

HeadsUp!

News from the
UCSF Department of
Otolaryngology –
Head and Neck Surgery



From Surgeon to System Builder

Dr. Patrick Ha Takes on a UCSF-Wide Leadership Role

On July 1, 2025, Patrick Ha, MD, stepped into a new role as Vice Dean for Clinical Affairs and Partnerships in the UCSF School of Medicine. The appointment places him at the center of UCSF's clinical enterprise, spanning UCSF Health, Zuckerberg San Francisco General Hospital and Trauma Center, the San Francisco VA Health Care System, UCSF Benioff Oakland Children's Hospital, UCSF Fresno, and community affiliates.

"My career here has touched the operating room, the clinic, and administrative leadership," Dr. Ha said. "Now, I get to think about how all of those pieces fit together across the entire institution."

When Dr. Ha arrived at UCSF a decade ago, he was focused on building the strongest possible team and providing the best care for patients with head and neck cancer. Over time, that mission expanded: first, as chief of the Division of Head and Neck Surgical Oncology in the UCSF Department of Otolaryngology – Head and Neck Surgery (OHNS), then into bridging services across Mission Bay, and now into system-level strategy.

His new role stretches beyond his own specialty, placing him at the center of UCSF's clinical enterprise and its many partnerships across the Bay Area.

"It's a way for me to give back to UCSF," he said.

A Solid Track Record

Dr. Ha has always been a builder. As chief of the Division of Head and Neck Surgical Oncology, he grew the division's clinical footprint by more than 50%. Recognizing that delays in intake were a major barrier to care, he restructured the system so that coordinators focused solely on new patient scheduling rather than juggling multiple competing responsibilities.

This dedicated intake team became the clear point of contact for patients and referring providers, even offering video visits to streamline information gathering and referrals. The changes dramatically reduced wait times, making the division one of the fastest in the cancer center for new patient access. By making it easier for patients to get in the door, he positioned the division to handle greater demand and grow its reach significantly.

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UCSF Earns Vizient Top Performer Status

Fall 2025 brings news from UCSF as well as challenges to our campus. Challenges relate to instability in academic medicine. The field is unstable because of uncertainty around funding sources for research and impending changes in government reimbursement for clinical care from both the state and the federal government. However, those who work at UCSF are very astute, and we will manage despite the changing landscape.

On the news front, the medical center remains robust and is extremely busy. *U.S. News & World Report* ranked the medical center as #1 in California (in a tie) and #1 nationally in neurology and neurosurgery. Our department was ranked #17 nationally by the *U.S. News* algorithm. Perhaps more importantly, in 2025 UCSF is the only public academic medical center to have distinctions in all three quality benchmarking ratings: placement on the *U.S. News* Honor Roll, a CMS Five-Star Quality Rating, and listing in Vizient's top performer cohort. This institution is quietly amazing.



Andrew H. Murr, MD

Our department has had some important achievements and advancements. First, read page 4 in this issue of *Heads Up!* about a fascinating paper from the Grandis/Johnson lab that describes a systemically administered STAT3 decoy (CSD3) to treat oral squamous cell carcinoma in cats.

Next, I want to congratulate the newly appointed vice chairs in the department: Steven D. Pletcher, MD, is the Vice Chair (and the Program Director) for Education; Charles Limb, MD, is the Vice Chair for Academic Affairs; and Patrick Ha, MD, is the Vice Chair for Head and Neck Oncologic Services. In addition (as you will see on page 1 in this issue), Dean Talmadge King, MD, selected Patrick as the Vice Dean for Clinical Affairs and Partnerships in the School of Medicine. Please offer Steven, Charles, and Patrick congratulations the next time you see them.

As you will read on page 3 in this issue, we welcome two new faculty members to the department: Scott Hirsch, MD, is in our Pediatric OHNS Division, and Tokunbo Ayeni, MD, joins our General Otolaryngology–Head and Neck Surgery Division. Tokunbo was recently selected – along with Mary Xu, MD – for the Task Force on New Materials by the American Board of Otolaryngology–Head and Neck Surgery.

