SPRING 2026 | VOL. 23 | ISSUE 1

HeadsUp!

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

University of California San Francisco

Also in This Issue

OHNS to Launch Neurotology Fellowship

Neurotology sits at the intersection of microsurgical precision, auditory and vestibular science, and multidisciplinary care—a combination that demands highly specialized training. To meet this need, UCSF OHNS will launch a fellowship program in neurotology and expects to welcome the first fellow in July, 2027.

Charles Limb, MD, will serve as program director, and Y. Song Cheng, MD, will be deputy program director of the new fellowship, which has been approved by the Accreditation Council for Graduate Medical Education (ACGME).

In recent years, the Division of Otology, Neurotology, and Skull Base Surgery has grown steadily, both clinically and academically. Multidisciplinary collaborations with Audiology, Neurosurgery, Neuroradiology, and Oncology have matured, creating an ideal environment for advanced subspecialty training.

Recognizing the unique breadth of expertise required in neurotology, the fellowship is being designed to provide comprehensive exposure to advanced ear surgery, lateral skull base surgery, and vestibular medicine.

"By integrating high-volume surgical training, vestibular medicine, and research, we aim to create an exceptional training environment and a launchpad for future leaders in our field," Dr. Limb said.

"The fellow will train alongside experts in neurosurgery, oncology, audiology, and vestibular physical therapy, gaining a truly collaborative experience. They will also be at the forefront of scientific advancement through UCSF's strengths in research and technology development," he added.

What the Fellow Will Experience

The fellowship is being built around three core pillars: clinical training, research, and multidisciplinary engagement.

Clinically, the experience will be centered on a concentrated, high-volume surgical practice. This includes both microscopic and endoscopic otologic surgery, as well as one of the busiest cochlear implantation programs in California. Fellows will be involved in the management of complex skull base and vestibular disorders, advanced head and neck cancers, and facial nerve pathologies.

Continues on page 4

Message from the Chair

The Value of Science and Research

UCSF was once again the #1 ranked school of medicine in the country for NIH grants, a position it has held for many years. As always, the quality and power of research at UCSF is extraordinary. In that vein, our department has been restructuring its own research footprint due to recent retirements of elite and amazing scientists. I am very pleased that Zach Steinhart, PhD, who works with CRISPR technology, has just joined our department from the Gladstone Institute. His new lab is in the Diller Building of the UCSF Helen Diller Family Comprehensive Cancer Center, an NCI-designated center. We hope to have several other new scientists in the department in the near future – both in the Cancer Center and in the Coleman Central Auditory Processing Laboratory in the Sandler Building at Mission Bay.

Andrew H. Murr, MD

Departmental authors have published several new books. Daniel Knott and Rahul Seth finished their landmark textbook, *Gender Affirming Surgery of the Face and Neck*, which was published by Springer and is available now. Jennifer Grandis has a book available for preorder: *Harsh Medicine: Why Women Can't Get Ahead in Science and Health Care.* I also must mention Jeffrey Sharon's new book, *The Great Balancing Act*, which is widely available.

As you will read elsewhere in this issue of *Heads Up!*, UCSF is starting an ACGME-approved Neurotology Fellowship, thanks to the hard work of Charles Limb and the rest of his division, especially Song Cheng. This fellowship is in addition to those we offer in Facial Plastic and Microvascular Surgery; Head and Neck Oncologic Surgery; Laryngology and Professional Voice and Swallowing; and Pediatric Otolaryngology.

Last fall we welcomed Michael Chow, MD, to the department. Michael is a head and neck oncologic surgeon with expertise in microvascular free flap reconstruction. After completing residency training in OHNS at NYU, Michael became one of our fellows last year. We are very pleased to see him join our faculty team in a seamless fashion.

Another recent addition to our faculty, Nikki Jiam, MD, is off to an amazing start in our Division of Otology/Neurotology. She was just named a Chen Scholar Award recipient.

