

PRESIDENT'S MESSAGE



Joe Jacobs, MD
ARS President

The American Rhinologic Society successfully celebrated our 50th Anniversary in New York City September 18-20, 2004 with David Kennedy as our honored guest. Over 500 Otolaryngologists registered from both the national and international rhinologic community. The success of this meeting will herald a new era for our Society. These achievements which include both the scientific and social programs as well as enhanced corporate support will provide a building scaffold for the next 50 years. We have positioned ourselves to break new ground and provide the society and our membership with an opportunity to surpass previously established goals. The Society is well represented within the medical community through the untiring efforts of the individuals that comprise your ARS Board and the Committees.

We recently completed the Winter ARS Board Meeting in New York City. This session takes place yearly in a location chosen by the President. Our two annual Board Meetings which are open to all ARS members occur during the Spring (COSM) and Fall programs. During each Winter Board Meeting, the Executive Committee, Board, Consultants and committee representatives review activities and programs which have taken place during the year and, most importantly, establish new goals for the Society. Our success, although certainly based on the work effort and unparalleled experience of the Board Members and Consultants, is also substantially and directly related to the activities of our Committees. The ARS continues to seek out members who are interested in participation within our committee structure.

The Membership and Credentials Committees, chaired by Karen Fong and Peter Hwang respectively, proposed substantial changes in the credentialing process expediting approval of proposed new ARS members. Secondly, the ARS is embarking on a 50th Anniversary membership drive. The society will utilize the Newsletter as well as direct mailings to highlight the many and substantial benefits of ARS membership. The society is requesting each and every present member to seek out nonmember colleagues with an interest in Rhinology and direct them to Karen (fongka@ohsu.edu).

The society has numerous resources which have proven to be of substantial benefit to our membership highlighted by our newly designed web site, www.american-rhinologic.org. This site contains important and informative material concerning socioeconomic data, patient information as well as upcoming meeting information and registration. Martin Citardi chairs the Information Technology Committee and our "state of the art" web site is an example of Martin's and his committee's dedication to the Society.

SPRING 2005

The Education Committee, chaired by Todd Kingdom, is actively working on a proposal to solidify and coordinate the Rhinologic Fellowship application, interview and acceptance process. When complete this Rhinology Fellowship Director Consortium would act as an advisory group to the Education Committee on matters related to fellowship program development and modification. Todd has been working with Winston Vaughan, the previous chair, on this project.

Tom Tami, who chairs the Research Grant Committee, has successfully coordinated the ARS CORE grant review process. During the last cycle, January 2004, a total of 8 grant applications were submitted for ARS Research Awards. Kelvin Lee and Tim Smith are the ARS Grant Committee representatives to CORE. The funds that enable the ARS to grant such awards are raised by Paul Toffel, a Past President, through unrestricted corporate research support. The Society is extremely indebted to Paul for his untiring and successful effort.

The Awards Committee, chaired by Allen Seiden, is actively revamping the online abstract submission process to enable authors to simultaneously designate their scientific material for ARS award consideration. These proposals were reviewed at the Winter Board and presented by Rich Lebowitz who is a member of the Committee. Jim Stankiewicz and his successor as chair of the ACCME committee, Jim Palmer, recently completed a thorough and painstakingly detailed submission of material to the ACCME for credentialing purposes. Marvin Fried, our present Secretary and Second Vice-President as well as Wendi Perez, our Administrator, were involved in this endeavor.

Mike Setzen, Chair of the Patient Advocacy Committee, continues to present pertinent information during all of our scientific meetings. He has also been charged with a project to update patient advocacy material on the ARS web site concerning coding, reimbursement as well as sample letters which members can submit to contest payor denials.

The Bylaws Committee through the present Chair, Bill Bolger, as well as Andy Lane who will succeed Bill, has updated our Bylaws and Policy and Procedures Manual. This was a mammoth task which has recently been completed. This material will be modified as needed to reflect changes in ARS structure and function.