Patricia Loftus, MD, has been recognized with the 2025 Excellence in Mentoring Award from the Academy of Medical Educators. Speaking of mentoring, see page 6 in this issue to read about Dr. Nicole Jiam and the Transformative Power of Mentorship in Otolaryngology.

In pediatric news, Jordan Virbalas, MD, has been recognized with membership in the prestigious Academy of Medical Educators at UCSF. Also, the UCSF Benioff Oakland Children's Hospital became fully incorporated into UCSF from a staffing perspective over the summer.

Construction of our two new hospitals (one in Oakland and one at Parnassus) is moving along well. Our new research building at Parnassus should have its "topping out" ceremony soon.

Finally, please remember our portfolio of CME offerings early next year: the Advances in Diagnosis and Treatment of Sleep Apnea will be at the Hotel Nikko in San Francisco February 13-14, and the Pacific Rim Update will be February 14-17 in Honolulu. And I hope to see you at the Combined Sections Meeting of the Triological Society January 22-24, 2026 in Orlando.

Warmly,

Andrew H. Murr, MD, FACS

Professor and Chair

UCSF Department of Otolaryngology – Head and Neck Surgery



Peninsula Outpatient Center Opens

In April, UCSF Health opened the Peninsula Outpatient Center at 225 California Drive in the heart of downtown Burlingame, a convenient and comfortable location for people who live or work on the Peninsula.

The center features an ambulatory surgery center with four operating rooms for outpatient surgery and procedures in OHNS, gastroenterology, orthopaedics, and urology. Surgeons also perform breast, plastic and reconstructive, colorectal, and general surgery.

In addition, the center offers cancer clinical care, an 18-chair infusion center, comprehensive radiology services for complex imaging, and lab services.

For more information, contact Administrative Director Justin Sauerbrey at (517) 960-9374. ■



Bayfront Outpatient Surgery Center Marks 1st Anniversary

August 28, 2025 marked the one-year anniversary of operations at the Bayfront Outpatient Surgery Center at 520 Illinois Street in San Francisco's Mission Bay neighborhood.

During its first year, the center supported 7,939 patients in multiple specialties. The OHNS service has contributed greatly to the center's success with the following rankings:

- #1 in contribution margin for FY25
- Top 3 in surgical volume

"This remarkable milestone reflects the extraordinary commitment of our surgical services leaders, perioperative leadership, and the Bayfront triad, who worked tirelessly to transition thousands of surgical cases from Moffitt Long, Mount Zion, and Mission Bay inpatient locations to the new Bayfront outpatient surgical center," said Department Chair Andrew Murr, MD, who was an active leader during the final planning phases leading to the center's opening. ■

Welcome to Drs. Ayeni and Hirsch

Tokunbo Ayeni, MD



Tokunbo Ayeni, MD, returns to UCSF as one of two new faculty to join the Department of Otolaryngology – Head & Neck

Surgery. Dr. Ayeni was born and raised in Southern California, where he enjoyed playing football, tennis, and running track during his youth. Inspired by a family grounded in service – his mother a nurse and his father a mechanical engineer – he pursued medicine with a strong sense of purpose. He completed his undergraduate studies at the University of California, Riverside, and went on to earn his medical degree from UCSF, through the Health Professions Scholarship Program (HPSP) with the United States Air Force.

Dr. Ayeni completed his otolaryngology residency at Baylor College of Medicine and served as a comprehensive otolaryngologist and military officer in Southeast Virginia.

During that time he earned teaching appointments and accolades from the Uniformed Services University of the Health Sciences and Eastern Virginia Medical School for his contributions to medical education.

While in medical school, he met his wife, Nicole, and together they now have two children. Dr. Ayeni looks forward to continuing his commitment to medical student and resident education, as well as providing comprehensive otolaryngologic care.

Scott Hirsch, MD



Pediatric otolaryngologist Scott Hirsch, MD, was born and raised in Cupertino. From an early age he would round

with his grandfather, a nephrologist, both at Stanford Hospital and during house calls on the weekends. This instilled a strong desire to pursue medicine himself.

