

advanced
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Hear MD

Better Hearing for Better Living



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Inside This Issue:

Audiologists & Physicians Partnering in Your Hearing Health
Hearing Testing
Hearing Device Evaluation & Maintenance
Tinnitus Evaluation & Therapy
Hearing Device Strategies for Success

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Welcome



Welcome to the third issue of Advanced ENT magazine. We have chosen to dedicate this issue to exploration of what our colleagues at HearMD can do and can offer to our patients. They offer services in conjunction with the physician staff to help our patients' needs in hearing and balance. In particular HearMD offers:

- Hearing testing
- Hearing device evaluation, dispensing, and maintenance
- Tinnitus evaluation and therapy
- Balance assessment

Otolaryngology itself lists ears as the first part of the body with which we are concerned. While the examination of the ear and adjunct imaging gives us a lot of information about each patient's ear problems, we cannot see the inner ear, the part of the ear where the mechanical energy of sound is converted to nerve impulses for the brain to interpret. We rely on testing to provide clues about what is happening in the inner ear. We may learn, for example, of hearing loss due to the little bones of hearing in the ear which might be amenable to surgical treatment. Or we may learn that the hearing mechanism of the ear is normal but that the brain is not processing auditory information adequately. Most hearing testing, however, tells us of the loss of hearing from the cochlea, the hearing part of the inner ear. From this testing we also learn about the options for assisting the hearing through hearing devices. Our HearMD staff includes audiologists and hearing aid dispensers who can use testing information to help plan the best form (or forms) of help for our patients with significant hearing loss. Familiarity with the different types of devices gives patients the best chance for improving hearing function in everyday life. Many patients are also troubled by tinnitus, the proper name for the noises many people hear inside their heads. HearMD can offer help with counseling, tinnitus masking devices and a support group for those who suffer from tinnitus. Finally, HearMD is an important part of our assessment of balance. Hearing testing tells us about the inner ear itself and sometimes helps to distinguish specific causes of balance problems. We also offer, in conjunction with Continuing Care, more detailed balance testing to aid in our understanding of each patient. This will help direct us to the most effective course of action and treatment for each individual.

We, the physicians of Advanced ENT, recognize the great value of our HearMD colleagues. We are excited to give you an opportunity to learn more about the HearMD practice and the services they offer.

As always, we welcome your comments and/or questions about anything we do at Advanced ENT. We encourage you to ask so that we might better help you and your loved ones.

Finally, we are pleased to announce a new office location opening in Spring 2013 at the Virtua Voorhees Hospital campus! We value our relationship with you, and we hope that you will continue to partner with us in addressing your hearing healthcare needs at our new facility.

Sincerely,

THE PHYSICIANS AND STAFF OF ADVANCED ENT

HearMD Staff



Advanced ENT and HearMD – Working Together for Better Hearing

By Deborah Burke, M.Ed., CCC/A

IN TODAY'S world of hearing healthcare, there are many providers from which to choose. Our mission at HearMD is to address the individualized needs of each patient with compassionate, professional and progressive hearing health care. Our goal is to improve the quality of our patient's lives and relationships through better hearing.

To accomplish this, we work closely with the physician team of Advanced ENT to determine the cause of your hearing loss and to evaluate for potentially more serious medical conditions. The medical assessment is an important part of a complete and comprehensive hearing evaluation. Obtaining medical clearance from one of our Ear, Nose and Throat physicians will ensure that your hearing loss cannot be remedied with medicine or surgery. In addition, because we work so closely with the physician team, any medical issues such as ear infections, itchy ears, cerumen (ear wax) management, dizziness or sudden changes in hearing sensitivity can be addressed in a timely manner.

We believe that a thorough hearing assessment is an important part of a complete health evaluation for all ages. Our professional and caring hearing healthcare staff at HearMD is experienced in diagnosing and treating all types and degrees of hearing loss. After a complete hearing evaluation, our staff will take the time to explain the test results and will discuss how the hearing loss might be affecting your daily life and relationships. We pride ourselves on providing accurate and up-to-date information about hearing and hearing loss so that our patients can make educated hearing healthcare decisions. We do this because in



Our mission at HearMD is to address the individualized needs of each patient with compassionate, professional and progressive hearing health care.