The Audit and Pediatric Committees, Chaired by Stil Kountakis and Rande Lazar respectively, are more recent additions to the Society and will be assuming greater importance over the next few years. We have organized a Business Relations Committee with Jim Hadley, Howard Levine and myself as members. The charge of this committee is to develop programs to attract unrestricted educational grants which will continue to strengthen the Society.

continued on pg. 2

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Karen Fong, MD
Todd Kingdom, MD



The American Rhinologic Society would like to thank Gyrus ENT for partnering with the ARS Newsletter for 2005

PRESIDENTS MESSAGE, CONT.

Joe Jacobs, MD, *President of ARS*

continued from pg. 1,

Mike Sillers, President-Elect, is the Program Chair for the upcoming COSM ARS meeting at the Boca Raton Resort and Spa in Boca Raton Florida May 13-15, 2005 while the Fall ARS meeting will take place at the Westin Bonaventure Hotel & Suites in Los Angeles California September 23-24, 2005. The first David Kennedy Lectureship, established during our 50th Anniversary, will highlight the scientific program in LA. David manages our society's finances as Treasurer and through his many contacts within the International Rhinologic community enhances our reputation. Marvin Fried, our Secretary, working with our superb administrator Wendi Perez, have done a remarkable job of coordinating the increasingly complex administrative aspects related to ARS activities. Brent Senior, Editor of our Newsletter, will assume the Secretarial Position in September of 2005 as Marvin Fried ascends the ladder to become the First Vice-President. Richard Orlandi, a present Consultant to the Society, has accepted responsibility of Editor.

Howard Levine, our First Vice-President, has been appointed President of the Sinus and Allergy Health Partnership which is presently reorganizing to play an even greater role in the sphere of Rhinology. Our past Presidents Jim Hadley and Don Lanza will continue to exert significant influence within our Society and the Rhinologic community. Don and Jim had a major role in the recent publication, Rhinosinusitis: Establishing Definitions for Clinical Research and Patient Care in Otolaryngology-Head and Neck Surgery.

In closing, I want to personally thank our membership for their continuing support of this organization as well as the Executive Committee, Board and Consultants for their wisdom, advice and responsiveness. Lastly, my appreciation for their patience goes to my wife Patti, daughters Stacy and Allison as well as their husbands Rich and Jeff.

BOARD OF DIRECTORS WINTER MEETING

New York City – December 4, 2005

The Board of Directors of the American Rhinologic Society recently met for its annual winter meeting in New York City. The board was joined by its consultants and by the chairpersons of the various committees. Topics of discussion included advocacy issues such as image guidance reimbursement in ambulatory surgery centers. This installment of Nose News contains an article by Dr. Michael Setzen, chair of the patient advocacy committee, which details the issues involved. Great attention was also paid to increasing the value of membership in the ARS and to the recruitment of new members. Under Dr. Joseph Jacob's direction, the membership and credentialing committees have been charged with analyzing these issues and have come up with a number of recommendations that were discussed at the meeting. Dr. Karen Fong, chair of the membership committee, outlines some of these changes in her article. Website improvements, rhinology fellowship enhancements, and many other issues were discussed by the board.



The Board of Directors, its consultants, and its committee members serve for fixed terms on a volunteer basis. ARS members interested in assisting in any of these capacities are encouraged to contact Dr. Joseph Jacobs, ARS President.

NEW DEFINITIONS OF RHINOSINUSITIS ARE CIRCULATED THROUGH TWO JOURNALS SIMULTANEOUSLY

Donald Lanza, M.D., FARS



Our scientific understanding of rhinosinusitis that affects millions of lives continues to be hampered by lack of consensus on how to define the various forms of this disorder. In the December supplements of Otolaryngology-Head & Neck Surgery and the Journal of Allergy & Clinical Immunology, yet new definitions of rhinosinusitis are advanced.

