

Department News

Chair's Welcome

Spring 2025



On the third Friday of March, in an annual rite of Spring, senior medical students across the nation learned their Match results. Here at the University of Arizona Department of Otolaryngology, the Match results brought news that Megan Wilson and Luis Martinez will start their otolaryngology residency training in our department this summer. But before embarking on their otolaryngology training, these two individuals will graduate from medical school and officially become new physicians. Reflecting on when I received my MD thirty years ago, I am reminded that all physicians, new and old, would do well to remember the solemn duty we owe our patients, and that we should use our knowledge and skills not only to provide care but also to advocate for our patients. Our training to become a physician, reinforced daily in our practice taking care of patients, has taught us how to evaluate evidence, to respect the rights of our patients, to act in

our patients' best interests and promote their well-being, and to treat all patients equally and fairly. These are the basic ethical principles of being a physician.

Like many, today's headlines have caused me to further contemplate—how does a physician's responsibility extend beyond our own patients, to the world around us? I believe a physician's responsibility to society goes far beyond diagnosing and treating illness in individual patients. Physicians are not only healers; they are advocates, educators, and leaders. They hold a special trust with the public, and with that trust comes a profound duty to serve the greater good.

One of the most urgent responsibilities physicians have today is fighting scientific misinformation. We've seen how dangerous misinformation about vaccines can be—not only during the COVID-19 pandemic, but also with the resurgence of diseases like measles, which had once been nearly eradicated. When doctors speak out clearly and compassionately, they can help guide people back to facts, protecting individuals and communities from preventable diseases. Physicians must use their voices and expertise to correct false narratives, especially on social media where misinformation spreads so quickly.

Another critical responsibility is advocating for scientific research. Medical breakthroughs don't just happen; they require consistent investment, with critical support from the federal government and advanced at universities across the country. Physicians must push for continued funding for research into treatments, cures, and preventive care. Science doesn't move forward without adequate resources, and physicians are uniquely positioned to explain why that matters — not just to policymakers, but to the public as well.

Physicians also need to champion public health institutions like the Centers for Disease Control and Prevention (CDC). Organizations like the CDC are essential for tracking disease outbreaks, setting health guidelines, and ensuring that our responses to health crises are organized and effective. By standing up for these institutions, physicians help protect the infrastructure that keeps our society safe, even when politics threaten to undermine it.

Another major part of a physician's duty is advocating for social justice and equitable access to healthcare. Good health should not be a privilege reserved for the wealthy or well-connected. It should be a right available to every person, regardless of income, race, or geographic location. Physicians must acknowledge the deep inequalities in our healthcare system and work toward a future where everyone has the chance to live a healthy life.

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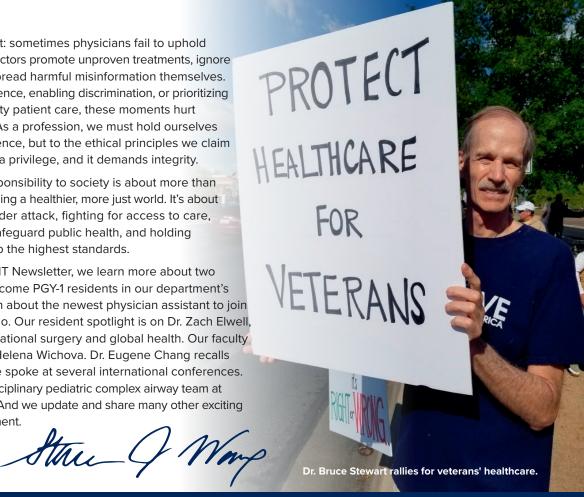
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But we also need to be honest: sometimes physicians fail to uphold their responsibility. We've seen doctors promote unproven treatments, ignore evidence-based guidelines, or spread harmful misinformation themselves. Whether it's endorsing pseudoscience, enabling discrimination, or prioritizing financial self-interest above quality patient care, these moments hurt public trust and endanger lives. As a profession, we must hold ourselves accountable—not only to the science, but to the ethical principles we claim to stand for. Being a physician is a privilege, and it demands integrity.