This year's Otolaryngology match drew the highest number of applicants in recent history, which makes us appreciate even more how much it took for these incoming residents to get here. Please join me in welcoming Isaac Alter, MD, from Columbia University; May Gao, MD, from Duke University; Sarah Hughes, MD, from the University of Michigan; Rachel Kutler, MD, from Columbia University; and Hannah Weinstein, MD, from Columbia University.

We will be offering a number of CME course in the near future, and I urge you to please join us at one or more of the following: Bradley Marple, MD, from the University of Texas, Southwestern, will be our Sooy visiting professor on June 20, and Sam Selesnick, MD, from Weill Cornell Medical College, will be our Schindler visiting professor on October 1. The Pacific Rim Otolaryngology Update with Tripler Army Hospital will be held in February, 2027 at the Moana Surfrider and is now run by Charles Limb, Steve Pletcher, and Bovey Zhu. The UCSF/Penn Sleep Update will also be in February, 2027.

Finally, I look forward to seeing you at the Academy meeting in Los Angeles in October.

Warmly,
Andrew H. Murr, MD, FACS
Professor and Chair
UCSF Department of Otolaryngology – Head and Neck Surgery

UCSF Facilities Update

Construction cranes and hardhats are visible on both sides of the bay, with building projects in full swing.

A modernization project is under way at UCSF Benioff Children's Hospital (BCH) Oakland. The project includes the construction of a new administrative support building and a new hospital building.

On the Parnassus campus, construction is in progress for the UCSF Barbara and Gerson Bakar Research and Academic Building (BRAB), a state-of-the-art facility that will house the UCSF School of Nursing and research programs for cancer, microbiology, diabetes, immunology, and cell biology. Construction continues on the 15-story UCSF Health Helen Diller Hospital that is expected to open in 2030.

The UCSF School of Dentistry will relocate to 409 Illinois Street in Mission Bay. The new site will become a modern center for collaborative education and offer expanded, state-of-the-art dental care for San Francisco.

Nearby, on central waterfront land, workers are busy transforming the former Potrero Power Station into a new seven-story life sciences and cancer center.

Two other legacy facilities in San Francisco – the former Saint Francis and St. Mary's hospitals – have been renamed as Hyde Hospital and Stanyan Hospital respectively, reflecting their integration into UCSF Health. ■

Power Station *Helen Diller Hospital* *Hyde Hospital*

BCH Oakland *Stanyan Hospital*

BCH Oakland Admin Building *BRAB*

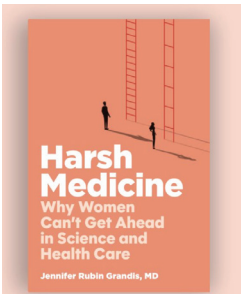
OHNS Experts Publish Two New Books

Jennifer R. Grandis, MD

Dr. Grandis Sheds Light on Barriers to Career Growth of Women Physician Scientists

Jennifer Grandis, MD, will discuss her journey to becoming an author and her new book, *Harsh Medicine: Why Women Can't Get Ahead in Science and Health Care,* when she speaks to the Commonwealth Club World Affairs on July 6.

Dr. Grandis, the American Cancer Society Professor of Otolaryngology and the Robert K. Werbe Distinguished Professor in Head and Neck Cancer, says that large numbers of skilled, highly trained women go to work every day in the United States. They are very good at their jobs and bring passion to what they do. And yet, once they get to work, many of those same women can expect to face a numbing routine of behaviors that belittle them and dismiss their expertise.



This phenomenon is explored in *Harsh Medicine,* which Johns Hopkins University Press will publish in July but is available now for pre-order. The book is the culmination of a qualitative research study where Dr. Grandis interviewed more than 100 men and women in academic medicine at over a dozen institutions, focusing on the leaking pipeline of women in her profession. She interviewed experts in their field about what they experienced and how they successfully navigated tough work environments.

The book examines why some women, who on paper should have been successful, gave up on their career ambitions because of sexism, and/or lack of access to resources and power. Among examples Dr. Grandis explores are women who were hired to run departments at universities, but when they started their jobs, they found they did not control their budgets and needed their supervisor – a man – to approve purchases and department changes.

