



A Biannual Publication of the Medical College of Georgia Department of Otolaryngology-Head and Neck Surgery

The OTO OBSERVER

The Newsletter of the Department of Otolaryngology-Head and Neck Surgery



AUGUSTA UNIVERSITY
MEDICAL COLLEGE
OF GEORGIA

Department of Otolaryngology-Head and Neck Surgery

Summer 2019

CHAIRMAN'S NOTE

DEAR READERS,



As another academic year is coming to a close, it is a good time to reflect on what we accomplished, celebrate those who completed their training and welcome those who, at various stages of their careers, focus their pursuits and seek to enrich their knowledge and training.

This year we grew our business on all fronts, reaching record numbers in MCG Otolaryngology history, but what we are most proud of is our residency program. Our residents excel at all measures and lead major quality projects with institution-wide impact. No surprise then that our own Dr. Luke Edelmayer, a PGY3 resident, was selected to receive the prestigious "2019 MCG Resident of the Year" award. Luke is only the second MCG Otolaryngology-Head and Neck Surgery resident to receive this honor. This was accompanied by a great otolaryngology residency match, making our program stronger and more diverse. We received residency applications from 40 different States of the Union, and all 7 MCG acting interns and 9 of 11 outside acting interns successfully matched. This success gives us strength and makes our future outlook brighter. With that kind of energizing momentum, look out "burnout", there is no room for you at MCG Otolaryngology!

I wish you a great summer with good health and time to enjoy it!

A handwritten signature in black ink that reads "Stil Kountakis".

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Professor and Chairman, Department of
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Edward S. Porubsky, MD Distinguished
Chair in Otolaryngology
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FACULTY HONORS



Dr. J. Kenneth Byrd was promoted to Associate Professor effective July 1, 2019 and was co-PI on a project entitled, "CD73 expression on cancer-associated fibroblasts of Head and Neck Cancers shapes the immune landscape", which was awarded an NIH R21 grant.



Dr. Gregory Postma presented the Daniel C. Baker, Jr. Lectureship: Mentoring in a Changing World at the American Laryngologic Association, received the ABEA Chevalier Q. Jackson award and was named to America's Top Doctors for 2019.



Dr. Michael Groves was promoted to Associate Professor effective July 1, 2019.



Dr. David Terris was named to America's Top Doctors and America's Top Doctors for Cancer for 2019.

SELECTED PUBLICATIONS

Geltzeiler M, Bertolet M, **Albergotti W**, Glysteen J, Olson B, Persky M, Gross N, Li R, Anderson P, Kim S, Ferris RL, Duvvuri U, Clayburgh D. Staging HPV-related oropharyngeal cancer: Validation of AJCC-8 in a surgical cohort. *Oral Oncol* 84:82-87, 2018.

Unsal AA, Booth JR, Rossi NA, **Byrd JK, Kountakis SE**. Basaloid nasopharyngeal carcinoma: A population-based analysis of a rare tumor. *Laryngoscope* 2019 Jan 10. doi: 10.1002/lary.27788. [Epub ahead of print]

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Edelmayer L, Ito C, Kimbrough J, **Kountakis SE, Byrd JK**. Conversion to chronic invasive fungal sinusitis from allergic fungal sinusitis in immunocompetence. *Laryngoscope* 2019 Mar 9. doi: 10.1002/lary.27884. [Epub ahead of print]

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Howell RJ, Khosla, **Postma GN**. Open versus endoscopic surgery of Zenker's Diverticula: A systematic review and meta-analysis. *Dysphagia* 2019 Mar 12. doi: 10.1007/s00455-019-09994-9. [Epub ahead of print]

Walsh NJ, Sullivan BT, Duke WS, **Terris DJ**. Routine bilateral neck exploration and four-gland dissection remains unnecessary in modern parathyroid surgery. *Laryngoscope Investig Otolaryngol* 4(1):188-192, 2018.

Elteley AM, **Terris DJ**. Neck dissection in the surgical treatment of thyroid cancer. *Endocrinol Metab Clin North Am* 48(1):143-151, 2019.

Walsh NJ, Caten AJ, White JJ, **Terris DJ**. Protocol driven outcomes in renal parathyroid surgery. *Head Neck* 41(4):880-884, 2019.