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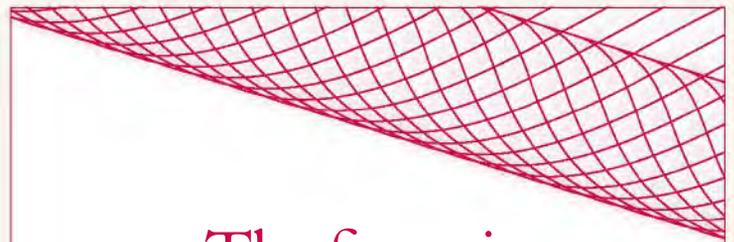
our practice, we place high value on patient education. By working together in this way, we will create realistic goals to improve your hearing.

One of the ways that we strive to help you hear better is by providing complete hearing aid dispensing services in all of our offices. Unlike many other hearing healthcare practices, our licensed hearing health professionals dispense hearing aids from many different reputable and well-known manufacturers. Therefore, we have the freedom to choose which product and/or manufacturer we feel is best for each individual patient's hearing loss and lifestyle needs. In addition, our HearMD staff is always quick to evaluate and to dispense new hearing aid technology as it becomes available. We accomplish this by attending several continuing education programs every year. During these programs, we learn about the latest developments in hearing health care and hearing aid/assistive listening device technology so that we may then offer it to our patients.

It is important to remember that today's hearing aids are complex medical devices, not just simple sound amplifiers as they were in the past. It takes knowledge and skill to fit them properly. That is why choosing an experienced, well-informed hearing care professional like those at HearMD is just as important as choosing the hearing aid(s) themselves. A state of the art hearing aid(s) or assistive listening device will not benefit you as greatly or live up to your expectations if it is not fit and programmed properly for your hearing loss and listening needs by an experienced professional.

After you purchase hearing aids at HearMD, we continue to provide top-quality hearing healthcare by including our Premium Care Plan as part of every hearing aid fitting. As part of our ongoing commitment to your hearing health, we include our Premium Care Plan **at no charge** in order to provide you with exceptional worry-free hearing aid care for 5 years from the date of purchase. The Premium Care Plan includes: **free** in-office Clean & Check maintenance visits every six months for 5 years, **free** batteries dispensed in six-month supply quantities at the end of your trial period (and when you return for your semi-annual Clean & Check maintenance visits) for **5 years**. The Premium Care Plan also includes (if applicable) tone hooks and tubing changes for Behind-the-Ear (BTE) hearing aids, in-office earmold and shell modifications, hearing aid reprogramming following manufacturer's repair and wax filters.

So if you or someone you know is suffering from hearing loss, let the physicians of Advanced ENT and the hearing healthcare professionals of HearMD help you begin your journey to better hearing for better living.



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Better Hearing for Better Living

by Katherine Gilman, MA, CCC/A, FAAA

THE EARS are taken for granted by most people, since they develop early in pregnancy and can detect sound and movement even before birth. Considering that sounds are vibrations, nearly everything that moves makes some degree of sound; thus, healthy inner ears are sensing sound, position and motion continuously – even while we sleep. Through early childhood, the brain learns to recognize various sounds, and organizes them in order to distinguish between important sounds and everyday ambient noises. From very early in life, we become so accustomed to having numerous sounds around us that we no longer notice many of them. The ears also become the “eyes in the back of our heads”, and we can hear people approach from behind or tune-in to what others are saying even when we aren't looking at them. We can hear many things beyond our range of sight, such as the neighbor's dog barking or a train passing in the distance.

As the child's brain develops, it attaches meaning to spoken sounds to develop language comprehension, and learns to mimic what it hears to develop speech – verbal communication is a very complex process. The vestibular system also handles complex stimulation in childhood through running, tumbling, swimming, riding bicycles and roller coasters, etc. All this happens with very little conscious thought. The brain detects vibration, motion and processes them instantaneously so we can act reflexively to sound or movement when needed.