Although *Harsh Medicine* focuses on academic medicine and science research labs, it has a universality to it where all women, no matter what their profession or circumstances, might see themselves in its pages. Dr. Grandis, who has experienced sexual harassment in her own workplaces, knows that just reporting on the problem is only half of the equation. *Harsh Medicine* offers resources and solutions, and it gives readers hope that they still might be able to shock the system and effect great change in the workplace, making it more egalitarian for women and men alike.

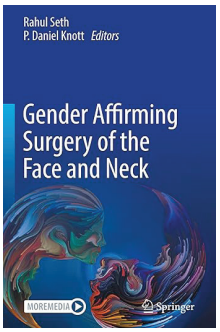
"I am grateful for all of the support as I continue on this journey. The topic can be uncomfortable but it is not impossible to solve. We need to find a way to listen to understand. The talents of half of our colleagues are too important to squander," Dr. Grandis said. ■

P. Daniel Knott, MD

Dr. Knott Addresses Gender Affirming Surgery

Amid a growing recognition of the endemic barriers to care facing transgender and gender diverse (TGD) individuals, there perhaps has never been a more appropriate time for the publication of a book wholly dedicated to gender-affirming surgery. That is why P. Daniel Knott, MD, and Rahul Seth, MD, edited "Gender Affirming Surgery of the Face and Neck," the first textbook published on the topic.

Comprising more than 20 chapters authored by nearly 50 experts in their respective fields, the book provides the accumulated wisdom collected from the thought leaders within the gender-affirmation care community. Published by Springer Verlag, the book is divided into four sections, with the most up-to-date descriptions and essential information on the subject.



Dr. Knott is a professor and Dr. Seth is a former associate professor in the Facial Plastic, Aesthetic and Reconstructive Surgery Division of OHNS. Several years ago they undertook this project, with a commitment of bringing together in a single volume the perspectives of not only surgeons, but experts from all of the fields relevant to the patient seeking gender affirmation.

Section 1 covers essential concepts in gender affirming care, including concepts of gender identity, hormone therapy, and medical care. Section 2 focuses on the face and covers the concepts of attractiveness and reviews the surgical options for facial feminization. Section 3 is dedicated to vocal affirmation/speech therapy, and Section 4 covers extra-facial gender affirmation. The book relies on as much evidence as exists in making its arguments for a rational, caring, and professional care program for TGD individuals.

Dr. Knott notes that while gender-based stereotypes slowly erode and popular opinion continues to evolve, it is believed that approximately one percent of the population self-describes as transgender and gender diverse. Buoyed by the creation of the World Professional Association of Transgender Healthcare, societal understanding and acceptance of TGD individuals has progressed in fits and starts.

Legal protections and insurance reform have provided expanded coverage for gender-related health care. Nevertheless, the lack of encompassing federal legislation has led to the adoption of a patchwork of state-based legislative guidelines. It has been estimated that there are over 1.5 million TGD individuals with a demographic distribution covering every city and community throughout the USA. Many of them may be able to enjoy expanded access to care, but many others continue to struggle to overcome barriers to access. ■

Neurotology Fellowship

Continued from page 1

There will also be dedicated training in vestibular medicine under the mentorship of Jeffrey Sharon, MD, an internationally recognized leader in vestibular science, and an accomplished otologic and skull base surgeon.

From a multidisciplinary perspective, the fellow will attend sessions of the Lateral Skull Base Tumor Board, the Challenging Otology and Audiology Case Conference, and Cochlear Implant Meetings, along with participation in collaborative surgical cases involving neurosurgery and other specialties.

Research opportunities will span both clinical outcomes and translational auditory science. Areas of focus being explored include the application of artificial intelligence and large language models in medicine, cochlear implant performance, vestibular disorders, outcomes of skull base surgery, device innovation, and neural processing of sound. With dedicated mentorship and strong institutional infrastructure, meaningful scholarly contribution will be expected over the two-year training period.

"We intentionally structured this fellowship to expose trainees not only to current best practices, but also to emerging technologies and scientific concepts that will shape the future of hearing restoration and skull base surgery. Understanding the science behind what we do strengthens surgical judgment and lays the foundation for continued innovation," said Dr. Cheng.