Duke WS, Omesiete WI, Walsh NJ, **Terris DJ**. Baseline intraoperative intact parathyroid hormone levels in parathyroid surgery. *Head Neck* 41(3):592-597, 2019.

DEAN'S LEADERSHIP ACADEMY

Two of our Department's division leaders have successfully completed the inaugural Dean's Physician Leadership Academy. This was a six-month program, designed to produce "home-grown" physician leaders, who would have the skills to lead our institutional efforts to improve patient safety, hospital processes, innovation and overall outcomes for our patients. Dr. Ken Byrd, Chief of the division of Head and Neck Surgery, and Dr. Drew Prosser, Chief of the division of Pediatric Otolaryngology, were both selected to be part of the inaugural class of 10 participants.

The monthly seminars and workshops were provided by current AU leaders in partnership with faculty leaders from the Hull College of Business, the AU Medical Center, AU Medical Associates, and the Office of Learning, Leadership, & Development. The program covered topics from finance and business of medicine, to process improvement, and team building/development skills. Participants were chosen through a nomination process and were selected by AU leadership. The fact that two of our departmental faculty were selected is quite a remarkable feat for a department our size and reinforces the importance and high regard for which the institution holds our department.

We look forward to seeing these two put what they have learned into action, as our department strives to lead the Medical College of Georgia at Augusta University in quality improvement initiatives designed to better patient outcomes.



OBSTRUCTIVE SLEEP APNEA AND THE HYPOGLOSSAL NERVE STIMULATOR

- CAMILO REYES GELVES, MD

Obstructive sleep apnea (OSA) is a state-dependent sleep disorder that involves complete interruption or significant decrease in airflow in the presence of a breathing effort caused by repetitive upper airway collapse which results in oxygen desaturation and arousals. Consequences of untreated OSA include adverse cardiovascular and metabolic outcomes, decline in quality of life, and neurocognitive impairment. Moderate-to-severe OSA, defined as an apnea-hypopnea index (AHI) score of 15 or more events per hour, is an independent risk factor for insulin resistance, dyslipidemia, vascular disease, and death¹. Patients usually have nocturnal (snoring, apneas, choking sensation, arousal and awakening) and daytime symptoms (morning headaches, non-restorative sleep, fatigue, cognitive deficits, mood changes, decreased libido and hypertension among others). In our practice, we use the Epworth sleepiness scale and the STOP BANG questionnaire to screen our patients. Patients undergo a comprehensive Otolaryngologic evaluation, medical history and physical examination. As OSA is a state-dependent disease, at AUMC Otolaryngology, our patients also undergo a Drug Induced Sleep Endoscopy (DISE) which is the closest resemblance to Non-REM sleep². We assess airway collapse while under simulated sleep at the palate, tongue and epiglottis³. After our evaluation, we assess patients for a hypoglossal nerve stimulator.

Indications for a hypoglossal nerve stimulator are as follow: Age > 22 y/o, Body Mass Index < 35, Diagnosed OSA with AHI 15-65, Positive Airway Pressure (PAP) failure or inability to tolerate PA. PAP failure is defined as an inability to eliminate OSA (AHI of greater than 15 despite PAP usage), and PAP intolerance is defined as: Inability to use PAP (greater than 5 nights per week of usage; usage defined as greater than 4 hours of use per night), or unwillingness to use PAP (for example, a patient returns the PAP system after attempting to use it). Finally, appropriate airway anatomy based on DISE findings⁴.

Surgical Technique

The system is placed under the skin of the neck and chest through 3 small incisions; a neck incision, an upper chest incision for the implant and a lower chest incision for the sense lead. The hypoglossal nerve is identified. Using a nerve stimulator, the "functional breakpoint" is identified (transition from exclusion to inclusion branches). The cuff is placed to stimulate branches to the genioglossus (oblique and horizontal), geniohyoid and transverse muscle fibers. The stimulation lead is then tunneled and sutured to the digastric muscle, after this, the implant pocket is created superficial to the pectoralis fascia. A tunnel and a pocket is created between the internal and external intercostal muscles for the sense lead which should be facing the pleura. Tunnels are created for the sense and stimulator leads towards the implant for connection. The device is placed in the pocket and sutured into the pectoralis major fascia. The chest sensor and tongue movement is then verified using telemetry, if there is no adequate response, the leads must be repositioned.

