosis: Natural History and In-Office Management. Ann *Otol Rhinol Laryngol* 2019;128(11):1073-77.

Shoffel-Havakuk H, **Sadoughi B**, **Sulica L**, Johns MM. In-Office Procedures for the Treatment of Benign Vocal Fold Lesions in the Awake Patient: A Contemporary Review. *Laryngoscope* 2019;129(9):2131-2138.

Husain S, **Sadoughi B**, Mor N, Sulica L. Time Course of Recovery of latrogenic Vocal Fold Paralysis. Laryngoscope 2019 May;129(5):1159-1163.

Sadoughi B, Rickert SM, **Sulica L**. Granulomas of the membranous vocal fold after intubation and other airway instrumentation. *Laryngoscope* 2019;129(2):441-447.

Li C, Boon M, Ishman SL, **Suurna MV**. Hypoglossal nerve stimulation in three adults with down syndrome and severe obstructive sleep apnea. *Laryngoscope* 2019;129(11):E402-E406.

Steffen A, Abrams N, **Suurna MV**, Wollenberg B, Hasselbacher K. Upper-Airway Stimulation Before, After, or Without Uvulopalatopharyngoplasty: A Two-Year Perspective. *Laryngoscope* 2019;129(2):514-518.

Steffen A, Kilic A, König IR, **Suurna MV**, Hofauer B, Heiser C. Tongue motion variability with changes of upper airway stimulation electrode configuration and effects on treatment outcomes. *Laryngoscope* 2018;128(8):1970-1976.

Soneru CP, Riley CA, Hoffman K, **Tabaee A**, Schwartz TH. Intra-operative MRI vs endoscopy in achieving gross total resection of pituitary adenomas: a systematic review. *Acta Neurochir (Wien)* 2019;161(8):1683-1698.

Safi C, Li C, **Tabaee A**, Ramakrishna R, Riley A. Outcomes and imaging findings of respiratory epithelial adenomatoid hamartoma: A systematic review. *Int Forum Allergy Rhinol*. 2019;9: 674-680.

Maurrasse S, Schwanke T, **Tabaee A**. Smartphone Capture of Flexible Laryngoscopy: Optics, Subsite Visualization and Patient Satisfaction. In press: *Laryngoscope 2019*;129(9):2147-2152.

McCoul ED, Mayer SI, **Tabaee A**, Bedrosian JC, Marino MJ. Endoscopic evaluation of the Eustachian tube (EEET): A reliable tool for grading Eustachian tube inflammation. *Int Forum Allergy Rhinol* 2019;9:305-310.

Riley CA, **Tabaee A**, Conley L, Amine M, Soneru CP, Anand VK, Schwartz TH. Long-term sinonasal outcomes after endoscopic skull base surgery with nasal septal flap reconstruction. *Laryngoscope* 2019;129:1035-1040.

Riley CA, Soneru CP, Husain Q, Gray ST, Senior BA, **Tabaee A**. Faculty attitudes towards rhinology fellowship training: a survey of rhinology fellowship programs. *Am J Rhinol Allergy* 2019;33:8-16.

Golan S, Chen Y, Levine B, Pearlman AN, Levinger JI, Tabaee A, Kacker A, Lelli GJ. Does long-term success from endoscopic DCR correlate with early post-operative reduction in tearing? Am J Otolaryngol 2018;39(5):592-593.

Tassler AB, Gooding WE, Ferris RL. Hypopharyngeal cancer treatment: Does initial surgery confer survival benefit? *Head Neck* 2019;41(7):2167-2173.

Department Faculty



Michael Stewart, M.D.
Professor and Chairman of Otolaryngology
Senior Associate Dean for International
Affairs and Affiliations
(646) 962-6673



Samuel Selesnick, M.D.
Professor and Vice Chairman of
Otolaryngology
Professor of Otolaryngology in
Neurological Surgery
(646) 962-3277



George Alexiades, M.D.
Director, Cochlear Implant
Center
Associate Professor of
Clinical Otolaryngology
(646) 962-2032



Victoria Banuchi, M.D. Assistant Professor of Otolaryngology (646) 962-2363



Ashutosh Kacker, M.D. Professor of Clinical Otolaryngology (646) 962-5097



William Kuhel, M.D.
Director, Head & Neck Service
Professor of Clinical
Otolaryngology
Richard W. Zirinsky Jr.,
Professor of Head and Neck
Surgery
(646) 962-6325



David Kutler, M.D.
Residency Site Director-Weill
Cornell
Associate Professor of
Otolaryngology
(646) 962-4323



Joshua Levinger, M.D. Assistant Professor of Otolaryngology (646) 962-4451

Department Faculty



Alison Maresh, M.D. Assistant Professor of Otolaryngology Anne Belcher, M.D. Assistant Professor of Otolaryngology (646) 962-2225



Vikash Modi, M.D.
Chief, Pediatric Otolaryngology
Associate Professor of
Otolaryngology
Associate Professor of
Otolaryngology in Pediatrics
(646) 962-3017



Joseph Montano, Ed.D. Chief, Audiology & Speech Language Pathology Professor of Audiology in Clinical Otolaryngology (646) 962-5364



Aaron Pearlman, M.D. Associate Professor of Clinical Otolaryngology (646) 962-3169