After completing undergraduate studies at the University of California, Davis, Dr. Hirsch received an MD from the Virginia Commonwealth University School of Medicine. He then went to the University of Colorado for his otolaryngology residency, and he completed his pediatric otolaryngology fellowship at Texas Children's Hospital.

While in Colorado, Dr. Hirsch completed a two-year NIH T32-funded research fellowship focusing on the interplay between genetic variants, microbiome, and environment in determining pediatric otitis media phenotypes.

Dr. Hirsch and his wife, Rachel, have two children. Throughout all the time spent in other states, Dr. Hirsch knew that he and his wife would end up back in the Bay Area, and he is ecstatic to be at UCSF. He looks forward to working with all the amazing staff, promoting medical student and resident education, and providing comprehensive pediatric otolaryngology care with an emphasis on continuing to build the aerodigestive program. ■

Patrick Ha

Continued from page 1

"Growth comes down to trust and responsiveness," he said. "If people know you'll take great care of their patients, the partnerships follow naturally."

Effective treatment of head and neck cancer depends on a multidisciplinary team working in concert, Dr. Ha said. The disease requires surgeons, oncologists, pathologists, nutritionists, speech-language pathologists, social workers, and others to work together to provide patient care for this relatively rare form of cancer.

That collaborative perspective, he said, has shaped his leadership style: "You can't do it alone. You need a team that spans disciplines and follows patients throughout their journey."

That mindset translates directly to UCSF's broader mission. In his new role, Dr. Ha will act as UCSF's point person for clinical partnerships, spanning multiple UCSF entities and new community affiliates. His goal is simple but ambitious: expand UCSF's reach while making the system easier to navigate for patients and providers.

"It all comes back to patients," he said. "If you start with the question of what will provide the best care, the right partnerships and strategies emerge from there."

Creating Clear Categories and Expectations

Another major aspect of Dr. Ha's new position involves clarifying the roles of UCSF faculty and providers across different sites, including the VA and county hospitals as well as St. Mary's, St. Francis, Mount Zion, and Oakland facilities. In this function, he will be collaborating with Christina Mangurian, MD, MAS, vice dean for Academic Affairs at the UCSF School of Medicine.

Dr. Ha noted that UCSF encompasses many "phenotypes" of clinicians and providers – some who are formal faculty and others who are affiliates, health system employees, or School of Medicine appointments.

He hopes to create clear categories and expectations for these various providers, similar to how the School

of Medicine developed the clinician-educator track.

"As UCSF continues to expand, it's important to clarify expectations and create metrics, or even new tracks, where current structures don't fully capture the contributions of providers," Dr. Ha said. "By recognizing those differences, we can better balance departmental needs with the health system's vision while ensuring providers at all sites feel valued, supported, and successful."

So what does success in this wide-ranging new role look like? For Dr. Ha, it's less about big announcements and more about culture.

"If department chairs and faculty feel supported enough to pick up the phone and call me for advice, then I know I'm doing my job," he said.

He's eager to expand his reach in academic medicine. "For the first time, much of what I do has nothing to do with cancer," he reflected. "It's about shaping UCSF's future at large, while keeping a clinician's perspective on how those decisions affect people on the ground." ■

Promising Results in Pet Cats with Head and Neck Cancer

By Daniel E. Johnson, PhD and Jennifer R. Grandis, MD

The process of developing a new drug for treating patients with cancer involves careful design of the drug and extensive evaluation in

cultured cell lines and tumor-bearing animal models before the drug can ever be tested in humans. Of course, positive results and initial indications of safety must be

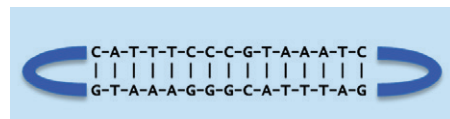
obtained along the way. Many drugs fail in early development due to toxicity or lack of efficacy in preclinical models. This summer our collaborative team in the Head and Neck Lab reached a major milestone with a new anti-cancer drug we are developing, demonstrating potent anti-tumor activity in mice and safety and efficacy in pet cats with head and neck cancer. Our findings were published in the August issue of *Cancer Cell*, a leading international journal of cancer research.