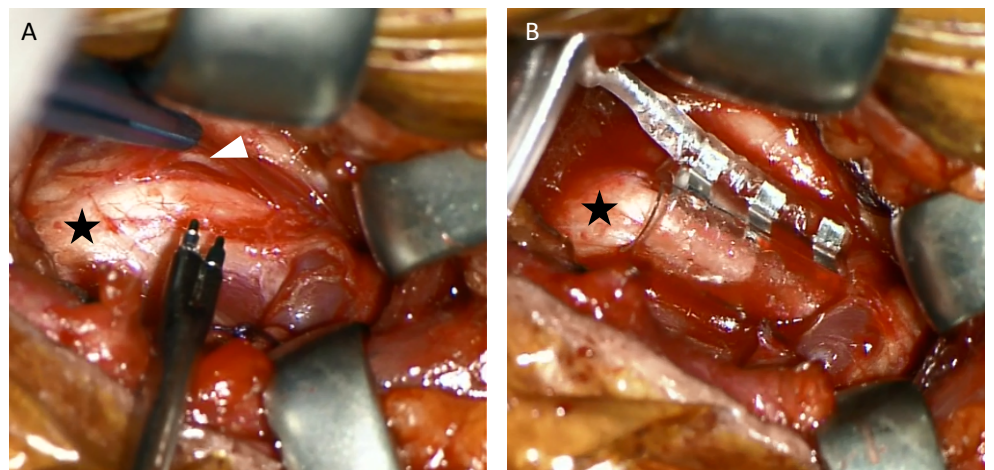


Figure 1. A. Black star: hypoglossal nerve, arrow head: exclusion branch. Image shows nerve stimulator used intraoperatively to identify functional breakpoint. B. Image shows cuff around hypoglossal nerve.

Wounds are closed in usual fashion and pressure dressing is applied. Patients must avoid any strenuous activities and avoid shoulder abduction for more than 90 degrees for one month. Four to 6 weeks postop, the implant is activated and its settings are customized during an overnight sleep study.

Case Report

We present the case of a 65 y/o female with OSA apnea-hypopnea index (AHI) of 34 diagnosed in 2007 who was on CPAP therapy with a pressure between 4-18 cm H₂O with a nasal mask from which she achieved improvement of her symptoms. However, she complained of nasal congestion, choking sensation, aerophagia and difficulty tolerating the mask. She underwent an uvulopalatopharyngoplasty, septoplasty and inferior turbinate reduction. Postoperative sleep study failed to show improvement on her AHI and she had significant problems using the device throughout the night with multiple awakenings. She was evaluated and stated that she would like to be "completely off the machine". A DISE was performed and showed 1) Velopharynx - complete lateral collapse, 2) Oropharynx - complete lateral collapse, 3) Tongue base - partial A/P collapse, 4) Epiglottis - no collapse, 5) O₂ nadir of 90% while on nasal cannula. She underwent a hypoglossal nerve stimulator device implant. Careful selection of extrusion branches was selected and NIM monitoring confirmed proper stimulation of extrusion branches (Figure 1). Extrusion of the tongue was seen immediately intraoperative. She was admitted overnight for observation and discharged the next day without complications. Chest X-ray was ordered to rule out pneumothorax and assess proper implant location (Figure 2). Incisions healed well and her device was activated 6 weeks postoperatively. As of now, she is sleeping 8-9 hours a night compared to less than 3 hours straight before the implant, she is not snoring and feels increased daytime level of energy.