Ultimately, the physician's responsibility to society is about more than just treating illness; it's about building a healthier, more just world. It's about speaking up when science is under attack, fighting for access to care, supporting the institutions that safeguard public health, and holding our selves — and each other — to the highest standards.

In this issue of the DepartmENT Newsletter, we learn more about two new physicians who will soon become PGY-1 residents in our department's residency program. We also learn about the newest physician assistant to join the department, Jocelyn Camacho. Our resident spotlight is on Dr. Zach Elwell, who shares his passion for international surgery and global health. Our faculty spotlight is on neurotologist Dr. Helena Wichova. Dr. Eugene Chang recalls his recent trip to Korea, where he spoke at several international conferences. Dr. Carrie Liu explains the multidisciplinary pediatric complex airway team at U of A/Banner-Medicine, Tucson. And we update and share many other exciting recent happenings in the Department.



Resident Spotlight – Dr. Zachary Elwell



In October 2024, I was invited to serve as a panelist at the annual American College of Surgeons Clinical Congress in a session titled Charting New Horizons: The Evolving Landscape of Careers in Global Surgery. Our panel included attending and resident physicians from all surgical subspecialties who have shaped their careers, education, or research interests around advancing global surgical care. Our audience included over 50 physicians, trainees, and medical students seeking to learn more about global surgery as a career path. Each panelist contributed their professional knowledge through current clinical and research experiences and provided testimonials of how they began their respective careers and developed their professional networks. We ended the session with breakout table discussions focused on individual surgical subspecialties, where I had the privilege of representing otolaryngology. Serving on this panel was a tremendous experience, and I remain very grateful to our faculty for empowering me to attend this meeting.



ACS Clinical Congress 2024 Panel - Charting New Horizons: The Evolving Landscape of Careers in Global Surgery. Panelists from left to right: Rodrigo Vaz, MD, PhD (ACS/Trauma, Brazil), Marcelo Ribeiro, MD (ACS/ Trauma, USA), Aeryn Dick, MD (Surgical Oncology, USA), Zachary Elwell, MD (Otolaryngology, USA), Passant Abdelrahman, MBBCh (Ophthalmology, Egypt), Katayoun Madani, MD (Advocacy & Policy, USA), Chris Dodgion, MD, MSPH, MBA, FCS (ECSA), FACS (ACS/Trauma, USA)



Global Surgery Student Alliance team from left to right: Zachary Elwell, MD, Jess Barmine (GSSA Junior National Co-Chair), Lydia Kersh (GSSA Senior National Co-Chair), and Passant Abdelrahman, MBBCh

Welcome New Residents – Starting Summer 2025



Luis Alfredo Martinez

My name is Luis Alfredo Martinez, and I am from Mesquite, New Mexico. I attended New Mexico State University, where I received my degree in Kinesiology and a minor in Biochemistry. After graduation, I worked as a scribe, substitute teacher, and registration employee at a hospital. I also completed a post-baccalaureate program at the University of New Mexico before attending their School of Medicine. I was curious about otolaryngology from day one of medical school, so during my first semester,

I scrubbed into a parathyroidectomy and was instantly hooked. As I continued to shadow the faculty, I realized that it was the field for me.

What attracted you to U of A?

I had been to Tucson several times for soccer tournaments, concerts, the Arizona Bowl, and triathlon training. I always enjoyed my trips to Tucson, and it's only a four-hour drive from my hometown. I had an amazing interview day with the faculty, and the fact that they care for patients from the western part of New Mexico drew me toward U of A even more. I strongly believe U of A will help me reach my professional goals while allowing me to have a great life outside the hospital.

What is your favorite surgery to be involved in?

Currently, my favorite surgeries to be part of are any cancer reconstruction cases.

What do you enjoy doing in your spare time?

I am an avid triathlete (at least I try to be), so you'll catch me on my bike, at the pool, or running on most days. I enjoy exploring new coffee shops and am always looking for fun concerts to attend!

What are your long-term goals?

I want to go back to southern New Mexico to practice in my community while also having an academic affiliation. I plan on establishing a scholarship/mentorship program for underserved, first-generation students who want to pursue medicine.