Mentorship and Career Development

In addition to close collaboration with the fellowship directors, mentorship will be provided by a diverse group of faculty, including Steven W. Cheung, MD; Nicole Jiam, MD; Jeffrey Sharon, MD; Aaron Tward, MD, PhD; and Dylan Chan, MD, PhD, as well as neurosurgical collaborators Philip V. Theodosopoulos, MD, and Ramin Morshed, MD. This breadth of mentorship will ensure exposure to different perspectives and approaches as well as individualized guidance for the fellow.

"We have high expectations for clinical excellence and technical rigor, and we aim to provide a broad perspective on modern neurotology techniques, with a strong emphasis on academic development," Dr. Limb said.

With diverse academic opportunities, fellows will be expected to engage in research, publish in scholarly journals, and present at national conferences. By the end of the program, graduates will be well prepared not only to perform complex otologic and skull base procedures, but also to contribute meaningfully as confident surgeons, engaged educators, and innovative scientists.

Candidate Qualifications

"We will be interviewing candidates this summer. We are seeking a fellow who values patient-centered care and exemplifies intellectual curiosity, humility, teamwork, and a strong commitment to advancing the field," Dr. Cheng said.

As they approach the inaugural year, Drs. Limb and Cheng are particularly excited to work with an individual who is collaborative, adaptable, and motivated to help shape the program's culture.

Looking ahead, they envision the fellowship becoming one of the most sought-after training opportunities for the next generation of academic neurotologists.

"Ultimately, the true measure of success will be the enduring impact our fellow has on their patients and on the specialty as a whole," Dr. Limb said.

A Generous Gift

The launch of the Neurotology Fellowship was made possible through the generosity of Mr. Tom Holliday and Mrs. Susan M. Windemuth, whose donation was inspired by their late friend, Valerie Atikian, of San Francisco.

"We extend our sincere gratitude to Tom and Susan for their support in bringing this program to life," Dr. Limb said. ■

UCSF Recognizes OHNS Faculty

Nicole Jiam, MD

Nicole Jiam, MD, is an awardee of the UCSF Chen Scholars program. She will receive a grant to support her project, "Artificial Intelligence/Machine Learning Guided Cochlear Implant Rehabilitation: Early Trajectory Modeling to Personalized Aural Neuroplasticity." Dr. Jiam was chosen from a pool of over 100 UCSF junior faculty who applied for this highly competitive grant. The award will help advance efforts at UCSF OHNS in related translational research. ■

Alyssa Civantos, MD

Garani Nadaraja, MD

Alyssa Civantos, MD and Garani Nadaraja, MD received the Exceptional Physician Award from UCSF Health. They exemplify excellence in otolaryngology through skilled, compassionate, and equity-driven care. Dr. Civantos is a reliable, patient-centered leader and mentor committed to advancing health equity. Dr. Nadaraja is an innovative pediatric ENT leader who has expanded access to advanced care for children while advocating for families and modeling UCSF PRIDE values. ■

Dr. Brodie Examines Hearing Screening Methods Among Preschoolers

"Early childhood education is one of the most influential factors on overall health and socioeconomic outcomes," said Pediatric Otolaryngologist Kara Brodie, MD, whose clinical and research focus is on improving hearing loss identification and outcomes for deaf and hard-of-hearing children with the intention of improving developmental outcomes.

Prior to pursuing a career in medicine, Dr. Brodie studied public health at the undergraduate and graduate level which influenced her clinical and research focus on optimizing educational opportunities through earlier detection of hearing loss and understanding factors that influence decisions to pursue hearing loss interventions.

"As a part of the UCSF Children's Communication Center Research Team, we are focusing on multidisciplinary approaches of improving health care delivery to our deaf and hard-of-hearing patients," Dr. Brodie said.

Led by Dylan Chan, MD, PhD, and Program Coordinator Jenny Stephens, the research group is composed of otolaryngologists, audiologists, speech pathologists, educational liaisons, social workers, residents, medical students, and clinical research coordinators. Through monthly conferences, team members present their ongoing research to obtain feedback and collaborate on new research ideas.