Recognizing continued need for improvements on existing definitions for differing forms of rhinosinusitis five national societies, The American Academy of Allergy, Asthma and Immunology (AAAAI); The American Academy of Otolaryngic Allergy (AAOA); The American Academy of Otolaryngology Head and Neck Surgery (AAO-HNS); The American College of Allergy, Asthma and Immunology (ACAAI); and the American Rhinologic Society (ARS) formed

a multidisciplinary international committee comprised of 30 physicians from allergy/immunology, otolaryngology, infectious disease, and radiology. This panel worked to develop definitions of rhinosinusitis for clinical research, and to suggest clinical trial designs for studies that would allow for more appropriate use of pharmacologic, immunologic and surgical interventions. The committee was able to reach consensus on definitions and clinical research strategies for:

1. acute (bacterial) rhinosinusitis,
2. chronic rhinosinusitis without polyps,
3. chronic rhinosinusitis with polyps, and
4. allergic fungal rhinosinusitis.

At this panel there was general agreement that no one etiologic factor fully explains or adequately accounts for the pathologic manifestations and clinical heterogeneity of rhinosinusitis.

Histopathologically speaking, the inflammatory component of these disorders manifests as a mixed mononuclear inflammatory cell infiltrate with neutrophils predominating in acute disease and eosinophils predominating in most chronic disease.

Additionally, there has been an evolution of thought moving away from the notion that all of chronic rhinosinusitis can be explained on the basis of sinus ostial obstruction and persistent bacterial infection to an appreciation that chronic rhinosinusitis has a significant inflammatory component that may be caused simultaneously or independently by various factors. Evidences for the varying potential sources of this condition are discussed. These include but are not restricted to the possible roles of:

1. Persistent infection as a factor in chronic rhinosinusitis including biofilms and "osteitis"
2. Allergy and other disorders of immunity.

3. Intrinsic factors of the upper airway.
4. Superantigens from *Staphylococcus aureus* in chronic rhinosinusitis with nasal polyps.
5. Colonizing fungi that induce and sustain eosinophilic inflammation.
6. Genetic perturbations such as aspirin sensitivity.

This document reviews various etiologic factors in rhinosinusitis and highlights areas where their roles in rhinosinusitis are controversial and where new information is emerging. Varying contributors authored individual sections to serve as background information on the controversies and definitions presented later in this manuscript. The document presents a classification scheme for chronic rhinosinusitis based on current knowledge and consensus opinion, and discusses the subjective and objective measures used in the diagnosis and evaluation of rhinosinusitis. Important factors in the design of clinical trials are then discussed. Ultimately, consensus definitions for rhinosinusitis are put forth for:

1. Acute presumed bacterial rhinosinusitis
2. Chronic rhinosinusitis without polyps
3. Chronic rhinosinusitis with polyps
4. Classic allergic fungal rhinosinusitis

For details, see:

Meltzer EO, Hamilos DL, Hadley JA, Lanza DC, Marple BF, Nicklas RA, Bachert C, Baraniuk J, Baroody FM, Benninger MS, Brook I, Chowdhury BA, Druce HM, Durham S, Ferguson B, Gwaltney JM, Kaliner M, Kennedy DW, Lund V, Naclerio R, Pawankar R, Piccirillo JF, Rohane P, Simon R, Slavin RG, Togias A, Wald ER, Zinreich SJ. Rhinosinusitis: establishing definitions for clinical research and patient care.

Simultaneously published at:

- Otolaryngol Head Neck Surg. 2004 Dec;131(6 Suppl):S1-S62
- J Allergy Clin Immunol. 2004 Dec;114(6 Suppl):155-212.