Not only do we take our hearing for granted, but many people choose noisy activities and occupations (such as music, firearms, motorcycles and power tools) and will likely accumulate noise-induced hearing loss over time. Sound doesn't need to be uncomfortably loud in order to be potentially damaging. For example, hair dryers and dental drills aren't usually dangerous when exposure is limited; but those who hear those sounds for hours a day are at risk. Other lifestyle choices and medical conditions that affect our general health can also contribute to a gradual decline in hearing. For example, smoking and diabetes have been correlated to progressive hearing loss. We also become less active through the years so the vestibular system isn't challenged as much as it was in youth. Therefore our reflexes and equilibrium weaken as a result.

For most people, hearing sensitivity fades so slowly that we are unaware of the changes from day-to-day. In the earlier stages, the brain will “fill-in-the-blanks” for what our ears are missing, allowing us to perceive what was said rather than truly hearing it. Since little thought went into detecting and processing the sounds all around us for decades, we don't notice that the train in the distance has become softer and softer until it is inaudible to us. Family and friends may be the first to notice that we are not responding to things the way we once did.

Over time, noise damage can accumulate from certain occupations and hobbies, including:



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Eventually, we do notice that conversations take more listening effort, especially in groups or background noise. We might have to ask for repetition or mistakenly guess what someone has said. We may notice that we are getting fatigued and will tune-out, or that others become impatient with our difficulties. Some people hear sounds within their ears or head, known as tinnitus, which current research suggests is due to the auditory nervous system missing the sound stimulation that the inner ear used to provide. This is similar to the "phantom limb" phenomenon.

With uncorrected hearing loss, some people find social situations frustrating or embarrassing and may withdraw from activities that were once enjoyable. This can lead to a sense of isolation and depression. The lack of sound stimulation to the brain is also correlated to higher risk for dementia in those with even mild untreated hearing loss. The risk for falls also increases, due to the reduced awareness of our environment through auditory cues coupled with the vestibular system that has also weakened from lack of stimulation through physical activity.

The good news is that it doesn't have to be this way. Much has been learned about the aging process, and more people are proactively taking steps to maintain their health and stay more active through their later years. Not only are today's older adults lifestyles more active and engaged than the previous generation's, but the attitudes toward seeking help and using tools to compensate for physical limitations have also changed dramatically. Eyeglasses and orthodontic braces were once something that people tried to hide, but now they come in fun colors and no longer have a stigma. We are beginning to see a similar change in attitudes about hearing instruments, especially with the improvements that have taken place over the past decade.

Through advancements in hearing instrument technology, we can compensate

for the sensory impairment through digital amplification and sound processing. The newest developments have focused on going beyond the customized sound amplification of earlier digital hearing aids. The hearing aids now can do some of the sound processing and filtering that the auditory nervous system can no longer do as efficiently – such as detecting whether a sound is a voice or a noise and determining from which direction the sounds are originating. This can help the hearing device wearer focus on the speech they want to hear over the other sounds around them. By doing this, it will ease some of the listening effort and fatigue that many people with hearing loss experience. In addition, there are wireless accessories that interact with the hearing instruments to allow the wearer more options in challenging listening environments.

Re-learning to use what one hears through hearing instruments is essentially a rehabilitation process that takes patience and persistence. Each person is unique, as are their hearing issues. That is why it is crucial to use a hearing health-care provider that has the medical background to ensure that one gets a thorough evaluation, accurate diagnosis and a personalized treatment plan. Ideally, the practice should also be independent of franchising and purchasing contracts, which allows greater freedom to select from a variety of models to determine what is best suited for the individual patient. There should also be plenty of counseling and follow-up visits as you adjust in order to address all your questions. This will ensure that you are getting the most out of your hearing devices.

The saying, "if you don't use it, you lose it," is proving itself to be true the more we learn about aging. As such, we are finding that many people are noticing the subtle changes in hearing in the earlier stages and are taking steps to correct it sooner. This is to their benefit, as it is easier

to adapt to the change before the auditory nervous system has become too weak from lack of use. Most of our patients find that the process is worth the investment of both time and money. We often hear patient's stories about how family members comment how great it is to have them involved in the conversation again. Some have said that they actually feel younger, since they're not disrupting the flow of conversation by asking, "What did you say?" Many also tell us about sounds that they'd forgotten about; like the person who was thrilled to hear the frogs in the summer when visiting family in the country. Sometimes it's a sound as common as the turn-signals in the car or the 'zip-zop' of corduroy pants that people are pleasantly surprised to hear again.