Through her research, Dr. Brodie partnered with the San Francisco Department of Public Health and early childhood education sites to evaluate the effectiveness of a community-based preschool hearing screening program to identify late onset, progressive, and undiagnosed pediatric hearing loss.

"Preschool hearing screening can be critical to close the screening gap and help identify undiagnosed hearing loss that can often go undetected until clinic-based screening at age 4 or school-based hearing screening. This two-tiered screening program, using a combination of otoacoustic emissions and pure tone audiometry, has excellent screening completion rates among preschool age children, an age group that has been historically more challenging to test," Dr. Brodie said.

Yesai Park turning hearing screening into a game

Julianna Giammona preparing preschoolers for screening

That study was the foundation for an active clinical trial that is being led by Dr. Chan as principal investigator with Dr. Brodie as co-investigator. Funded by the Patient-Centered Outcomes Research Institute, Drs. Chan and Brodie are comparing two different screening approaches in the preschool setting.

"One of the main barriers to screening is the cost of the screening equipment. This raised the question: are there more affordable screening options that can be conducted in the preschool setting to improve access to screening?" Dr. Brodie said. She will be comparing screening results between using the expensive gold-standard OAE screening with an affordable investigational smartphone-based OAE device that could ultimately improve access for screening nationally and internationally. To evaluate this question, she has been awarded a Pilot Grant for Early Career Investigators funded by the Mount Zion Health Fund.

Dr. Brodie's other research studies have evaluated disparities in genetic testing for hearing loss, the impact of genetic testing on families' decision to pursue hearing interventions, barriers to access to care including the impact of telehealth therapy, and the effect of sound environment on language outcomes in deaf and hard-of-hearing outcomes.

"Being a part of this research team has been incredibly rewarding for the direct applications to improving hearing loss detection, intervention, and counseling for patients; the wonderful collaboration across disciplines; and mentorship opportunities for those interested in otolaryngology and pediatric care," she said. ■

The UCSF Children's Communication Center Team

Personal Reflections on Facial Trauma

By Tokunbo Ayeni, MD

I am a former military surgeon and a history enthusiast who became fascinated with the integration of medicine during times of war. Specifically, I was drawn to history surrounding facial trauma.

As such, my journey toward becoming a facial trauma surgeon started when I read an historical interpretation of the career of Dr. Harold Gillies, one of the first facial plastic surgeons. *The Facemaker,* by Lindsey Fitzharris, is a biography about the early career of Dr. Gillies and his experiences during the first world war, including the establishment of a special ward to provide pioneering plastic surgery to soldiers in Queen Mary's Hospital in Sidcup, England. The book details his challenges taking care of the injured, his call to improving the care of individuals with facial trauma, his subsequent hand in establishing the specialty of facial plastic surgery, and his creation of a collaborative and specialized team to help these patients.

The author highlighted that "while limb loss made men heroes, facial injuries transformed them into 'monsters' in the eyes of society." As I saw it, facial trauma patients immediately become vulnerable regardless of their demographics, socioeconomic

status, or other background factors. These patients will interact with their environment in an entirely new way, and in turn their environment will react to them in a different and most of the time negative way. I felt a calling toward these types of surgeries and wanted to have the skill to support these patients and help them get back to normalcy, at least on the surface.

During my training it was common for facial trauma patients who presented at the Ben Taub Hospital in Houston to be named "Ayeni specials" because I had gained a reputation for my interest in facial trauma and was a regular in facial trauma cases. My presence made it seem like I was attracting the trauma, however the real story is that I gravitated toward those trauma cases so I could learn how to properly care for those patients.

After residency, my career started as an otolaryngologist in the United States Air Force with time split between the Joint Base Langley-Eustis and the Naval Medical Center at Portsmouth in Virginia. I took part in curriculum development and chose to revamp the facial trauma program with new lectures, simulation labs, and cadaveric lab dissections. Involvement with the plastic surgery and oral and maxillofacial surgery departments allowed me to revamp the curriculum and start joint lectures with those departments.

