american rhinologic society **NOSE DEVISE** Society ISUE #1 2012



Michael Setzen, MD

President's Message

To quote Napoleon Bonaparte "Ability is nothing without Opportunity"

The American Rhinologic Society has been actively engaged in addressing issues with respect to our mission statement with the goal of the strategic plan being utmost on our radar screen-the ARS has both the Ability and the Opportunity to make this society the Best. In the words of Ralph Waldo Emerson "The reward of a thing well done is to have done it".

The ARS Board together with its Committee Chairs and Members are reaping the rewards of those tasks we are actively doing on a daily basis. Most importantly, we have successfully planned our ARS Summer Sinus Symposium to be held in Chicago on July 13 and 14, 2012. The goal of this meeting is to bring together all practicing otolaryngologists that do any aspect of Rhinology and not only ARS members, but any member of the American Academy of Otolaryngology-Head and Neck Surgery. We anticipate both community-based and university-based otolaryngologists and rhinologists will attend this first Annual Summer Sinus Symposium. Featured guests will include our guest of honor, David Kennedy; also our current President of the American Academy of Otolaryngology Head and Neck Surgery, Rodney Lusk; and Karen Zupko, Regan Thomas and Dean Toriumi to name some of our featured speakers. Our faculty includes otolaryngologists in all areas related to the nose including reflux, sleep apnea and snoring, rhinoplasty, the orbit, skull base surgery, and practice management with respect to this. Rick Chandra and Kevin Welch together with the Program Committee are responsible for spearheading this new exciting ARS Symposium.

As we look ahead to COSM, we anticipate a great meeting in Sunny San Diego on April 19th and 20th-Todd Kingdom as Program Chair has something special planned, so Save the Date.

On the educational front, we have had two successful webinars in which residents have had the opportunity to attend lectures in the comfort of their own home. We are trying to make these webinars available to all residents and residency programs, but space is the issue. I do want to thank Joe Han for making this possible.

The webinar has also allowed the Board of Directors to engage in an online meeting. This was successfully held on November 14, 2011. We will make this webinar available so that all committees will have the opportunity to have face-to face online meetings.

Our web page has been revitalized thanks to the hard work and effort of Kevin Welch and the IT committee. This will allow us to function as we should in this digital age.

Our winter board meeting was held on January 14th in Boca Raton, Florida.

On the membership front, we are anxious to grow our successful society from our current membership of 1,300 with a goal of at least 1,500 to be achieved during the next year. We will invite all practicing otolaryngologists with an interest in the nose to join our prestigious society. We also invite all Residents in training to consider joining the ARS.



The American Rhinologic Society would like to thank Acclarent, ASL, Entellus, Eyemaginations, NeilMed, Olympus/Gyrus and Xoran for partnering with the ARS Newsletter for 2011.

www.american-rhinologic.org jo<u>in the ARS</u>____

ARS Officers

Michael Setzen, MD President Todd Kingdom, MD President-Elect Peter Hwang, MD Secretary Joseph Jacobs, MD Treasurer Timothy Smith, MD First Vice President Roy Casiano, MD Second Vice President Brent Senior, MD Immediate Past President Stil Kountakis, MD

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2011 Dates

1st Annual Official American Rhinologic Society (ARS) *Summer Sinus Symposium* July 13 & 14, 2012 Chicago, IL Featuring didactic and interactive learning with global experts in rhinology.

Details online at: www.american-rhinologic.org /ars_courses

ARS Calendar of Events

www.american-rhinologic.org /calendar_events

President's Report, cont'd.

Advocacy issues have continued to be critical to the survival of our subspecialty. Of importance, the issue of balloon dilation technology continues to be at the forefront of most of our advocacy-related issues. Blue Cross Blue Shield Anthem has battled us with respect to the issue of balloon dilation as a standalone procedure, being investigational, experimental, and not medically necessary. With the help of the Academy, the ARS, and the Rhinology and Paranasal Sinus Committee, we have stood steadfast in our opposition to their opinion, but we have been unable to change their guidelines with respect to this matter. Their opinion is that the evidence currently available in the literature is not strong enough to support our position.