STAT3 Protein

The drug we have developed is aimed at targeting a cellular protein called STAT3. The STAT3 protein acts to induce the expression of genes that cause cells to grow and divide. In normal cells the ability of STAT3 to perform this function is regulated by an on/off molecular switch, with the switch mostly in the “off” position. In contrast, in cancer cells the switch is always in the “on” position, causing STAT3 to persistently drive cells to proliferate and tumors to grow. STAT3 is chronically turned on in a majority of human cancers, making it an important target to try to inhibit with a drug. However, this protein has proven to be notoriously difficult to inhibit and there are currently no FDA-approved STAT3 inhibitors.

We have developed an entirely unique, first-in-class inhibitor of STAT3, which we call the cyclic STAT3 decoy (CS3D). Among the unique properties of CS3D is

its composition of a double-stranded DNA molecule that is cyclized at both ends to form a dumbbell-like structure.



Historically, DNA and RNA have not been used to make drugs, but the advent of mRNA vaccines for COVID has brought us into a new age, and CS3D is adding to this new armamentarium of nucleic acid-containing therapies.

In addition to being chronically turned on in cancer cells, STAT3 is also frequently activated in the immune cells of cancer patients. When this occurs, STAT3 acts to shut down the ability of the immune system to fight and eliminate cancer, a serious consequence. This fact led us to hypothesize that an effective inhibitor of STAT3 might have a doubly beneficial effect: reducing the proliferation of the cancer cells while ramping up the ability of the immune system to destroy the cancer. To test this hypothesis, we treated mice that harbored head and neck tumors with our CS3D drug and evaluated the effects on both tumor cells and immune cells. We observed that CS3D treatment inhibited the growth of tumors while activating the immune system to fight the cancer cells, supporting our hypothesis and highlighting the promising potential of our drug.

UC Davis Collaboration

While studies in mice are tremendously useful, a significant limitation is that the laboratory mice used in such studies are genetically identical, eat the same food, and are exposed to the same environments. Hence, they do not provide ideal models of disease in humans, who are genetically heterogeneous and live in diverse environments. Through a fortuitous interaction with scientists at UC Davis we learned that head and neck cancer is common in pet cats, is largely untreatable, and is quickly lethal. At a



molecular level, head and neck cancer in cats closely resembles human head and neck cancer, and pet cats, like humans, are heterogeneous and are exposed to similar environments. This prompted us to collaborate with veterinary oncologists at the UC Davis School of Veterinary Medicine to perform a clinical trial of CS3D in pet cats with head and neck cancer. Our goal was to determine whether CS3D treatment would result in any toxicities and to assess whether treatment might be associated with a positive clinical response. Twenty pet cats were enrolled, and a series of escalating doses of CS3D was given. Tumors were measured and biopsied, and blood was harvested before and after treatment.

Notably, even at the highest doses given, CS3D did not cause significant adverse events, indicating that the drug is exceptionally well tolerated. In addition, disease control was observed in 35% of the treated cats, a marked improvement over the aggressive, progressive disease that occurs in untreated cats. Analysis of tumor and blood specimens from the trial revealed that cats who responded to CS3D treatment – relative to cats that did not respond to CS3D – exhibited distinct differences in the profiles of genes expressed in their tumors and in the types of immune cells circulating in the blood. These differences point to biomarkers that may be useful in predicting, prior to treatment, who may respond to CS3D treatment.

