Marc G. Dubin, MD

Candidate for
At-Large Director
Private Practice

What unique attributes do you bring to the Board of Directors?
What do you think is the most important item in the Academy’s Strategic Plan and how do you plan to maximize this for all types of practicing otolaryngologists?

In the spring of 2020, I was honored to participate in the AAO-HNS Future of Otolaryngology Task Force that assembled the COVID-19 guidelines for the return to practice. This focus on the day-to-day practice of medicine, now part of the Academy’s Strategic Plan under the Business of Medicine, is my priority as Chair of the Private Practice Study Group and hopeful AAO-HNS Director. My goal is improving the logistics of medicine, regardless of practice type, despite the headwinds we face. Pre-authorization, declining reimbursement, and increasingly complex regulations impact us all. These burdens don’t discriminate based on practice setting.

I feel that my professional experiences uniquely position me to advocate for all otolaryngologists on this issue. I serve as the president of The Centers for Advanced ENT Care, a 50+ physician otolaryngology group in the Maryland/Washington, DC, and Virginia area, with a clinical practice that focuses on tertiary rhinology. In these roles and throughout my career, I bridge the divide among my private practice, my general otolaryngology partners, and my academic colleagues in the leadership of the AAO-HNS and American Rhinologic Society. Wearing these very different hats resulted in an appreciation for the importance of academicians and private practitioners working together for the best interest of our specialty. It is critical that we focus on our common goals and minimize the frictions that exist below the surface as both practices cannot thrive without the support of the other.

In summary, my varied professional, clinical, and academic experiences make me an unwavering advocate for the entire specialty. As such, I would look forward to the opportunity for continued leadership in the AAO-HNS with a specific focus on improving the day-to-day practice of medicine for all otolaryngologists. The business of medicine is much more than reimbursement and it profoundly affects us all.
Please provide a one-page personal statement as to what is your vision for the leadership role for which you are applying, why you are pursuing the elected position, and why you should be chosen.

In 2020 The American Academy of Otolaryngology confirmed its significance to every Otolaryngologist in the United States (and probably the world). The AAO’s response to COVID-19 was exemplary and its leadership unparalleled. The thoughtful daily guidance of the Academy kept Otolaryngology from being led down the rabbit hole of rumors and assumptions and eventually allowed us to rapidly resume practice armed with the best available information.

With that in mind, I was honored to be asked to participate in the Task force of the Future of Otolaryngology that worked quickly and diligently to assemble the guidelines for the return to practice in May of 2020. Albeit during an unbelievably stressful time for all, I enjoyed working with the other task force members, gathering thought leaders’ opinions and the limited data to assemble the rational, thoughtful document. It was this involvement and interactions with Academy opinion leaders that has spurred my interest in AAO leadership. I have subsequently been appointed to represent Maryland as the Governor on the BOG, participated as a member-at-large on the 2021 AAO-HNS Strategic Planning, and serve as a member of Paranasal Sinus Committee. I am also honored to have been elected as the Chair of the new Private Practice Study Group.

As the Chairman of the Board of Managers of the Centers for Advanced ENT Care, a 60+ physician led practice in the MD/DC/VA region, I am confident that my experience running one of the largest ENT groups in the country uniquely positions me for advocacy of private practice ENT. Our group is committed to the preservation of independent private practice amongst the pressures of private equity, hospital acquisitions, and the encroachment of commercial carriers into the provision of health care. As such, we are run by physicians, for physicians, to maintain our independent otolaryngology practice.

Additionally, I have practiced tertiary care rhinology for 15 years and in so doing have bridged the divide between my private practice, my general otolaryngology partners and my academic partners in the leadership of the American Rhinologic society. I served on the Board of Directors of the ARS, have chaired numerous committees and continue to serve as one of the course directors of the Summer Sinus Symposium. This service has led to in an in-depth appreciation of the importance of academicians and private practitioners working together for the best interest and preservation of our specialty. It is critical that we work toward our common goals and minimize the frictions that exist below the surface. As I attempt to straddle both worlds, it is obvious that we are all working to provide outstanding, quality-based health care and both practices cannot exist without the support of the other.