Sound enriches our lives through communication, but also in more ways than we realize. If you find that you are having difficulty following conversation in groups, speech doesn't seem as clear as it used to and people are suggesting that you are missing more than you realize, please consider having your hearing evaluated. By determining what your hearing levels are and discussing the options available, we at Hear MD can help you to achieve better hearing for better living!

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Robert B. Belafsky, M.D., F.A.C.S.



Dr. Robert B. Belafsky is certified by the American Board of Otolaryngology-Head and Neck Surgery. He received premedical training at the George Washington University in Washington, D.C., and earned his medical degree from the State University of New York at Downstate Medical College in Brooklyn, New York. Dr. Belafsky served his residencies at Lankenau Hospital and at Thomas Jefferson University Hospital, both in Philadelphia, Pennsylvania. He is a fellow of the American College of Surgeons and the Philadelphia College of Physicians. Dr. Belafsky is Chief of Otolaryngology at Lourdes Medical Center-Burlington County.

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Dr. Howard J. Bresalier is certified by the American Board of Otolaryngology – Head and Neck Surgery. He received premedical training at Emory University in Atlanta, Georgia, and earned his medical degree from the University of Osteopathic Medicine and Health Sciences in Des Moines, Iowa. Dr. Bresalier served his residency at Botsford General Hospital in Detroit, Michigan. He is a member of The American Osteopathic Association, and is a fellow of the American Osteopathic College of Otolaryngology. Dr. Bresalier serves as Head of Otolaryngology at Kennedy Health System.

Harry Cantrell, M.D., F.A.C.S.



Dr. Harry Cantrell is certified by the American Board of Otolaryngology-Head and Neck Surgery. He received premedical training at Drexel University in Philadelphia, Pennsylvania, and earned his medical degree from The Milton S. Hershey Medical Center of the Pennsylvania State University College of Medicine. Dr. Cantrell completed his internship at York Hospital in York, Pennsylvania, and his residency at the University of Maryland Hospital in Baltimore, Maryland. He is a fellow of the American College of Surgeons.

Roy D. Carlson, M.D.



Dr. Roy D. Carlson is certified by the American Board of Otolaryngology-Head and Neck Surgery. He received his premedical training at Yale University in New Haven, Connecticut, and then he attended Yale University School of Medicine to earn his medical degree. He completed his internship and residency at Yale University as well. Dr. Carlson is chief of Otolaryngology at Virtua Memorial.

Anthony Cultrara, M.D.



Dr. Anthony Cultrara is certified by the American Board of Otolaryngology-Head and Neck Surgery. He received premedical training at Montclair State University in New Jersey, and earned his medical degree from New Jersey Medical School at the University of Medicine and Dentistry in Newark. Dr. Cultrara served his internship and his residency at the State University of New York Science Health Center in Brooklyn, New York, and his fellowship at the New York Center for Voice and Swallowing Disorders at St. Luke's/Roosevelt Hospital Center in New York.

Stephen P. Gadomski, M.D., F.A.C.S.



Dr. Stephen P. Gadomski is certified by the American Board of Otolaryngology-Head and Neck Surgery. He earned a B.S. in Biology and Chemistry from Boston College, a masters degree in Zoology from Rutgers University, and his medical degree from Thomas Jefferson University in Philadelphia, Pennsylvania. He served his internship in general surgery at Einstein Medical Center in Philadelphia and his Otolaryngology residency at Thomas Jefferson University. He is a fellow of the American College of Surgeons and a member of many other professional medical organizations. He is past-president of the medical staff at Virtua South and serves as Chief-Section of Otolaryngology Head and Neck Surgery there as well.

Ashmit Gupta, M.D.



Dr. Ashmit Gupta is certified by the American Board of Otolaryngology-Head and Neck Surgery. He received premedical training at the University of Pennsylvania, and earned his medical degree and Master of Public Health degree from George Washington University in Washington, D.C. Dr. Gupta completed his internship and residency at George Washington University as well.

