

	O E COMPANY OF THE PARK OF THE		
		1	M. P.
	Wellcome CONTENT	age 3	1
The same of	Our reference population	5	
	Where we are	7	
	Hierarchical and functional organization	20	
	Section of Otology and Audiological Implants	23	
	Section of Audiology	27	
	Section of Otoneurology	29	
4.4	Section of Rhinology and Anterior Skull Base Surgery	31	
	Section of Oncology and Head and Neck Surgery	34	
	Section of Dysphagia and Sleep Disorders	37	
EMPSENCES	Section of Pediatric Otorhinolaryngology	39	THE PERSON NAMED IN
	Section of Voice	41	
6.	Resident Medical Interns of Otorhinolaryngology	43	
	Nursing care in Otorhinolaryngology	47	***
(I)	The Otorhinolaryngology Service / CM Unit and the University of Seville	50	
	Coordination of the Cochlear Implant Program of Western Andalusia	54	
	Tracheostomized Patient Care Unit	56	
	Training	62	
	Research	65	
	Innovation	74	
Pisk.	Accreditation	77	1
1	Celebration of relevant events	79	
	Team cohesion days	84	



I welcome you to the Otorhinolaryngology Clinical Management Unit / Service of the Virgen Macarena University Hospital in Seville.

Our entire team of professionals strives every day to improve patient care, to use the most appropriate diagnostic tools and to provide them with the best treatments. We want to create the best conditions so that they can deal with illnesses in the most

comfortable way possible, so we are always receptive to their suggestions and needs.

Our vocation for training, for innovation and for research allows us to be continuously at the forefront of the advances of Medicine and Nursing in order to offer them to our patients.

In the same way, our full identification with the Public Health System of Andalusia allows us to provide equitable health care for all citizens, at the same time accessible and transparent. All patients receive our maximum attention, from the most banal to the most complex processes.

We are a reference center for Western Andalusia in Cochlear Implants, having received the explicit recognition of our trajectory in favor of implanted patients by the Federation of Associations of Implanted Patients of Spain.

All specialists and most of nursing professionals are accredited by the Professional Certification Program of the Health Quality Agency of Andalusia, and the Service / UGC itself is also accredited since 2010, having periodically renewed its demanding criteria quality.

We want you to know us better through the following pages.

Thanks for trusting us.

- Juni

Dr. Serafín Sánchez Gómez

Head of Service and Director of the Clinical Management Unit of Otorhinolaryngology. Virgen Macarena University Hospital. Seville.

Associate Professor of Otolaryngology.

University of Seville.



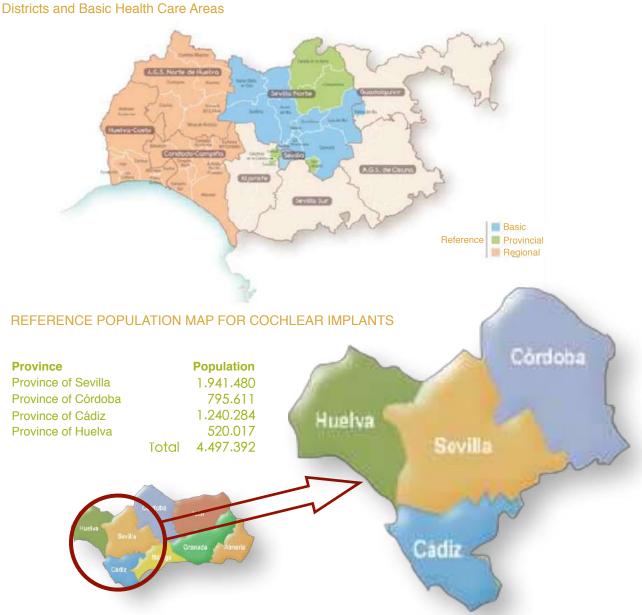
Our reference population

The Virgen Macarena University Hospital provides healthcare to the reference population of its hospital area as a Basic Population. In addition, the Otorhinolaryngology Service / Clinical Unit assumes complex oncological and infectious care processes in other Districts and Basic Health Zones. We are a reference center in Cochlear Implants for the provinces of Western Andalusia and in Spasmodic

Dysphonia for all of Andalusia.

Basic Population	
Disctricts	HUVM
Guadalquivir	3.524
Sevilla Norte	207.822
Sevilla	269.505
Total	480.851

REFERENCE POPULATION MAP OF THE VIRGEN MACARENA UNIVERSITY HOSPITAL











Where we are

Operating rooms

The main surgical activity is performed in the operating room n° 305 (daily plus 2 weekly sessions in the afternoon) and L1 (2-3 weekly sessions) in the Hospital Virgen Macarena, where we have the most modern surgical and imaging technology: 3 columns of high definition endoscopic surgery (one of them with NBI light), 3 motorized surgical microscopes, navigator, debrisor, high-speed milling motors, neuromonitor, radiofrequency equipment, CO2 laser, diode laser, ultrasonic surgery equipment (Thunderbeat), equipment for high definition video recording.



We also use 3 or 4 operating rooms weekly with general anesthesia at the San Lázaro Hospital and the Santa Isabel Clinic. The operating room sessions with local anesthesia (6 monthly), we carried out in the Operating Room of the UGC-ORL in the Polyclinic of the area of External Consults.



















Hospitalization

The hospitalized patients are in the 5th Floor, A Ward, of the Hospital Virgen Macarena. The ENT Service / Clinical Unit is assigned 12 beds, which are intended primarily for the development of surgical activity and urgent admissions.



The ENT Service / Clinical Unit is organized to carry out a very efficient hospitalization activity and at the same time of excellent quality. The average stay of the 1,474 admitted patients is of 1.64 days, reaching an activity in ambulatory major surgery of 82.34% of the 1,655 scheduled surgery interventions.

All the processes are protocolized and 2 Clinical Pathways have been designed for those of greater importance for patients and professionals: I - Total laryngectomy; 2 - Cochlear implant.

The ENT Service / Clinical Unit

carries out a very efficient management of the hospitalization, performing more than 70% of its activity as Ambulatory Surgery and as Day Hospital, reaching an average stay of 2.15 days.

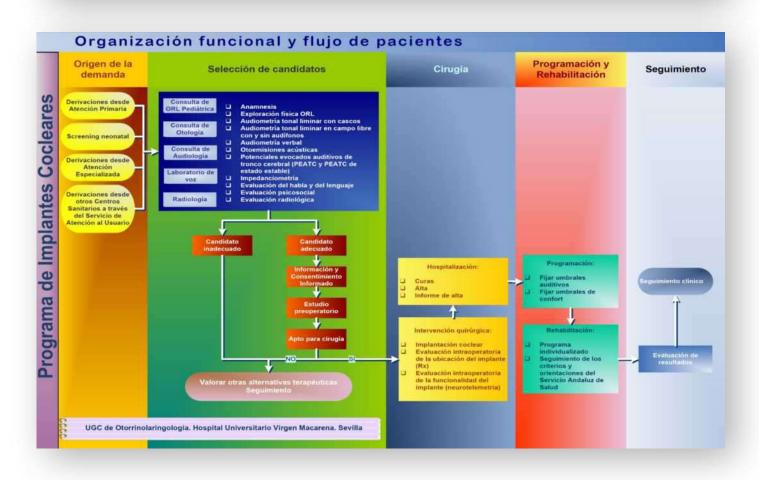
The majority of hospitalized patients with stays longer than 2 days are due to surgical and reconstructive oncological processes of the head and neck. To a lesser extent, serious infectious processes (deep cervical abscesses, descending necrotizing fasciitis) and hemorrhagic processes are counted.

The ENT Service / Clinical Unit has a doctor and a resident every day of the week in the morning, including Saturdays, Sundays and holidays, for the care of hospitalized patients.

Likewise, it has a doctor every working day, destined to the attention of the non-urgent or preferential interconsultations that are requested from other specialties about hospitalized patients in their corresponding wards. Urgent and preferential interconsultations are attended without delay by the hospitalization doctors or by the continuing care physicians.

