

Editorial

Special Issue: Case Studies from the Mayo Clinic Florida

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Audiologists who work in large multispecialty medical facilities like Mayo Clinic Florida have unique opportunities to see interesting patients. The patients that arrive at our clinic have often been to several other professionals and have not found answers to their questions or do not believe they have a definitive diagnosis or treatment plan. Other patients are referred by outside professionals looking for further diagnostic work or opinions. As a result, the patients we see sometimes present complicated and/or unusual types of symptoms and problems.

Our audiology section at Mayo Clinic Florida has two means by which we share interesting and informative cases with each other. Every Friday over the lunch hour we meet in our conference room and have two cases presented from that week. Our fourth-year Au.D. extern student is responsible for presenting a case every Friday, and one of the full-time audiology staff members also presents a case, with the latter responsibility being rotated among the audiologists. Second, once each month we meet on Tuesday morning at 7:30 with colleagues from otology, physical medicine, and physical therapy to discuss vestibular cases we have seen. Adding these together, we present and discuss over 100 cases each year.

At one of our recent Friday noon case conferences I was stuck by how fascinating and interesting many of our cases are. In the spirit of wanting to share a few of these cases, I approached Dr. Jerger, the editor-in-chief of *JAAA*, and asked if the audiology and otolaryngology staff at Mayo Clinic Florida could prepare a group of interesting cases to share with the readership. He agreed to consider the request, and the result is this issue.

One theme I hope is clearly obvious in these articles is that there are distinct advantages of working closely with other professionals. We are fortunate at Mayo Clinic Florida to have an excellent relationship with our otolaryngology colleagues as well as those in other disciplines. I found that not only can we work together well in the clinic but we can cooperate in preparing multiple manuscripts. If more audiologists and otolaryngologists could experience relationships like those we have, I would predict that many of the professional “political” issues would dissipate.

We have assembled what I believe is an interesting set of articles, with everything from cochlear implants to hearing aids to vestibular cases to HIPAA issues to external ear cancers. The audiologists and otolaryngologists at Mayo Clinic Florida hope you find several topics of interest in this collection of articles. If this issue is received well, we would hope to share some more interesting cases with *JAAA* readers again in the future. I would like to thank all of my audiology staff and our otolaryngology colleagues for their efforts in putting together this issue. And special thanks to my colleague David Zapala, whose contributions vastly improved the quality of many of the articles included in this issue.

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