Patrick J. Hall, M.D., F.A.C.S.



Dr. Patrick J. Hall is certified by the American Board of Otolaryngology-Head and Neck Surgery as well as the American Academy of Facial Plastic and Reconstructive Surgery. He received premedical training at the Philadelphia College of Pharmacy and Science, and earned his medical degree from the University of Medicine and Dentistry in Newark, New Jersey. Dr. Hall served his otolaryngology residency at the University of South Florida in Tampa, Florida. He completed fellowship training in Facial Plastic and Reconstructive Surgery with Dr. Richard Farnior in Tampa, Florida. He is a fellow of the American College of Surgeons and serves as Chief of Otolaryngology and Facial Plastic Surgery at Underwood Memorial Hospital.

P. Todd Rowan, M.D., F.A.C.S.



Dr. P. Todd Rowan is certified by the American Board of Otolaryngology-Head and Neck Surgery and its subspecialty of Sleep Medicine. He received premedical training at the University of Pennsylvania, and earned his medical degree from New York University School of Medicine. Dr. Rowan served his residency at the Hospital of the University of Pennsylvania and Children's Hospital of Philadelphia, after which he underwent formal training as a fellow in otology with Dr. Herbert Silverstein in Sarasota, Florida. Dr. Rowan is a fellow of the American College of Surgeons. He serves as medical director of the Balance Center at Underwood Memorial Hospital and Kennedy Health System, and he is the medical director of the Sleep Center at Virtua Washington Township.

David N. Schwartz, M.D., F.A.C.S.



Dr. David N. Schwartz is certified by the American Board of Otolaryngology-Head and Neck Surgery. He received premedical training at the College of William and Mary in Williamsburg, Virginia. He attended Boston University School of Dental Medicine earning a degree in dentistry followed by a medical degree from Boston University School of Medicine in Massachusetts. Dr. Schwartz completed his surgical and otolaryngology residencies at the State University of New York in Syracuse, New York. He is a fellow of the American College of Surgeons. He serves as the Chief of Surgery at Underwood Memorial Hospital.

Rasesh P. Shah, M.D., F.A.C.S.



Dr. Rasesh P. Shah is certified by the American Board of Otolaryngology-Head and Neck Surgery. He completed an accelerated seven-year medical program, receiving premedical training at the New Jersey Institute of Technology, and earning his medical degree from New Jersey Medical School at the University of Medicine and Dentistry in Newark, New Jersey. Dr. Shah completed his internship and residency at UMDNJ in Newark, New Jersey as well. He is Program Director of Otolaryngology at Lourdes Specialty Hospital. He is a fellow of the American College of Surgeons.

Samir Shah, M.D., F.A.C.S.



Dr. Samir Shah is certified by the American Board of Otolaryngology-Head and Neck Surgery. He received premedical training at Cornell University in Ithaca, New York, and earned his medical degree from the State University of New York Downstate College of Medicine. Dr. Shah completed his residencies at the State University of New York Health Science Center in Brooklyn, New York, and the SUNY Downstate College of Medicine. He is a fellow of the American College of Surgeons.

Attention, Tinnitus Sufferers!

by Linda Beach, HAD and Mary-Ann Halladay, BA

TINNITUS IS the medical term for ringing, roaring, buzzing, pulsating, and other unwanted noises in the ears or head. The consequences can be mildly annoying to devastating. Many suffer from its severe form and hear noises every moment of the day, making sleep difficult at night. However, it is not a hopeless condition. Our approach to helping those in need is through the South Jersey Tinnitus Support Group.

Twenty-three years ago we saw the increasing need to find help for those experiencing intrusive tinnitus. We consulted the American Tinnitus Association who assisted us in forming the South Jersey Tinnitus Support Group (SJTSG). Our main focus was, and remains, to bring together those who share this condition who are experiencing difficulty knowing how to deal with it.

Our meetings are held once monthly, September to June. Many core members have been coming for years. They have learned to incorporate coping strategies to mitigate much of their suffering. It is rewarding for us to see how our members keep coming back to offer help to those who are extremely distraught. They offer ways that have worked for them to overcome fears about tinnitus and help find answers to decrease the negative impact of their noise.