Megan Wilson

My name is Megan Wilson. I was born in Kentucky and primarily grew up in Rhinebeck, NY and Murray, KY. I went to the University of Oklahoma for undergrad, where I received degrees in Biochemistry and History. After this, I spent a year working at a COVID testing site and as an ER tech before starting medical school at the University of Louisville School of Medicine. Growing up, we didn't have any otolaryngologists nearby, so I was fairly unfamiliar with the field prior to my medical education. Fortunately,

I was able to connect with my home department during my third-year elective, where I fell in love with the field. The diverse scope of practice and ability to make a real difference in patients' quality of life is what really solidified my resolve to choose otolaryngology!

What attracted you to U of A?

Growing up, I had family in Tucson, so I already knew I loved the area and sunny weather. I was fortunate enough to complete an away rotation at U of A during the fall of my fourth year. Immediately, I was impressed by how knowledgeable, independent, and involved all the residents were in the OR and with patient care. Everyone made me feel like a part of the team, even as a visiting student. Couple that with fantastic research opportunities and great resident-faculty collaboration, and you have a program I'm very excited to be a part of!

What is your favorite surgery to be involved in?

As of now, my favorite surgeries are parathyroidectomies and free flap/local reconstructions.

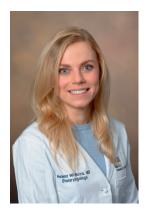
What do you enjoy doing in your spare time?

I love running outdoors, hiking, drawing, and rock hunting in my free time. I'm also a big history buff, so I like visiting local historical sites whenever I can!

What are your long-term goals?

I have an interest in Head and Neck Oncology and Pediatric Otolaryngology, but I'm keeping an open mind as I explore all the subspecialties during my training. Ultimately, my goal is to be the best surgeon/clinician I can be and continue to be involved in research and the education of the next generation of physicians.

Faculty Spotlight – Dr. Helena Wichova



Dr. Wichova joined the Department of Otolaryngology – Head and Neck Surgery at University of Arizona College of Medicine (UACOM) as an Assistant Professor in September 2022 with subspecialty training in Otology/Neurotology. Her clinical interests span both disorders of the middle ear including cholesteatoma, conductive hearing loss, chronic ear infections, and cochlear implants, as well as a close working relationship with her neurosurgery colleagues for treatment of lateral skull base pathology such as encephaloceles, tegmen defects, superior semicircular canal dehiscence and resection of lesions of the cerebellopontine angle. She has been an integral addition to the Otology/Neurotology Division expanding the clinical and surgical volume and training Otolaryngology residents.

Dr. Wichova is dedicated to teaching the future generation of physicians and recently expanded her teaching role in the UACOM as a Clinical Core Reason (CRC) Facilitator in January 2025. As a CRC Facilitator, she works with first- and second-year medical students to develop clinical reasoning skills and habits of self-directed learning. She has truly enjoyed her time helping them gain new medical knowledge, generate diagnostic hypotheses, and diagnose unique clinical cases. She collaborates with other CRC Facilitators monthly to obtain feedback, create future teaching modules, and evolve as an educator. She additionally has volunteered for Otolaryngology didactic/practical teaching sessions for the UACOM to enhance their understanding of our field.

Working with enthusiastic young trainees with open minds eager to learn all that medicine has to offer has been a very rewarding experience for Dr. Wichova. She hopes to expand her presence in UACOM in the future to have a larger impact on medical school education. Her dedication to teaching was recognized by her election to the Academy of Medical Education Scholars (AMES) at the University of Arizona. In her spare time, she continues to travel the world with her husband, Siberian Husky, and toddler.





Welcome - Jocelyn Camacho, PA-C



Hey everyone this is a little about me! I am the newest PA-C to join the ENT team. I graduated from PA school at A.T. Still in Mesa, Arizona in August 2019. I completed my clinical rotations in the Fresno CA area. After graduation I pursued my doctorate (Doctor of Medical Science) from 2020-2022. I hope to one day be able to teach with this degree.

Since then, I held a position at Banner in a nocturnal hospitalist position. After adding two new family

members, I decided to make a career switch, which led me to ENT in the fall of 2024. I am very happy to be here.