I began taking facial trauma call for a local Level II trauma hospital and gained more insight into operating as a facial trauma surgeon in the community. That sharpened my surgical and nonsurgical skills within the community and helped me create more friendly infrastructure for facial trauma patients while improving access to postoperative care. Relying on mentors around

me during that time enabled me to continue to learn my craft and grow more passionate about the work. I joined the AO (Arbeitsgemeinschaft für Osteosynthesefragen) and began to attend virtual and in-person lectures to advance my knowledge and learn from the best in the field.

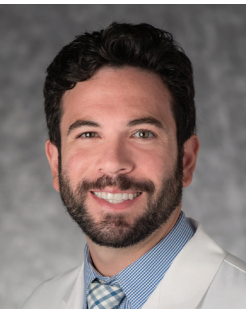
After joining the OHNS faculty at UCSF in July 2025, I voiced my interest and passion for facial trauma surgery, education, learning, and mentorship. Such pioneers in facial trauma as Drs. Andrew Murr, Andrew Goldberg and Daniel Knott welcomed me and challenged me to do just that. It is truly inspiring to be around other individuals who have a passion for what they practice.

Seeking mentorship from within the OHNS department and outside the department from plastic surgery and oral and maxillofacial surgery has expanded my knowledge and thought processes. With the help of Dr. Megan Durr and other leaders at Zuckerberg San Francisco General Hospital, we have started collaborative quarterly case conferences to further expand our respective knowledge to best succeed in the care of facial trauma patients. My long-term goal is to develop an educational homage to what Dr. Gillies developed in Sidcup and go beyond that by utilizing modern technology.

Facial trauma has changed since World War I: ballistic, incendiary, or explosive injuries rarely occur in the Bay Area. However, there are still formidable risks to the form and function of our faces: a tumble off a Lime scooter or an e-bike, an auto accident, or a violent crime, for example. Such incidents still deliver patients in their most vulnerable state to our county's general hospital, and I want to be one person within UCSF and the greater Bay Area who can advocate and expertly take care of these patients as they endure an extremely difficult period in their lives. ■

Smart Phone Technology to Aid in Understanding Meniere's Disease

Jeffrey D. Sharon, MD, and Yew Song Cheng, MD, are leading a study team that is using wearable technologies to seek an "Enhanced Understanding of the Meniere's Through Smart Data Collection During Vertigo Attacks," with funding from the American Hearing Research Foundation (AHRF).



Jeffrey D. Sharon, MD

Despite initial descriptions over 150 years ago, the cause of Meniere's disease is not known. It is clear that the disease causes inner ear damage, typically on one side, resulting in episodes of vertigo and progressive hearing loss.

Vertigo attacks occur randomly – during commutes, vacations, and at night, for example. It is extremely unlikely for a vertigo attack to occur in the clinic, however.

"In ten years of caring for a high volume of Meniere's patients, I have personally witnessed only one attack. This is one feature that impairs study of the disease. It is clearly important to understand the exact physiological changes that occur during attacks, but we haven't had the ability to do so. Until now," Dr. Sharon said.

"During a typical Meniere's attack patients experience hearing loss, vertigo, aural pressure, and tinnitus. In addition, there is nystagmus, an oscillating eye movement that corresponds to the sensation of vertigo. Presumably, the hearing loss that occurs is objective and would be able to be seen on an audiogram. In addition, vital sign changes likely occur, such as a fast heart rate during attacks," he added.

"With smartphones and wearable technologies, we can finally plan to understand the real time physiological changes that happen during these attacks," Dr. Cheng said.

Because iPhone technology tracks eye and head position as part of facial recognition, it facilitated the previous creation of an app for nystagmus detection. To record nystagmus, Drs. Sharon and Cheng have partnered with Jorge Otero Millan, PhD, a scientist who studies eye movements in the School of Optometry at UC Berkeley. During their trial the research team is using the nystagmus app in efforts to characterize nystagmus speed and direction for each Meniere's attack that occurs.