We are proud to have as the facilitator of our group, Barbara Kennedy. Barbara served as a member of the ATA board. She shared with us the following comments about her personal experiences as a tinnitus sufferer. "I look back to my early days with tinnitus and realize that without the help of family, friends, ATA and the support group, I would not be coping as well as I am after 12 years with tinnitus. My first response was one of panic laced with a little "hysteria". I was immediately calmer once I educated myself about tinnitus and found a community of support both from the ATA and SJTSG. Tinnitus is a complex condition and there is no standard protocol to help those that suffer with it. Until a cure is found many of us have found a safe haven in coming together with fellow sufferers. In attending these meetings I am not only able to learn more about ways to manage my tinnitus from what others have shared, but also I can lend support to those that need my help. It is a give-and-take experience.

Although I am doing fairly well with my tinnitus, I will continue to attend meetings and enjoy the role of facilitator with Linda and MaryAnn serving as consultants. Our productive discussions go further than complaints and self-pity. We help each other to stay informed about recent research studies and how to raise funds to support those projects. As we share our successes and challenges we even manage to laugh-



Drs. Stephen Gadomski and Patrick Hall present staff members Mary-Ann Halladay and Linda Beach with an award for their over 20 years of service with the SJ Tinnitus Support Group.

and that's a good thing for all of us!"

In addition to interpersonal support, our meeting agenda occasionally has guest speakers. These include acupuncturists, chiropractors, audiologists, TMJ specialists, ENT doctors, psychologists, and speakers that discuss relaxation strategies. At each meeting new members receive a packet with articles relating to tinnitus, ATA brochures and often new research information. We have a handout each month for our other members.

The SJTSG has also helped with the organization of the Mid-Atlantic Tinnitus Conferences. Notable speakers from across the county gave seminars relating to tinnitus.

In addition, a member of our group has established an annual regional fundraiser to financially support the ATA research projects. This fundraiser targets assistance to musicians to make them aware of the crippling effects of tinnitus. To date more the \$7000 has been donated to the ATA.

The meeting time and location are advertised in local newspapers on a regular basis to keep the general population informed. The ATA also assists in advertising of information related to the SJTSG. Our meetings are free, and we encourage spouses and friends to attend.

To all those who suffer from tinnitus, please know you are not alone.

South Jersey Tinnitus Support Group

Supported by Hear MD

Meetings are held the **1st Thursday** of each month.

Location: ROHNA/Advanced ENT Corporate Headquarters
1020 N. Kings Highway, Suite 201
Cherry Hill, NJ 08043

Time: 7:00-8:30 PM

Tips on Dealing with Tinnitus

1. Do not panic. Tinnitus is rarely a sign of any serious ongoing pathological condition. The sound you hear may in fact be the normal sounds created by your body or your brain at work.
2. Have your hearing checked and see an ear, nose and throat physician who can evaluate you for potential treatable medical conditions which can cause or aggravate tinnitus.
3. Review your current medications with your physician for possible tinnitus side effects.
4. Examine your lifestyle and make changes if stress is a part of your environment.
5. Examine your diet and reduce possible sources of irritation such as salt, artificial sweeteners, excess sugar, alcohol, some over-the-counter medications, tobacco and caffeine.
6. Avoid loud noise. If avoidance of noise is not possible, use hearing protection devices.
7. Do not draw any negative conclusions about your condition. You will learn that the real difficulty with tinnitus is created outside the auditory system. Negative thoughts may be more damaging than the sounds themselves.
8. Keep informed about tinnitus. Learn what tinnitus is, and more importantly, what it is not. There is a great deal of research being conducted in the search for tinnitus relief. Contact The American Tinnitus Association at 800-634-8978 or www.ata.org. You will not fear tinnitus once you are properly informed.
9. Attend the South Jersey Tinnitus Support Group. They can help you sort out all the information, and offer compassionate companionship and coping strategies.
When: The 1st Thursday of each month from September through June
Time: 7:00 PM
Location: ROHNA/Advanced ENT Corporate Headquarters
1020 N. Kings Highway, Suite 201
Cherry Hill, NJ 08043
call 856-602-4200 for more information
10. Discuss your tinnitus with those around you. Inform them about the conditions that are difficult for you.
11. Be involved in your recovery. Tinnitus may not resolve on its own.
12. Do not give up if a therapy or treatment doesn't produce immediate relief.
13. Do not blame yourself for your tinnitus. The causes of tinnitus are numerous and nearly impossible to determine.
14. In most cases, people who experience tinnitus will "habituate" to it, and after a period of adjustment, will go on with their lives as well as before.