In summary, my goal as a hopeful leader of the AAO is to utilize my experience running a large private practice group while practicing tertiary subspeciality care. I have a unique clinical practice that closely mirrors that of an academic rhinologist while concurrently administering a large private practice of general and subspeciality self-employed otolaryngologists. By harnessing this experience, I look forward to serving the AAO during these challenging times.
CURRICULUM VITAE

Name: Marc G. Dubin, MD, FACS

Current Employment:
Centers for Advanced ENT Care, LLC (previously ENT Associates at GBMC) 2006-present
  Board of Managers, 2015-present
  Chairman, August 2017-present
  Executive/Leadership Committee
  Chairman, Aug 2017-present
  Benefits Committee
  Chairman, September 2018-present
  ENT Associates at GBMC Division
  Co-Managing Partner, 2016-2021
  Managing Partner, 2021-present

Place of Birth: Springfield, PA

Education (include institutions, dates, degrees):
University of Pennsylvania, College of Arts and Science, Philadelphia, Pennsylvania
  Bachelor of Arts in Biological Basis of Behavior, May 1995
University of Pennsylvania School of Medicine, Philadelphia, Pennsylvania
  Doctor of Medicine, May 1999

Residency and Fellowship:
University of North Carolina Hospitals, Chapel Hill, North Carolina
  Intern in General Surgery, Department of Surgery, June 1999-June 2000
University of North Carolina Hospitals, Chapel Hill, North Carolina
  Resident in Otolaryngology, Department of Otolaryngology: Head and Neck Surgery, June 2000-June 2004
Georgia Nasal and Sinus Institute, Savannah, GA
  Rhinology Fellowship under Frederick A. Kuhn, M.D, July 2004-June 2005

Specialty: Rhinology

Licensure and Certification:
Licensed to practice medicine in Maryland (Lic# D62319)
Diplomat of the American Board of Otolaryngology April 2005 (Certificate #18773), Recertified, exp. 2025

Previous Employment:
Johns Hopkins University, Department of Otolaryngology, Baltimore, MD
  Full Time Assistant Professor, Rhinology and Sinus Surgery, August 1, 2005-August 31, 2006

Memberships and Offices Held /Academy and other societies:
American Board of Otolaryngology-Head and Neck Surgery
  Oral Examiner, 2021-present
American Academy of Otolaryngology-Head and Neck Surgery, Fellow- Member since 1999
  FESS Task Force 2015
  CPT and Relative Value Committee 2015-2017
  Board of Governors, Alternate Governor, 2018-2020, Governor, 2020-present
  Future of Otolaryngology Task Force 2020
  Private Practice Study Group, Chair, 2021-present
  Paranasal Sinus Committee, Member, 2021-2023
American College of Surgeons, Fellow, Member since 2007
American Rhinologic Society, Fellow, Member since 1999

Consultant to Board of Directors, 2010-2012
Chairman, Newsletter Committee, 2011-2012
Chairman, Marketing Committee, 2012-2018
Board of Directors, 2012-2015
Course Director, Summer Sinus Symposium, 2016-present
Development Strategic Planning Committee, 2019-present
Private Practice Task Force, 2021-present

Honors/Awards:
Greater Baltimore Medical Center Resident Teacher Award, Department of Otolaryngology, 2014
Johns Hopkins Resident Teaching Award, Department of Otolaryngology-HNS, 2009
Southern States Endoscopic Sinus Surgery Course, Invited Guest Lecturer, October 2005, Savannah, GA
Honorable Mention, Research Award, American Rhinologic Society, April 2005
Johns Hopkins Resident Endoscopic Sinus Surgery Course, Invited Guest Lecturer, February 2005
Travel Grant, Annual Meeting of the American Academy of Otolaryngology, September 2004
Travel Grant, Annual Meeting of the American Academy of Otolaryngology, September 2003
Southern Section Travel Award, Southern Section of the Triological Society, January 2002
Travel Grant, Annual Meeting of the American Academy of Otolaryngology, September 2001
Travel Grant, Annual Meeting of the American Academy of Otolaryngic Allergy, September 2001
Vice President’s Resident Award, Southern Section Meeting of the Triological Society, January 2000
Alpha Omega Alpha Medical Honor Society, October 1998