Collectively, we found that our CS3D drug exhibits promising effects on both cancer cells and immune cells, is well tolerated, and inhibits the growth of head and neck cancer in both mice and companion pet cats. These findings support the clinical evaluation of this novel anti-cancer agent in human patients with head and neck cancer. ■

The Great Balancing Act

An Insider's Guide to the Human Vestibular System

By Jeffrey D. Sharon, MD

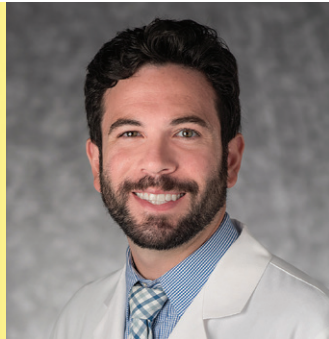
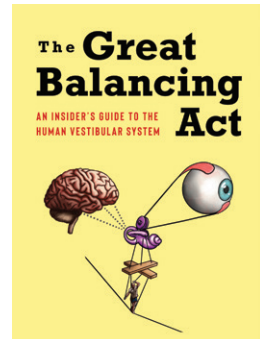
For the last decade, I've been working on a popular science book about the vestibular system. The book, whose title is the same as the headline above, is finally finished. It is now available for purchase through the publisher (Columbia University Press) and other booksellers.

Jokingly referred to as the "sixth sense," the vestibular system may be the most underappreciated part of the human body. For millennia, we've known that we can see, hear, touch, smell, and taste the world around us. But it was only in the latter half of the 19th century that scientists discovered that the ear does more than hear. It helps us balance by sensing movements and gravity. Elegantly designed sensors, embedded deep in the skull, sense every twist, turn, and tumble, enabling swift reflexes that keep vision and balance steady. Evolutionarily, the vestibular system is primordial and ubiquitous, possessed by every animal on Earth. Even jellyfish and plants have a rudimentary vestibular system, allowing them to sense gravity, despite not having a brain. Fossilized skulls show that the T. Rex vestibular system is much like our own, while their cochlea – the organ of hearing – was poorly formed and minimally functional.

Malfunctions of the vestibular system, causing vertigo, dizziness, and imbalance, are common, affecting about 10% of

humanity. However, they fall into a gap between two related fields of medicine: neurology and otolaryngology—head and neck surgery, relegating vestibular disorders to a forgotten corner of medicine. My own research has shown that most vestibular patients see multiple physicians, don't get the answers they are looking for, and have lost confidence that they will. Fortunately, there are vestibular allies out there, who study and appreciate the importance of the forgotten half of the inner ear. Pilots are taught to recognize vestibular illusions, predictable quirks of perception that occur when the vestibular sensors are fooled by physical forces outside standard operating range. Evolutionary biologists, taking advantage of the fact that the inner ear is encapsulated by the densest bone in the body and therefore survives longest, theorize about the behavior and lives of long extinct creatures, inferring function from form. Astronauts must understand their inner ears, as disorientation, confusion, and projectile vomiting are all common during the transition to the zero-gravity environment of outer space.

In writing this book, I wanted to tell the story of the vestibular system. I tried to explain how it works, and what happens when it doesn't. I wanted to show how pioneering scientists learned the secrets of the vestibular apparatus.



"Jokingly referred to as the 'sixth sense,' the vestibular system may be the most underappreciated part of the human body."

— Author Jeffrey D. Sharon, MD

I attempted to explain how the vestibular system is necessary for spatial reasoning and abstract thought. Combining neuroscience, history, and physiology, I wrote about how remarkable the vestibular system is, how it works so well that we take it for granted, and how it can devastate when it goes haywire. I hope that readers will join me on a journey – through history, through biology, through medicine and disease, through past accomplishments and future challenges, through sea, land, air, and space to discover an unknown and vital part of ourselves. ■