There are now several validated apps for hearing assessment, including a native app on the iPhone. That app pairs with Apple AirPods Pro to enable an accurate audiogram by assessing ear canal fit and the presence of background sounds. The AHRF grant allows the research team to give AirPods to study participants so that weekly audiograms can be produced during the trial as well as at several points during vertigo attacks.

Grant funds will also be used to provide Apple Watches to participants so the study team can collect data on heart rate, respiratory rate, daily steps, and stride length during vertigo attacks. This information will be useful for understanding the changes in activity that occur as a result of Meniere's attacks.

Finally, the study will use text messaging to survey participants and capture real-time symptoms during vertigo attacks. Subjects can then mark the start and end of each vertigo attack and gather data in their normal environment, which will enhance the accuracy of the collected information. ■

Robotic Cochlear Implant Surgery Comes to UCSF

Charles Limb, MD

Robotic technology is the latest advance in cochlear implantation, and Charles Limb, MD, began using the new technology at UCSF earlier this year. Dr. Limb, the Francis A. Sooy Endowed Professor of Otolaryngology-Head and Neck Surgery and Director of the UCSF Douglas A. Grant Cochlear Implant Center, is now using the iotaSOFT® Insertion System to improve the insertion of cochlear implant electrodes into the inner ear.

The cochlea represents the anatomical site where most forms of sensorineural hearing loss arise. Early work in cochlear implantation was performed at UCSF by Drs. Michael Merzenich, Robert Schindler, and Robin Michelson. During cochlear implant surgery, otologists perform a mastoidectomy and obtain surgical access to the middle ear space through a small tunnel called the facial recess. Through this opening, which is only a few millimeters in diameter, the surgeon is able to visualize the inner ear, or cochlea, using a surgical microscope.

Once the cochlea is identified, a tiny entrance point is created into the cochlea, and an implant electrode is carefully placed into the inner ear. This step has traditionally been performed as a fully manual process, with the surgeon trying to thread the wire electrode into the inner ear using only their hands, the goal being to achieve a complete insertion with minimal trauma to the delicate tissues inside the inner ear. This requires precise control and also a slow speed of insertion.

Within the past few years, otologists like Dr. Limb have begun using the iotaSOFT Insertion System to place the electrode into the inner ear. The robotic system was developed by IotaMotion, a company that grew out of efforts by surgeons at the University of Iowa. Research has shown that microscopic trauma inside the cochlea is reduced and hearing preservation outcomes are improved when using this technology for lateral wall type cochlear implant electrodes. ■

Otolaryngology – Head and Neck Surgery
2233 Post Street, UCSF Box 1225
San Francisco, CA 94115

ADDRESS SERVICE REQUESTED

First-class Mail
U.S. Postage
PAID
San Francisco, CA
Permit No. 8285

OHNS Events

Upcoming Events

Residents Research Symposium
Thursday, June 18, 2026 (Genentech, Byer Auditorium, 12:00PM – 5:00PM)

Sooy Endowed Lectureship
Guest: Bradley Marple, MD
Saturday, June 20, 2026 (Genentech, Byer Auditorium, 7:30AM – 12:30PM)

Year-End Sooy Reception
Saturday, June 20, 2026 (San Francisco Fairmont Hotel, 6:00PM – 10:30PM)

Boles Lectureship
Thursday, September 10, 2026 (Mission Bay Campus, 5:00PM – 6:00PM)

Schindler Lectureship
Thursday, October 1, 2026 (Mission Bay Campus, 5:00PM – 6:00PM)

UCSF Audiology Update XVI
October 9 & 10, 2026 (Marriott Fisherman's Wharf)

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!
SPRING 2026 | VOL. 23 | ISSUE 1
Department Chair, Editor-in-Chief:
Andrew H. Murr, MD
Department Communications Manager:
Yasmine Castañeda
Design: Documents and Media, Andre Thelemaque

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**

To join the OHNS Giving Challenge **please visit tiny.ucsf.edu/OHNSgift (or scan code above). For more information, contact Associate Director of Development Laura Hickey at 415-317-9516 or laura.hickey@ucsf.edu.**