" This panel worked to develop definitions of rhinosinusitis for clinical research... "

FALL MEETING:

Abstract Submission Deadline

April 15, 2005

submit abstracts to:

www.american-rhinologic.org

COSM SUMMARY

Micahel J. Sillers, MD, *President-Elect*



Please plan now to join us in Boca Raton for an excellent American Rhinologic Society Spring Meeting May 13-14, 2005. This year's meeting will include two half-day sessions beginning on Friday May 13 at 1:00 PM, with 32 oral presentations and 3 panel discussions. The oral presentations range from clinical to basic science with broad applicability to the practicing rhinologist. The panels will discuss contemporary management of the frontal sinus, an update on inflammatory rhinosinusitis, and patient advocacy issues related to turbinate surgery and the use of surgical navigation. The 2005 Program Committee, including Drs. Stilianos Kountakis, Todd Kingdom, John DelGaudio, Todd Loehrl, Peter Doble, Ronnie Swain, Jim Palmer, Joe Han, Peter Hwang, Kelvin Lee, and Richard Orlandi, has done an excellent job in choosing from an ever-growing number of abstract submissions. In addition to the scientific session, there will be 30 poster presentations. Recognition for the Cottle award, research award, and outstanding posters will be made. A preliminary program is included in the Newsletter. A final print program with abstracts will be available at registration as well as an electronic version with additional useful information from the ARS website for all registrants. Finally, the ARS Program Committee is accepting abstracts for the annual fall meeting. The abstract submission deadline is April 15, 2005. We hope to see you in Boca Raton!



May 13, 2005

- 1:00-1:10 Welcome and Introduction
Joseph Jacobs, M.D., President
Michael Sillers, M.D., President-Elect
Moderators: John DelGaudio, M.D. and Joseph Han, M.D.
- 1:10 "Evidence supporting endoscopic sinus surgery in the management of adult chronic rhinosinusitis",
Timothy Smith, M.D.
- 1:17 "Endoscopic Transphenoidal Pituitary Surgery with Real Time Intraoperative MRI (IMRI)", Vijay Anand, M.D.
- 1:24 "Antibiotic Sensitivities of Coagulase Negative Staphylococcus from Purulent Sinus Secretions", Marc Dubin, M.D.
- 1:31 Discussion
- 1:40 "Association of Nasopharyngeal and Laryngopharyngeal Reflux with Post-Nasal Drip Symptomatology", John DelGaudio, M.D.
- 1:47 "Systemic Absorption of Gentamicin Nasal Irrigations".
Wesley Whatley, M.D.
- 1:54 "Characterization of Normal Respiratory Flora in Purulent Sinus Secretions; 'Normal Flora' is not necessarily 'Normal'",
Frederick Kuhn, M.D.
- 2:01 Discussion
Moderators: Peter Hwang, M.D. and Kelvin Lee, M.D.
- 2:10 "Minocycline Accelerates Recovery after Olfactory Axotomy in Mice", Joseph Raviv, M.D.
- 2:17 "Quantitative Comparison of Nasal Irrigation Devices Based on Mucociliary Transport Time", Tony Kille, M.D.
- 2:24 "Prediction of Response to Surgery in Allergic Patients with Chronic Sinusitis in Children", Hassan Ramadan, M.D.

2005 ARS CORPORATE AFFILIATES

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Aventis
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Gold (\$5,000)

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Abbott Laboratories

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Priority Healthcare
Ortho McNeil
Richard Wolf Medical Instruments

Bronze (\$1,000)