We did need to resurvey nasal endoscopy, CPT Code 31231, since the initial survey response was floored, and a new survey was held during December 2011. All members of the ARS were asked to participate in this survey and it is critical that when asked to complete the survey, that this be done correctly and diligently, since reimbursement is based upon the results of an accurate survey.

CPT® Assistant December 2011 / Volume 21 Issue 12 recently published "Coding Clarification: Post-Endoscopic Sinus Surgery Debridements" and this will help our members with respect to guidelines for reimbursement as it supports the need for post op debridement to be done at the discretion of the operating surgeon and dependent upon the clinical scenario-I encourage you to review this, and use it when appropriate debridement is denied.

Pete Batra will be sending out a CT sinus survey and this will be done as a combined effort with AAOHNS-this will be sent out to all ARS and Academy members.

We continue to promote the activities of the ARS and we have been successful in doing this through our newsletter, Nose News, our updated web page, and blast e-mails.

Research continues to be a vibrant area of our subspecialty and this will continue to be the backbone of our society-Tim Smith and Andy Lane through their efforts will keep us at the forefront.

I am pleased to inform you that the International Forum of Allergy and Rhinology has now been accepted for listing in Medline. All our manuscripts, including all those published to date, will be discoverable through Medline/PubMed®. Thank You to those ARS members for their hard work over the past 18 months, and especially since the Journal went into print earlier this year. We need to invite our members esp. the International members to submit to IFAR. One anticipates a strong impact factor soon.

Collaboration with the Academy and other sister Societies through SSAC is critical. In particular we are making efforts to work closer with AAOA with respect to Education and Research initiatives. Rick Pillsbury and I together with Todd Kingdom and Sandra Lin are actively engaged in discussion with respect to the ARS and AAOA developing a closer relationship on many fronts. We also plan to work with, ABOto with respect to MOC. The ARS and AAFPRS will be another area of collaboration because of our common interest in the nose.

I do want to thank the Board of Directors, the Committee Chairs, and all of those involved on committees for the wonderful effort they have put in to allow the ARS to continue to flourish. One anticipates a vibrant exciting year in the year 2012.

As President, it is my privilege and pleasure to continue to see that the ARS achieves its goals and satisfy its mission statement.



"Meaningful Use" - Medicare Electronic Health Records Incentive Program and other PAC Updates

Jivianne Lee, MD

Jivianne Lee, MD

The ARS patient advocacy committee (PAC) would first like express our deepest thanks and appreciation to Pete Batra, MD for his outstanding leadership and years of service as our immediate past chair. We would also like to congratulate him on his appointment to the ARS Board of Directors and are looking forward to his continued mentorship as our new ARS board liaison.

As we look ahead to 2012 and beyond, continued awareness of Center for Medicare & Medicaid Services (CMS) rules/updates with respect to implementation and reporting of electronic health records (EHR) has become essential. In 2009, as part of the economic stimulus package delineated by the American Recovery and Reinvestment Act (ARRA), \$36 billion was invested by the federal government in health information technology (HIT) with \$34 billion allotted for distribution directly to providers who successfully demonstrate "meaningful use" of a certified EHR. With this EHR incentive program, non hospital-based Medicare/Medicaid providers are eligible to receive up to \$44,000 and \$63,750 respectively over a 5-year period beginning in 2011. Physicians located in designated "health professions shortage areas" may also qualify for an additional 10% in supplemental bonuses. All providers with a pre-existing EHR or who implement an EHR prior to 2014 may participate in this incentive plan.

Three criteria for "meaningful use" of a certified EHR were initially outlined by the ARRA: 1) EHR must be shown to be used in a meaningful way that incorporates ePrescribing, 2) EHR is connected in such a manner as to facilitate exchange of information, and 3) Providers report on predetermined clinical quality measures (CQMs).