David Phillips, M.D Assistant Professor of Otolaryngology (646) 962-6328



Mukesh Prasad, M.D. Associate Professor of Clinical Otolaryngology (646) 962-2216



Anaïs Rameau, M.D. Assistant Professor of Otolaryngology (646) 962-7464



William Reisacher, M.D. Associate Professor of Otolaryngology (646) 962-2093



Steven Rosenblatt, M.D.Assistant Professor of
Otolaryngology
(646) 962-2224

Department Faculty



Rita Roure, M.D.
Chief of Service, Lincoln
Hospital
Assistant Professor of
Clinical Otolaryngology
(718) 579-5093



Babak Sadoughi, M.D. Assistant Professor of Otolaryngology James A. Moore Clinical Scholar in Otolaryngology (646) 962-7464



Anthony Sclafani, M.D.
Director, Facial Plastic
Surgery
Professor of Otolaryngology
(646) 962-2285



Lucian Sulica, M.D.
Director, Sean Parker Institute
for the Voice
Professor of Otolaryngology
Sean Parker Professor of
Otolaryngology
(646) 962-7464



Maria Suurna, M.D. Assistant Professor of Otolaryngology (646) 962-9135



Abtin Tabaee, M.D. Associate Professor of Otolaryngology (646) 962-2221



Andrew Tassler, M.D. Assistant Professor of Otolaryngology (646) 962-2286



Andrea Wang, M.D. Assistant Professor of Clinical Otolaryngology (646) 962-9136



Michelle Kraskin, Au.D. Instructor of Audiology in Clinical Otolaryngology (646) 962-2231

Residency Update

Combining the resources of Weill Cornell Medicine and Columbia University College of Physicians and Surgeons, the joint Otolaryngology – Head and Neck Surgery Residency Training Program provides outstanding opportunities in clinical care, research, and academic medicine.

2018 - 2019 Weill Cornell OTO Graduates



Mahmoud Awad, M.D.



Matthew Kim, M.D.



Sarah Maurrasse, M.D.



Tiffany Peng, M.D.

2019 - 2020 Weill Cornell OTO Interns



Clara Lee, M.D.



Elliot Morse, M.D.



Aaron Oswald, M.D.



Andre Shomorony M.D.

Our New Residency Alumni Association

The Departments of Otolaryngology – Head & Neck Surgery at Weill Cornell Medicine and Columbia University worked together to create a new Residency Alumni Association in 2017, which includes graduates of all Otolaryngology residency programs that are or were associated with Weill Cornell Medical College, Columbia University, and Manhattan Eye, Ear, and Throat Hospital.

Our Residency Alumni Association hosts an annual dinner during the yearly, two-day comprehensive otolaryngology update course held in New York City. During this dinner, alumni and faculty, as well as current residents and fellows, are able to connect and network, forming and re-establishing lasting and valuable professional relationships that span generations.

The Distinguished Alumnus Award

This year we were pleased to award the Third Distinguished Alumnus Award to **Dr. Wesley Hicks**, who is currently Professor and Chairman of the Department of Otolaryngology at Roswell Park Comprehensive Cancer Center in Buffalo, NY. Dr. Hicks graduated from Manhattan Eye, Ear & Throat Hospital in 1990.

We look forward to our Residency Alumni Association's future growth and continued success, and we invite our alumni to join us at upcoming events!

What Our Patients are saying about us

Our Physician Organization made a decision to partner with an external vendor to both review our online reputation and to get immediate patient reviews and feedback after an appointment with a Weill Cornell Medicine Otolaryngology provider (physician, audiologist or speech language pathologist). For the latter project, patients receive a text message or email after they leave our office with a link where they leave their immediate feedback about our practice. The information below reflects how our department has scored on both of these continuing institution-wide initiatives:

Review summary for selected time period





Top review sources for selected time period **Encourage** customers to review you on Google.

- **G** Google (3,894)
- 4.9 ★
- Healthgrades (2,119)
- 4.9 ★
- BirdEye (324)

NR

Online Reputation Highlights (June 2017 to December 2019)

 Our Reputation Summary improved from 4.8 to 4.9 (out of 5.0) from last year to this year.

Text Program Highlights

- To date, we have sent out 139,845 review requests and received 8,761 reviews (6% response rate).
- To date, we have received 6,178 reviews with positive sentiment (4 or 5 star rated) which is **71%** of our total reviews.



SAVE THE DATES

May 15-16 2020

Weill Cornell Medicine | NewYork-Presbyterian

EINSTEIN



with hands on Cadaveric dissection lab





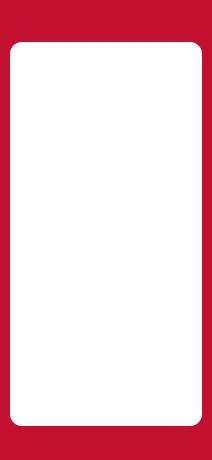


15TH ANNUAL

Otolaryngology Update in NYC October 21 & 22, 2021

At the NY Hilton Hotel

Department of Otolaryngology – Head and Neck Surgery Weill Cornell Medical College Weill Greenberg Center 1305 York Avenue, 5th Floor New York, NY 10021



Weill Cornell Medicine Otolaryngology Head & Neck Surgery

☐ **NewYork-Presbyterian** ☐ Weill Cornell Medical Center