GE Medical Systems
Medtronic-Xomed

COSM PRELIMINARY SCHEDULE CONT.,



- 2:31 Discussion
- 2:40 "The Role of the Underlying Bone in Inverting Papilloma"
Alexis Jackman, M.D.
- 2:47 "Efficacy of Draf I Surgery for Chronic Frontal Sinusitis"
Han Joseph, M.D.
- 2:54 "Recalcitrant rhinosinusitis with polyps is associated with altered expression of genes associated with innate immunity"
Andrew Lane, M.D.
- 3:01 Discussion
- 3:10-3:30 Break
- 3:30-4:00 Panel Inflammatory Mediators in CRS
Jan Gosepath, M.D. and Bradley Marple, M.D.
Moderators: James Palmer, M.D. and Richard Orlandi, M.D.
- 4:00 "Expression of cyclooxygenase and lipoxygenase enzymes in nasal mucosa of cystic fibrosis patients",
Jonathan Owens, M.D.
- 4:07 "Differences in Skull Base Defect Size: Endoscopy versus Computed Tomography", John DelGaudio, M.D.
- 4:14 "Surgical outcomes of drillout procedures for management of complicated frontal sinus pathology", Pete Batra, M.D.
- 4:21 Discussion
- 4:30 "Powered Turbinoplasty – the long term results as compared to electrocautery and submucosal turbinoplasty",
Raymond Sacks, M.D.
- 4:37 "Effect of estrogen on olfactory neuron proliferation",
Karen Fong, M.D.
- 4:44 "Innate antimicrobial activity of sinus secretions in patients with/without chronic rhinosinusitis", Jivianne Lee, M.D.
- 4:51 Discussion
- 5:00 Business Meeting
- May 14, 2004**
- 8:00-8:15 Introduction, Poster and Awards Presentation
Todd Kingdom, M.D., Allen Seiden, M.D.
Moderators: Todd Loehrl, M.D. and Ronald Swain, Jr., M.D.
- 8:15 "Lobular Capillary Hemangioma of the Nasal Cavity: A Retrospective Study on 40 Patients", Roberto Puxeddu, M.D.
- 8:22 "Subjective headache before and after endoscopic sinus surgery", William Moretz III, M.D.
- 8:29 "Progression of Sinus Disease in the Intubated Patient",
Spencer Payne, M.D.
- 8:36 Discussion
- 8:45 "Cocaine-induced midline destructive lesions (CIMDL): cocaine concentration is more significant than time of exposure", Matteo Trimarchi, M.D.
- 8:52 "Comparison of Three Techniques for Transsphenoidal Pituitary Surgery", Jeffrey Neal, M.D.
- 8:59 "Regional Analysis of Sinonasal Ciliary Beat Frequency in Normal Subjects", Jeffrey Shaari, M.D.
- 9:06 Discussion Moderators: Todd Kingdom, M.D. and Peter Doble, M.D.
- 9:15 "Long-term Zileuton Post-surgical Prophylaxis for Nasal Polyposis", Larry Duberstein
- 9:22 "Overexpression of leukotriene C4 synthase (LTC4S) and plasminogen activator inhibitor 1 (PAI 1) gene promoter polymorphisms in sinusitis", Alessandro de Alarcon, M.D.
- 9:29 "In vivo optical coherence tomography of the nasal mucosa
Usama Mahmood, M.D.
- 9:36 Discussion
- 9:45 "The incidence of concurrent osteitis in patients with chronic rhinosinusitis: a clinicopathologic study", Jivianne Lee, M.D.
- 9:52 "Chronic Rhinosinusitis with Nasal Polyps: Further Evaluation of the Superantigen Hypothesis", Robert Kern, M.D.
- 9:59 "Medical and Surgical Considerations in Patients with Samter's triad", Kevin McMains, M.D.
- 10:06 Discussion
- 10:15-10:35 Break
Moderator Stilianos Kountakis, M.D.
- 10:35 "Endoscopic management of the frontal sinus outflow tract for fractures of the frontal sinus: A new alternative to obliteration", Jivianne Lee, M.D.
- 10:42 "Invasive Fungal Sinusitis: What is the Appropriate Follow-up?"
John DelGaudio, M.D.
- 10:49 Discussion
- 10:55-11:25 Panel Controversies in Frontal Sinus Surgery,
Frederick A. Kuhn, M.D.
- 11:25-11:55 Panel Patient Advocacy Committee Update,
Michael Setzen, M.D.
- 11:55 Closing Remarks: Joseph Jacobs, M.D. and Michael Sillers, M.D.

CMS COVERAGE OF +61795 IN AN ASC SETTING

Michael Setzen, MD, FACS, *Chair, Patient Advocacy Committee*



There has been a flurry of activity pertaining to CMS's opinion on Image Guidance Surgery (IGS) in an Ambulatory Surgical Center (ASC). On November 26th, CMS published in the Federal Register the 2005 proposed rule of covered procedures in an ASC. Currently +61795 is excluded from the list of covered procedures to be done in an ASC facility.