In July 2010, the final criteria for "meaningful use" of the EHR Medicare Incentive Program were released. Currently, 20 total CQMs must be reported in order to qualify: 15 core measures (i.e. demographic data, vital signs, problem list, active medication list, allergies, smoking status, eprescriptions, medication order entries, etc.) and 5 menu set measures (in which providers may choose from a list of 10.) Examples of individual core measure reporting criteria are listed in Figure 1. Attestations must then be completed and data electronically uploaded via a CMS designated portal, with aggregate numerators and denominators provided for each required measure throughout the reporting period. In July 2011, CMS proposed that eligible physicians (EPs) also participate in a Physician Quality Reporting System (PQRS)-Medicare EHR Incentive Pilot, in which calculated results are directly transmitted to the CMS by the EP's EHR via a secure portal or by a PQRS-EHR data submission vendor on the EP's behalf. For further details and latest updates on the EHR incentive program, members are advised to consult the CMS website https://ehrincentives.cms.gov.

In addition to the EHR incentive program, the CMS has also established an electronic prescribing incentive program (ePrescribing). Providers who successfully meet the reporting criteria (i.e. eRx measure reported 25 times during the reporting period) are eligible for additional incentive payments (+1% in 2012) with potential penalties incurred against unsuccessful e-prescribers. The most recently proposed CMS rules

Clinical Quality Measures

Measure	Reporting Criteria		
Demographic data	>50% patients recorded		
Vital signs	>50% patients > 2 yrs of age with height, weight, & BP recorded		
Problem List	>80% patients with at least one entry recorded		
Active Med List	>80% patients with at least one entry recorded		
Med Allergy List	>80% patients with at least one entry recorded		
Smoking Status	>50% patients 13 yrs of age or older recorded		

ePrescribing Incentive Program

	2012 incentive	2013 incentive	2013 payment adjustment
Incentive or Penalty	+1%	+0.5%	-1.5%
Reporting Periods	12 months (1/1/12- 12/31/12)	12 months (1/1/12- 12/31/12)	12 months (1/1/12-12/31/12) or 6 months (1/1/12- 6/30/12)
Reporting Methods	Claims, registry, EHR	Claims, registry, EHR	Claims, registry, EHR
Criteria for Successful Reporting	Report eRx measure 25x during reporting period	Report eRx measure 25x during reporting period	Report eRx measure 25x during reporting period or report eRX measure 10x for any service (6mo)

regarding reporting criteria, methods, and periods for ePrescribing were released in July 2011 and are summarized in Figure 2. For further information on the eRx incentive program, ARS members may refer to the CMS website www.cms.gov/erxincentive.

With respect to ARS PAC related news, ARS members should be aware that the CPT code 31231 (diagnostic nasal endoscopy) has been sent to the Relative Value Update Committee (RUC) for review and is in the process of being resurveyed. The ARS is currently assisting the AAO-HNS CPT/RUC in determining its value and surveys have been sent to ARS volunteers. In terms of upcoming projects, the ARS PAC has also been collaborating with the AAO-HNS on creation of a CT Practice Patterns Survey. The current form has already been vetted by the ARS PAC/ARS Board of Directors and is being evaluated by the AAO-HNS Imaging Committee. It should soon be ready for launch to the general ARS/AAO-HNS membership in the near future. Finally, given the rising prevalence of endoscopic skull base surgery, the ARS PAC has also commenced work on a Skull Base Surgery Practice Patterns Survey and will keep members updated with regards to its progress. If any ARS members have any PAC related issues, please do not hesitate to contact the ARS PAC and we will do our best to assist you in any way we can.

SAVE THE DATES



July 13 - 14, 2012

Westin Michigan Avenue

Don't miss the *FIRST EVER* American Rhinologic Society SUMMER SINUS SYMPOSIUM in Chicago, IL

ALL practicing otolaryngologists - Community & University - who perform rhinology and related medicine can come together to expand their practices by learning from the experts in the fields of Rhinology, Sleep Apnea, Reflux, Rhinoplasty, Skull Base Surgery, Practice Management, and new applications, including Balloon Sinuplasty.