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Compensation Strategies: How to Get the Most from Your Hearing Aids

By Laura Berman, M.S. CCC



AFTER 38 years in the hearing health profession, I have met patients who say “my crazy family says I don’t hear” to “I have a problem and am ready to do something about it.” If you fall anywhere within that continuum, hopefully this article will provide some insight into the amazing journey to better hearing. Although many people have a tendency to take their auditory ability for granted, when there is hearing loss, the result is that there is a major breakdown in communication. Hearing loss often occurs gradually and insidiously. Most do not notice its progression until it reaches a point where it interferes with day to day life. Often, it is family members and/or friends that identify the change and encourage action. Beginning with a thorough Ear, Nose & Throat examination and the administration of a hearing test by a qualified hearing professional, the journey towards better hearing has begun. If there is no medical/surgical solution, hearing aids are recommended.

For some, amplification provides an immediate auditory “ah-ha” moment. For most, the process of adjusting and adapting to rediscovered hearing requires a more interactive and proactive involvement from both the hearing impaired patient and their support network. Residual hearing needs to be maximized as the brain reclaims sounds that need to be both heard and processed. The hearing professional plays a significant role in helping the patient balance the benefits of technology with realistic expectations and helpful compensation techniques.

The key, fundamental strategies to successful wearing of your hearing aids are as follows:

1. Admit and accept there is a hearing loss and be proactive about doing something about it.
2. Seek qualified and reputable hearing health professionals.
3. Purchase hearing aids if they are recommended. If two aids are suggested, get both.
4. Wear them regularly.
5. Take an active role and responsibility towards readjusting and welcoming the ability to hear again.
6. Be assertive in educating others in altering their behavior, speech pattern, positioning, etc.
7. Maintain a positive attitude while realizing there may be some challenges along the way. Welcome the benefits of amplification while maintaining realistic goals and expectations. Improved hearing does not mean normal hearing.
8. Hone in on your innate lip-reading skills to supplement the new and additional sounds you now hear. Recognize this is a life skill you already know how to do but now can use to your advantage especially in challenging, noisy, listening environments.
9. Take control of your auditory environment whenever possible by being aware of both your placement

and the speaker's, increase lighting and try to reduce unneeded background noise.

10. Maintain a sense of humor and relax.

Hearing, listening and brain processing begin before you are born. When a person hears well, there appears to be no effort or work involved. When a hearing loss occurs over time, one is rarely aware of the decline or even when it began. I often correlate this to the physical aging process. When one looks in the mirror, one sees no day to day changes. But look back at a photo from years ago, and you realize you do not look the same. Likewise, when patients complain that their family members mumble or talk from another room and that is why they cannot hear them, I often ask if they remember having these same complaints years ago. The answer is always "no." Acceptance that the "fault" lies not in someone else mumbling but their own loss of hearing. One gradually falls into

the habit of saying, "huh, what, repeat that, what did you say, say it again." Much like the saying "When a tree falls in the woods and there is no one there to hear it, does it make a sound?" Likewise, if sounds occur and you do not hear them there is still sound. If birds are chirping outside your window or a clock ticks in your home, just because you no longer hear them does not mean these sounds are not occurring.

The ability to successfully adjust to and maximize the benefits from amplification involves a team approach that begins with the hearing impaired person. The hearing impaired person needs to be willing to be an active participant in the fitting process. It is also good to have the support of their family. Those factors, combined with a reliance on and trust in the advice of an experienced hearing health-care professional will ensure a more successful hearing device fitting. Only then has the satisfying path to better hearing, improved communication

skills and a renewed appreciation of your sense of hearing begun. Hearing aids are the first major step in this journey. Total success and satisfaction combines today's technological advances with ongoing, supplemental compensatory strategies and techniques.