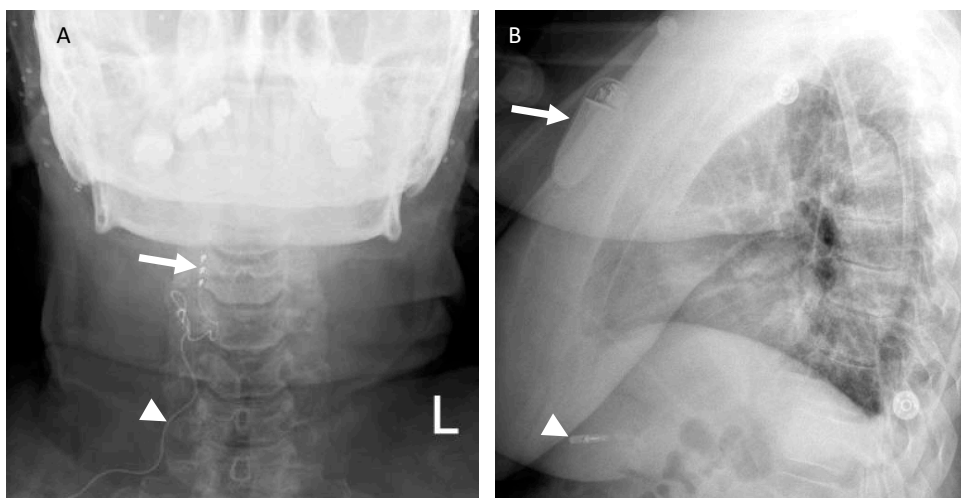


Figure 2. A. Postoperative neck and chest X-ray. Arrow shows cuff at level of hypoglossal nerve. Arrow head shows lead from cuff to implant in upper chest. Figure 2. B. Lateral chest X-ray, arrow shows implant in upper chest pocket, arrow head shows chest lead positioned between the internal and external intercostal muscles.

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4. Strollo PJ, Soose RJ, Maurer JT, de Vries N, Cornelius J, Froyovich O, et al. Upper-Airway Stimulation for Obstructive Sleep Apnea. *N Engl J Med* 2014;370:139-49. doi:10.1056/NEJMoa1308659.

QUALITY IMPROVEMENT SYMPOSIUM

In early May, our department was proud to play a major role in Augusta University Medical Center's inaugural Quality Improvement Symposium. Through his work chairing our institution's Graduate Medical Education Subcommittee for Quality Improvement, Dr. Michael Groves realized that there were a lot of resident-driven projects that were being completed for quality improvement that no one really knew about. This inspired him to propose a hospital-wide Quality Improvement Symposium, showcasing the best quality improvement projects that had been completed at AU in the last two years.

Hospital leadership was excited about the idea and jumped on board, offering prize money for the top three projects. The prize money will be used by the winning departments to pursue future quality improvement efforts, thus perpetuating the QI cycle. The event was a rousing success with nearly 50 project submissions, 26 of which were chosen



(L to R): Daniel Sharbel (PGY3), Christopher Leto (PGY5), Phillip Coule (CMO), Thomas Holmes (PGY2), Stil Kountakis (Chair), Renee Booth (PGY2)



(L to R): Christopher Leto (PGY5), Michael Groves (Program Director), Thomas Holmes (PGY2), Daniel Sharbel (PGY3), Renee Booth (PGY2)

to be highlighted in poster form at the Symposium. A great crowd of physicians, nurses, medical students, hospital staff, patients and families flowed through the poster session over two hours, asking questions and giving great feedback to the presenters.

The Department of Otolaryngology – Head and Neck Surgery was well represented with 4 posters, and chief resident, Dr. Chris Leto, and his team won the 3rd Place Prize for their project, "Eliminating Tracheostomy Tube-Related Pressure Injuries in Adults." All in all, the Symposium was a huge success and looks like it will become an annual event, proving that quality improvement is a vital part of what we do and how we here at AU strive to provide the best care possible to our patients.

QUALITY IMPROVEMENT PROJECT

Eliminating Tracheostomy Tube-Related Pressure Injuries in Adults

Christopher J. Leto, M.D.¹, Daniel J. Carroll, M.D.¹, Mark A. Fritz, M.D.², Brian Ho, M.D.³, J. Kenneth Byrd, M.D., FACS¹, Michael W. Groves, M.D., FACS¹, Kevin C. Dellsperger, M.D., PhD⁴, Stilianos E. Kountakis, M.D., PhD, FACS¹, Gregory N. Postma MD¹

¹Augusta University, Department of Otolaryngology--Head & Neck Surgery, Augusta, GA

²University of Kentucky, Department of Otolaryngology--Head & Neck Surgery, Lexington, KY

³Nicklaus Children's Hospital, Miami, FL

⁴Augusta University, Augusta University Health, Augusta, GA

Background:

Medical device related pressure injuries are under scrutiny due to the impact on Medicare reimbursement and to increased attention by payers focus on quality metrics in health care. We assessed the frequency of tracheostomy tube-related pressure injuries (TTRPI) in adults requiring mechanical ventilation who underwent a tracheostomy following implementation of a protocol to reduce and potentially eliminate these injuries.

