

PROMOTION RECOMMENDATION  
THE UNIVERSITY OF MICHIGAN  
MEDICAL SCHOOL  
DEPARTMENT OF NEUROLOGY

Kevin A. Kerber, M.D., associate professor of neurology, with tenure, Department of Neurology, Medical School, is recommended for promotion to professor of neurology, with tenure, Department of Neurology, Medical School.

Academic Degrees:

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| M.S. | 2008 | University of Michigan       |
| M.D. | 2000 | University of South Carolina |
| B.S. | 1996 | Xavier University            |

Professional Record:

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| 2013-present | Associate Professor of Neurology, University of Michigan           |
| 2007-2013    | Assistant Professor of Neurology, University of Michigan           |
| 2005-2007    | Clinical Lecturer, Department of Neurology, University of Michigan |

Summary of Evaluation:

Teaching: Dr. Kerber teaches general neurology and neuro-otology to medical students and residents while serving as the neurology inpatient/consult attending and when students/residents spend time in his outpatient clinic. On an annual basis, he gives residents a lecture on the emergency evaluation and management of the dizziness patient as part of the Emergency Lecture Series. In addition, he gives a series of talks during the year regarding a more comprehensive approach to dizziness presentations. During rotations in his outpatient clinic, he leads didactic discussions and provides residents with relevant medical literature and video-taped findings to review, in addition to supervising patient encounters. During academic year 2015-2016, Dr. Kerber trained a clinical fellow in medical neuro-otology.

Externally, Dr. Kerber is frequently invited to give continuing medical education talks. He is currently the director (2017-2020) of the Neuro-otology program of the Annual Meeting of the American Academy of Neurology (AAN). This is a significant honor in recognition of his clinical and teaching skills since it is the largest annual international neurology conference and only one person is selected to direct the program every four years. He was also the keynote speaker at the 2016 International Masters Course on Vestibular Disorders (Mexico City, Mexico). Dr. Kerber is an invited author of educational book chapters in popular texts such as Cecil's Essentials of Medicine and Conn's Current Therapy. He has also co-authored a comprehensive text book on the vestibular system titled Clinical Neurophysiology of the Vestibular System, 4th edition.

Research: Dr. Kerber's primary focus is health services research on the topic of dizziness – with the goal to optimize care in an efficient, effective, and sustainable manner. He is currently the PI of two R-level NIH/AHRQ awards. Dr. Kerber's work is important because dizziness is a problem for 15% of the adult population in the U.S. and his work has identified important gaps between the evidence base and real-world care delivery. The most prominent gap is the use of the test (Dix-Hallpike test [DHT]) and treatment (canalith repositioning maneuver [CRM]) for benign paroxysmal positional vertigo (BPPV). The DHT is the established gold standard test for BPPV and the CRM is supported by meta-analyses of randomized controlled trials and clinical guideline statements. Dr. Kerber's population-based work was the first to identify the underuse of the DHT and CRM in emergency department dizziness presentations– finding that only about 20% of patients diagnosed with BPPV have a DHT documented and less than 5% have a CRM documented. Despite this, approximately 30% receive a head CT which is only rarely warranted in probable BPPV presentations. Dr. Kerber also was the first to demonstrate substantial patient demand for information to self-diagnose and treat dizziness, based on his published work regarding the large volume of google searches using clinical dizziness keywords and a systematic review of YouTube videos of the CRM. Based in part on demonstrating this demand, he received an R18 to develop a self-diagnosis and treatment tool that uses survey predictive modeling and a video-based patient-oriented tutorial. On a broader level, Dr. Kerber also performs health policy research particularly relating to utilization and payments. He and his colleagues have used comprehensive or nationally representative data to define utilization by neurologists, evaluation/management (E/M) payment distribution by specialty type, medication-related expenditures by specialty type, and differences in payment by time estimate for procedural vs E/M work. These studies are published in high impact journals including *Annals of Neurology*, *Neurology*, *JAMA Internal Medicine*, and *Annals of Surgery*.

#### Recent and Significant Publications:

Kerber KA, Zahuranec DB, Brown DL, Meurer WJ, Burke JF, Smith MA, Lisabeth LD, Fendrick AM, McLaughlin T, Morgenstern LB: Stroke risk after nonstroke emergency department dizziness presentations: A population-based cohort study *Ann. Neurol* 75:899-907, 2014.