Clinical Pathways

	- Senior in any pro-	Det Ingecoriation	Sal secesso	262	2543	Del	Dist	294	1947	Dat	Skil	56.00	Sutt	33w12	2015	2614						
-		A hardening	NUMBER							-	Day to ta terms puringers	_			-	-						
	Tracket		Comprehen statistical parameters	Frenchis on capacity	Central territorismogra- trendas en rapelha	Cars drie helds parages Remote de denigne	Cas de la fanda paragos Nacional dissalar de cuello.			Retrie solution personale.		Cast III Shares surriges for notice venture revise.	Caracta to handy garages	Date to in tends pringers their a substitutional	Profes the property of	Cara de la forma que Limbaca y carrière de						
	Regists Sistemany		Profession CLASS		Emphastroments	Mostle et opere	Emphasis onitrito		Median stocker & costs			Limberry sertifie de desais	Limpagna y martino de calmalia.		Rates SAG	Entorne de alta hospita						
	Digital y enkelle de setamble	CRE C	Verlande de prandroum	otherwelli website	Información sectorios pacierros		Información exolución paciente	organization terretories	Comprehensive constitution		Camprolación consisten	Comprisant consists	Carpellacily systems	Linguage y combin de carrain	Solution or other	inform a Malintonia						
	exploration folice y entirorities	in .	Verficación de la bioxidada?	efermente protectio facilia		Comprehents sondering	Información esolución familia		Inhough estate	Comprehension constanting			references multiple persons		Deplete y cardin de cânda							
1.6	Toma de decisiones largações	ia.	Place operations	Parlamin sandings	Patiente sammas	Homele soluting elem	Perspena beginne	efermation analysis facts	Principle and pictures	Separate arthridge	Internation extractor familia	Information extraction families	información endución faction	offermal extincts points	Christian milesty parters	Pearly Inc.						
1.7	informative procedurants		Priso de whaterou perceptor	Tokaca ostipala pr	Tolerance and haute on SNO	Himade extent bein	Personal di summercia	Pormpara Seamina	Perspera Secreta	Primarie endade	Heropera Esquirica	Pamigrania, Salaminia	Peropera Sources	Informatio decisión benta	Internación de Sacción Servica.	Prouds articles a						
1.7	rimum		Industrian & Systems	Herapana i perito (20	Hampana is perfect 120 to	Reducibl scentingle	Belicate orașe DAS			Información exclusión familia		Firms Proper confirmation bear		Heropata Impitos		Interhelite entirely						
1.7	Congression 500 perch	60.1	Information a Tentiane		Energete uniformatic bigs	Dimension out business INC	5			Sengwa Incine						Myraille estable						
1.5	Solicital in establishments	ma .	Centricide in relativist			Rempire a pirela (CS) is	d.															
	Fell arisotto (replete																					
	program consent at here																					
		100														_						
	Sirthain relicinges	eth-	_		_		_			_	_					-						
-	Information and Programming		_		-		-					-		-		-						
		Congression cons	Personal paints	Cas becruture	Care tono materia	Core type retires	Cara tuno mature	Continenation	Circle Series martieres	East torontess	Descriptions	Castinonates	Car turu hideia	Care type trabate	Cvs time makes	Cas sim nation.						
	-	Department (II) with	Crostle into	Procedure and control	NAMES AND ADDRESS OF THE	National part NO	Nation worst pr D15	Natural artest (ar 245	National Association (NO)	National per SNII	Nation whee pr 210	National Act and Delication	Nation emorge 1915	Native Autor Engagement	Deposit sins	Congress sense						
	_	Produptito parame Progris parame, landa	Cerpturit			Comprehe siesale	Carpette deals	Company (Area	Companie (druja Companie (MS)	Corpoter strain Corpoter MG	Carpoter SNS	Cerptus sinds Cerptus 310	Cargodar (814)	National artes on SKI	Debar SHG Medicality par visions	Matter project						
1			Cargolia Briago Cargolia sodo	Reluir sentings Corpolar sérula	Congress de la Congresia de la	Corporar INS. Notada do denam	Compressor (NG) Tomo pressor arterial	Competitor SNS. Princippedial activities	Tone province status	Conspictor (No.	Tertapesin stens	Conspoter SNO	Carpoter (NG Tonoprode atess	Carpolar (Ind.	Yunopeobi statul	Tonoposite anna Tono imperator						
		Erroge normal bruss	Value wints grights	Comprise via		Tors protes storal				Torin Impenior			Toriu tergenatura			Projective or developing						
1	-	Velhasin tomic	Tonopesinatina	Corpolar tongo	Congrator SHII Tona presion arterial	Tura teneratura	Contra bergueratura Postoririos	Debustrones 200	Tana emperatura Medicactivorarpar SND	Medica Strong or Still	Divisionale organistica	Tons improtos biolografe and per SMI	Melica in occur INC	Tonoposion arbital Tono temperatura	Tuna terramenta. Haja-de anterneria.	Congroter maniging						
1.7	8	Participa if densities	Total brigarities	Carpolar SVI	Tonatemposasia	Metastroway SNS	Herceitr on at \$15	http://ereferance	This is arthresis	Popular enformation	Proprieta	Pop di ermenia.	Pigia de vertierneria	Retract origin SVS	Produktive em	Carpothe admon						
1.7		Patholina paradica	Matteriority a season	Tanapasin steral	Makeacin mid per SNS	Prop de enformaria	Figo-dy-enferteds:	Ponteritoren	Proposition and	CONTRACTOR NO.	Property James	horacol aces	Proposed service	Prigo de enfermedo	Cured living rafters	Interne alla ederne						
1.7		Velouir parentals		Tamp temporation	High de politicación	Personal paint	Properties patients	Corrects tomo markets	Commits turns mellion	Committe forms marketing	Corecto funcionations	Corects Sens reduces	Constitution making	Properties parties	Corrects Survey Sertin.	Remodelite d						
1 7		Tarracia consisten	Maria de arriema la	Moderating sures	Promote in passing	Committe Serie replace	Carecti tura nichos	Corecis forto brita	Committe farter fartile	Correctic forms larde	Committee land	Carein toro test	Carmini Sara larde	Cents because	Corestic form state	Seation by Tradesto						
1		Carrier de regione pare entre	Caredo Selo rigilare	High to entertain.	Earnets have markets	Corrects fore large	Carecin functions	Cornello birto della	Complete barrier money	Corecto funo estre	Earnin bronote	Careiro Sales sorte	Caredo tara roote	Careco tura tada								
		Pointer a party de 20 hours		Printer British	Cornell turni terilo	Directi tare oute	Estractio tuño cosha							Certifo Servicing								
			Careto Seromote	Coresity type refers	Comits saw male																	
				Conecili, turno larido																		
				Committee with																		
+								_								_						
	Comprisoners of relatives simicilares multipasin ha			Contact agreements			Anti-maps anothers.	Actionwell modice at countries (0) or pr								1						
	romé é provie Especie	Francisco Sector (107A)	Supplement name	CONTRACTOR OF STREET,	Relate sample automa		SNOW it was a best	SNLW Surger bea-		Desputation To the course per	Comment II on case or	Dropores II repute an	Drawning Property	Drawani II rajuga ar	Department (2 to present per	1						
1	elevator is halphorety	Fallette, SPOC) el present	December 2 No. of 24 hours	serve instinct and	THE PERSON NAMED IN COLUMN	Name (comment	Sectionisms belowings 100	landmine laboration TO	Supered proteorings	SACTO	ONCITAL IN	OMESTER	(WC/DA	INCIDEN.	BACKO A	4						
1	pringraphie a principalist	no publichmentalis	Common of the last	negiena	or settle sangestion		ing RESERVATION NO.	ing \$0125 + distance		1000	Chieff.	2000	3000	1000	(1 miles)	1						
1	problém de procede traba	nah.					regain SNGR 6	301 mg/av SNGR 1														
1		Paragraphic and the second				Attionage province at:							4	100	194	1						
1 7		Probata editoria ser	Samuel Street	Prefere companyation	Cartery of Carter	Michigan SM report	Department of the plant are	ATT CARRETYNY	AND DESCRIPTION	Newson represent DTS	Steurnes regress (7) mg	Manual regress (75 eg.	Stange regions TTing	Service represent Tilling	Signific regimes 175 mg	1						
117		processing at the street in	Politica incrementation regio Promotio del Regide	capit Polaulas del	redicals increases their and a second contract of the second contrac	SACATO SI ANTINI A DATA SACATO SI STATUTO SE NE	Conjugate of the cape per .	Delication or of rate to	Organic Strategy as pro		or SNG4 in press	pa SIGN syminamapos	por SNGR trie pretox	py INGR's a proces	or BIGRA's press	1						
1 7		rimentalis		Prepar.	and a second life landow.	METCH in disservation (ACC) and				enagesis:	(mighte)	by seed distributions although	andgrale.	anylgreis.	ankpre	1						
1 7		20110000		1000		(m/ 59/58 A				1			1	William	-							
1 7		Ringly abote lecturess	A STATE OF	5 5 35	1 31/20 E	Creamin Street Basin	Reprint Harmon (1) ha	Heteriol reprint STI	National registres 575	Tionwitt 8 to:	Traverent drive	Fragements de lass	Taranners in tel.	Televiero B.HI	Trademants do live.							
		tributaring 185 ing 4 circumstates 855 mg N	Onepool 1 ets 1/24 tr	Dropout Larg (CD)	Drograms 1 and 1950 K.	1965101	ort 1040-6 k	ing par Shillis it is precise.	rspac Stille t a proise	constitues some	pumortiidadeo según	Screenistable legal Processor	constitutes regin	constitution regin	corcettitade sepie	Name a reduce						
	-	Completions St. Fig. 1	Reduction conditionality per la	Commission of the last	Selecte continues per la			PERSONAL PROPERTY.		Sedacite continuests per	Selection continuous per la	Selectio conficiencia per la	Selection professional period	Section continues as in	Delate ortica at prin	Individual the purpose in a						
6 7			agracia ya wamesa	ephylinia yn Harring.	engineter ple magnetic	Montal represent \$15 mg	Transmission inc.	Name of the last	Total rent to be	injulation for particular	adjects his same	aginatio po manera	agilation plumateria:	AND REAL PROPERTY.	aglación y a maneros.	comprisidates, inche						
4 1 7			production ting Zome	levelscoper ling Zone	terroloopen ting 2 samp	our SNOOL IN	committees segar	ametricités signi	comunitational seguir	terretorior ting l'amp	Similaripen Ting Zooms	Smithtown Trig. 7 companie	renescepen fing Zoons	production Fing 2 time:	encepering land	nation reduces						
ш	0		per SMI aries 25.ht	por 5760 or Sept. 25 ft.	pre 590 also 2016		Protection	Principal	Proposed	per 1990 a les 25 h	partition the	59G ± 91293	por SME e inc 25 h	per 200 a int 25 h	ptr 200 a tot 200	prescribe pers of Year						
	i i		Programmer	Profigura imple	Diskipted larger Americansky		Sedenie undersente per la	Section in continuents per	Section in conditional part		perdicate to la name		The second second	Through the same		CONTRACTOR OF THE PERSON NAMED IN						
1 7			Anetheriteja c heterical	Anelleidigis t retentor	o recently in regresses I are:	Teamer birth	agrant of territor	A optional property	Agliantin with Response	1	CONTRACTOR DE PLANTE	1				1						
1 7			magnetics 1 and 1788 4	regiment tamp (ASB y	NOW promoterni for an	Comprésidades congule Production	Complement 199, 2 mms	stretainment ing June	ternelsteam fire, Strong		peopling it trouses					1						
11.7			practice 1 y pr 1NS	periodicensi 1 grupp SAG.	DIG movie	PERSONAL PROPERTY.	or Districtly	por \$500 x 6x 20 to	per \$140 e tel 224	1	Sec Kraffe	1				1						
1 7			definings evolves.	Arthornya workstea	Adhenous procing at		_			-					_	1						
1 7			Devikers 1 gr 1/81 St	clavitates i grittin Si	Carolinas 1 gr (VIII) St	Debelle ordensmisser's					l .	1				1						
11.5	5		mergia a help-latheration	Section of Section Sections	principly of help-landarrisons.	aglicitie phrasma;						1				1						
			Subsection (60 mg (V/S) h =	Distriction 182 mg 70152 B	sometime till my NYS his	benessepen ting Zoone per BNG+ to 201						1				1						
			pinemie 80 ng 1/61	- circlerosa 60 mg 116 h.	common 600 mg (VIII.)																	
	4		Tripped expense IEA	17 hatus sprove, HTA	Tripped symmetric.											17						
			EPOC 3 Selection Street	CFOC. Scientifics (NA) was	EPOC SI GARBOU (SHAWL) DWG IN POLITICATED																	
			Process del Proglet	posite in mathematics Processes in House	Personal del Hagina																	
			Planning arra + practice:	The second second												_						
			processo in featureign							Stanton o destre												
		Lite requirements per	fetiger.																			
		Amonthigh	promotive afficial common size about major de SSS					Own	-	- Date between story	de conducto de la constitución d	and the same of the same										
			milità podenza					(1000 A month)		Committee of the Commit		a avenue a removal										
3		NAME PROPRIES	Report et et als	average 4 distributes	Access to the latest to the la	1				The same of the sa	and the same of th					Non-James N						
		-	patentin	Specific Control of Specific S							Charles and the											
		Annal Annaportura	Manual companies		Super prison in a color come							THE RESERVE										
17		origination de la minoritation de la minoritation	information by otherwises a													Security Hones						
1.7		a tea facilitates. Taratters at	Committee of the party of the			Married Company of the Park	and an income in case	manufacture of the last	and the second second second	and the second second	Acres and the last	Armenia e recenta de sera	to be being the same of the same	and the same		intereste y explicar						
1 7		points a notrale	of patients (if an accurate to	4												revale a du elemp						
	8	NAME OF BRIDE	in demanda													arrest report de factor						
1 3		otherwise drift in common																				
1		y de mentas valore al									Department of											
H	a panti and edges								Existence case													
1		a Don't Mirporate	Refronta constructor												to receive has 4 heapt it	brings to strain in						
1	Per di angli er a linda	2 D Basi, Landevanner	the lawle olivery collection.		Manager Charles and Charles	and the later of the later of the later of	manufacture and a second	A Accordance of the Control	andre de la minute de la communicación	Continue of the last	Service Co. In principle of the last	and the same and the same		when maps is unit	Where Magnith condi-	Steamper, profess						
-	Par in anyther a Debt houtstoode of houts.	Control of the Contro		attrictions & these lates are being a transport of the states and the states are a state of the state of the states are a state of the state of the states are a state of the									to Control to Send									
Total Control of the last of t	Prophilosophia Hospital Prophilosophia de Morrania	Surviviga, Benga (14	esetto espertis		The state of the s				COLUMN PROPERTY.													
The same of the same of	Procedurate for the Program.	Surriegia, d'engo (14 Esc) repubblisc di Nota Repubblisce allestio							COLUMN TO THE PERSON							per as littleme de al						
Total State of State	Prophilosophia Hospital Prophilosophia de Morrania	Survivagia, Bergan (14 Sur) repositions de fusion for pada tomo alleration per risenti (15 dins)	esetto espertis												phants cinia in desiris.	per as inherends of Refunds this paper						
Theresian and the	Prophilosophia Hospital Prophilosophia de Morrania	Surriegia, d'engo (14 Esc) repubblisc di Nota Repubblisce allestio	esetto espertis											sharide clinics on Asmirile.	bhaide dina er bricki.	per as littere						



Treatment and Cure Room

The Treatment and Cure Room is located at the entrance of A Ward of the 5th Floor of the Virgen Macarena Hospital. It has a high definition endoscopy column with NBI light, portable fibroscope, microscope, endoscopes and several computer terminals connected to the hospital's intranet.



In addition to the cures of the patients who undergo surgery and the care of hospitalized patients in charge of the ENT Service / Clinicaal Unit, all the interconsultations received from other inpatient units are centralized and attended to.

The nurse responsible for the care of hospitalized ENT patients acts as the hospitalization reference of the Tracheostomized Patient Care Unit. This nurse works as a team with the nurse of the Tracheostomized Patient Care Unit that is located in the outpatient clinics of the Polyclinic, as well as with other professionals of Home Hospitalization, Palliative Care, Case Management Nursing and ICU.

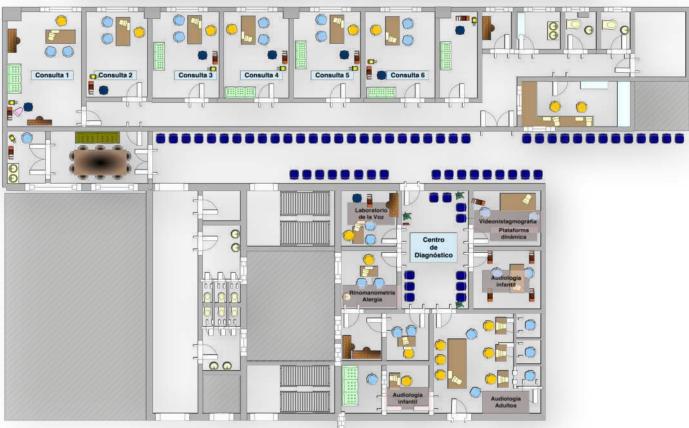




Consultations and explorations (ENT Diagnostic and Treatment Center, Polyclinic)

The activity of office consultations and special examinations is carried out in the ENT Diagnostic and Treatment Center, located on the second floor of the Policlínico building, located on the Macarena campus, 50 meters in front of the hospital. The lower images and the plane show the distribution of the different spaces.