Methods:

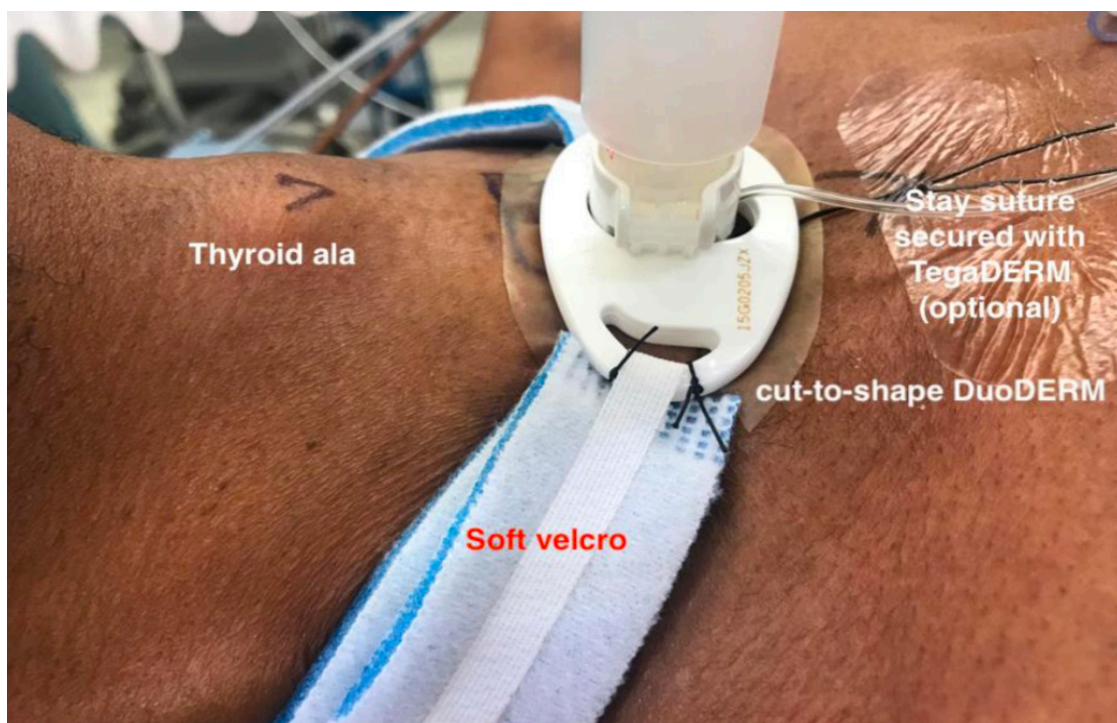
All adult patients who underwent tracheostomy by otolaryngologists from July 1, 2016 to February 28, 2018 had the following modifications to the surgical technique: foam collar placed rather than twill tie to secure the tracheostomy tube around the neck; hydrocolloid placed superior and inferior to the skin incision to buffer the flange; a deliberate air knot thrown in the four-point securing sutures. On post-operative day 3, the hydrocolloid was removed and the sutures cut. Increased purposeful communication with nurses and respiratory therapists enhanced attention to risk factors for TTRPIs. Number of TTRPIs were compared pre and post-intervention.

Results:

Ten TTRPIs occurred in 9 patients (10.6%) who underwent tracheostomy (n=85) in the twelve month pre-intervention period; 90% (n=9) were flange related and 10% (n=1) from the twill tie. In the nineteen-month period after protocol implementation, there were zero TTRPIs in 137 adult patients who underwent tracheostomy by otolaryngologists.

Conclusion:

Enhanced communication, awareness, responsibility, and changes to perioperative tracheostomy protocols eliminated TTRPIs in adult patients at our institution. Our results suggest that further study is warranted and potential widespread implementation may significantly decrease the incidence of TTRPIs in adults who undergo tracheostomy.