Community Service:
University of Pennsylvania Alumni Interviewer, 2011-2019
Otolaryngology Resident Clinic, Greater Baltimore Medical Center, 2006-present
Volunteer at KIPP Baltimore, April 2009
Medical Missionary trip to Vietnam, March 2003

Regional/Local Hospital Participation:
Maryland Society of Otolaryngology, Member 2005-present
Advisory Board, Department of Otolaryngology-HNS, Great Baltimore Medical Center, 2008-present
Peri-operative Executive Committee, Greater Baltimore Medical Center, 2011-2014
Value Analysis Committee, Greater Baltimore Medical Center, 2011-2014

Summation of Published Works Within the Specialty:
Guidance for Return to Practice For Otolaryngology Head and Neck Surgery Part I and Part II

Treatment of Chronic Maxillary Atelectasis Using Balloon Dilation

Squamous Cell Carcinoma in an Inverted Papilloma

Endoscopic traspterygoid biopsy of a pterygopalatine fossa mass.
Chu EA, Saunders JS, Dubin MG. Ear Nose Throat J. 2010 Jan;89(1):E28-9

American Rhinologic Society member survey on “maximal medical therapy” for chronic rhinosinusitis

The role of the rhinologic assessment in medical management.

Sinonasal epithelial cell expression of toll-like receptor 9 is decreased in chronic rhinosinusitis with polyps

Radiographic resolution of chronic rhinosinusitis without polyposis after six weeks versus three weeks of oral antibiotics
Unilateral multifocal inverted papilloma of the maxillary and frontal sinus

Radiologic Quiz 2: Maxillary Osteomyelitis

Endoscopically Guided Aerobic Cultures in Post-Surgical Patients with Chronic Rhinosinusitis

Analysis of methods to assess sinus extent in osteoplastic flap surgery: transillumination versus 6-ft Caldwell versus image guidance
Melroy CT, **Dubin** MG, Hardy SM, Senior BA. American Journal of Rhinology. 2006 Jan-Feb;20(1):77-83.

A comparison of computer-aided surgery registration methods for endoscopic sinus surgery

Preservation of natural frontal sinus outflow in the management of frontal sinus osteomas

Staged Endoscopic and Combined Open/Endoscopic Approach in the Management of Inverted Papilloma of the Frontal Sinus

Comparison of Antral Puncture v. Middle Meatal Swab for Culture in Acute and Chronic Sinusitis: A Meta Analysis

Endoscopic Lothrop (Draf III) with Punches: mucosa preservation technique

Benign Tumors of the Frontal Sinus

Stereotactic computer assisted navigation: state of the art for sinus surgery, not standard of care

Clear Cell Odontogenic Carcinoma of the Mandible: Case Report and Comprehensive Analysis of the Literature

Precursor B Cell Lymphoblastic Lymphoma Presenting as Isolated External Ear Swelling in a 2 year-old child

Increased role of the Otolaryngologist in Endoscopic Pituitary Surgery: Endoscopic Hydro-examination of the Sella

Osteoplastic Flap for the Treatment of Benign Frontal Sinus Tumors

Venturi Atomizer Contamination in a Rhinologic Practice
**Dubin** MG, White DR, Melroy CT, Gergan MT, Senior, BA. American Journal of Rhinology. 18(3)151-156. May-June 2004.

Endoscopic Repair of Cerebrospinal Leaks after Neurosurgical Procedures

The Limitations of Isolated Palatal Surgery in the Treatment of Obstructive Sleep Apnea

Computed Tomography’s Ability to Predict Hypoglossal Nerve Sacrifice

The role of soluble IL-4 receptor and IL-5 receptor antibody in preventing late-phase allergy induced eustachian tube dysfunction

Eustachian tube dysfunction after tobacco smoke exposure

Effect of Intranasal Histamine Challenge on Eustachian Tube Function

Contours of hair cell bundles along the chick basilar papilla

The Allograft Dermal Implant (AlloDerm®) in a Previously Irradiated Field,