The consultation offices have an endoscopy column with fiberoptics with a television chip on the tip and recording systems, which offers the highest image quality in the explorations. They also have microscopes with a television camera, endoscopes, NBI light system, videolaryngostroboscopy and suctioning equipment.

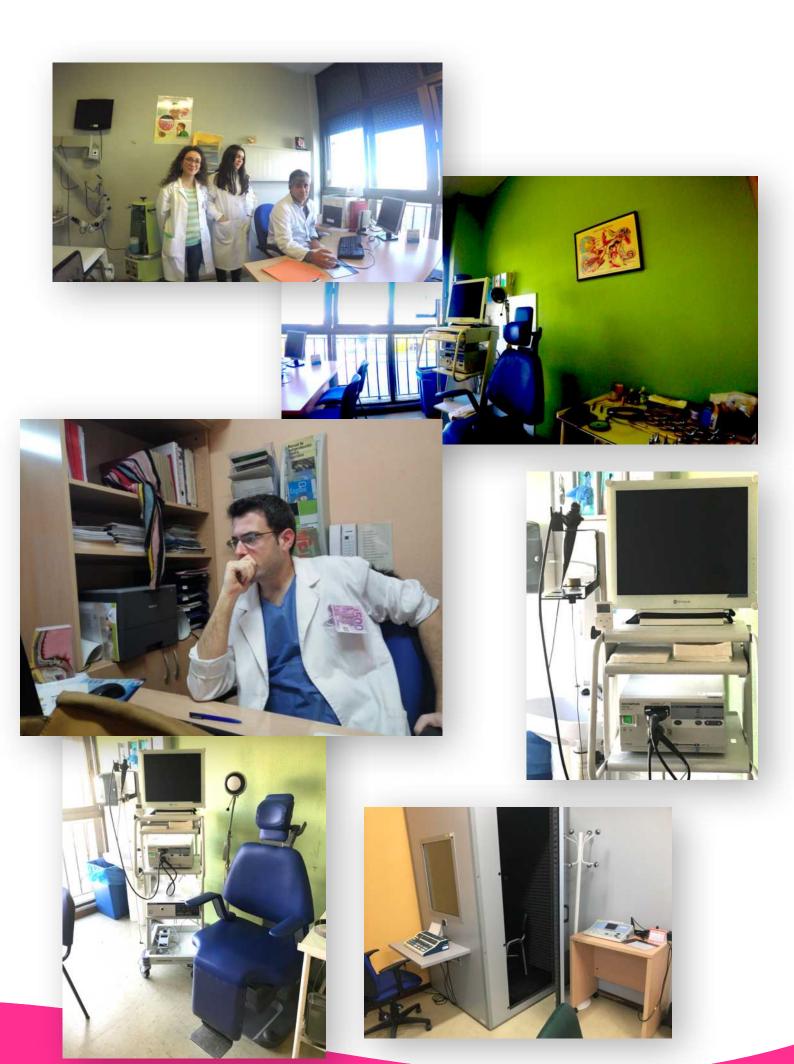
The consultations of the Diagnostic Center constitute the second level of specialized care of the ENT Service / Clinical Unit, to where the patients referred from the first level of specialized care of the ENT Service / Clinical Unit and the other Hospital Units are attended. They have a distribution by Sections and Units to offer the best healthcare quality of the superspecialization.

In the Nursing Consultation, the ambulatory care patients' cures are carried out daily, as well as the first postoperative care of the patients who undergo outpatient surgery.

It is also the point of reference of the Tracheostomized Patient Care Unit for all tracheostomized patients of all specialties that are subject to clinical follow-up in their homes.

Likewise, it provides nursing care for the cures and spare parts of phonatory prostheses and carries out a relevant activity of health education in all areas of the specialty.

















Consultations and explorations (Centro de Especialidades de San Jerónimo)

The ENT Service / Clinical Unit has 3 daily consultation offices in the Center of Specialties of San Jerónimo, plus a shared Audiology office.

They constitute the first level of specialized care of the ENT Service / Clinical Unit



and are exclusively dedicated to the care of patients referred from Primary Care. They offer preferential attention in less than 5 days and scheduled service in less than 25 days.

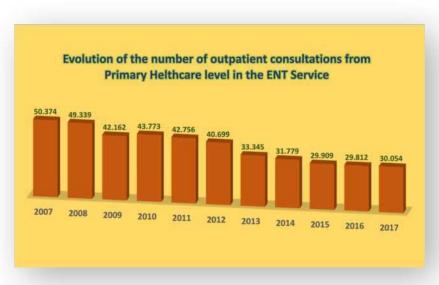
Each office has an endoscopy column with a fibroscope and a microscope, as well as all the exploration instruments.





The ENT Service / Clinical Unit works closely with Primary Care to optimize the care of patients shared between both levels and reduce the inconvenience to users derived from unnecessary displacement or uncertainty about their health status. To this end, it organizes multiple training activities and prepares documentary material to help decision-making and clinical management of patients with otorhinolaryngological pathologies.

The result of this joint effort is the decrease in the number of global consultations of the ENT Service / Clinical Unit that did not add value to the care process and the increase in the scientific-technical level of the consultations that are currently carried out, increasing the health outcomes and the satisfaction of the users.















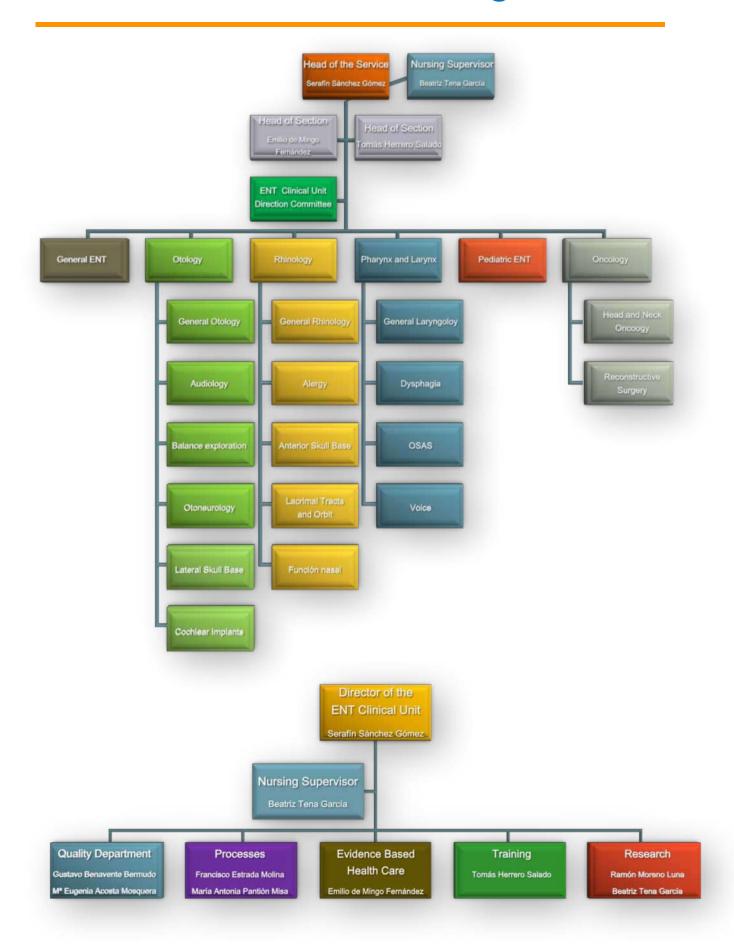








Hierarchical and functional organization



Unidad de Otorrinolaringología Hospital Universitario Virgen Macarena y Área

Información al Usuario

Usted se encuentra en la Unidad de Otorrinolaringologia del Hospital Universitario Virgen Macarena y Área. Para prestar una atención integral a los pacientes con enfermedades de la garganta, el cuello, la nartr y los oldos la Unidad de Otorrinolaringología está organizada en varias áreas:

Área	Edificio	Planta		
	Policinico	2º piente, els derechs		
Consultus Externas	C. de Expecialidades Experanza Macareca	1* Flants, módu- los 114, 116, 120		
	C. de Especialdades de San Jerbrimo	1º Pienta, módulos 7, 8		
Hospital de Dis ORL	Policlinico	2* plente, als derecha		
Centro de Diagnóstico	Policinico	2ª plente, els dereche		
Hospitalización	Hospital Virgen Macerera	5º plenta, ale A		
Quiréfanos	Hospital Virges Macarera	3º plenta, sia de quirofenos		

Teléfonos de Interés							
Administrativos de las Consultas Externas Sr. Jun Gorafez Lobo Srs. Teres Cota Contras	95500698	9:00-14:00					
Administrativo Quirúrgico y de Hospitalización Sr. Javier Garcia Feliez	955000974	9:00-14:00					
Hospital de Dia Srs. Mª José Vega Férez	955000093	9:00-14:00					
Centro de Diagnóstico Srs. Rosario Comingues Gómes	953926566	9:00-14:00					
Auctilianes de Enformerie Consultas Externas Sta. Encarascide Alvane Allino Sta. Nº Dolores Hedira Jimines Sta. Nº Carmen Cinara Natios	955000698	9:00-14:00					









Section of Otology and Audiological Implants



Dr. Agustín Alcalá Fernández



Dr. Estefanía Berrocal Postigo



Dr. Francisco Ropero Romero



Dr. Francisco Aguilar Vera

Dr. Alcalá is a national reference in otological surgery and audiological implants. Throughout his career he has made multiple stays in the best otological centers in the United States, France, Great Britain, Holland, Germany, Denmark and Austria. His solid training and extensive professional experience have allowed him to transmit his knowledge to an excellent team that develops an intense surgical activity on a wide range of procedures in Otology.

His clinical leadership has placed the ENT Clinical Unit of the Virgen Macarena University Hospital at the head of the national centers in the number of annual patients who have benefited from the cochlear implant technology.

The Section of Otology and Audiological Implants maintains a continuous offer of teaching and training. In addition to 2 annual courses of Otologic Surgery and Temporary Bone Dissection, they receive practically every month national and foreign otolaryngologists to update themselves in oto-surgical techniques and cochlear implants.

At the same time, they participate in multiple congresses, symposia, courses and training activities as expert speakers in their field of expertise in Otology and Audiological Implants.

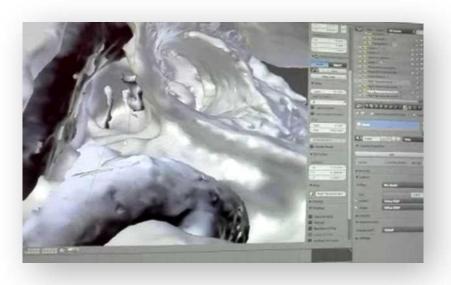
The consolidation of the portfolio of services is enabling this Section to deploy research initiatives. There are several doctoral theses that are being carried out on interesting otological and implantological auditory aspects. A multicenter and multinational clinical trial on the use of a drug in the form of a gel for the preservation of residual frequencies after cochlear implantation has also been carried out in 2017.

One of the areas of greatest impact in the otorhinolaryngological community is the development of virtual reality application methodologies and augmented reality for the planning of surgeries and the surgical approach that is beeing developed in the ENT Clinical Unit. One of the additional advantages of this innovation is to allow ENT residents a much faster surgical learning and techniques of much greater complexity.