Course Highlights:

Course faculty are the national leaders in rhinology and sinus surgery.



• Honored guest **David Kennedy** will perform a televised sinus dissection

• **Brent Senior** will give the keynote address on the Past, Present and Future of Sinus Surgery

David Kennedy, MD • **Tim Smith** and distinguished panelists will discuss Difficult Situations we all

encounter in Sinus Surgery and what to do when they happen

• **Joe Jacobs** will demystify the frontal sinus and frontal sinus surgery

• **Todd Kingdom** and distinguished panelists will examine Endoscopic Orbital Surgery for the Otolaryngologist • **Peter Hwang** and distinguished panelists will tackle the toughest sinus cases in the country (submitted by you and course participants)

• Karen Zupko will be featured in a session dedicated to maximizing your practice efficiency

The ARS Summer Sinus Symposium in Chicago promises to be an exciting, highly educational program that brings together interested otolaryngologists in one forum to discuss all aspects of rhinology and the impact these issues have on patient care in your practice. National leaders in rhinology will lead discussions of pertinent clinical issues that affect all otolaryngologists practicing rhinology.

Complete program details, including hotel, registration, and transportation information will be available in coming months. Please visit the ARS website at *www.american-rhinologic.org/ars_courses* for more information.



Spring Mtg/COSM



Todd Kingdom, MD

Planning for the ARS Spring Meeting as part of the 115th COSM in San Diego is well under way. Once again the ARS sessions will be held at the Manchester Grand Hyatt hotel. As Program Chairman, I have invited 21 ARS members to help me review abstracts and deliver this exciting program. We are fortunate enough to have expanded meeting time allocated with a full day on Thursday, April 19 and an afternoon session on Friday, April 20.

I anticipate filling these sessions with approximately 40 scientific abstract presentations, 4-5 expert panels for discussion of clinically relevant topics, 3-4 invited guest lectures on select topics of interest, and dozens of poster presentations. Topics will include:

- Allergy
- · Management of cough
- · Peri-operative issues in rhinology
- Avoiding complications in ESS

· Advances in endoscopic skull base surgery

I am also working on a combined effort with the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS) for one of the ARS sessions, as that organization will be returning to COSM. I see collaboration with these other societies as critical for serving our membership and providing outstanding educational opportunities. I look forward to seeing you in San Diego. For additional information check out http://www.americanrhinologic.org/spring_meeting.

Program Committee:

Tim Smith, Richard Orlandi, Mickey Stewart, Kevin Welch, Shu Das, Vijay Ramakrishnan, David Poetker, Devvani Lal, Charles Ebert, Amet Singh, Eric Holbrook, Greg Davis, Sarah Wise, Parul Goyal, Joe Han, Jeff Suh, Doug Reh, David Conley, Chris Church, Nate Sautter, Nithin Adappa



Case of the Quarter

Mitchell Gore, MD Charles Ebert, MD

A 19-day-old girl

presented from an outside hospital with a 6-day history of erythema surrounding her right eye. She had been born at term and was breast-fed. The patient's mother, sister, father, and grandfather all had a history of methicillin resistant staph aureus (MRSA) infection. The erythema spread and she developed edema surrounding her eye, extending from the right upper eyelid to the chin. She became febrile to 101.1 and presented to her pediatrician. She Fig 2a was admitted for a septic workup at a nearby regional hospital and started on vancomycin once blood cultures came back as MRSA. An initial head CT showed orbital cellulitis without focal abscess. Three days later, due to worsening erythema and proptosis, a paranasal sinus CT was obtained and demonstrated an orbital abscess. At this point she was transferred for surgical intervention. Physical exam revealed right evelid edema with proptosis of the globe. Review of the outside CT (Figure 1A, 1B) revealed periorbital soft tissue swelling, a proptotic globe, and phlegmon versus subperiosteal orbital abscess subjacent to the inferior rectus muscle, with an orbital abscess from the periorbital area into the retro-orbital region measuring 1x0.8 cm and ethmoid opacification.

