This will be my last opportunity as Section Chair to thank all of you who have re-energized the Section on Otolaryngology by participating in policy review, writing chapters for our publication, *Pediatric Otolaryngology*, organizing and advocating for elimination of choking hazards and button battery injuries.

Development of guidelines and policy review of otolaryngic care is the heart and soul of what we do to educate the general pediatrician. Your effort to influence guidelines mean that you set the new standard for several years. For example, Section member influence was instrumental in the new Obstructive Sleep Apnea guideline that allows for the provision that a pediatrician may send a patient directly to an otolaryngologist for evaluation rather than automatically requiring that a sleep study be performed. This important phrase means that you have the backing of the AAP when you speak to a medical director who is not in compliance with the guideline. Currently, this battle is being fought at the state, regional and national level by Section members among a variety of insurance carriers. My advice is to never back down or accept a declarative ruling by a medical director who chooses to set their own clinical pathway. You are the expert and have both the guideline and clinical wisdom to advocate for your patients and families.

*Pediatric Otolaryngology* book sales are going well. Pediatricians are very thankful that we published this text specifically for them with pearls and pitfalls in clinical practice. They look to us to help them better understand otolaryngic pathology and dispel the myths and legends still inherent in clinical practice. Special thanks goes to Past-Chair and Co-Editor, David Darrow, for his impeccable attention to detail and uncanny sense of how to present information in an accessible manner for the practicing pediatrician.

In the advocacy world, our ever expanding coalition on the Button Battery Task Force has demonstrated very clearly to battery manufacturers and product design specialists that the medical community views this issue with utmost urgency. Section member, Ian Jacobs, is the national Task Force Chair representing ABEA. Many Section members have played a significant role already. Jim Reilly wrote an article for our annual Focus on Subspecialties that was published in AAP News. Section Executive Committee member, David Walner, was primary author of our Button Battery Resolution that passed the Annual Leadership Forum with a truly astounding 99% vote, the highest of any resolution this year! And, the resolution was chosen for Top 10 designation among all passed resolutions. That means the AAP Leadership highlights this issue in their advocacy efforts. And special thanks goes to Section member, Kris Jatana, for his active participation on the Task Force on collaboration with industry and educating pediatricians on the urgency of battery removal. Within the AAP, the coalition is also growing with participation from general surgery, gastroenterology, emergency medicine and injury prevention. A survey on management of button battery injuries is being developed and will be sent to all members for their input. Section Chair-Elect, Chuck Bower, will be taking over as Chair at the annual National Conference and Exhibition (NCE) in Orlando this October. It has been my great pleasure to serve you over the past few years and the Section is in great hands with Chuck and the other Executive Committee members. My last plea to all Section members is to please get involved. The AAP is a great organization because of the work you do on behalf of children. Volunteer your expertise, your enthusiasm and your wisdom. You decide the future of healthcare in America and the AAP is the best vehicle to promote your vision for children's healthcare needs.
Editor's Note
Steven E Sobol, MD MSc FAAP

Wow! What a Great Organization!!!!!

As pediatric otolaryngologists, we have a number of societies which have the potential to add value to our careers. During challenging economic times, one often questions the value of membership in multiple organizations, and we are sometimes faced with the decision of having to choose where we spend our hard earned dollars.

I admit that I am slightly biased but can say without hesitation that AAP membership has been invaluable at every stage of my career. Coming out of fellowship in 2004, the main value for me was having the "FAAP" after my name. These four letters made me immediately identifiable to the community pediatricians and helped me quickly build a practice in a tough, competitive community. As I enter my 10th year of practice, the four letters have become less important to me. The major value of membership, however, has made the AAP the first organization that I consider paying dues to each year.

ADVOCACY!!!!!

There is no other organization that better represents our interests as pediatric otolaryngologists than the AAP. Having a voice in an organization that captures virtually every pediatrician and subspecialist gives us tremendous power on Capitol Hill. I don't think that I need to explain this any further as we are all figuring out how to navigate through the new mandates that we have had imposed on us. If we don't have a voice, someone else will, and you can be sure that their interests will come first…

I encourage everyone to watch this 5-minute video that highlights the value of being a member of AAP.

http://youtu.be/zFmmFCg6VdQ

Free OTOSIM!!!

Anyone interested in FREE ACCESS to section-owned OTOSIM units? From November through August, we will have six OTOSIM units available for use by active members for one month periods of time. Units can be used to host courses or for resident and medical student teaching. The units will be available free of charge, with the member responsible only for shipping and handling. Yet another great reason to be an AAP otolaryngology section member!

Upcoming Meetings for 2012

Mark your calendar!

Come experience “the world's largest gathering of otolaryngologists.” The American Academy of Otolaryngology-Head and Neck Surgery, Annual Meeting and OTO Expo will be hosted in Vancouver, BC. September 29-October 2, 2013.