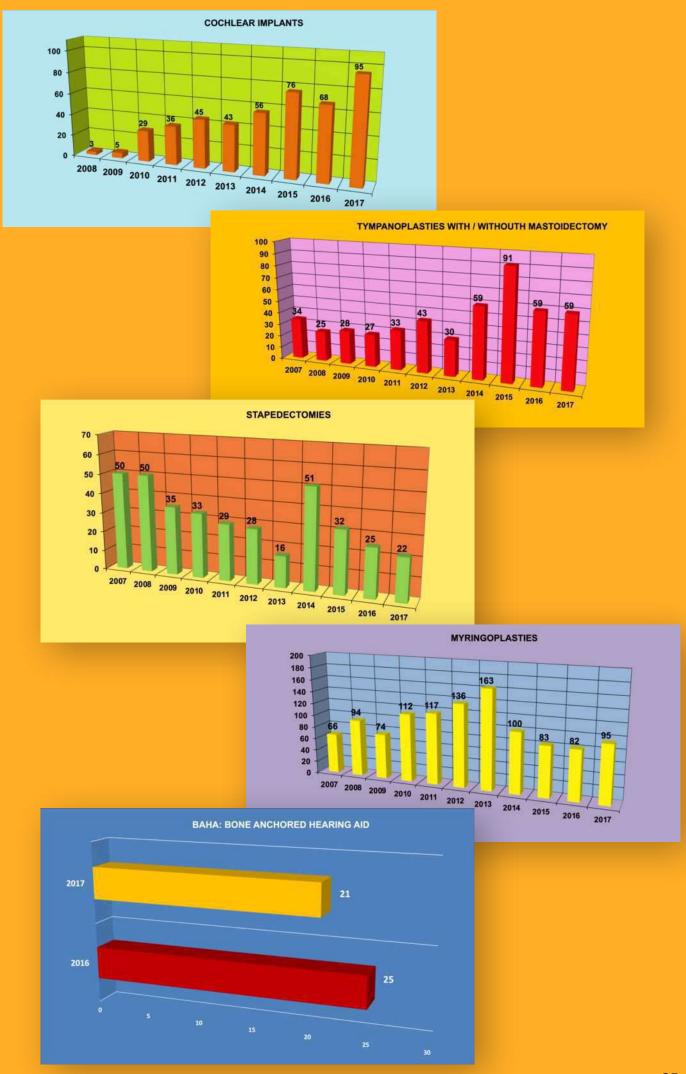


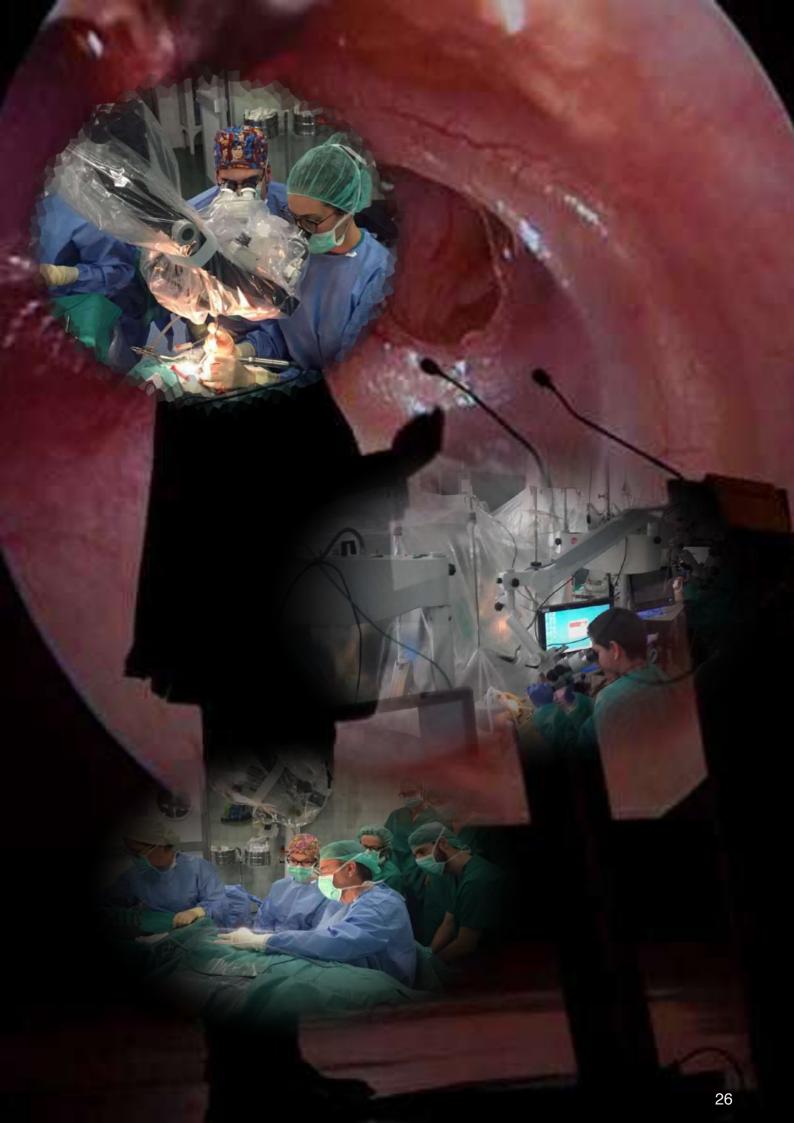
Cochlear Implant team, composed of otolaryngologists, audiologists, phoniatricians, speech therapists, nurses, engineers, technicians.

Examples of the use of the Virtual Reality and Augmented Reality methodologies and their clinical application during surgeries.









Section of Audiology



Dr. Amparo Postigo Madueño



Dr. Cayetana López-Ladrón García de la Borbolla



Dr. Cristina Alonso González

Dr. Postigo has been leading this section for more than 15 years, and is a true benchmark in the field of Audiology. His career is linked to the learning of his predecessor, Dr. Ana María Ruiz Carmona, introducer and promoter of Audiology in Spain.

Dr. Postigo combines her enormous clinical experience in audiological explorations with an exceptional teaching vocation, recognized by the multiple generations of otolaryngologists, residents, nurses and hearing care professionals who have been trained at her side.

It is also present in the most important national and international audiological forums and maintains close professional contacts with the most important Spanish Audiology centers and Associations of people affected by hearing loss and those associated with cochlear implants.

His teaching and competence, especially in the field of Children's Audiology, have been the fundamental support for the Virgen Macarena University Hospital acquired accreditation as a reference center in Andalusia for the implementation of Cochlear Implants by the Andalusian Health Service in the year 2008.

The clinical assistance, teaching and research volume of the Audiology Section has allowed the secondment of otorhinolaryngologists Dras. López-Ladrón and Alonso to it, developing a high daily activity in both pediatric patients and adult patients.

The team work of otolaryngologists / audiologists is complemented by the collaboration of 2 nurses, I nursing assistant technician and I hearing care professional.

The experience of the entire team in the management of complex patients and the modern technological equipment allow the realization of more than 98% of the pediatric explorations in consultation, without requiring sedation in the operating room.



Section of Otoneurology



Dr. Emilio Domínguez Durán



Dr. Francisco Aguilar Vera



Dr. Cristina Alonso González

The growing interest in the specialty of the field of Otoneurology has found an adequate reference in the Virgen Macarena University Hospital with the team of otorhinolaryngologists that make up the Otoneurology Section.

Drs. Domínguez, Aguilar and Alonso have protocolized the management of patients affected by balance pathologies, both from a diagnostic and therapeutic point of view. They extend this management from the reception of patients in the Emergency Department or from Primary Care to carry out even close collaborations with the Neurology and Rehabilitation Services to offer patients the best healthcare and the fastest possible integration to their activities.

The illusion and vocation of the members of the Otoneurology Section are trasmitted to residents and medical students, and it manages to extend this interest beyond the hospital. Work and research groups have been established with primary care physicians to continue the projects generated by otoneurologists, projects of great relevance for the establishment of prognostic factors in the onset of stroke and for the proper management of vertiginous processes in Primary Care.

The research activity of this Section is reflected in the publication of articles in journals of scientific impact and in its continued presence in national and international forums in the field of Otoneurology.

It also highlights its spirit of innovation, which is reflected in the design and development of computer applications based on Information and Communication Technologies for the management of otoneurological processes, both basic and complex, such as dizziness. caused by migraines. These applications are available for computers, tablets and mobile phones.



European Archives of Oto-Rhino-Laymgology (2018) 275:1709-1713 https://doi.org/10.1007/c00405-018-4598-2 OTOLOGY



Identification of dizzy patients who will develop an acute cerebrovascular syndrome: a descriptive study among emergency department patients

I. Mármol-Szombathy 1 . E. Domínguez-Durán 2 . L. Calero-Ramos 1 · S. Sánchez-Gómez 1

Received: 4 March 2018 / Accepted: 27 April 2018 / Published online: 2 May 2018 © Springer-Verlag GmbH Germany, part of Springer Nature 2018

Abstract

Purpose To calculate the incidence of subsequent acute cerebrovascular syndrome in emergency department patients with vertice or distinct syndrome and to determine needlessors of subsequent acute cerebrovascular syndrome in these nations. Purpose To calculate the incidence of subsequent acute cerebrovascular syndrome in emergency department patients with vertigo or dizziness symptoms and to determine predictors of subsequent acute cerebrovascular syndrome in these patients.

Methods Descriptive and actionises tive bisoidal based-population while anymor emergency denartment matients with vertigo. vertigo or dizziness symptoms and to determine predictors of subsequent acute cerebrovascular syndrome in these patients.

Methods Descriptive and retrospective hospital based-population study among emergency department patients with vertigor or dizziness symptoms in 1 year. One year follow-up since the medical visit was performed. Chi-square and Fisher tests were used for qualitative variables. Manna-Whitney U test for quantitative variables. A multivariate and Fisher tests were acute cerebrovascular syndromes who visited emergency department during 2015 were identified. Since a size: 1.29% for acute cerebrovascular syndromes were identified; 8 stocks and 4 transient ischemic attacks. Percentages over the clouded. 12 to develop an event over the general population were 7.24 for acute cerebrovascular syndrome, 95% Cl (3.98-13.12); 14.9

size: 1.29% for acute cerebrovascular syndromes. 0.43% for transient ischemic attack and 0.86% for stroke. Odds ratio values to develop an event over the general population were 7.24 for acute cerebrovascular syndrome, 9.5% CI (3.8–4.09) and 5.86 for stroke, 9.5% CI (2.72–1.2.0). Attail fibrillation mellitus were identified as significant risk factors to develop an acute cerebrovascular syndrome.

Conclusion Emergency department patients with symptoms of vertige or dizziness had sevenfold higher risk of acute cerebrovascular syndromes than the general population. Attail fibrillation and diabetes mellitus are risk factors associated with

Keywords Dizziness - Vertigo - Emergency Department - Acute cerebrovascular syndrome - Transient ischemic attack - Stroke - Cardisvascular risk factors

Introduction

Vertigo is the sensation of self-motion when no self-motion Vertigo is the sensation of self-motion when no self-motion is occurring or the sensation of distorted self-motion during an otherwise normal head movement [14], and dizziness is the feeling of being light-headed, 'swimmy' or giddy [2]. It is a very annewing symptom which causes the nation to the reeting of being light-headed, 'swimmy,' or giddy [2]. It is a very annoying symptom which causes the patient to each medical care. In this sense, approximately 10% of total emergency room visits are due to verigo [3]. In patients over 65 years old, it is estimated to be at 13–38% [4], making it one of the most common principal composition in the one of the most common principal complaints in the emergency department (ED).

2 I. Mármol-Szombarby ireneszembarby@gmail.com

Department of Ondaryagology, University Hospital Yirgon Macarena, Doctor Fedriani 3, 41009 Seville, Spain

Although most patients with vertigo or dizziness have Although most patients with vertigo or dizziness have benign vestibular problems, up to 3% have posterior circulation stroke and other serious central nervous system causes [5]. It has been proven that patients whose prolonged crisis of dizziness is due to a central cause are at risk of additional of dizziness is due to a central cause are at risk of additional of dizziness is due to a central cause are at risk of additional strokes and secondary complications of the initial stroke par-ticularly ischemic swelling following large cerebellar infarc-tion or a progression of the lesion, nvolving more wide-ton are progression of the lesion, involving more wide-spread areas of infarction in the posterior circulation [6]. The evidence demonstrates an increased employment in

spread areas of infarction in the posterior encuration [6].

The evidence demonstrates an increased stroke risk in the following period associated with vertigo or dizziness. the following period associated with verilgo or dizzness, but the results are not consistent [7]. This may be due to the fact of that these results have been measured in different

The objectives of this study are to calculate the incidence Are objectives of this study are to calculate the incidence of acute cerebrovascular syndrome (ACVS) in ED patients with vertigo and to identify risk factors in the ED population with vertigo which can be used as predictors of ACVS.

2 Springer

Section of Rhinology and Anterior Skull Base Surgery



Dr. Serafín Sánchez Gómez



Dr. Jaime González García



Dr. Juan Maza Solano



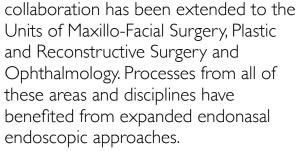
Dr. Ramón Moreno Luna

The Rhinology and the Anterior Skull Base Surgery have known in the last decade an unprecedented boom in the specialty. Its rapid and intense development has taken place due to the availability of a technological equipment based on the image and for having overcome the classic limits of Otorhinolaryngology by having allied in multidisciplinary teams with other related specialties.