What would you do next?

The patient was taken to the operating room by the Rhinology and Pediatric Otolaryngology teams. The neonate was registered to the Brainlab image guidance system using surface matching registration. Endoscopy was performed using the 3mm Storz Hopkins Rod, which demonstrated edema of the middle meatus. Due to the intranasal edema and inferomedial location of the abscess, an external approach using a standard Lynch incision was used, and subperiosteal dissection with image guidance provided access to the orbital abscess pocket (Figure 2A). The cavity was opened and all loculations broken up; the cavity was irrigated with



Fig 1a





Fig 2b

Fig 1b

Bacitracin-saline. Packing was placed in the cavity and the incision was closed with absorbable gut sutures (Figure 2B). Intraoperative cultures grew ORSA. The iodoform packing was removed on post-operative day two, and her proptosis, erythema, and edema all resolved. She was discharged on postoperative day 5 to complete a total of 14 days of intravenous Vancomycin.

Orbital abscess formation often results from spread of infection from the evelids, teeth, or paranasal sinuses, or trauma, hematogenous spread, or acute dacryocystitis. Orbital abscess is potentially sight- and life-threatening, and if untreated it can result in blindness, meningitis, cavernous sinus thrombosis, and brain abscess.

Orbits/paranasal sinus CT scanning is recommended for operative planning and diagnosis, and once the diagnosis of orbital abscess is confirmed, prompt surgical drainage is required. In infants, endoscopic drainage is often possible, but in cases where the intranasal anatomy does not permit endoscopic drainage or with a lateral or superior abscess an external procedure may be required. Long-term culture-directed intravenous antibiotics are usually continued post-operatively. Although orbital complications secondary to sinusitis or dacryocystitis in the pediatric patient are rare, they can lead to significant morbidity and mortality if left untreated.



Rhinology Fellows Course

Seth M. Brown, MD

For the fourth consecutive year, the American Rhinology Society will be sponsoring a course for our incoming rhinology fellows. This has been a joint venture between the Resident and Fellow's Committee (Seth Brown) and the Education Committee (Joseph Han).

Open to all incoming rhinology fellow's, it offers the fellows not only an opportunity to learn but to interact and meet one another. This year in attendance will be our current president, Michael Setzen who will bring his vast business and coding knowledge to the fellows. The course is held in the Los Angeles areas and is open to all fellows free of charge due to generous support from Karl Storz Endoscopy. Nearly all our fellows attend this course, last year with participants coming from all over the United States, Canada, Lebanon, Singapore, and Australia.

The course includes a lecture module on sinus anatomy, physiology, and medical and surgical treatment of sinus disease. a business curriculum and a full sinus and skull base dissection. The goals of the course include: Educate the incoming fellows, improve patient care and safety, foster research interests in rhinology and sinus disease, promote academic endeavors, create collegiality, promote professionalism, generate interest in the ARS, and to prepare for clinical practice. The fellow sinus course is unique in that the course includes lectures on contract negotiation and coding, two areas that are not usually emphasized in training programs.

Furthermore, it includes a lecture on academic development, which helps prepare those fellows interested in looking for physician/scientist roles. To date the fellow's responses from this course has been overwhelmingly positive. We welcome ideas and feedback on ways to make this an ever improving program.

