

CURRICULUM VITAE

Dr Wisam Gargaz

MBBS, MSc ENT

MRCS, DOHNS

PERSONAL DETAILS

Surname: Gargaz

First Name: Wisam

Date of Birth: 23/1/1975

Married with 3 kids

Nationality. Jordanian, British.

Current appointment:

Associate professor in ENT department. Medical school. Jordan university of science and technology. 2013 till now

Previous appointment

Consultant Head and neck surgeon. King Hussein Cancer Centre. Amman, Jordan. This is the regional head and neck oncologic referral centre treating high volume of oncologic head and neck cases. 2014-2025

Work address:

King Abdullah University Hospital. Irbid, Jordan.

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NNUH1975@GMAIL.COM

PROFESSIONAL QUALIFICATIONS:

-**MB. BS:** 23rd June 1998, Jordan University of Science and Technology.

-**MSc:** 1st July 2003, Jordan university of science and technology.

-**Jordanian Board in ENT:** Jordan Medical Council.2003.

-**MRCS:** Royal College of Surgeons of Edinburgh.2007. -**DOHNS:** Royal college of surgeons of England.2009.

TRAINING AND WORK EXPERIENCE:

-ENT residency in King Abdullah University Hospital (KAUH): July

1999-June2003

-ENT Clinical Fellow, KAUH: July 2003- October 2004 -Clinical fellow in Rhinology, South Manchester University Hospitals:2005- 2008.

-Head and neck specialist, Norfolk and Norwich university hospital (NNUH). Norwich. 2009-2013
NNUH is the regional referral center for head and neck cancers.

-Consultant head and neck surgeon, King Hussein Cancer Centre (KHCC).
KHCC is the regional cancer center for Jordan and the middle east.
2014- 2025.

OPERATIVE EXPERIENCE:

Head&NECK:

- Trans Oral Laser surgery dealing with early laryngeal and pharyngeal tumors.
- Total and partial Laryngectomy.
- Neck dissection, modified radical and selective.
- Glossectomy and oral cavity tumors surgery.
- Trans oral and transcervical tongue base resection.
- Thyroidectomy for benign and malignant tumors.
- parathyroid surgery.
- Submandibular gland excision.
- Parotidectomy.
- Endoscopic maxillectomy.
- Trans maxillary approach to infratemporal fossa tumors.
- Transnasal approach to pituitary gland tumors.
- Endoscopic Stapling of pharyngeal pouch.
- Vocal cord medialisation surgery including Radiesse injection. -Tracheal stenosis surgery, including laser excision with dilatation and -Tracheal resection with end to end reanastomosis.
- Voice restoration surgery following laryngectomy.

Reconstruction:

- Pectoralis Major Flap.
- Deltopectoral flap.
- Supraclavicular flap.
- Melolabial flap. -Forehead flap.

NASAL SURGERY:

- Septoplasty and SMR -Rhinoplasty open and closed.
- FESS:
 - Middle meatal antrostomy
 - Anterior ethmoidectomy
 - Posterior Ethmoidectomy
 - Sphenoidotomy
 - Endoscopic DCR -SPA ligation.
 - Endoscopic Management of choanal atresia.
 - Endoscopic Management of nasal and anterior skull base tumors including Angiofibroma.

EAR SURGERY:

Tympanoplasty.

Mastoidectomy.

Ossiculoplasty.

Meatoplasty.

Bone Anchored Hearing Aids (BAHA) Otoplasty.

Research:

1. Concordance between head and neck MRI and histopathology in detecting laryngeal subsite invasion among patients with laryngeal cancer
2. PO-1228 The accuracy of staging head and neck MRI versus histopathology in patients with laryngeal cancer
Re-Irradiation for Recurrent Head and Neck Cancer: Freedom from Cancer Recurrence Rate
3. Primary radiation therapy for advanced-stage laryngeal cancer: A laryngo-esophageal dysfunction disease-free survival
4. Transcervical Approach to Oropharyngeal Synovial Sarcoma: a Case Report
5. Intensified Radiation Therapy for Laryngeal Cancer: Oncologic and Functional Outcomes

6. Stapler Pharyngeal Repair Versus Conventional Suturing After Laryngectomy in Jordanian Laryngeal Cancer Patients
7. Comparison of Two Standard Treatment Approaches in Locoregionally Advanced Nasopharyngeal Carcinoma
8. wedge shape merocel pack after functional endoscopic sinus surgery: our experience with 697 patients
9. Implications of a background of Hashimoto's thyroiditis on the current conservative surgical trend towards papillary thyroid carcinoma
10. Giant versus regular parathyroid adenoma: A retrospective comparative study
11. Rib Osteoblastoma as a Cause of Neurogenic Thoracic Outlet Syndrome: A Case Report
12. Evaluation of Patched-1 Protein Expression Level in Low Risk and High Risk Basal Cell Carcinoma Subtypes
13. Clinical outcomes and impact of prognostic factors in resectable oral cavity squamous cell carcinoma
14. Erratum to "Basal Cell Carcinoma Pathology Requests and Reports Are Lacking Important Information"

15. Clinical and Demographic Features of Basal Cell Carcinoma in North Jordan
16. Peer-assisted Learning: Intensity-modulated Radiotherapy Transition in Developing Countries
17. Endoscopic Caldwell–Luc technique
18. Clinical and molecular characteristics of Jordanian oropharyngeal cancer patients according to P16 expression: a retrospective study and a report of a novel biomarker

COURSES ATTENDED:

- Powered instrument in endoscopic sinus surgery: November, 2004, Leighton Hospital, Crewe, MR Elgan Davies.
- Tympanoplasty and mastoidectomy course: June/06, Ipswich general hospital, Mr Mathew young.
- Facial plastic oncology course. 29th June 2007. Ninewells hospital. Mr Paul .s. white.
- Temporal bone dissection course. 2 days course in Ninewells hospital. Dundee.
- Foundation of ear surgery, UCL, London .2 days course, November 2009.
- Head and neck dissection course, Coventry April 2011.
- Head and neck dissection course, East Anglia University April 2012.
- Organised global post laryngectomy rehabilitation course in King Hussein cancer centre. Key guest speaker Eric Blom(inventor of Blom–Singer speech valve). June 2014.
- Transoral laser course. Namur , Belgium . May/ 2015
- Organised global post laryngectomy rehabilitation course in King Hussein cancer center. 2017

REFERENCES:

Mr Michael Wickstead.

Consultant ENT surgeon, clinical director.

Norfolk and Norwich university hospital

Mr Ramez Nassif

Head and neck oncology surgeon

Norfolk and Norwich University Hospital

Mr Andy Bath

Consultant ENT surgeon

Norfolk and Norwich University Hospital