A delegation of otolaryngologists from the American Rhinologic Society and AAO-HNS met with CMS on November 10th, 2004 in Baltimore, Maryland. Representatives included Michael Setzen, MD; Michael Sillers, MD; Martin Citardi, MD; Charles Koopman, MD; Beth Roberts, attorney for the ARS; and Linda Taliaferro, Director of Regulatory and Socioeconomic Affairs, AAO-HNS. We presented the case for IGS in an ACS facility.

Initially, CMS was confused as to how and why we as Ear, Nose and Throat surgeons should and can use this sophisticated neurosurgical technology in an ASC setting. CMS, under the leadership of Dr. Ken Simon, allowed us to give a full and comprehensive presentation elucidating why we should be allowed to use IGS in an ASC setting. We let it be known that this kind of surgery is better suited in an ambulatory setting and it would be more costly if this were done as an inpatient in a hospital.

We showed how we use "brain technology in sinus surgery to stay out of the brain and eye." We also explained that most nasal and sinus surgeries, in particular Functional Endoscopic Sinus Surgery (FESS), are being performed on an ambulatory basis both in an ASC and an ambulatory facility attached to a hospital.

CMS, not recognizing the need for use IGS in an ASC, will not reimburse for the technical component (facility fee) of +61795 when done in an ASC. They will continue to pay for the physician's component under the Medicare Part B Physician Fee Schedule. We explained why denial of payment

" We showed how we use 'brain technology in sinus surgery to stay out of the brain and eye.' "

of the technical component could prevent both access to care and access to sophisticated and important technology for the Medicare sinus patient. We also expressed the concern that CMS's denial could have a domino effect and that all third party payers and private insurers may do likewise. CMS will reimburse for +61795 when performed in an inpatient or outpatient hospital setting.

FESS CPT codes are approved in an ASC setting and as +61795 is an add on code it should also be an approved ASC procedure.

CMS specifically asked if more than 50 % of endoscopic sinus surgeries are performed using IGS. Our response was no and fortunately so. If IGS were being used more than 50% of the time, then it could become part of the standard of care and part of the overall fee which would then affect both the physician and technical components of reimbursement.

It is therefore important to take heed of what CMS is asking. We should only use IGS in appropriate situations according to the Academy guidelines. The AAO-HNS guidelines include revision FESS; diffuse nasal polyposis; sphenoid, frontal and posterior ethmoid disease; bizarre anatomy, congenital, acquired or traumatic; and any neoplastic case, benign or malignant. If abuse of IGS takes place, we will all suffer and reimbursement will be denied.

We now have 60 days to respond to the proposed rule and we will do so on behalf of the ARS and the AAO-HNS. We will ask that +61795 be an approved procedure in an ASC setting as well as an inpatient or outpatient facility. Furthermore, the 2005 ASC covered services proposed rule has four other codes - 31233, 31235, 31237 and 31238 - that are deleted from the ACS list as well. We may consider requesting that these codes not be deleted from the ASC Procedure List for 2005.

It must be noted that we are not doing this on behalf of Image Guidance Companies or ASC's but rather in the interest of patient safety. CMS and the AMA prefer to hear from physicians rather than from industry representatives who may have an inherent bias. IGS is state of the art but not the standard of care. This will be discussed in an upcoming Nose News article.

In summary, we differ in opinion with CMS and have clarified this and in so doing, we hope to have IGS approved on the ASC list of procedures for 2005. High on the agenda of the ARS is seeking appropriate care for the rhinologic patient and with this in mind, +61795 belongs on the ASC list since many nasal and sinus surgeries, in particular FESS, are being done in an ASC. In so doing, patients seeking ASC treatment will be better served.

www.american-rhinologic.org



JOIN THE AMERICAN RHINOLOGICAL SOCIETY TODAY!

Karen Fong, MD, *Chair, Membership Committee*



The field of rhinology is undergoing rapid growth both technically and scientifically, and the extremely high level of participation in the ARS Fall Meeting in New York City this past September reflects the growing interest in rhinology and sinus surgery.

