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had improvements in SNOT-22 scores from baseline did not differ by asthmatic status at any time point.

Conclusion: Patients receiving multiantigen SLIT therapy can expect significant improvement in quality of life in as short as 1 month of initiating therapy; this improvement seems to be maintained long term. The SNOT-22 can be used to determine whether a patient is having significant improvement on multiantigen SLIT, thereby allowing the physician and patient to make informed decisions about continuing the treatment, which is an out-of-pocket expense.

Perceptions of the Virtual Interview Process: A National Survey of Rhinology Fellowship Directors

Jared A. Johnson, MD, Benjamin S. Johnson, MD, Michael T. Chung, MD, Adam Folbe, MD, MS

Introduction: To limit the spread of COVID-19 and keep faculty and applicants safe, many otolaryngology subspecialties conducted their fellowship interviews via a virtual format, including within the field of rhinology. Given the novel virtual format of interviews during the 2021 rhinology interview cycle, our study looked to determine how virtual interviews compared with in-person interviews from the perspective of rhinology fellowship directors.

Method: A web-based anonymous survey was developed consisting of 15 questions. Electronic letters were sent to all fellowship directors participating in the 2021 rhinology match requesting their participation. Fourteen of the 15 questions from our survey were based on a 5-point Likert-type scale, with 1 representing *strong disagree* and 5 representing *strongly agree*; there was 1 one open-ended question.

Results: Overall, 70% of rhinology fellowship directors responded. Fellowship directors were divided on whether they were satisfied with the virtual interview but overall felt the process was convenient (74%). Most (74%) reported that virtual interviews did not allow them to sufficiently display their program. In addition, 70% felt that the virtual interview process did not allow them to establish rapport with applicants and also to determine who would be the best fit for their program (70%). Most also reported placing more emphasis on applicants' curriculum vitae and letters of recommendation. Overall, 65% said they would not plan to offer virtual interviews in the future despite similar or better match results.

Conclusion: While virtual interviews result in notable cost reductions and increased convenience to programs and applicants, fellowship directors were mixed in their level of satisfaction with the overall process. This was primarily related to the perceived inability to accurately reflect their program remotely and also an increased difficulty evaluating applicants via a virtual format. These limitations led to most fellowship directors not planning to offer virtual interviews in the future despite similar match results to when conducting traditional interviews.

Postoperative Opioid Use in Patients Undergoing Functional Endoscopic Sinus Surgery

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Introduction: Endoscopic sinus surgery is a commonly performed outpatient procedure for which opioids are frequently used. Few prospective studies have been conducted to address opioid prescription after sinus surgery. Our goal was to further examine our practice habits in opioid prescription and the relation to patient experience.

Method: This was a prospective, observational study. Patients were consented prior to surgery between September 2018 and March 2020. All patients were given equal postoperative pain control recommendations and initial prescription for 20 tablets of hydrocodone-acetaminophen. One to 2 weeks postoperatively, the patients were called and asked to respond to 5 questions regarding the amount of opioid taken, the stop date following surgery, nonopioid pain regimen, method of discarding opioids, and patient opinion if the opiate helped. The data were analyzed using binomial regression.

Results: Twenty patients were included in the study, with an average age of 52 years and an equal distribution of men and women. The median number of pills taken postoperatively was 3. Eighty percent of patients reported taking fewer than 5 pills, 10% used 5 to 10 pills, and 10% used more than 10 pills; 70% kept the remaining prescription after initial use. Of the patients, 35% used no over-the-counter medications in addition to hydrocodone and acetaminophen, and 70% felt the narcotic helped their pain following sinus surgery. A higher average narcotic was used in patients with a history of pain-related diagnoses, multiple medical diagnoses, lung disease, diabetes, and any narcotic use. This was found to be significant only with history of any reported narcotic use (mean 7.1 vs 2.4 pills taken; $P=.0161$).

Conclusion: The addition of a narcotic to the postoperative pain regimen positively affected the patients' perception of pain control. Despite this, 90% of patients consumed less than half of what was prescribed. This information coupled with a detailed preoperative assessment will lead to judicious use of narcotics in the postoperative analgesic armamentarium.

Pott Puffy: First Shot, The Best Shot

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Introduction: Low incidence on Pott Puffy tumor (PPT) has caused studying risk factors and recurrences of the disease to be difficult. Increased incidence at our institution was used to evaluate potential risk factors for the disease process itself and prognostic factors for recurrence.

Method: Single institutional retrospective chart review identified 31 patients from 2010 to 2022 with PPT. Patient