The American Otological Society recently completed their 140th Annual Meeting in San Diego, CA. We wish to thank Dr. Antonio De La Cruz for an outstanding program. The Basic Science Lecture, "Speech Understanding from Implants: Cochlear, Brainstem & Midbrain," was presented by Dr. Bob Shannon. Dr. Fred H. Linthicum, Jr. was the Guest of Honor.

Presidential Citations were presented to Drs. Burt Brent, Bob Shaoon, William E. Hitselberger & William W. Lo.

Dr. Richard A. Chole received the 2007 Award of Merit at the President’s Banquet on Friday evening.


Membership: The Society is pleased to report a total of 304 members.

The AOS welcomed four Active Members: Drs. Jose N. Fayad, Gerard J. Gianoli, Alan G. Micco, Nancy M. Young

One Corresponding Member: Dr. Juichi Ito.

Treasurer’s Report
The balance on hand in the AOS Treasury as of April 15, 2007, $171,013.87.

AOS Basic Science Lectureship Fund balance as of 4/15/2007 $140,590. The lectureship supports basic science lecturers at the AOS Annual Meeting. The profit share of the journal is used to fund this lectureship, and the goal is to have the interest share from the fund pay the travel expenses for the lecturer.

Research Fund Report
The market value of the research fund as of March 31, 2007, was $8,778,670. The value of the research fund on March 31, 2006, was $8,319,226.

The Council approved funding for two clinician scientist awards (renewals), two research fellowships and one research grant. The total amount of funds awarded for 2007-08 was $302,885.

The awarded proposals were as follows:

Research Grant
Richard Smith, MD (University of Iowa) Identification of a Genetic Contribution to Meniere’s Disease $55,000

Research Fellowships
Vincent Lin, MD (University of Washington) (Renewal) The Role of Direct Trans-differentiation in Hearing Recovery after Drug Damage in an Avian Model $44,000

Yu-Lan Ying, MD (University of Pittsburgh) Molecular Responses of Spiral Ganglion Cells to Oxidative Stress $44,000

Clinician Scientists Awards
Joni Doherty, MD (University of California, San Diego) ErbB receptor regulation of Vestibular Schwannomas (Renewal) $80,000

Anthony Mikulec, MD (Saint Louis University) Optimization of Local Drug Delivery to the Cochlea (Renewal) $79,885

American Board of Otolaryngology: Dr. Richard Chole presented the ABOto report. The President of the Board is Dr. Jesus E. Medina, Dr. Wayne F. Larrabee is President-Elect and Dr. Paul Levine is Treasurer. Drs. Robert Ossoff, Harold C. Pillsbury and David E. Schuller completed their terms as a Director after many years of dedicated service to the Board. Drs. C. Ron Cannon, Paul R. Lambert (AOS member), and Randal S. Weber were elected to the Board of Directors.

The primary certification written qualifying exam was given to 287 individuals on March 30. All of the examinees took the oral exam on the following two days. Ninety-eight individuals presented the oral examinations.

Neurotology Subcertification: The exam was not given this year. The Neurotology exam will be given again in 2008. The two pathways are still open. For the standard pathway, an applicant must have completed an ACGME accredited Sleep Medicine Fellowship. The alternate pathway will be open for five years. In 2011 the alternate pathway will no longer be available. Presently, Sleep Medicine subcertification is available to otolaryngologists. There are 24 individuals who have signed up to take the examination in Sleep Medicine where one of the sponsoring boards of Sleep Medicine including neurology and internal medicine, pediatrics, physical medicine are also sponsoring boards. There are several ways individuals can be eligible for Sleep Medicine; completion of a fellowship in Sleep Medicine, or any 12 months of formal post-residency training in Sleep Medicine. Twelve months experience in Sleep Medicine over a five-year period will also qualify the individual to take those examinations.

Otolaryngology Training Exam (OTE): The OTE was given to 1100 residents and practitioners in March.
Maintenance of Certification (MOC): There are now 1243 participants in MOC including all of the directors of the Board and all of those individuals who have time-limited certificates, those that have been certified since 2002. MOC is available to everyone. MOC is being required by state boards and in some states there is an alternative of either participating in your specialty MOC or participating in the state maintenance of licensure. The MOC consists of several different parts; 1) a credentialing part; 2) self-improvement process and the Board will roll out the first self-improvement module later this year. They will be online as an education type of a self-improvement module where you score yourself; 3) an examination in 2009; 4) performance in practice where the Board will be assessing diplomats as far as their efficacy in practice. This process is in discussion.