The Rhinology and Anterior Skull Base Surgery Section has 4 high definition video-imaging systems and light source connections for endoscopic surgery in the operating room, with an electromagnetic and infrared navigators, with microdebridization and laser diode engines.

One of the pillars of the high level achieved by this Section is its pioneering character at the national and international level by the application of 3-dimensional imaging technologies and the manufacture of rapid stereolithographic prototypes from diagnosis to treatment in endonasal endonasal surgery. His works in the field of surgical planning based on 3D images and in having disseminated planning protocols based on checklists created by the members of the Section are especially noteworthy.

Another of the pillars of success lies in the collaboration with the Neurosurgery Unit, from the beginning of the skull base surgery with Dr. López Izquierdo in 2007 until its later completion with Drs. Eugenio Cárdenas Ruíz-Valdepeñas and Ariel Kaen. Likewise, the multidisciplinary



This Section is also very active in the field of research, developing several Clinical Trials in rhinology, especially in nasosinusal polyposis and allergic rhinitis.



Prof. Dr. Hugo Galera Ruíz





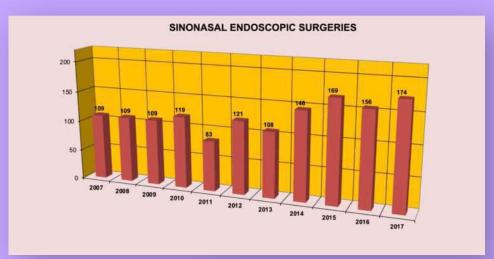


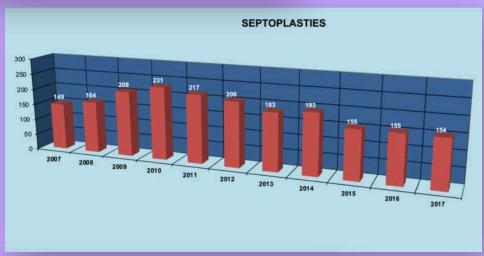


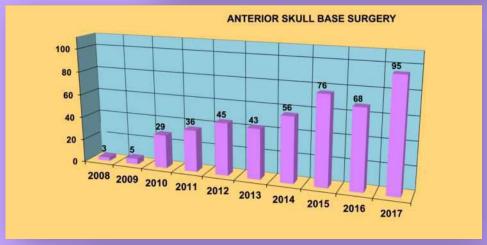


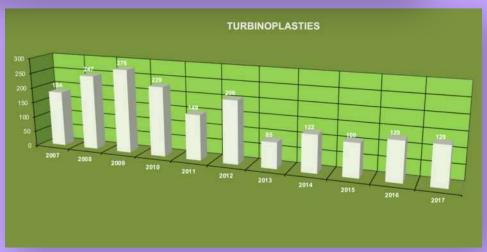












Section of Oncology and Head and Neck Surgery



Dr. Tomás Herrero Salado



Dr. Emilio de Mingo Fernández



Dr. Julio Ventura Díaz



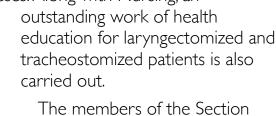
Dr. Gustavo Benavente Bermudo

The Virgen Macarena University Hospital has an attached population close to 500,000 inhabitants, located in an area with low economic resources in general. There are no regional hospitals or private clinics that can absorb a portion of the health demand, so the Hospital provides health care in a way that is practically unique to its entire reference population. This means that there are high incidence and prevalence of otorhinolaryngological and head and neck cancer processes.

The Section attends annually to around 80 cancers of the larynx and to 30 of the pharynx. He directs the Head and Neck Tumor Committee of the Hospital, where all oncological cases of this anatomical area are discussed in a multidisciplinary environment. From their resolutions, patients are offered different therapeutic options for their processes, from chemoradiotherapy protocols to surgery.

The Section has exploratory equipment in consultations with high resolution video-imaging system and light source connections, equipped with light NBI (Narrow Band Imaging), as in the operating room. In addition to the classic surgical techniques, transoral techniques with CO2 laser (TOLS) and transoral techniques with ultrasound surgery (TOUSS) are carried out.

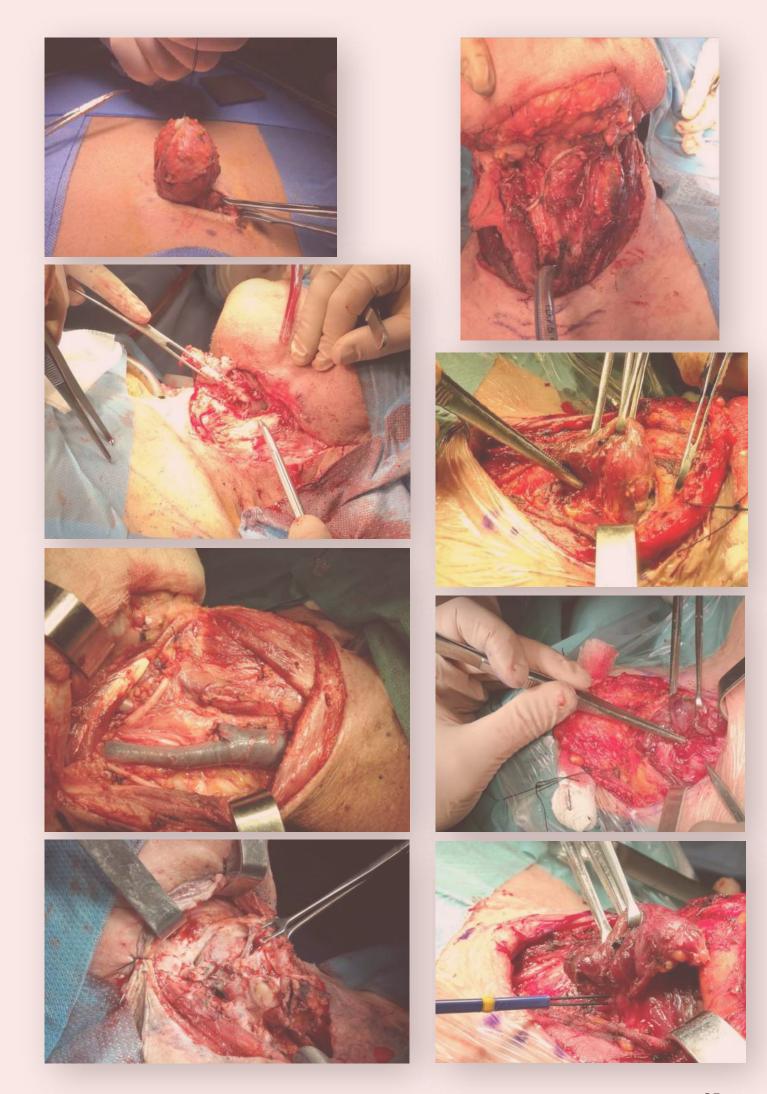
There are also numerous patients who have benefited from voice recovery after total laryngectomy by performing phonatory fistuloplasties and placement of phonatory prostheses. Along with Nursing, an



The members of the Section display an intense teaching and training activity, both in updating knowledge and in training by simulation with human and animal corpses.



Dr. Francisco Estrada Molina























Section of Dysphagia and Sleep Disorders



Dr. Emilio de Mingo Fernández



Dr. Francisco Estrada Molina

The pathology of the pharynx has gained a prominent role in recent years within the Otorhinolaryngology. The otorhinolaryngologists are making use of our ability to explore and treat the anatomical regions where the diseases settle and are manifested through dysphagia and sleep disorders.

The knowledge of the anatomy and the accumulated experience in the management of oncological and infectious diseases linked to the pharynx place the otolaryngologist at the central point of the management of the dysphagic and sleep processes.

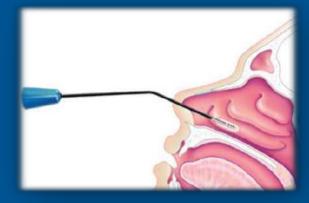
However, this Section works in close collaboration with other specialties and Units that treat these pathologies from other points of view: Pneumology, Neurology, Neurophysiology, Rehabilitation, Critical Care and Intensive Care.

The members of the Section apply the Clinical Practice Guideline on Physical Examination of the Upper Airway in Obstructive Sleep Apnea-Hypopnea Syndrome of Adults, published in 2018 jointly by specialists from multiple disciplines and areas of knowledge and endorsed by the Spanish Society of Otolaryngology and Head and Neck Surgery, by the Spanish Sleep Society, and by the Spanish Society of Oral and Maxillofacial Surgery.

On selected patients, DISE (Drug Induced Sleep Endoscopy) is carried out to evaluate the functional pharyngeal behavior and the establishment of the site of the obstruction.

On the results of the explorations, the otorhinolaryngologists share with the other specialists involved in these processes the best therapeutic alternatives that can be offered to each patient. They monitor and evaluate their results, always considering the patient's opinion and making decisions in a shared manner.

This Section is specialized in the treatment of chronic snoring, using surgical treatments when other conservative alternatives have not achieved their resolution. While some procedures must be performed in the operating room under general anesthesia, others are performed under local anesthesia, with or without sedation.













Section of Pediatric Otorhinolaryngology



Dr. Félix Prado Mediano



Dr. Enrique Gómez Aldaz



Dr. Cayetana López-Ladrón García de la Borbolla

Otorhinolaryngological diseases in children are very frequent. They range from completely banal processes to situations that really compromise the child's life. The Section of Pediatric Otorhinolaryngology addresses all this wide range of pathologies in this age group.

The management of the different processes is protocolized by applying the official documents prepared by the Andalusian Ministry of Health in relation to the most frequent clinical situations that can lead to surgical intervention (Tonsillectomy / Adenoidectomy, Ventilation tubes/grommets) or that are managed within medical alternatives (Otitis).

The Section of Pediatric Otorhinolaryngology is a reference for the treatment of bronchial foreign bodies in children of any age by rigid bronchoscopy, in close collaboration with the Pediatric Pulmonology Section of the Pediatric Unit.

Likewise, he has extensive experience in the management of pediatric airway problems.

This Section shares with the Audiology and Otology Sections the field of diagnostic and therapeutic action of the otological processes subsidiary of surgical treatment.

Adequate attention is also given to voice, swallowing, olfactory and balance pathologies that affect pediatric patients.

The physicians of this Section are especially focused on the personalized attention of patients and their parents, who offer detailed information about the processes, their management options, their expectations and their foreseeable results.



Section of Voice



Prof. Dr. Hugo Galera Ruíz



Dr. Gustavo Benavente Bermudo



Dr. Cayetana López-Ladrón García de la Borbolla

The voice is one of the hallmarks of the Otorhinolaryngology specialty. The otolaryngologists in this Section perform visual evaluations of the phonatory tract using high definition imaging systems and light source connections, which provide images of exceptional quality to fiberoptic explorations.

The visual exploration is complemented with the visualization of the behavior of mucous waves with laryngoestroboscopy. Modern equipment allows the acoustic analysis of the voice, simultaneous electronic visualization of the vocal emission with the analysis of its physical parameters of frequencies, formants, duration, phonatory indexes, etc.

The members of the Section perform delicate microsurgery interventions, using high-precision instruments.

The experience of otolaryngologists in the Otorhinolaryngology Clinical Management Unit in the care of voice problems has allowed the Andalusian Health Service to have accredited it as a reference center in Andalusia for the management of patients suffering from Spasmodic Dysphonia, a rare disease included in the catalog of rare diseases prepared by the Ministry of Health.

The Voice Section organizes and participates actively in activities of dissemination of voice care and prevention of diseases of the vocal cords. In addition to the celebrations of the World Voice Day at the Teatro de la Maestranza in Seville, training sessions are shared with groups closely linked to the use of the voice as a professional tool, as is the case of students and teachers of singing at the Conservatories Superior and Media of Seville and the case of teachers and educators of all levels.

This Section also collaborates closely with the Phoniatrics and Speech Therapy Unit of the Hospital Rehabilitation Unit.

