Abstract
The American Academy of Otolaryngology publishes a workforce survey annually. These data serve to summarize the practice of otolaryngology in the US. There are no specific studies on practice patterns for academic otolaryngologists. This survey is to identify practice patterns within academic otolaryngology and use it to track resident training and practice changes in the future.

Methods
A thirteen question survey was mailed to 856 practicing otolaryngologists in the United States. 230 responded for a return rate of 26.8%.

Results
Of the 230 respondents, 217 practice full-time. 97% work with otolaryngology residents and are board certified. 67% had fellowship training. Fellowships were pediatric otolaryngology, facial plastics, head and neck and neurotology. Respondents feel practice patterns have changed.

Discussion
Academic otolaryngology is seeing a shift from generalists to subspecialists. This differs from the private practice sector. The subspecialization prevalent in academic otolaryngology may ultimately alter resident training. Academic programs need to have a balance of general and subspecialized otolaryngologists in order to train residents for practice.

Conclusions
Academic programs need to have a balance of general and subspecialized otolaryngologists in order to fully train residents for practice. By providing a variety of faculty expertise, residents will be able to manage most otolaryngologic patients by the time they complete their training and will be well equipped to practice in any community. Our specialty has to decide what kind of workforce we want for the future, how call among subspecialists and generalists is going to be managed, and which core skills our residents should be trained to acquire. Our academy has been excellent at keeping a close watch on the ratio of otolaryngologists per population and we may need to further define optimal ratios for the subspecialties.

Case type by subspecialty