Faculty News Highlights

- Recent news about OHNS faculty includes completion of an exclusive licensing agreement between UCSF and Jacaranda Biosciences (JBI), which was co-founded by **Dylan Chan, MD**. JBI is developing small molecules targeting the unfolded protein response to prevent hearing loss caused by chemotherapy.
- **Jordan Virbalas, MD**, has been welcomed into the UCSF Medicine Haile T. Debas Academy of Medical Educators. As a member of the Academy, Dr. Virbalas advances the mission of UCSF by accelerating teaching and improving health with an emphasis on community and innovation.
- The National Science Foundation awarded a \$1.25 million Small Business Innovation Research Phase II grant to **Nicole Jiam, MD**, and her team at IIAM Health to accelerate their work in AI-powered automation for optimizing new patient referral pathways. Dr. Jiam also received support from the Getting Together Fund, sponsored by the UCSF School of Medicine and UCSF Health, for a Hearing & Skull Base Summer Picnic. The picnic was an in-person, non-clinic, informal gathering of members of the multidisciplinary teams involved in the care of patients with skull base and neuro-oncologic disease.



Clockwise from top left: Drs. Dylan Chan, Jordan Virbalas, Nicole Jiam, and attendees at the Hearing & Skull Base Summer Picnic.

The Transformative Power of Mentorship in Otolaryngology

The start of the new year invites recognition of goals, praise for achievements, and plans for the future. National Mentoring Month, also at the start of the year in January, is a time to celebrate mentors' invaluable role in shaping careers and fostering growth. At the UCSF Department of Otolaryngology–Head and Neck Surgery (OHNS), mentorship is more than guidance – it is a cornerstone of training, innovation, and leadership.

OHNS is fortunate to have a large cadre of outstanding mentors, including Nicole Jiam, MD, director of the UCSF Otolaryngology Innovation Center.

Guiding Her Academic Journey

For Dr. Jiam, her mentors guided her to mastering surgical techniques, clinical decision-making, and navigating the complexities of research, academic promotion, and work-life balance. Their long-standing commitment and investment in her success inspired her to prioritize mentorship later in her career, recognizing its potential to shape the next generation of surgeons and scientists.

Mentees looking for that perfect mentor to guide them should approach the situation as if building a professional, long-term relationship.



Dr. Nicole Jiam (right) with her lab celebrate successful submissions of abstracts to the upcoming 2026 ACIA and ARO conferences.

"In the context of academic surgery, mentees should start by being prepared and engaged," Dr. Jiam said.

"Whether in the operating room, clinic, or research meetings, show initiative by asking thoughtful questions and actively seeking feedback. Establishing trust and rapport takes time, so consistency and professionalism are key."

As for those she mentors, Dr. Jiam seeks out those who are curious and prepared to learn and reflect on performance.

"A strong mentee embraces feedback and shows a genuine desire to grow, both technically and intellectually," she said.

Advice to Mentees

Mentorship does not come without challenges for both mentor and mentee. For mentees, it's making the most of the relationship. According to Dr. Jiam, it boils down to four main components:

- 1. Come prepared** for every interaction, whether it's a pre-op briefing, research meeting, or casual discussion about career goals.
- 2. Set clear objectives**, and be proactive in seeking out opportunities for skill development.
- 3. Reflect on feedback**, and follow up with mentors to demonstrate growth.
- 4. Take advantage** of mentors' expertise for technical skills, career advice, networking, and navigating challenges.

Dr. Jiam advises young academics to seek out mentors early and often and to not be afraid of asking questions or seeking advice.

"Confidence comes from preparation and humility, and the operating room is a place where both are critical," she said.

Alignment with Goals, Values, and Vision

Her successful career and time at UCSF OHNS have coupled with several big-picture decisions to make career moves and take advantage of available opportunities. When faced with a career-changing decision, Dr. Jiam relies on a combination of reflection, mentorship, and research.

"I evaluate opportunities based on how they align with my professional goals, personal values, and long-term vision. I also seek input from trusted colleagues and mentors who understand my field and career aspirations. Finally, I consider the impact on my ability to provide patient care, advance research, and contribute to the training of future surgeons," she said.

Watching residents and medical students grow into confident, skilled clinicians and researchers is the most rewarding part of Dr. Jiam's position. As a mentor, guiding a resident through a challenging surgical case or helping a student cultivate a meaningful research project is fulfilling and reminds her why she chose this leadership path.

Mentorship in surgery extends beyond teaching technical skills; it's about shaping the next generation of compassionate, resilient leaders.