The Southern Pediatric Otolaryngology Study Group is organizing the First Caribbean Pediatric Otolaryngology Conference to be held October 24 thru 27, 2013 at the Ritz-Carlton San Juan Hotel in Isla Verde, Puerto Rico. Prominent speakers from different academic institutions from the US will be addressing the audience on diverse topics related to Pediatric Otolaryngology. Please visit our website at: www.caribbeanpediatricoto.org

Last but not least… The 2013 AAP National Conference and Exhibition will take place in Orlando, FL. October 29-29, 2013.

Please join us at the upcoming 2013 Society for Ear, Nose and Throat Advances in Children (SENTAC) annual meeting which will be held in Long Beach, CA. December 5-8, 2013.

See you there!
AAP National Conference & Exhibition Special Events

AAP Kids’ Camp
Friday, October 25, 5:30–8:30 PM
Children and families will enjoy healthy food, music, fun, games, crafts and surprises. This year’s theme—"Living the Florida Life"—will feature activities specially designed to introduce Orlando as the unique and unforgettable experience it is. Activities are specially designed to provide children with an interactive experience.

Community Cares Project
Friday, October 25, 12:00–4:30 PM (Shuttle departs at 11:30 am)
Join us for an opportunity to provide support for Orlando area children by volunteering your time before the National Conference during our annual "Community Cares" project. This year the AAP will be painting, repairing, planting, and participating in a host of other activities for the Boys and Girls Club of Central Florida (www.bgccf.org). Lunch and shuttle transportation will be provided.

AAP Friends of Children Fun Run & Walk
Monday, October 28, 7:30–8:30 AM (6:30 am Shuttle Bus Pick Up from AAP Hotels)
Join runners and walkers in the 7th annual Fun Run & Walk benefiting the AAP Friends of Children Fund. Suggested donations for entry begin at $25 per family to participate. Conference.

Pediatric Bowl
Tuesday, October 29, 12:30–1:30 PM
Come match your wits with contestants from three pediatric residency programs in Florida. The teams will battle to see who is the "kingfish" of Florida residency programs and who gets to take home the "Meconium Cup." The Pediatric Bowl combines entertainment, a lot of learning and some fun competition! There will be more than marlins, rays, and sunfish on hand, so come prepared to hear all sorts of pediatric questions and answers. Moderators: Paul Fisher, MD, FAAP; Michael Cabana, MD, FAAP

AAP National Conference & Exhibition — Future Dates

2014
AAP National Conference & Exhibition
San Diego, San Diego Convention Center — NEW Venue!
October 11-14, 2014
Pre-conference events Friday, October 10

2015
AAP National Conference & Exhibition
Washington DC, Walter E. Washington Convention Center
October 24-27, 2015
Pre-conference events Friday, October 23

2016
AAP National Conference & Exhibition
San Francisco, The Moscone Center
October 22-25, 2016
Pre-conference events Friday, October 21

Pediatric Otolaryngology
Section on Otolaryngology—Head and Neck Surgery; Scott R. Schoem, MD, FAAP and David H. Darrow, MD, DDS, Editors
Get the answers you need for on-target ENT diagnosis, treatment and referral.
Pediatric Otolaryngology gives you one place to look for expert help with virtually any commonly encountered pediatric ENT condition.

For more information and to purchase Pediatric Otolaryngology, click below:
http://tinyurl.com/AAP-Books-PediatricEnt
Section on Otolaryngology- Head and Neck Surgery
Program Schedule
October 27, 2013 ~ Orlando, Florida
Pediatric Dysphagia: Where are we in 2013?

Session Description/Objectives
Pediatric dysphagia is a common childhood disorder. As the infant is growing and maturing, anything that interferes with the ability to feed orally can result in a feeding disorder. There are a multitude of etiologies that can contribute to pediatric dysphagia, from physiological to anatomical. As such, clear cut evaluation paradigms are difficult to discern, and guidelines are still needed to define the most efficient and cost-effective means of managing these children. Current Evaluation and management paradigms often call for multidisciplinary teams to best handle these difficult cases.

This course will cover best and most efficient evaluation studies, the developmental anatomy and physiology of swallowing, drooling management, and interventions (both medical and surgical) frequently prescribed.

Sunday, October 27, 2013
8:30 am – 4:00 pm

8:30 am  Section Abstract Plenary Session
9:15 am  Abstract questions and discussion
9:30 am  Pediatric Dysphagia: Introduction
        Diego Preciado MD PhD
9:35 am  An overview of common feeding disorders in children
        J Paul Willging MD
10:10 am  A multidisciplinary approach in pediatric dysphagia assessment
        Claire Miller, PhD, CCC-SLP
10:50 am  Break
11:00 am  Common GI pathologies resulting in dysphagia, Advances in their evaluation and management
        Benjamin D. Gold, MD, FACG,FAAP
11:40 am  Role of the otolaryngologist in the surgical treatment of pediatric dysphagia
        Steve Sobol, MD
12:20 pm  Discussion
        Diego Preciado, MD, PhD, FAAP
12:30 pm  Presentation of Research Award
12:40-4:00 pm  Section Executive Committee Meeting, Abstracts, and Lunch