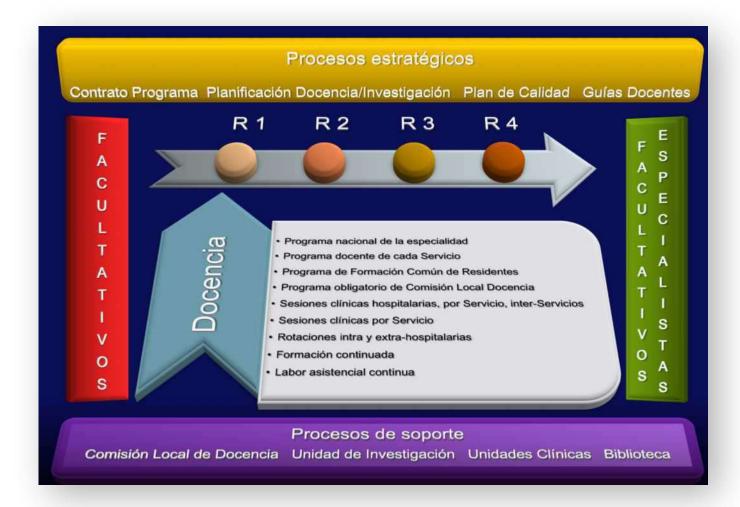


Resident Medical Interns of Otorhinolaryngology



The Otolaryngology Service / CM Unit of the University Hospital Virgen Macarena is accredited for the teaching of 2 In-house Otorhinolaryngology Residents in each annual call. Depending on the offer of places, the ENT Service / counts each year with a number between 6 and 8 residents.

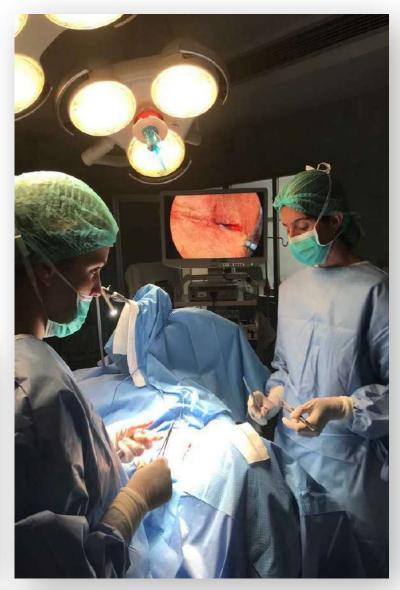
The MIR training occupies one of the most important activities of the ENT Service / Unit, being organized so that the residents can achieve the teaching objectives in all professional fields, being involved from the first moment in the assistance, teaching and research.



The high healthcare capacity of the ENT Service / Unit allows the care performance of the ENT MIRs in outpatient consultations, complementary examinations and tests, hospitalization, emergencies, operating theaters and clinical management.

The ORL MIRs have an ORL Service / Unit simulation laboratory to train on a daily basis in all surgical techniques, both with simulation materials and with corpses.







The tutors accompany the residents in the simulation laboratory during the sessions of temporal bone dissection, nasosinusal endoscopic surgery and laryngeal and cervical surgery.

Residents can record their work while they are running, in order to evaluate their progress later.

The ENT Service / Uinit has Dissection Guidelines for each area of surgical procedures, as well as an extensive reference videotape library for surgical training.



















Nursing care in Otorhinolaryngology



Beatriz Tena García Nurse Supervisor

Nursing care is an essential pillar in the care of otorhinolaryngological patients. The characteristics of medical-surgical specialty of Otorhinolaryngology means that multiple health care is required in outpatient clinics, in the hospitalization room and in the local anesthesia operating room of the ENT Service / Unit.

The strict protocolization of nursing care in all these areas allows the development of functions and tasks with the maximum guarantees of quality of care and comfort for patients and users.

Nursing leadership of the Nursing Referral / Nursing Supervisor of the CM Unit of Otorhinolaryngology promotes scientific nursing work, continuously using assessment scales of the different items, applying systematic in the work organization of nurses and nursing assistants, using systems of nursing classification of nursing diagnoses (NANDA), elaborating documents of reception / care / discharge / continuity of care, identifying and applying the rules of patient safety, developing a relevant strategy of health education for patients / caregivers ...

The scientific and professional level of the nursing staff is reflected in the continued presence in relevant events and national and international congresses. Work of nurses and nursing assistants

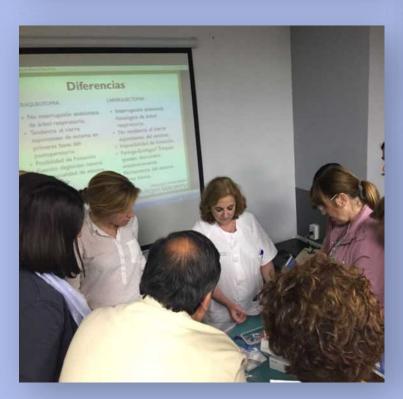


of the UGC of ENT have been awarded in the most recent congresses of their respective fields.

Likewise, the
Nurse Supervisor
belongs to the
Boards of
Directors of
National Scientific
Societies of
Nursing in
Otolaryngology
and Nursing
Directors.







ENFERMERÍA DE SEVILLA § 313 * GRANOTE PRENA COLEGO DE SEVILLA



PROFESIÓN

Enfermeras de Otorrinolaringología del Hospital Universitario Virgen Macarena premiadas en el Congreso Nacional de Enfermería





■ The ENT Service / Clinical Unit and the University of Seville





- 60.000 students, 4.300 Professors, 2.300 administrative staff.
- 123 Departments, 31 centers, 73 face-to-face studies
- 5 campus, 45 buildings
- 34 Academic Degree Studies
- 22 Official Masters
- Virtual Learning Platform for **50.000** students and **1.780** courses

University teaching staff in the Otorhinolaryngology Subject. Department of Surgery



Prof. Dr. Hugo Galera Ruíz Profesor Titular de Otorrinolaringología



Dr. Serafín Sánchez Gómez Profesor Asociado



Dr. Amparo Postigo Madueño Profesora Asociada



Dr. Emilio de Mingo Fernández
Profesor Asociado

The link between Otorhinolaryngology and the University of Seville extends from the very beginnings of the specialty in Spain, in the last third of the 19th century.

Since then, generations and generations of doctors have learned Otorhinolaryngology in the classrooms of the Faculty of Medicine of Seville and have done the practices in the consultations, in the wards and in the operating rooms of the Virgen Macarena University Hospital.

The teaching vocation of all teachers and clinical tutors is very positively appreciated by the students, some of whom have continued the stimulus received in the university period by choosing Otorhinolaryngology as their specialty in choosing the positions of Internal Medical Residents.

Otorhinolaryngology annually receives several university students from other European and American countries to develop their Practices of the Erasmus Plus Program in our Faculty of Medicine and our Service / Unit of Otorhinolaryngology of the Virgen Macarena University Hospital.

Master's Thesis, Final Degree Projects and Doctoral Thesis are carried out annually.



Dr. Gustavo Benavente Bermudo Profesor Asociado

Federico Rubio, como cirujano práctico, fue la más brillante de las figuras que, a lo largo del período 1860-1880, introdujeron en España las arriesgadas intervenciones que permitió la revolución quirúrgica.

Efectuó en 1878 la primera extirpación total de la laringe, cinco años después de la llevada a cabo por Theodor Billroth.

El jardín del campus universitario Macarena acoge un busto en memora de Federico Rubio y Galí.



Rafael Ariza Espejo (Écija, Sevilla 1826-Madrid 1887).



Trabajó en el laboratorio berlinés de Rudolf Virchow. A su regreso se encargó de la enseñanza de la histología en la Escuela Libre de Medicina y Cirugía de Sevilla creada, tras la Revolución de 1868, por iniciativa de Federico Rubio y Galí.

Dirigió el servicio de Otorrinolaringología del Instituto de Terapéutica Operatoria, creado por Federico Rubio en el Hospital de la Princesa de Madrid, que convirtió en la primera escuela española de Otorrinolaringología. Introdujo la



Ramón de la Sota y Lastra (Santander 1832-Sevilla 1913) fundó en Sevilla la cátedra de Otorrinolaringología de la Facultad de Medicina.

Primer laringólogo español.

El 31 de Mayo de 1887 practicó la primera "intubación laríngea" que se hizo en Europa.

University teaching staff in the Surgical Nursing Subject. Faculty of Nursing, Physiotherapy and Podiatry



Beatriz Tena García Profesora Asociada



María Eugenia Acosta Mosquera Profesora Asociada

The teachers of Surgical Nursing deploy an intense teaching activity, very recognized by the students.

The rigor in the transfer of theoretical knowledge to the practice of care in a real environment is emphasized, with direct attention to patients under the supervision of professionals from the nursing staff of the Otorhinolaryngology Unit.

A very close monitoring of the progress of each student is carried out individually, being very demanding in the completion of the registration of the activities they develop.

It is also relevant the direction of Final Degree Projects, which culminate in very enriching experiences for the training of students in research methodology and high-level scientific productions, both in the presentations that are defended in the corresponding academic act and in the documents that shape and structure the work carried out.



Coordination of the Cochlear Implant Program of Western Andalusia

The Cochlear Implant Program of the Otolaryngology Service / Clinical Unit of the Virgen Macarena University



Hospital is one of the two accredited centers in the Public Health System of Andalusia (SSPA) for this benefit. The Program includes aspects of accessibility at source (audiology + otorhinolaryngology + early detection of



hearing loss) with referral to the implantation center (otolaryngology + audiology + radiology + genetics + psychiatry + pediatrics + engineers + hearing care professionals + phoniatry + speech therapy) and with subsequent referral to center of origin for health and non-healthcare monitoring (speech therapy + school education + early stimulation +

hearing aids).

This high number of professionals in different geographical scenarios, process phases, moments of time and different competencies requires a demanding coordination that prevents the loss of patients (most of them are deaf children) and a scrupulous adaptation to the clinical pathway and follow-up of the milestones of hearing



and language to obtain an optimal result of social, school and work integration.

The operative coordination of the Cochlear Implant Program falls on the Reference of Care and ENT Supervisor, Beatriz Tena García, and on the Healthcare Professional Kiko López Benítez.



Implementation of Coordination of the Cochlear Implant Program•

• Coordination of the care teams of the ENT Services of the hospitals belonging to the Network of Cochlear Implants of Western Andalusia to offer a health care of excellence and uniformity.

• Provision of equitable health care to the reference populations in access to the cochlear

implant of all candidates. Goal of reaching 100% of newborns in hospitals and subsidized centers of the SSPA to which the neonatal screening for congenital hearing loss is performed.

Province	Population	New born	< 18 years old
Sevilla	1.941.000	19.455	433.954
Cádiz	1.240.000	11.800	272.102
Córdoba	799.402	7.044	165.183
Huelva	521.968	5.004	109.005
Total	4.502.370	43.303	980.244

• Offer benefits to candidates to receive a cochlear implant under the criterion of equity, ensuring that the indications and decisions related to health benefits are adjusted and carried out according to the requirements, requirements and recommendations of the

Health Care Center

state and regional regulations that regulate and frame cochlear implants and other related devices.

- Facilitate the renewal of external processors to 100% of patients when the requirements are met.
- Ensure the use of the cochlear implant, especially in children, with all the necessary benefits in a timely manner and in social, family, educational and economic contexts that facilitate the proper development of the implanted person.

1 HU Virgen del Rocío (Sevilla)	SAS
2 HU Virgen Macarena (Sevilla)	SAS
3 HU Virgen de Valme (Sevilla)	SAS
4 H Nuestra Señora de la Merced (Osuna, Sevilla)	SAS
5 H de Constantina (Constantina, Sevilla)	Agencia Sanitaria Bajo Guadalquivi
6 H de Utrera (Utrera, Sevilla)	Agencia Sanitaria Bajo Guadalquivi
7 H de Morón (Morón de la Frontera, Sevilla)	Agencia Sanitaria Bajo Guadalquivi
8 H de Ecija (Ecija, Sevilla)	Agencia Sanitaria Bajo Guadalquivi
9 H San Juan de Dios (Bormujos, Sevilla)	Hospital privado concertado
10 CHU de Huelva (Huelva)	SAS
11 H de Riotinto (Riotinto, Huelva)	SAS
12 HU Reina Sofía (Córdoba)	SAS
13 H Infanta Margarita (Cabra, Córdoba)	SAS
14 H Valle de los Pedroches (Pozoblanco, Córdoba)	SAS
15 H de Montilla (Montilla, Córdoba)	Agencia Sanitaria Alto Guadalquivi
16 H de Puente Genil (Puente Genil, Córdoba)	Agencia Sanitaria Alto Guadalquivi
17 H Valle del Guadiato (Peñarroya Pueblonuevo, Córdoba)	Agencia Sanitaria Alto Guadalquivi
18 HU Puerta del Mar (Cádiz)	SAS
19 HU Puerto Real (Puerto Real, Cádiz)	SAS
20 H de Jerez de la Frontera (Jerez de la Frontera, Cádiz)	SAS
21 H Punta Europa (Algeciras, Cádiz).	SAS
22 H de la Línea (La Línea de la Concepción, Cádiz)	SAS
23 H de Puerto de Santa María (El Puerto de Santa María, Cádiz)	Hospital privado concertado
24 H de Sanlúcar de Barrameda (Sanlúcar de Barrameda, Cádiz)	Hospital privado concertado
25 H de Villamartín (Villamartín, Cádiz)	Hospital privado concertado

Ownership

- Have a personal and individualized record of 100% of the implanted patients, showing the milestones to be achieved in terms of hearing (intelligibility), benefit of language (oral communication) and improvement of educational levels. rehabilitative speech therapist and speech therapist effectively delivered to implanted patients.
- Promote to the maximum the unique acts for patients who move from distant homes to the implantation center.
- Maximize local follow-up (where the patient resides) by professionals trained in the care of implanted patients and evaluate this follow-up following standardized protocols.