Kerber KA, Meurer WJ, Brown DL, Burke JF, Hofer TP, Tsodikov A, Hoeffner EG, Fendrick AM, Adelman EE, Morgenstern LB: Stroke risk stratification in acute dizziness presentations: A prospective imaging-based study. *Neurology* 85:1869-1878, 2015.

Kerber KA, Raphaelson M, Barkley GL, Burke JF: Is physician work in procedure and test codes more highly valued than that in evaluation and management codes? *Annals of Surgery* 262: 267-272, 2015.

Calaghan BC, Burke JF, Skolarus LE, Jacobson RD, De Lott LB, Kerber KA: Medicare's reimbursement reduction for nerve conduction studies: Effect on use and payments. *JAMA Intern Med* 176:697-699, 2016.

Kerber KA, Forman J, Damschroder L, Telian SA, Fagerlin A, Johnson P, Brown DL, An LC, Morgenstern LB, Meurer WJ: Barriers and facilitators to ER physician use of the test and treatment for BPPV. *Neuro Clin Pract* 2017 in press.

Service: Dr. Kerber serves on internal committees including the Brain Death Committee, Neurology Promotions Committee, and the medical center's Remote Second Opinion Executive Committee. As part of the Brain Death Committee, he contributed to updating the brain death policy in academic years 2011-2012 and 2014-2015. As part of the Remote Second Opinion (RSO) committee, he has contributed to establishing RSO for the entire medical center. At the national level, he serves as co-advisor for the American Academy of Neurology's (AAN) Relative Value Update Committee (2009-present). This work involves attending two to three conferences per year to present recommendations for valuation of CPT codes. This is an important service because the proper valuation of neurology services is an integral part of neurology practice and he also benefits professionally from this experience by gaining hands-on experience with payment policy. For the American Neurological Association, he serves on the Scientific Program Advisory Committee for the annual meeting (2016-2018). In 2016, his symposium proposal was selected as the presidential symposium. He also serves as the director of the neuro-otology program at the AAN's annual meeting (2016-2020) and as co-editor for the innovation and care delivery section for the journal *Neurology*. Dr. Kerber's clinical responsibilities include two half days of neurology clinic and two weeks as the attending on the inpatient or consult neurology service per year. He is the only neurologist at the University of Michigan who is fellowship trained in medical neuro-otology. He is the director of the Department of Neurology Dizziness Clinic.

#### External Reviewers:

Reviewer A: "Dr. Kerber has rapidly established himself as a national leader in vertigo and emerging leader in health services research within neurology. He has written and lectured extensively on vertigo, including in leading journals in our field...and at national meetings."

Reviewer B: "Dr. Kerber is considered to be one of the few people at the highest level of otoneurology in the United States as evidenced by his publications and his role in teaching at the annual American Academy of Neurology meeting....Dr. Kerber's recent collaboration with Dr. Newman-Toker from Johns Hopkins put him in the absolute forefront internationally of studying the evaluation of patients with acute dizziness."

Reviewer C: "It is a delight to see Dr. Kerber creating his niche in health services research in neuro-otology, where he began by studying the epidemiology of dizziness in the emergency department. His work was eye opening to the rest of us as he meticulously analyzed the utilization of medications and clinical tests in the emergency department to demonstrate potential targets for improvement.....Dr. Kerber has found his own path in building his academic career. He has been extremely productive and has firmly established himself as a leader in health services research in dizziness and vertigo."

Reviewer D: “Specialists in neuro-otology are few and far between, and Kevin is considered a national leader....He will remain a great investment for the University of Michigan in the years to come.”

Reviewer E: “Dr. Kerber is an extremely gifted and motivated Neuro-otologic academic clinician-scientist and educator, as well as a dedicated colleague and academic society leader.”

Summary of Recommendation:

Dr. Kerber has garnered a national reputation for his health services contributions in the areas of dizziness and vertigo. Additionally, he provides an important clinical role as the only neuro-otologist on our faculty. I am pleased to recommend Kevin A. Kerber, M.D. for promotion to professor of neurology, with tenure, Department of Neurology, Medical School.

A handwritten signature in cursive script, reading "Marschall S. Runge".

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Marschall S. Runge, M.D., Ph.D.  
Executive Vice President for Medical Affairs  
Dean, Medical School

May 2018