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Internet Hearing Aids: Buyer Beware

By Linda Goldstein, Au.D., CCC/A

OVER THE past few years, growth in the number of companies selling hearing aids on the Internet has occurred. While purchasing on the Internet may be good for items such as books, clothes, shoes, and music, it is not a good place to shop for hearing aids. Even the most sophisticated hearing aid technology still requires a trained, experienced hearing health care professional to perform an evaluation, the initial programming, subsequent adjustments, and counseling regarding use and care of these devices.

Listed below are several reasons why individuals with hearing loss should be wary of purchasing hearing aids on the Internet:

■ According to the FDA (US Food & Drug Administration), hearing aids are a controlled medical device. They strongly recommend that individuals with hearing loss undergo an exam by a physician prior to being fit with hearing aids to be certain the hearing loss cannot be treated by medicine or surgery, and that the loss is not a sign of a more serious condition. However, Internet hearing aid companies usually ask individuals to by-pass the exam and sign a medical waiver, a practice that is discouraged by the FDA.

■ Many Internet hearing aid companies have individuals with hearing loss take a self-administered, automated hearing test to determine severity of hearing loss. However, these tests cannot determine the cause of the hearing loss. In addition to knowing the degree of hearing impairment, it is also important to know whether the loss is being caused by something as simple as excessive ear wax, or something more serious such as a tumor on the brain. In addition, such automated tests have been found to be invalid and unreliable in many elderly persons with hearing loss. In order to obtain the most reliable and accurate hearing test results, the audiologic evaluation should be performed in a sound-treated room, using calibrated equipment by a qualified hearing health care professional.

■ Many factors are taken into consideration when a hearing health care professional makes a recommendation for a particular type and style of hearing aid. Such factors include severity and type of

hearing loss, ability to understand spoken words, individual listening needs, manual dexterity, and visual acuity. In addition, there are hearing aid features such as directional microphones, telecoils, and blue tooth compatibility which may be necessary, but only a qualified hearing health care professional can determine if those features are appropriate. When purchasing hearing aids on the Internet, none of these factors is taken into consideration. The person with hearing loss merely chooses the device that looks good to her/him.

■ All hearing aids need to be programmed and fine-tuned to the individual's hearing loss and listening needs. When hearing aids are purchased on the Internet, there is a very limited ability to do that. In order for programming and fine tuning of the aids to be most effective at addressing the individual's hearing loss, the person with hearing loss needs to work one-on-one with a hearing health care professional. In addition, it is normal for hearing loss to worsen over time. The best way to address these changes in hearing is to work closely with a hearing health care professional who is familiar with your hearing health history. Your local hearing health care professional will be able to periodically re-evaluate your hearing to ensure you are getting the most benefit possible from your hearing aids. This is not possible when hearing aids are purchased on the Internet.



■ In addition to the programming of new devices, a qualified hearing health care professional will provide information about what to expect with the new hearing aids, as well as strategies for how to get the most from the aids in different listening situations. This type of counseling and support is typically not available on the Internet.

■ It is expected that hearing aids will need to be repaired from time to time, and most individuals will need a loaner hearing aid to use while their aid is sent for repair. A hearing health care professional who is truly committed to their patients will offer loaner hearing aids to patients while their aid is being repaired. Such a service is typically not available when aids are purchased on the Internet.

In the short term, purchasing hearing aids on the internet may seem like a "good deal" to some. However, in the long run, working directly with an audiologist or hearing aid dispenser instead of the Internet to ensure proper fit, programming, counseling and support often proves to be invaluable. A knowledgeable and experienced hearing health care professional will work closely with individuals with hearing loss to provide the most effective solution for their listening needs and help improve quality of life for many years to come.

References:

<http://www.asha.org/uploadedFiles/AIS-Hearing-Aids-Buying-Online.pdf>

Brady, G., (2011). 10 Good Reasons Not to Buy Hearing Aids on the Internet. The Monthly Communicator, 32 (11), 4-5.

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