Tracheostomized Patient Care Unit

Patients with more complex ENT oncology are usually tracheotomized. His attention has been classically part of the specialty, but nowadays patients of any specialty who have required the completion of a tracheotomy are emerging. The specialties that have a greater number of tracheotomized patients beyond Otorhinolaryngology are Maxillofacial Surgery, Internal Medicine, Pulmonology and Cardiology. To a lesser extent Oncology and Digestive System.

These patients are identified through the Tracheotomized Patient Care Unit, which is endorsed by a trajectory of more than two years as a Unit that provides transversal care from the UGC of ENT to all tracheotomized patients of any specialty, from the hospitalized to those who are in home follow-up.

Throughout this time an average of 17 new non-oncological monthly patients and seven monthly laryngectomized patients have been





treated, which require multiple actions depending on their healthcare needs.

In addition, the members of the Tracheostomized Patient Care Unit move to the homes of those patients who find it difficult to go to the hospital due to their clinical conditions, most of them subject to long-term mechanical home ventilation, working as a team with the Home Hospitalization Unit and the Palliative Care Unit.



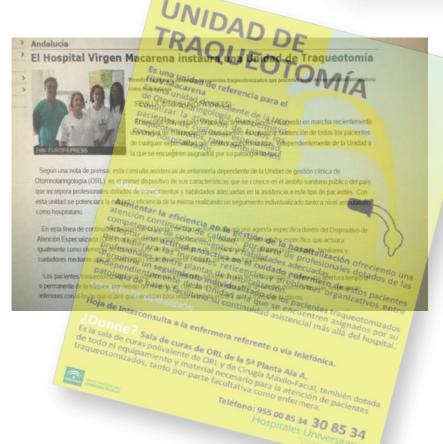




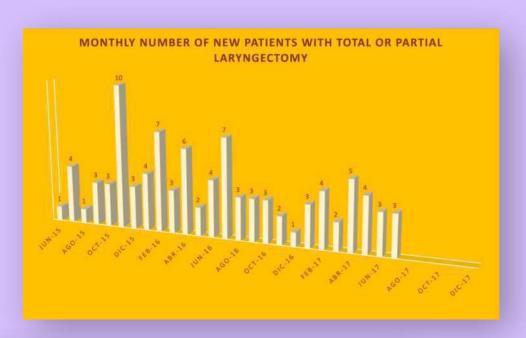


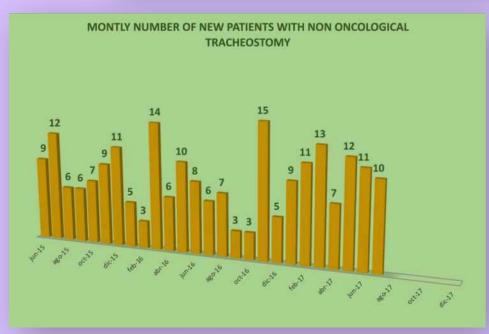
The Tracheostomized Patient Care Unit is included in the Multidisciplinary Team of Attention to Patients Affected by Amyotrophic Lateral Sclerosis (ALS) of the Virgen Macarena University Hospital. It provides information and advice to patients who are candidates for a tracheostomy. It also provides comprehensive care in all aspects related to tracheostomy, cannulas and connections to tracheostomy cannulae to all patients affected by ALS who are carriers of a tracheostomy.

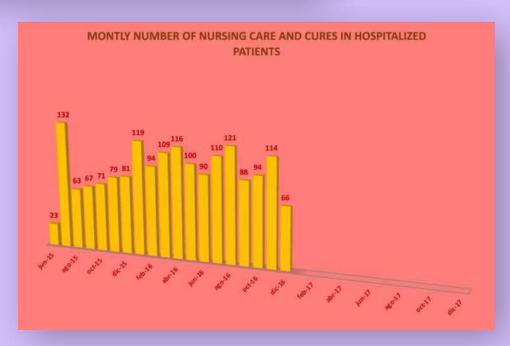




The members of the Tracheostomized Patient Care Unit have spread this innovative health organizational formula in multiple forums, providing a proactive response not only to tracheotomized patients affected by ALS, but also to all patients suffering from a chronic illness that requires them to use this device and even to stay connected to artificial respirators.









Award-winning work at the XVI National Nursing Congress in ENT 2017 for the experience of the Tracheostomized Patient Care Unit in the design and development of customized 3D cannulae

COMUNICORL: App for mobile phones, tablets and computers to facilitate communication for those who can not speak









Books published by the Tracheostomized Patient Care Unit on various aspects of the organization of patient flows and the management of tracheostomized patients

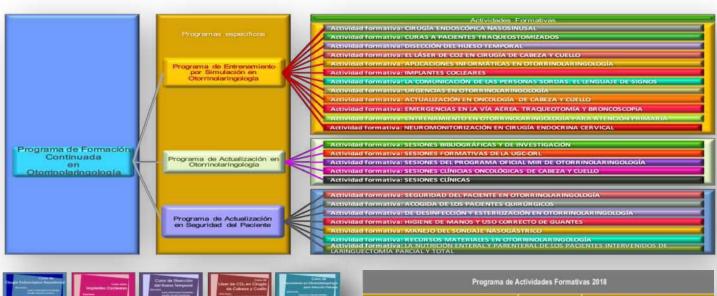




■ Training

The Service / Clinical Unit of Otorhinolaryngology has an extensive training offer in multiple fields of the specialty. It covers aspects of updating knowledge and internal continuous training for professionals of the Service in relation to new benefits or new ways of approaching the management of diseases.

But above all it stands out for its Simulation Training Program using human corpses, animal carcasses and computer technologies for handling 3D images focused on national and international attendees.





Programa de Actividades Formativas 2018				
Disección cervical, laringectomía total con sutura mecánica y prótesis fonatorias	12, 13 y 14 de febrero	Organiza: Asociación Andaluza de Educación Médica en Otorrinolaringología. Colabora: FAIGESCO.		
Cirugia endoscópica nasosinusal	7, 8 y 9 de marzo	Organiza: FAIGESCO		
Implantes cocleares	12 y 13 de marzo	Organiza: Unidad de Gestión Clinica del Hospital Universitario Virgen Macarena. Colabora: FAIGESCO.		
Audiología	4, 5 y 6 de abril	Organiza: Unidad de Gestión Clínica del Hospital Universitario Virgen Macarena Colabora: FAIGESCO.		
Patología de la voz	11 y 12 de abril	Organiza: Unidad de Gestión Clínica del Hospital Universitario Virgen Macarena. Colabora: FAIGESCO.		
Urgencias en Otorrinolaringologia I	25, 26 y 27 de abril	Organiza: Unidad de Gestión Clínica del Hospital Universitario Virgen Macarena. Colabora: FAIGESCO.		
Planificación quirúrgica en 3D y manejo de imágenes con Osirix	10 y 11 de mayo	Organiza: FAIGESCO		
Diagnóstico en la Patologia del Equilibrio	16, 17 y 18 de mayo	Organiza: Unidad de Gestión Clínica del Hospital Universitario Virgen Macarena. Colabora: FAIGESCO.		
	23, 24 y 25 de mayo	Organiza: FAIGESCO		
Aplicaciones informáticas en Otorrinolaringología	20 de junio	Organiza: Unidad de Gestión Clínica del Hospital Universitario Virgen Macarena. Colabora: FAIGESCO.		
Urgencias en Otorrinolaringología II	2, 3 y 4 de octubre	Organiza: Unidad de Gestión Clinica del Hospital Universitario Virgen Macarena. Colabora: FAIGESCO.		
Disección del nervio facial extratemporal y parotidectomía	9, 10 y 11 de octubre	Organiza: Asociación Andaluza de Educación Médica en Otorrinolaringología. Colabora: FAIGESCO.		
Actualización en oncología de cabeza y cuello	20 y 21 de noviembre	Organiza: Unidad de Gestión Clinica del Hospital Universitario Virgen Macarena. Colabora: FAIGESCO.		
Emergencias en la via aérea: traqueotomia y broncoscopia	29 y 30 de noviembre y 1 de diciembre	Organiza: Unidad de Gestión Clínica del Hospital Universitario Virgen Macarena. Colabora: FAIGESCO.		
Entrenamiento en Otorrinolaringología para Atención Primaria	10 ediciones	Organiza: Unidad de Gestión Clínica del Hospital Universitario Virgen Macarena Colabora: FAIGESCO		











Research

The ENT Service / Clinical Unit of Otorhinolaryngology has a strong care and teaching trajectory that has been properly channeled in the last 7 years into an organizational structure of Functional Units and Training Programs that allows it to promote its own research lines with an important substratum of organizational resources, of equipment and humans. It has 6 doctors currently in a staff of 22 specialists and 3 more with the Doctoral Thesis in progress.

The Service is currently qualified to develop several of the research lines of its portfolio of services.

Audiology and

Cochlear Implants

- Physiology of hearing: role of hair cells.
- Genetics of deafness.
- Neurotransmitters in the auditory pathway.
- Early detection of childhood deafness.
- Effectiveness of cochlear implants.
- Psychological evaluation of cochlear implant recipients. The family environment
- Etiopathogenesis, physiopathology and therapeutic management of tinnitus.
- Design of new models of cochlear implants and devices to improve their insertion and performance.

Molecular Biology and Genetics

- Oncogenes and suppressor genes in laryngeal cancer.
- Adhesion molecules and tumor progression.
- Tumor angiogenesis in pharyngo-laryngeal cancer.
- Proliferation antigens and prognosis.
- Expression of tumor genes.
- Epigenetics in pharyngo-laryngeal cancer.
- Tumor markers in cancer of the pharynx and larynx.
- Molecular biology of nasal polyposis.

Applied clinical research

- Application of images in 3 dimensions (3D) and stereolithographic rapid prototypes to the planning of ENT surgical interventions and to the personalized design of devices and organs.
- Prognostic factors in cancer of the pharynx and larynx.
- Minimally invasive endoscopic surgical approach routes for the skull base pathology.
- Reconstructive methods of the airway.
- Larynx transplant.
- Therapeutic organ preservation in laryngeal cancer.
- Psychological and psychopathological impact of laryngeal cancer.
- The emerging cancer of the larynx in the female population.
- Neuromonitoring and neurostimulation in cervical endocrine surgery.
- Indications of adenoidectomy and tonsillectomy.
- Diagnosis and therapy of obstructive sleep apnea syndrome.
- Nasal allergy.
- Nasosinusal polyposis.
- Therapeutic alternatives in the management of voice pathology.
- Nursing care plans.
- New methods in nursing procedures.
- Information and Communication Technologies in nursing care.
- Nursing care in Otolaryngology.
- Organizational innovations in Otolaryngology:
- Tracheostomized Patient Care Unit.
- Coordination of Cochlear Implants.
- Variability of clinical practice.

Clinical Trials active in 2017 and 2018

TITLE: A Phase II multicenter, placebo-controlled, proof-of-concept study evaluating the safety, and efficacy of intratympanic STR001 thermogel to preserve residual hearing in adults undergoing cochlear implant surgery

PROTOCOL NUMBER: STR001-201

EUDRACT NUMBER: 2015-002672-25

TEST PRODUCT: STR001

SPONSOR: STREKIN AG. Technologiepark Basel. Basel, Switzerland.

TITLE: A randomized, double-blind, 52-week, pacebo-controlled efficacy and safety study of DUPILUMAB, in patients with bilateral nasal polyposis o a background therapy with intranasal corticosteroids

PROTOCOL NUMBER: EFC14280

EUDRACT NUMBER: 2015-001314-10

TEST PRODUCT: DUPILUMAB/SAR231893

SPONSOR: SANOFI-AVENTIS RECHERCHE & DEVÉLOPPEMENT. Chilly-Mazarin

Cedex, France

TITLE: A Phase III, randomized, multicenter, double blind, placebo-controlled clinical trial of OMALIZUMAB in patients with chronic rhinosinusitis with nasal polyps.