As Dr. Jiam eloquently says: "Mentorship in surgery is a unique privilege... Through this, I learn from mentees as well, reinforcing my own growth as a clinician and educator." ■

Five Chief Residents Move On

The effects of the COVID-19 pandemic have dramatically created a once-in-a-century alteration in our ability to provide medical care," said Department Chair Andrew Murr, MD, in spring 2020. Shortly after, five new medical school graduates began their OHNS residencies under extraordinary circumstances at UCSF.

Those five, who concluded their residencies in July, are listed here with their current positions:

- **Jacquelyn Callander, MD** – Fellowship at Stanford in Rhinology and Endoscopic Skull Base Surgery
- **Shayan Fakurnejad, MD** – Facial Plastic and Reconstructive Surgery



From left: Drs. Fakurnejad, Gillard, Murr, Callander, Souza and Lindeborg.

Fellowship at Thomas Jefferson University Hospital in Philadelphia

- **Danielle Gillard, MD** – Cleveland Clinic Head and Neck Oncologic and Reconstructive Surgery Fellowship

- **Michael Lindeborg, MD** – Fellowship in Pediatric Otolaryngology–Head and Neck Surgery at the University of Washington, Seattle Children's Hospital

- **Spenser Souza, MD** – Fellowship in Facial Plastic and Reconstructive Surgery at the University of Michigan in Ann Arbor

Residency Class 2030

Ana Araujo, MD – Dr. Araujo earned her MD from Oregon Health & Science University, where she also completed a Master of Clinical Research. She conducted a randomized controlled trial evaluating the use of virtual reality for anxiety management in patients undergoing chemotherapy. During medical school, she also co-led the Introduction to Medical Spanish elective. Her research interests include head and neck cancer outcomes, medical education, and global health.



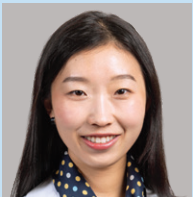
Lauren Tucker, MD, MS – A graduate of Columbia University with MS and MD degrees, Dr. Tucker was involved in the Student Medical Outreach Clinic throughout medical school. She conducted research to study the associations between age-related hearing loss, cognition, mental health, and socialization and helped with the protocol and pilot of an NIH R01-funded Early Age-Related Hearing Loss Investigation randomized controlled trial.



Melissa White, MD – While earning her MD from Duke University, Dr. White was a leader in the Duke Medical School Diversity, Equity and Inclusion and Wellness Committees and the Duke Chapter of the Student National Medical Association. She also assisted with research in a community engagement-based project aimed to elicit perceptions and knowledge of head and neck cancer in the community.



Sophie Yu, MD – Dr. Yu earned her MD with Honors from Harvard Medical School. She served as a first author on multiple peer-reviewed publications and was instrumental in designing and developing both preclinical and clerkship curricula for medical students. Her research interests include the inflammatory endotypes of chronic rhinosinusitis, the impact of environmental pollutants on the upper airway, chemosensory disorders, and medical education.



Connie Zhou, MD – While earning her MD from the UCSF School of Medicine, Dr. Zhou was student body president and the medical student representative to the board of the Association of Surgical Education. She performed head and neck squamous cell carcinoma spatial proteomics research as a member of the Spitzer lab, and she piloted UCSF OHNS' head and neck cancer community outreach.



Incoming Fellows

Weston Niermeyer, MD, MPH
Head and Neck Oncology Fellow



After earning his MD from The Ohio State University, Dr. Niermeyer completed his residency at George Washington University, where he simultaneously obtained an MPH in Global Health Program Design, Monitoring, and Evaluation. Dr. Niermeyer is a member of the Alpha Omega Alpha Honor Society, and his current research is focused on surgical curricula design and the use of process and outcomes measures for monitoring programs in low- and middle-income settings.