Recent Appointments

Newly Appointed Board Officers

Roy Casiano, MD (2nd Vice President) Pete Batra, MD (Board Member) Robert Kern, MD (Board Member)

Newly Appointed Committee Chairs:

Audit - Subinoy Das, MD Awards - David Poetker, MD By-Laws - Douglas Reh, MD CME - Raj Sindwani, MD Membership - Stephanie Joe, MD Ethics - Mark Zacharek, MD Patient Advocacy - Jivianne Lee, MD International Liaison - Nicolas Busaba, MD Resident's/Fellows - Belachew Tessema, MD

Newly Appointed Committee Members: Awards

Nathan Sautter, MD Naveen Bhandarkar, MD Ayesha Khalid, MD

Membership

Dean Martinelli, MD Bruce Tan, MD Eugene Chang, MD

Education

Jastin Antisel, MD David Conley, MD Jeffrey Suh, MD Benjamin Bleier, MD

Ethics

Spencer Payne, MD Cynthia Fisher, MD Liat Shama, MD Brian Rotenberg, MD Jean Kim, MD

IT Philip Harris, MD

Newsletter

Peter Manes, MD Nedra Joyner, MD Aaron Pearlman, MD

Patient Advocacy

Seth Brown, MD Russ Semm, MD Greg Davis, MD

Research Grants

Jayant Pinto, MD Eric Wang, MD Noam Cohen, MD (Chair Elect)

International Liaison

Avik Kumar Jana, MD Benjamin Macias, MD Alan Shikani, MD Ellie Rebeiz, MD Oswaldo Henriquez, MD Bozena Wrobel, MD Erin Wright, MD

Pediatric Rhinology

Joseph Bernstein, MD

Resident's/Fellows

Jamie Litvack, MD Lori Lemonnier, MD Stella Lee, MD Justin Turner, MD Deya Jourdy, MD Thomas Higgins, MD Seth Lieberman, MD Roheen Raithatha,MD Nathan Deckard, MD

Presidential Goals 2011-12 REWARDS

R-Research E-Education W-Website A-Advocacy R-membeRship D-Development S-mission Statement

You can support ARS Research!

From the strength of our recent Scientific Programs at both the Spring and Fall meetings, it is easy to see that research is at the heart of the future of our specialty. Each year, the ARS awards resident and new investigator grants in rhinology as a participating society of the AAO-HNSF CORE Grant program. Many of these small grants have served to support the early development of some of our brightest minds and future leaders of our specialty.

For the first time, members of the American Rhinologic Society will have the opportunity to make a direct donation to the ARS in support of research. Past grants have been largely supported by donations from industry, but in the ever-changing financial land-scape of medicine, it is up to us to ensure the strength and vitality of our specialty.

Details of the program will be announced prior to the Annual Meeting. We encourage members of the ARS to join us in investing in the future of rhinology by making a tax-deductible contribution.

Tax Deductible Donation - American Rhinologic Society (Tax ID# 36-6008801) 100% of your donation is tax-deductible.					
\$50\$100\$250\$500\$1,000					
\$50 - Friend in Research - Includes acknowledgement in print and recognition ribbon at Annual Meeting					
 \$100 - Bronze Friend in Research Includes acknowledgement in print and recognition ribbon at Annual Meeting 5% Discount on Annual Meeting Registration Fees (Applies to year of donation) 					
 \$250 - Silver Friend in Research Includes acknowledgement in print and recognition ribbon at Annual Meeting 10% Discount on Annual Meeting Registration Fees (Applies to year of donation) 					
 \$500 - Gold Partner in Research Includes acknowledgement in print and recognition ribbon at Annual Meeting 15% Discount on Annual Meeting Registration Fees (Applies to year of donation) 					
 \$1000 - Platinum Partner in Research Includes acknowledgement in print and recognition ribbon at annual meeting 20% Discount on Annual Meeting Registration Fees (Applies to year of donation) 5 year commitment of research support, includes Complimentary Annual Meeting Registration for that current year, certificate and special recognition pin during awards ceremony After 10 years of support, Complimentary Annual Meeting Registration for as long as membership remains in good standing, certificate and special recognition medal 					
Make check payable to: American Rhinologic Society - Research Fund (For Multi-Year Donations - See amounts due below)					
Check Amount: Check #					
Credit Card Payment (circle one): MasterCard Visa American Express					
Card Number: Exp. Date: Security#					
Name (Please Print):					
Address:					
City State: Zip:					
Tel: Fax:					
Email:					
 Please mail the tax deductible donation letter to the address above. Please fax the tax deductible donation letter to the fax # listed above Please email the tax deductible donation letter to the email address listed above. I wish to keep my donation anonymous. ARS member:YesNo 					
Multi-Year Commitment Silver Level - (5 years) Multi-Year Commitment - \$1250 (Credit Card will be charged \$1250) Gold Level - (5 Years) Multi-Year Commitment - \$2500 (Credit Card will be charged \$2500) Platinum Level - (5 Years) Multi-Year Commitment - \$5000 (Credit Card will be charged \$5000)					