RESIDENCY PROGRAM EXPANSION



*Dr. Gregory Kelts is presented with an appreciation award by Dr. Dan Sharbel (PGY 3) during the graduation ceremony.**

In keeping with our commitment to provide our residents with the best possible training, the residency program at the Medical College of Georgia is always looking for opportunities to expand and strengthen our educational experience. Recent examples include increasing from one month to six weeks our Facial Plastics rotation working with Dr. Achih Chen at the Georgia Center for Facial Plastic Surgery, sending residents to work with Dr. Bill Moretz, Jr. at the Southern Otologic Clinic, creating a formal 2-week Allergy and Immunology rotation with Dr. Kathleen May, reinstating the Oral Maxillofacial Surgery rotation for our PGY-4's, and adding a 2-week block for our PGY-2 residents to work with Neuroradiology and Speech/Audiology staff. All of these innovations have been well-received by the residents who appreciate the time to more thoroughly engage with the associated specialties. This past academic year, we also added an entirely new training site – the Dwight D. Eisenhower Army Medical Center at nearby Fort Gordon. Partnering with Dr. Gregory Kelts, MAJ MC, we have greatly expanded our facial plastic and reconstructive experience, with residents actively assisting in or performing a plethora of cosmetic, functional and reconstructive cases. Dr. Kelts, who also holds a Master's in Education, is an outstanding teacher and has been an incredible addition to the team. We want to thank him and ALL of our volunteer faculty for allowing us to extend our resident experience beyond our specialty and beyond the walls of our hospital!

2019 PORUBSKY SYMPOSIUM AND RESIDENT GRADUATION



C. Gaelyn Garrett

We had a wonderful turnout for the 17th Annual Porubsky Symposium and Alumni event. Guests from Georgia, Florida, North Carolina and South Carolina, as well as several Residency Program Alumni enjoyed some great CME lectures and resident research presentations.

Dr. C. Gaelyn Garrett provided two excellent Keynote lectures and our Residency Alumnus, Dr. Bernard Durante, and Fellowship Alumna, Dr. Ashli O'Rourke both inspired the audience with discussions of innovative technologies and techniques in our ever changing field.



Bernard Durante



Ashli O'Rourke

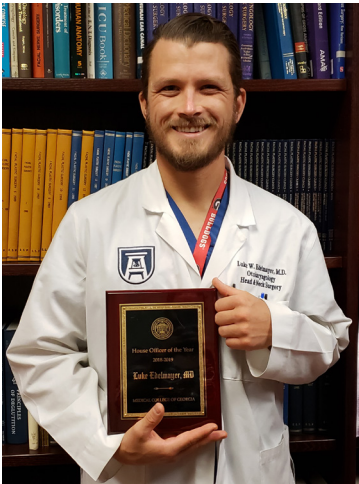
This was followed by a dominant performance by Dr. Garrett and her teammates, Drs. David Terris, Amy Blanchard and Arthur Torsiglieri, riding the "birdie-train" to victory in the Annual Porubsky Golf Tournament. The whole weekend was capped off in style with our resident and fellow graduation ceremony, where many laughs were had and all our graduates were congratulated and sent forth in good cheer. Overall, it was a fantastic event, and we hope more of our friends and alumni from neighboring states and all over the country will join us next year.



*Chief residents Christopher Leto and Colin Fuller**

*Photos courtesy of David Russell Photography

MCG-AU RESIDENT OF THE YEAR



Luke Edelmayer (PGY3) was named the 2019 MCG Resident of the Year. Luke is only the second Otolaryngology-Head and Neck Surgery resident to receive this honor.

Luke has made a significant impact in our department despite only being halfway through his training. What stands out most about Luke is his prodigious work ethic. He has a huge gamut of projects underway at all times, but miraculously, finds a way to balance it all and keep everything moving forward to completion. He is performing well above the level expected at this point in his training. Luke has several manuscripts in progress and has had at least two accepted for publication since starting residency. He is also very active in quality improvement initiatives within our department. Last year he helped design and implement a feature in PowerChart that identifies patients with difficult airways in a large on-screen alert anytime a provider opens the chart. This is an innovation that could legitimately save patient lives and could potentially be added to Cerner PowerChart packages used throughout the country. He is currently working on a design for a cheap and reliable adaptor to connect an incentive spirometer to a tracheotomy, so our head/neck cancer patients can use them and prevent post-operative pulmonary complications.