Autefeh Sajjadi, MD, MS
Facial Plastics and Reconstructive Surgery Fellow



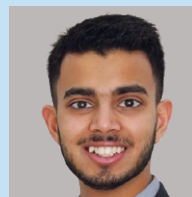
Dr. Sajjadi completed her Otolaryngology–Head and Neck surgery residency at the University of Minnesota after earning an MS degree from Ponce School of Medicine and an MD degree from Creighton University School of Medicine. As a resident, she earned a resident leadership award and an award for her research in clinical otology. She also worked on research projects aimed at identifying disparities in hearing screening practices in elementary schools.

Jennifer Silver, MD, MSc
Laryngology Fellow



Dr. Silver earned MD and MSc degrees and completed a residency in Otolaryngology–Head and Neck Surgery at McGill University. She was a representative on several committees throughout residency and was involved in teaching medical students, both as a senior medical student and as a resident. Dr. Silver has made significant contributions to the field of laryngology through her publications and presentations at national and international conferences.

Rajas Tipnis, MD FRCS
Pediatric Otolaryngology Fellow



After graduating with an MD from the Schulich School of Medicine and Dentistry at Western University, Dr. Tipnis completed his residency in Otolaryngology–Head and Neck Surgery at the University of Manitoba. During residency, he was actively involved in medical student teaching and in program improvement as a representative on the residency program committee. His interests include middle ear surgery for cholesteatoma and chronic ear disease and endoscopic management of pediatric airway pathologies.



Otolaryngology – Head and Neck Surgery
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Upcoming Events

Rat Microvascular Anastomosis Course

Friday, November 21, 2025, 7:30 am – 4:15 pm
Schindler Laboratory, Mission Center Building

OHNS Holiday Party

Thursday, December 11, 2025, 3:00–6:00 pm
2nd Floor West Lobby, Byer Hall, UCSF Mission Bay Campus

31st Annual Advances in Diagnosis and Treatment of Sleep Apnea and Snoring

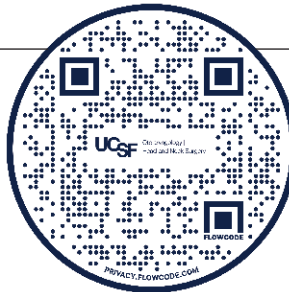
February 13-14, 2026, Hotel Nikko, San Francisco, California

Pacific Rim Update (Course #MOT26006)

February 14-17, 2026, Honolulu, Hawaii

*Join us in supporting UCSF
Otolaryngology – Head and Neck
Surgery as we push the boundaries of
research, educate the next generation
of leaders, and host impactful academic
events. Your philanthropic donation makes a difference!*

- **Host Educational Events & Lectureships:** Providing invaluable learning experiences for trainees, faculty, and the broader medical community.
- **Support Research Initiatives:** Driving groundbreaking discoveries that improve patient care and outcomes.
- **Fund Year-End Events & Celebrations:** Recognizing achievements and fostering a sense of community within our department.



HeadsUp!

FALL 2025 | VOL. 22, ISSUE 2

Department Chair, Editor-in-Chief:
Andrew H. Murr, MD

Department Communications Manager:
Yasmine Castañeda

Design: Laura Myers Design

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Contact Us

General Otolaryngology
Pediatric Otolaryngology – HNS
Otology, Neurotology and Skull Base Surgery
Rhinology and Sinus Surgery, Sleep Surgery
415/353-2757

Cochlear Implant Center **415/353-2464**

Facial Plastic and Aesthetic Surgery Practice
UCSF Medical Center **415/353-9500**

HNS – Facial Plastic and Post-Oncologic
Reconstructive Surgery, UCSF Helen Diller
Family Comprehensive Cancer Center
415/885-7528

Head and Neck Surgery and Oncology

Head and Neck Endocrine Surgery

Salivary Gland Center **415/885-7528**

Balance and Falls Center **415/353-2101**

Voice and Swallowing Center **415/885-7700**

Audiology **415/353-2101**

Bayfront Medical Building **415/353-9986**

Berkeley Outpatient Center **510/985-2000**

UCSF Health Redwood Shores Specialty Care
Clinic **415/476-7877**

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