The ARS is dedicated to promoting excellence in clinical care, investigation and education in the field of rhinology. It is the only professional organization that deals specifically with issues of sinus surgery, both endoscopic and conventional. Furthermore, the ARS provides professional camaraderie, educational, research and socioeconomic benefits for its membership. The society seeks to be proactive in patient advocacy issues confronting rhinologists in our current healthcare climate.

Benefits of regular membership include reduced registration fees to ARS meetings, access to the “Members only” section of the website, and a subscription to the *American Journal of Rhinology*, the official publication of the ARS, or the international journal, *Rhinology*.

Several categories of membership are available:

Regular Members must be out of residency training two or more years and board certified by the American Board of Otolaryngology or its equivalent. Sponsorship of two ARS members is required.

Associate membership is available at a reduced annual fee for board-eligible otolaryngologists within two years of completion of residency. Associate members can receive a subscription the *American Journal of Rhinology* at a reduced rate of \$100.

Resident membership is available free of charge to residents in good standing that are currently enrolled in ACGME-approved residency programs. Resident members can also receive a subscription to the *American Journal of Rhinology* at a reduced rate of \$100.

Fellow applicants must be out of residency at least three years and board certified by the ABO or its equivalent. Applicants must have attended at least two ARS meetings or sponsored courses over the past three years and evidence of scholarly work in rhinology is desired.

Detailed information on all categories of membership is available on the ARS website under “Membership Information”.

We encourage all otolaryngologists with an interest in rhinology and sinus surgery to join the ARS and reap the substantial benefits that membership has to offer. If you are a current member of the ARS, we ask that you encourage a non-member colleague to join.

In addition, if a completed application for Regular Membership is received by March 15, 2005, you will receive complimentary registration to the Spring Meeting at COSM in Boca Raton, Florida. New streamlined application forms for regular membership can be found on the ARS website:

<http://www.american-rhinologic.org>



The Credentials and Membership Committees have been working together to streamline the application process, and hope to roll out a new online application in the near future. The Membership Committee also continues to seek new

ways to increase the value of membership to the society and continually assesses the needs of the membership. Comments, suggestions and questions are always welcome and can be directed to: Karen Fong, MD, Chair, Membership Committee at fongka@ohsu.edu

ARS New Members!

REGULAR MEMBER NAME

Alexander G. Chiu
Theodore Gaylor
Carl W. Stevens

ASSOCIATE MEMBER NAME

Christine B. Franzese
Troy D. Scheidt

RESIDENT MEMBER NAME

Judy L. Chen
Jason A. Diaz
Satish Govindaraj
Derek K. Hewitt
Micah J. Hill,
Karen A. Kolln
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UPCOMING RHINOLOGY MEETINGS & IMPORTANT ARS DATES

- * Penn International Rhinology Course, University of Pennsylvania March 10-12, 2005
Contact: Bonnie Rosen - Phone: 215.662.2137 Email: bonnie.rosen@uphs.upenn.edu
- * Carolina Course in Sinus Surgery and Facial Plastic Surgery April 1-2, 2005
University of North Carolina, Chapel Hill, North Carolina
Contact: Kathy Harris - Phone: 919.966.3342 Email: kharris@med.unc.edu
- * New York Rhinology Update, NYU School of Medicine April 8-10, 2005
Contact: 212.263.5295
- * Rhinology 2005, 24th ISIAN International Symposium on Infection and Allergy of the Nose April 20-23, 2005
San Paulo, Brazil - Contact: Malu Losso Relações Públicas e Eventos -
Phone: (5511) 3865.5354 E-mail: secretaria@malulosso.com.br
- * Southern States Rhinology Course, University of Alabama-Birmingham April 28-30, 2005
Contact: Michelle Dickerson - Phone : 205.934.9766

If you would like to 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 Rhinological Society.**

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The Editor would like to thank Molly Reid for design assistance for ARS Nose News