I currently have three littles of which I am their humble and willing servant: Jayden (4), Sofia (2) and Emilia (1). My husband Estevan works here at Davis Monthan Air Force Base as an avionics guy, fixing helicopters.

We recently moved out to Vail, AZ to be closer to family and have some more space. We love a good DIY home project and working in our yard. Our hope is to develop some 4-H skills for our kids. In my free time I enjoy spending time with my kids, rock climbing, backpacking, camping, and paddle boarding.







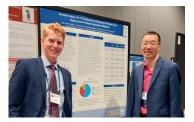
Spring Meeting Highlights

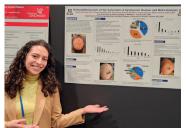
Triological Society Combined Sections Meetings

Orlando, Florida - January 23 - 25, 2025









Dr. Steven Wang with medical students Charles Gallego, Kyle Cook, Camila Hurtado, and Natalie Demirjian.

ENT in the Desert Conference

Tucson, Arizona - February 6-8, 2025











1) Dr. David Chen presented on Lasers in the Facial Plastics Practice. 2) The Laryngology Session Panel from left to right: Philip A. Weissbrod, MD, Madhav Chopra, MD, Helena Yip, MD, Jacob Martinez, CCC-SLP, Dori Smith, CCC-SLP, Kathleen Cazzato, CCC-SLP, and Natalie Monahan, CCC-SLP. 3) Dr. Stacey Gray, Dr. Uttam Sinha, Dr. Steven Wang, and Dr. Helena Yip at the ENT in the Desert Faculty Dinner. 4) Pediatric Otolaryngology speakers Dr. Jonathan Skirko, Dr. Sanjay Parikh, and Dr. Carrie Liu. 5) ENT in the Desert drew a record number of attendees this year.



Going Back Home – Visit to Seoul National University and the International Congress of Otorhinolaryngology in Suwon, Korea

- Dr. Eugene Chang

I recently had the honor of speaking at events in Korea, showcasing the clinical and translational research conducted at the University of Arizona. It was a meaningful experience that not only

highlighted my professional endeavors but also reconnected me with my Korean-American heritage.

At Seoul National University's 32nd annual Endoscopic Sinus Surgery course, I had the privilege of presenting, following in the footsteps of my father who trained in the same program. Having my parents and sister in the audience made the moment even more special. It was serendipitous to reunite with Dr. Min, the conference's founder and a former classmate of my father.

Subsequently, I traveled to Suwon for the International Congress of Otorhinolaryngology, where I addressed a diverse audience of over 1,600 attendees from around the globe. The event featured performances by renowned opera singers and a fusion Korean drum company, showcasing the rich cultural tapestry of the region.

Witnessing the collaborative spirit and cutting-edge advancements in surgery and research was truly inspiring.

While I cherished the opportunity to share our research abroad, returning home to Tucson, Arizona, filled me with gratitude as I resumed my work. Looking forward to potential collaborations with my esteemed colleagues at our next ENT in the Desert gathering!







Clinical Spotlight: Multidisciplinary Care for Pediatric Aerodigestive Patients – Dr. Carrie Liu

A common clinical scenario...

A 17-month-old toddler presents with a 9-month history of chronic cough and frequent coughing and choking during meals. There have also been three hospitalizations in the past five months for croup, with each episode requiring multiple doses of systemic steroids and nebulized epinephrine. He was started on a fluticasone inhaler and albuterol by his primary care physician with no improvement in the chronic cough. In clinic, flexible laryngoscopy shows cobblestoning of the posterior pharyngeal wall and edema of the interarytenoid mucosa. Given the concern for aspiration, a videofluoroscopic swallow study was ordered but the exam was unsuccessful due to a lack of patient cooperation. In this patient with recurrent croup, possible reactive airway disease, and reflux - what are the next steps? What is the best way to care for a patient like this?

What is an aerodigestive program?