Return form and donation to: American Rhinologic Society, PO Box 495, Warwick, NY 10990

Donations can also be made at: http://www.american-rhinologic.org/donate

2011 Awards

Presidential Citations: Susan Arias Jan Gosepath, MD David Kennedy, MD James Palmer, MD Wendi Perez Paul Toffel, MD

Golden Head Mirror Award:

Marvin Fried, MD Stilianos Kountakis, MD Ralph Metson, MD Michael Sillers, MD James Stankiewicz, MD

Maurice Cottle Award Andrew Lane, MD Timothy Smith, MD

Lifetime Achievement Award: Frederick Kuhn, MD

Too Young for a Lifetime Achievement Award Donald Lanza, MD

CORE New Investigator's Award Holly Boyer, MD

CORE Resident Research Award Samuel Oyer, MD Nicholas Sorrell, MD

Retiring Board Members Roy Casiano, MD Andrew Lane, MD

Retiring Consultants to the Board Rodney Schlosser, MD John DelGaudio, MD

On behalf of the ARS we wish convey our sincere condolences to the family of Dr. Wolfgang Draf. We will surely miss Dr. Draf and we thank him for the significant contributions he has made in Rhinology and Skull Base Surgery worldwide. Furthermore we thank Dr. Draf for the support he has shown to both the Academy and the ARS.

> Michael Setzen MD, President ARS

www.american-rhinologic.org

American Rhinologic Society Wendi Perez Administrator PO Box 495 Warwick, NY 10990

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If you would like have your upcoming rhinology meeting noted here, simply provide the editor with pertinent information: newsletter@american-rhinologic.org The American Rhinologic Society does not endorse these meetings but simply provides the list as a service to its members. The content of Nose News represents the opinions of the authors and does not necessarily reflect the opinions of the American Rhinologic Society.

The American Rhinologic Society Newsletter Editorial Office

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The American Rhinologic Society wants <u>YOU</u>!

Note from the President:

If you are a general otolaryngologist working in a community setting, the American Rhinologic Society wants you! We want you to be a member, and we want you to participate in the committee structure and leadership of the society. The ARS is the <u>only</u> society within otolaryngology dedicated to promoting education, research, and advocacy issues related to rhinology, sinus, and skull base surgery. Our journal, *International Forum of Allergy and Rhinology*, is the largest circulation rhinology journal presenting cutting edge and relevant rhinology information in an age of Maintenance of Certification--and it's a benefit of your membership. In short, the American Rhinologic Society deals with the issues you deal with and is concerned with the issues you are concerned with. Numbers matter - please consider joining, and getting involved, in our society.

Please return to: American Rhinologic Society, PO Box 495, Warwick, NY 10990 Fax: 845-986-1527, Email: ars.administration@gmail.com

Please Print Clearly:						
First Name:	Last Name:		Degree:			
Business Address:						
City:	State:	ZipCode:				
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Email:		Web Address:				
The ARS wants to serve our members. Plea	se help us get to kno	ow you.Please list issues that you fe	el are important to the field of Otolaryngology:			
1)						
2)						
Please list committees that you may be interested in participating in: For a complete list of ARS committees, please go to www.american-rhinologic.org						
1)		2)				
3)		4)				
Are you in Private Practice?Yes	No					
Current Hospital affiliation:		Acad	lemic Title:			
Have you ever attended an ARS meeting?YesNo If yes, when?						