Strategic Plan: Maintenance of Certification will be a big part of the strategic plan. If anyone has suggestions as to what the Board should be doing, or things the Board has not yet done, please contact Dr. Robert Miller, Executive Director at the ABOTO with your ideas, especially those from the Council and the leadership of the society.

American Academy of Otolaryngology: Dr. David Nielsen presented the report. The membership continues to grow although slowly. Domestic membership does not have the capacity to grow very rapidly but international membership continues to grow at about a 2 to 5% rate. About 8000 domestic members now belong to the Academy.

The advocacy and health policy activities continue to be successful. Each member of the Academy makes nearly four to eight thousand dollars more per year than they would make otherwise were it not for the advocacy efforts of the Academy. About half of that is directly responsible to the Academy’s efforts specific to otolaryngology and the other half is related to SGR work and over turning the negative updates. The PQR initiative is the next step in the voluntary reporting initiative, which will eventually lead to the requirement for all physicians to participate in some form of quality documentation in their practice.

The Academy is working with the Surgical Quality Alliance with the American College of Surgeons to ensure that there are quality measures that are validated and relevant to the specialty of Otolaryngology. The Sustainable Growth Rate formula repeal is critical. The Academy will continue work to substitute quality initiatives that really improve patient outcomes for the SGR in the coming years.

Guidelines update: The first otolaryngology led evidence-based guideline, which has become an evidence-based performance measure, has been put through the physician consortium for performance improvement. This has been approved, accepted by other specialty societies, and is now being presented to the AQA and NSQIP for approval. When this occurs, any physician who wishes to report on quality can use these guidelines and these are very important to the otology group.

The CORE research activities continue. This past year 127 applications were reviewed for 39 grants with about $675,000 in grants from 10 societies. The Academy will fund 15 grants in 2007-2008.

The education platform, the Academy “U” will be rolled out by the end of the year and will be populated on an ongoing basis. The focus will be on a new paradigm that will meet the new ACCME requirements.

The top five priorities identified by the Board for the Academy to address over the next year and a half are as follows: Advancing the Academy’s quality agenda and accelerating the process for online education, physician reimbursement, and scope of practice by leveraging relationships with quality to ensure that quality is not an excuse to manipulate payment but is actually about improving patient outcomes. Empowering research and CORE grants committee, invest in resources, and rebuilding the society relations.

Following Dr. Nielsen’s report, Dr. Clough Shelton reiterated to the society that it was clear from Dr. Nielsen’s report that the real political voice is the Academy. The Academy works very hard on the societies’ behalf on a number of issues, particularly now the Scope of Practice. It is important for the AOS members to support the political armor of the PAC and to give to the PAC.

AOS Bylaws Amendment: The amendment to the AOS bylaws was approved by the membership for Bylaws Amendment-3.2.0 Qualifications and Privileges a. Active Members in the AOS.

Membership Development Committee: 1) There are a number of potential candidates for AOS active membership. Continued guidance will be needed to develop the candidates identified. Additional prospective candidates must be actively sought. 2) The perception of the requirement for Trio membership dominates AOS thinking and is a significant impediment to AOS membership.

Audit Committee: Dr. David Barrs, Chairman, and committee members, Drs. A. Julianna Gulya and Michael McKenna reviewed the financial records of the Society. There were no exceptions or concerns.

Membership Dues
Dues for Active Members are $425.00 (USA) and $445 (International). Active member dues include a subscription to the O&N journal.

Associate Members dues are $100.00 (USA and International). Corresponding Members dues are $200.00 (USA and International). The O&N journal is optional for Associate and Corresponding members and is itemized separately on the dues statement.

Call for Papers
October 15, 2007, is the deadline for submission of abstracts for the 2008, Annual Spring Meeting. The American Otological Society accepts on-line submission of abstracts.

www.americanotologicalsociety.org

141st AOS ANNUAL SPRING MEETING
Mark your calendar now and plan to attend the 141st American Otological Society’s Annual Spring Meeting to be held in Orlando, Florida, at the JW Marriott Grande Lakes Hotel, May 2-3, 2008.