



## Application as Host Clinic for the 2016 CEORL-Fellowship in Rhinology

Thank you for your interest in acting as host clinic for the CEORL-HNS Fellowship 2016 in Rhinology. Please fill in the application template electronically – if additional pages are required, they may be included in the submission as separate pdf-files

**Deadline for applications: Tuesday, May 31, 2016**

### Name and address of institution

Name of institution: \_\_\_\_\_

Address: \_\_\_\_\_

ZIP/Postal Code: \_\_\_\_\_ City: \_\_\_\_\_

Country: \_\_\_\_\_

### Fellowship Contact Person

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

### Staff:

Chair, medical staff, residents in training

**Office-based activities of the Department (out-patients clinics per year)**

**Number of surgical procedures performed in 2015 in ENT/Head and neck**

**Total number** \_\_\_\_\_

General anaesthesia \_\_\_\_\_

Local anaesthesia \_\_\_\_\_

Elective procedures \_\_\_\_\_

Emergency procedures \_\_\_\_\_

**Please check on the list the availability in your Dept. or in collaboration with other Depts. (e.g. Allergology) Please select Yes or No**

**A. DIAGNOSTIC PROCEDURES**

**a) Functional tests**

- |   |                          |                          |
|---|--------------------------|--------------------------|
| rhinomanometry/PNIF (Peak Nasal Inspiratory Flow) | <input type="checkbox"/> | <input type="checkbox"/> |
| acoustic rhinometry                               | <input type="checkbox"/> | <input type="checkbox"/> |
| olfactory tests (subjective, objective)           | <input type="checkbox"/> | <input type="checkbox"/> |
| ciliary function tests                            | <input type="checkbox"/> | <input type="checkbox"/> |
| nitric oxide measurements                         | <input type="checkbox"/> | <input type="checkbox"/> |

## b) Allergy investigations

epicutaneous allergen tests	<input type="checkbox"/>	<input type="checkbox"/>
intracutaneous allergen tests (Prick, Scratch)	<input type="checkbox"/>	<input type="checkbox"/>
nasal provocation tests	<input type="checkbox"/>	<input type="checkbox"/>

## c) Others

Neuroradiology (CT, MRI, PET, angiography)	<input type="checkbox"/>	<input type="checkbox"/>
Pathology (frozen sections....)	<input type="checkbox"/>	<input type="checkbox"/>

Access to :

Multi-disciplinary teams e.g. in head and neck/skull base	<input type="checkbox"/>	<input type="checkbox"/>
Immunology	<input type="checkbox"/>	<input type="checkbox"/>
Neurosurgery	<input type="checkbox"/>	<input type="checkbox"/>
Ophthalmology	<input type="checkbox"/>	<input type="checkbox"/>
Pulmonology	<input type="checkbox"/>	<input type="checkbox"/>
Rheumatology/vasculitis	<input type="checkbox"/>	<input type="checkbox"/>

## d) Surgical Procedures

As performed in 2015 (may be extended to prior years and needs then to be indicated)

### Approx. numbers

FESS \_\_\_\_\_

Revision FESS \_\_\_\_\_

Pituitary Surgery \_\_\_\_\_

Repair of skull base for CSF leaks, meningoceles etc \_\_\_\_\_

Draf IIA, B-III procedures \_\_\_\_\_

Rhinoplasty \_\_\_\_\_

Revision rhinoplasty \_\_\_\_\_

Extended skull base Surgery (excl. pituitary) \_\_\_\_\_

Other types of extended sinonasal surgery \_\_\_\_\_

(e.g. associated to clefts, malformations, DCR, orbital surgery, fractures of the mid-face or zygoma)

External approaches to the sinuses \_\_\_\_\_

**Main clinical interests of the Department in Rhinology**

**Main research interests of the Department in Rhinology**

**Organisation of Scientific meetings (Congresses and Courses etc) (2010-2016)**

**Description of existing programmes intended for foreign visitors, e.g. international mentoring programme or similar**

**Language Requirements for Fellow**

**Please include the following files as separate pdf-files:**

- **List of publications** (2010-2016, in peer-reviewed journals)
- **List of other publications** (2010-2016, book chapters)
- **List of theses** (graduate and postgraduate theses)
- **List of grants**
- **Visitors / fellows** (2010-2016)
- **Applicant's brief biography** (limit to 250 words)
- **Letter of Intent, signed by Chair**

**For any inquiries, please contact:**

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