PROTOCOL NUMBER: GA39855

EUDRACT NUMBER: 2017-003450-16

TEST PRODUCT: OMALIZUMAB (IGE025)

SPONSOR: F. Hoffmann-La Roche Ltd. Basel, Switzerland.

TITLE: Open-Label extension study of OMALIZUMAB in patients with chronic rhinosinusitis with nasal polyps.

PROTOCOL NUMBER: WA40169

EUDRACT NUMBER: 2017-003450-16

TEST PRODUCT: OMALIZUMAB (IGE025)

SPONSOR: F. Hoffmann-La Roche Ltd. Basel. Switzerland.

Research and Innovation Projects financed by official Agencies active in recent years

Modality Health Research Projects. Ministry of Health of the

Junta de Andalucía

File PI-0212-2017

Title of the project New therapeutic targets in the treatment of

chronic sinusitis with sinonasal polyposis

Principal investigator Juan Manuel Maza Solano

Researchers Collaborators Amparo Postigo Madueño, Juan Solanellas Soler, Isabel

María Reyes Tejero, Rafael Moreno Luna, Manuel Castellano Muñoz, Jaime González García, Ramón

Moreno Luna

Center/s H. Virgen Macarena; H. Virgen del Valme; Instituto de

Salud Carlos III; Hospital Nacional de Parapléjicos de

Toledo

Modality Health Innovation Projects. Ministry of Health of the

Junta de Andalucía

File PIN-0460-2017

Title of the project Coordination of a Cochlear Implant Program

based on the management of patients' needs

Princiipal investigator Serafín Sánchez Gómez

Researchers Collaborators Beatriz Tena García, Amparo Postigo Madueño,

Francisco Javier Bernet Toledano, Paola Díaz Borrego

Center/s H. Virgen Macarena

Research and Innovation Projects financed by official Agencies active in recent years

Modality Health Innovation Projects. Ministry of Health of the

Junta de Andalucía

File PIN-0020-2016

Title of the project Impact of an Integral and Multidisciplinary Unit of

Attention to Tracheotomized Patients in the improvement of the quality of care and in the

efficiency of health management

IPrincipal Investigator Beatriz Tena García

Researchers Collaborators Maria Eugenia Acosta Mosquera, Amparo Postigo

Madueño, Francisco Javier Bernet Toledano, Sergio

Barrientos Trigo

Center/s H. Virgen Macarena and University of Seville

Modality Health Innovation Projects. Ministry of Health of the

Junta de Andalucía

Fike PI 0828-2013

Title of the project External validation of the Care Level Inventory

through Nursing Outcomes Classification

Indicators (INICIARE), for the evaluation of the

dependency level in hospitalized patients.

Multicenter study (INICIARE 2.0).

Principal Investigator Ana María Porcel Gálvez

Researchers Collaborators Sergio Barrientos Trigo, Beatriz Tena García,

Concepción Martínez Lara, Concepción Romero

Brioso et al.

Center/s H. Virgen Macarena and University of Seville

Research and Innovation Projects financed by official Agencies active in recent years

Modality First Own Teaching Plan. University of Sevilla.

File 372-2012

Portfolio to adapt the competences of the

Degree in Medicine to the new requirements of

the European Higher Education Area

Principal Investigator Serafín Sánchez Gómez

Researchers Collaborators José Ortega Beviá, Elisa Cabot Ostos

Center/s H. Virgen Macarena and University of Seville

Modality First Own Teaching Plan. University of Seville.

File 304-2011

Title of the project Formative and summative evaluation of

competencies in surgical knowledge areas through the new electronic portfolio of the

Department of Surgery

Principal Investigator Serafín Sánchez Gómez

Researchers Collaborators José Ortega Beviá, Elisa Cabot Ostos

Centers H. Virgen Macarena and University of Seville

Most recent publications in scientific journals

Mármol-Szombathy I, Domínguez-Durán E, Calero-Ramos L, Sánchez-Gómez S. **Identification of dizzy patients who will develop an acute cerebrovascular syndrome: a descriptive study among emergency department patients.** European Archives of Oto-Rhino-Laryngology. 2018;275:1709-1713.

Gómez Ávila J, Andrés Martín A, Pérez Pérez G, Sánchez Gómez S, Navarro Merino. **Tracheal foreign body. Importance of early diagnosis.** Vox Pediatrica. 2017;24(1):50-53.

Maza Solano JM, Benavente Bermudo G, Estrada Molina FJ, Ambrosiani Fernández J, Sánchez Gómez S. **Evaluation of the training capacity of the Book of the Spanish Otorhinolaryngology Resident (FORMIR) as an electronic portfolio.** Acta Otorrinolaringológica Española. 2017;68(6).

Moreno-Luna R, Cárdenas E, Tato JI, Rivero-Garvía M, Márquez-Rivas J, Mochón-Martín A. **Basiespinal Cerebrospinal Fluid Leak as a Complication After Adenoidectomy: Case Report and Literature Review.** World Neurosurgery. 2016;93:484:e9-484.e12.

García Rica E, Maza Solano JM, Herrero Salado TF, Sánchez Gómez S. **Laryngeal chondroid hamartoma: an exceptional case.** Acta Otorrinoaringológica Española. 2016;67(2):117-119.

Maza-Solano JM, Sánchez-Gómez S, Herrero-Salado T, Benavente-Bermudo G, Ventura-Díaz J, Mingo-Fernández EJ. **Prognostic classification of malignant tumors of the parotid gland.** Revista Española de Cirugía Oral y Máxilofacial. 2016;38(1):11-16.

Sánchez-Gómez S, Herrero-Salado TF, Maza-Solano JM, Ropero-Romero F, González-García J, Ambrosiani-Fernández J. **Improvement in the planning of nasosinusal endoscopic surgeries from 3-dimensional images with Osirix and stereolithography.** Acta Otorrinolaringológica Española. 2015;66(6):

Blanco-Piñero N, Antequera-Jurado R, Rodríguez-Franco L, Ibáñez-Guerra E, Herrero-Salado TF, Sánchez-Gómez S. **Emotional and psychopathological alterations in laryngectomized cancer patients.** Acta Otorrinolaringológica Española. 2015;66(4):210-217.

Maza-Solano JM, Sánchez-Gómez S, Herrero-Salado TF, Estrada-Molina F. **Nasopharyngeal melanoma: an infrequent entity.** Acta Otorrinolaringológica Española. 2014;65(5):314-316.

Most recent publications in scientific journals

Jiménez García A; Jiménez Calderón MC; Vázquez Zarza V; Marín Velarde C; Díaz Rodríguez M; Gila Bohórquez A; Reyes Díaz MI; Jurado Tudela F; Domínguez Adame E; Sánchez Gómez S; Oliva Mompeán F. **Neuromonitoring in cervical endocrine surgery. Detection and intraoperative prevention of recurrent paralysis.** Cir Andal. 2014;1(25):43-52.

Sánchez-Gómez S, Cabot-Ostos EM. Maza-Solano JM, Herrero-Salado TF. An electronic portfolio for quantitative assessment of surgical skills in undergraduate medical education. BMC Education 2013;13:65

Escudero-Carretero MJ, Sánchez-Gómez S, González-Pérez R, Sanz-Amores R, Prieto-Rodríguez MA, Fernández de la Mota E. **Preparation and validation of an informative document on adeno-tonsillectomy for patients.** Anales del Sistema Sanitario de Navarra. 2013;36(1):21-33.

Sánchez Gómez S, Maza Solano JM, Armas Padrón JR, Refolio Sánchez F, Herrero Salado TF. **Salivary Gland Choristoma of the Middle Ear and Review of the Literature.** International Journal of Otolaryngology and Head & Neck Surgery. 2013;2:215-220.

González-García A, González-García J, Diniz-Freitas M, García-García A, Bullón P. Accidental displacement and migration of endosseous implants into adjacent craniofacial structures: A review and update. Med Oral Patol Oral Cir Bucal. 2012;17(5):e769-774.

Most recent publications in books

Herrero Salado TF. **Management of phonatory prostheses in laryngectomized patients.** Ed. FAIGESCO. Sevilla, 2017. ISBN 978-84-16696-06-2.

Pedraza Juan CM, Tena García B, Sánchez Lozano MC. Nursing interventions for the recovery of communication in tracheostomized and laryngectomized patients. Ed. FAIGESCO. Sevilla, 2016. ISBN 978-84-16696-02-4.

de Luque Piñana V, Guardia Martínez P, Sánchez Gómez S. **The profilin. More than a food panallergen.** Ed. FAIGESCO. Sevilla, 2016. ISBN 978-84-16696-03-1.

Ropero Romero F. **Temporal Bone Dissection Guide**. Ed. FAIGESCO. Sevilla, 2016. ISBN 978-84-16696-04-8.

Tena García B. **Hospital Tracheotomy Unit: an organizational innovation.** Ed. FAIGESCO. Sevilla, 2016. ISBN 978-84-16696-00-0.

Sánchez Lozano MC, Tena García B, Pedraza Juan CM. **Nursing care in tracheotomized patients.** Ed. FAIGESCO. Sevilla, 2016. ISBN 978-84-16696-01-7.

Sánchez Gómez S. **Residents' Book.** In "Principles of Medical Education. From the Degree to Professional Development.." Ed. PANAMERICANA. Madrid, 2014. ISSN 788498358629. pp. 639-648.

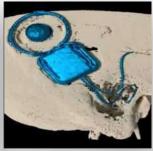
Sánchez Gómez S. **Healthcare marketings applied to the expansion of the Major Ambularia Surgery as an organizational innovation.** In "MAS. Major Ambulatory Surgery. Efficiency in Healthcare". Ed. DOYMA. Madrid, 2014. pp. 994-1011. ISBN 978-84-94440-30-4.

Sánchez Gómez S. **Anthropological approach to the human voice. The patient with voice problems. Clinical and biopsychosocial aspects.** pp. 6-38. 25/05/2013. ISBN 978-84-69576-76-2.

Innovation

Innovation is one of the most decided bets of the Service / Clinical Unit of Otorhinolaryngology. Its innovative lines cover many aspects, from technological innovations to organizational innovations that modify the way professionals organize to provide better care to patients.

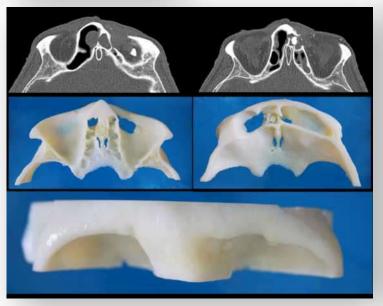




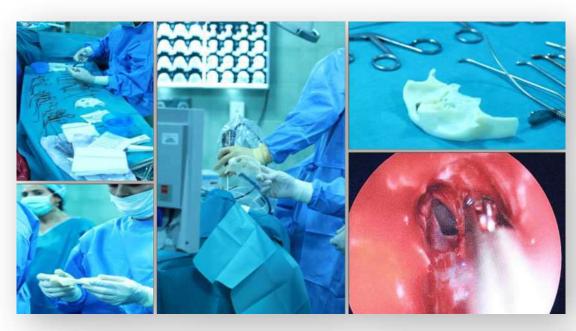


Innovations in the application of the methodologies of Virtual Reality, Augmented Reality, 3D images, stereolithography for the planning of the approaches and execution of the surgical procedures.













Organizational innovations:

- Telemedicine through video-otoscopy.
- Extensive development of the Major Ambulatory Surgery.
- Improvements in Clinical Management Units.
- Creation of a Tracheostomized Patient Care Unit.
- Coordination of the Cochlear Implant Program in Western Andalusia.



■ Quality Accreditation: Unit of Otolaryngology

The Service / Clinical Management Unit of Otolaryngology is accredited in Quality by the Agency of Health Quality of Andalusia since 2010, obtaining the reaccreditation in 2016.









Quality Accreditation: health care providers

All the facultative and nursing professionals of the Otorhinolaryngology Service / Clinical Unit are also accredited by the Health Quality Agency of Andalusia. All have continued with their accreditation processes also when the certification has expired.













Celebration of relevant events

World Voice Day





Conferences with the Laringectomized Patients Associations



Distinctions and institutional collaborations







The image above includes one of the work sessions shared between the ENT Service and the Manuel Castillo Conservatory of Music of Seville with the common link of the VOICE.

The ENT Service team receives
the 2017 Prize from the
Federation of Associations of
Cochlear Implant Users of Spain
(AICE) in the MEDICAL category
(upper and middle left images), act
chaired by the Spanish Health
Minister.

Under these lines, images of acts of delivery of different Awards of the Spanish Society of Otolaryngology and Head and Neck Surgery to members of the ENT Service.





Informative activities and presence in the media



■ Team cohesion days