An aerodigestive program is a multidisciplinary program that assesses and treats complex patients with interrelated issues of breathing, feeding, and/or swallowing. While there are no guidelines for the creation of these programs, there is consensus that the core components of an aerodigestive program are gastroenterology, otolaryngology, pulmonology, speech language pathology, nursing, and a care coordinator. Additional disciplines that may be beneficial for certain patients are sleep medicine, nutrition, social work, and respiratory therapy.

In an aerodigestive program, the care coordinator or nurse triages referrals to ensure that the appropriate patients are scheduled in a timely fashion. There is then a shared clinic during which patients are seen by the core providers. A comprehensive plan is then communicated to the family and additional investigations and/or interventions are coordinated. An important aspect of the program is the ability to perform combined endoscopy, where otolaryngology, pulmonology, and gastroenterology are present to perform their various diagnostic endoscopies with possible interventions under the same general anesthetic.

Who is the aerodigestive patient?

As alluded to above, patients who benefit from a multidisciplinary aerodigestive program are those that have breathing, feeding, and/or swallowing issues. Specific conditions may include but are not limited to: aspiration, failure to thrive, chronic cough, tracheoesophageal fistula, recurrent croup, and tracheostomy dependence.

What are the benefits of an aerodigestive program?

Multidisciplinary programs have been shown to improve the efficiency of patient care, with a shorter time to diagnosis and treatment. The ability to coordinate care, both in clinic and the operating room, also minimizes the number of visits

and general anesthetics needed, thereby reducing health care costs and caregiver burden.

Progress at the University of Arizona/Banner Medicine

In 2024, the Aerodigestive Clinic was launched at the University of Arizona /Banner Medicine. Team members are Dr. Susan Goode with pediatric gastroenterology, Dr. Lauren Benton with pediatric pulmonology, and Dr. Carrie Liu with pediatric otolaryngology. There is also a dedicated clinic nurse that triages patients and coordinates care. The most common presentations seen in this clinic are aspiration, recurrent croup, and children with tracheostomies who are being evaluated for decannulation. Currently, the clinic runs once a month followed by a team meeting. We are also excited because of the recent approval to have monthly block time in the endoscopy suite. which would allow for esophagogastroduodenoscopy, flexible bronchoscopy, and microdirect laryngoscopy under the same general anesthetic. Future goals of the program include recruitment of a speech language pathologist as well as expansion of the clinic given the growing waitlist.

Back to the patient...

The above-mentioned patient underwent a 'triple scope' with pediatric otolaryngology, pulmonology, and gastroenterology. Findings include grade 1 subglottic stenosis and a type 1 laryngeal cleft, which was treated with an interarytenoid injection augmentation. Copious secretions were noted in the right upper lobe bronchus, which is most commonly seen with aspiration in the supine position (such as aspirating refluxate). Bronchoalveolar wash of the right upper lobe showed a high percentage of lipid-laden macrophages, consistent with aspiration given the clinical context. Conservative measures for reflux such as avoiding a bottle before bed have already led to an improvement in the night-time cough. There is also less coughing with meals after the interarytenoid augmentation. The patient is currently being treated medically for reflux with ongoing follow-up through the aerodigestive clinic.

The U of A/Banner Medicine Aerodigestive Team



Dr. Lauren Benton, MD Pediatric Pulmonology



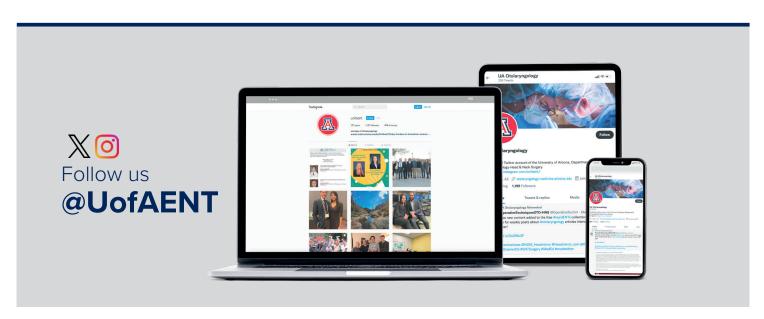
Pediatric Otolaryngology



Dr. Carrie Liu, MD, MPH Dr. Susan Goode, MD, MS Pediatric Gastroenterology



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