Luke is also highly regarded by the medical students for his outstanding teaching efforts. He always receives high marks from them in terms of the quality and volume of teaching he provides.

Impressively, Luke is equally as active and hard-working outside of the hospital and clinics. He has a growing family and is a dedicated and loving father and husband.

Finally, Luke also has wonderful musical talents, composing and performing songs for charity events around town, and his family regularly visits nursing homes to sing for the residents.

We are fortunate to have him as a member of our department and truly feel he is deserving of the title "Resident of the Year."

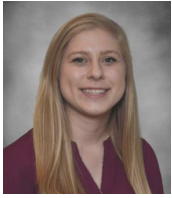


(L to R): David Hess (Dean), Julian Nussbaum, ROY finalist, Walter Moore (GME), Luke Edelmayer, ROY finalist, ROY finalist, Gretchen Caughman (Provost), Brooks Keel (President)

DEAN'S SUMMER RESEARCH PROGRAM

The Medical College of Georgia Medical Scholars Program offers the opportunity for medical students in good academic standing to engage in research activities in close mentorship with faculty who are nationally and internationally distinguished scientists, clinicians, and academic scholars. This year our department will host three students who will work with two of our faculty to further develop their research skills. They are: Brittany Gill (Kountakis), Brock Parman (Kountakis) and Arsh Momin (Carroll).

HAIL



PGY-1 Resident
Diana Bigler
from University of
Kentucky



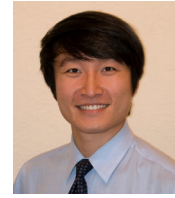
PGY-1 Resident
Rebecca Paquin
from MCG-AU



H&NS Fellow
Ahmad Elteley
from Cairo
University



Endocrine
Surgery Fellow
**David
Temmermand**
from Rowan
University



Laryngology
Fellow
Zao Mike Yang
from Louisiana
State University -
Shreveport



Rhinology-Skull
Base Fellow
Chadi Makary
from West
Virginia University

FAREWELL



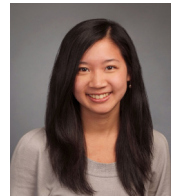
Chief Resident
Colin Fuller
will complete
a pediatric
otolaryngology
fellowship at
the University of
Arkansas



Chief Resident
Christopher Leto
will join a private
practice in
Tampa, FL



Endocrine
Surgery Fellow
Ahmad Elteley
will pursue a
H&NS fellowship
at MCG-AU



Laryngology
Fellow
Stephanie Teng
will join the
faculty at Beth
Israel Deaconess
Medical Center in
Boston



Rhinology-Skull
Base Fellow
Aykut Unsal
will join the
faculty at Drexel
University in
Philadelphia

2019 CONSULTANT OF THE YEAR

– NIRUPMA SHARMA, MD



We are delighted to announce that Nirupma Sharma, MD was the unanimous selection for the Department of Otolaryngology Consultant of the Year for 2019. Dr. Sharma is Associate Professor and Chief of Pediatric Hospital Medicine in the Department of Pediatrics at Augusta University. She received her medical degree from the Government Medical College of Rani Durgavati University in Jabalpur, India. She completed residency training in Obstetrics and Gynecology at the Institute of Medical Education and Research in Chandigarh, India, and residency training in Pediatrics at the State University of New York Health Sciences Center in Brooklyn. Dr. Sharma joined the faculty at MCG in 2008 and has been a tremendous asset to our Division of Pediatric Otolaryngology. We are immensely grateful for the care that Dr. Sharma provides our pediatric patients.

Otolaryngology - Head and Neck Surgery Team

SPECIALTIES INCLUDE:

- Head and neck cancer
- Thyroid and parathyroid surgery
- Facial plastic surgery
- Otology/Neurotology
- Rhinology (Nose and Sinuses)
- Laryngology (Voice, airway and swallowing disorders)
- Sleep apnea
- Pediatric otolaryngology (ENT)
- Skull base disorders

The Medical College of Georgia at Augusta University Otolaryngology-Head and Neck Surgery Department offers treatment of conditions affecting the ears, nose, throat, and head and neck including diagnostic procedures, minor surgical procedures, speech and language evaluation and treatment, and full audiology services including hearing aids and cochlear implants.

MEET THE TEAM



Stil Kountakis, MD, PhD, FACS
Professor and Chairman
Rhinology and Sinus Surgery



Gregory N. Postma, MD
Professor and Vice
Chairman
Chief, Laryngology



W. Greer Albergotti, III, MD
Assistant Professor
Head and Neck Surgery



J. Kenneth Byrd, MD
Associate Professor
Chief, Head and Neck
Surgery



William W. Carroll, MD
Assistant Professor
Pediatric Otolaryngology



Michael W. Groves, MD, FACS
Associate Professor,
General Otolaryngology
Residency Program Director



Mingsi Li, MD
Assistant Professor
Sleep Disorders,
Rhinology – Sinus/Skull
Base Surgery



J. Drew Prosser, MD
Assistant Professor
Chief, Pediatric
Otolaryngology



Camilo A. Reyes, MD
Assistant Professor
Facial Plastic and
Reconstructive Surgery,
Skull Base Surgery



Mohammad Seyyedi, MD
Assistant Professor
Otology/Neurotology



David J. Terris, MD
Regents' Professor
Thyroid and Parathyroid
Surgery



Sungmee Kim, PA-C
Physician Assistant II
Thyroid and Parathyroid
Surgery



Marc LeDuc, PA-C
Physician Assistant II
Otology/Neurotology



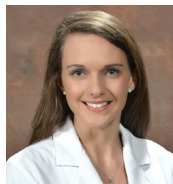
Heather C. Bentley, FNP-C
Nurse Practitioner
Head and Neck Surgery



Krystal Oestreich, DNP, CPNP-PC
Nurse Practitioner
Pediatric Otolaryngology



Brian B. Shirley, PNP-BC
Nurse Practitioner
Pediatric Otolaryngology



Sarah C. King, AuD, CCC-A
Director of Audiology



Laura E. Barber, AuD, CCC-A
Audiologist



Sarah S. Storey, AuD, CCC-A
Audiologist

Otolaryngology/Head and Neck Surgery Appointments

Adults	706-721-4400
Pediatric	706-721-5500
Adult Head & Neck Cancer	706-721-6744

Department of Otolaryngology-Head and Neck Surgery

Medical College of Georgia
Augusta University
1120 15th Street, BP 4109
Augusta, GA 30912
Academic Office: 706-721-6100

Utilize our physician referral tool making it simple for you and your patients –
augustahealth.org/referral



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PROFESSIONAL OPPORTUNITIES

Otologist/Neurotologist: We are seeking an Assistant or Associate Professor who wishes to join a thriving academic Otolaryngology/Neurotology practice. Fellowship/Postdoctoral training required.

Pediatric Otolaryngologist: We are seeking an Assistant or Associate Professor to join a thriving academic practice of two pediatric otolaryngologists. Fellowship training required.

To apply and receive additional information about the support associated with these opportunities, please send a curriculum vitae to Dr. Stil Kountakis, skountakis@augusta.edu.

Fellowships:

Endocrine/Head and Neck Surgery

Contact Dr. David Terris, dterris@augusta.edu

Rhinology and Sinus/Skull Base Surgery

Contact Dr. Stil Kountakis, skountakis@augusta.edu

Laryngology

Contact Dr. Gregory Postma, gpostma@augusta.edu

EDUCATIONAL EVENTS

April 29 - May 2, 2020:

Southern States Rhinology Symposium
 Kiawah Island, South Carolina
 southernstatesrhinology.org

June 12-13, 2020:

Eighteenth Annual Porubsky Symposium and Alumni Event
 Augusta, Georgia
 aoefdn.org/porubsky

Giving Opportunities

Designate Your Gift to AU Otolaryngology-HNS

- Otolaryngology-HNS Fund \$ _____
- Porubsky Resident Education Fund \$ _____
- Otolaryngology Fund \$ _____
- Laryngology Fund \$ _____
- Skull Base Academic Fund \$ _____

TOTAL \$ _____

- Check enclosed to GHS Foundation
- CREDIT CARD please complete the following
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Card # _____

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Full Name _____

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Gifts are tax-deductible to the extent provided by law. For more information, call 706-721-2515 or visit augusta.edu/igive. Mail to: Eileen Brandon, Office of Advancement, 1120 15th St. FI-1031, Augusta, GA 30912.