

UCLA

Neurosurgery

FUNCTIONAL & EPILEPSY EDITION

Connections



DR. ARIA FALLAH PERFORMING A HEMISPHERECTOMY PROCEDURE FOR EPILEPSY TREATMENT

LEADERSHIP

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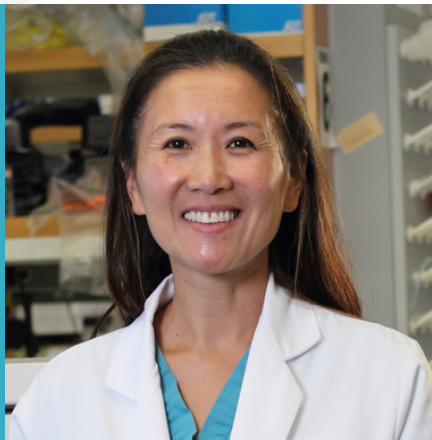
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FROM THE CHAIR



Linda Liou, MD, PhD, MBA

Professor & W. Eugene Stern Chair
Chair & Executive Medical Director
UCLA Department of Neurosurgery

Dear Colleagues and Friends,

Welcome to the Summer 2024 Edition of the UCLA Neurosurgery Connections newsletter!

As the W. Eugene Stern Professor, Chair, and Executive Medical Director of the Department of Neurosurgery at UCLA Health, I am delighted to share some recent developments in our department.

To begin, I'd like to send my sincerest congratulations to our graduating Residents, Drs. Joseph Bell, Sophie Peeters, and Bayard Wilson, as they embark on the next step in their neurosurgical journeys. Additionally, on behalf of the Department of Neurosurgery, I'd like to extend a warm welcome to our incoming intern class: Drs. Ryan Gallagher, Ryan Tripathy, and Bryan Zheng.

In this edition of the newsletter, we will highlight developments and innovations in our Functional and Epilepsy Division.

Our functional neurosurgeon-scientists are pushing scientific boundaries with their novel use of deep brain stimulation (DBS) for the treatment of a variety of complex conditions, including chronic low back pain (page 2) and treatment-resistant post traumatic stress disorder (PTSD) (page 3). Simultaneously, our physicians are improving the diagnosis and treatment of epilepsy, especially drug-resistant epilepsy, through the use of hybrid stereo-electroencephalography (SEEG) (page 5) and the development of an easily accessible online calculator to predict seizure freedom post-hemispherectomy (page 4).

Overall, our department continues to lead in groundbreaking research and clinical discoveries across its divisions, from advancements in navigated intraoperative ultrasound to neuromodulation to improve respiratory function in cervical spinal cord injury. Through numerous high-impact publications in top medical journals, our faculty and residents are expanding treatment possibilities and outcomes for all patients.

From all of us at the UCLA Department of Neurosurgery, we wish good health to you and your families!

Warm regards,

Linda M. Liou

TACKLING PAIN FROM WITHIN THE BRAIN

Novel Clinical Trial for Chronic Low Back Pain Seeks to Rewire Brain Circuitry Responsible for Pain

Although chronic low back pain is one of the most common pain disorders, impacting millions of individuals each year, it is one of the most challenging conditions to effectively treat.

When patients visit their doctor complaining of low back pain, physical treatments like spine surgery or spinal cord stimulation are commonly prescribed. Unfortunately, these treatments are prone to high failure rates.

“Pain is a complex phenomenon as it is not always linked to a structural abnormality or injury that can be fixed with spine surgery,” explains Dr. Ausaf Bari, who serves as an Associate Professor of Neurosurgery and the Director of Functional Neurosurgery at UCLA. “We do know, however, that chronic pain is associated with dysfunctional brain circuits, which require altering the brain rather than focusing solely on the spine.”



Functional magnetic resonance imaging (fMRI) reveals this dysfunction, suggesting that pain is capable of radically changing a patient’s brain circuitry. Despite this, current standard therapies to treat low back pain do not necessarily target the cognitive and emotional components of pain. To address this, Dr. Bari and his team decided to explore alternative methods for treatment that focus on the brain itself.

Deep brain stimulation (DBS) is a surgical procedure in which a small device, akin to a pacemaker, is implanted into a patient’s brain to help regulate brain signals. While DBS is commonly used for disorders such as Parkinson’s Disease, tremor, and epilepsy, it has also been shown to be beneficial in patients with psychiatric disorders such as depression. Since depression and pain influence overlapping brain circuits, Dr. Bari postulated that DBS of the depression target might be able to help with chronic low back pain as well.

The National Institutes of Health (NIH), through its HEAL (Helping to End Addiction Long-term) Initiative, awarded Dr. Bari with a \$4 million grant to investigate this hypothesis. Currently, Dr. Bari and his team are conducting a clinical trial to determine the efficacy of DBS for chronic low back pain.

The study involves implanting a DBS stimulator into the brain of patients suffering from chronic low back pain. After an adjustment period, the stimulator is either turned on or switched off without the patient or investigators knowing the settings. This process is known as double blinding, which aims to reduce potential bias when analyzing the results. During the trial, the stimulator will be alternated between off and on and then assessed for efficacy.

Although the trial is still in its infancy, Dr. Bari is hopeful that this approach will transform the treatment of chronic pain. If successful, DBS could emerge as an effective and long-lasting treatment not only for chronic low back pain, but for other chronic pain disorders.

To learn more about Dr. Bari’s clinical trial utilizing DBS for chronic low back pain, click [here](#).

PUSHING BOUNDARIES IN PTSD TREATMENT

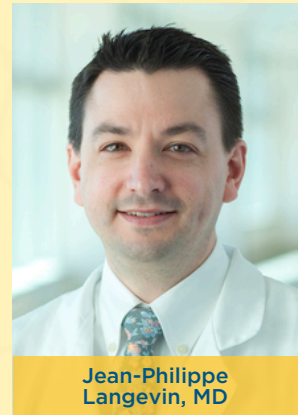
Breakthrough Therapy Offers Hope to Patients with Treatment-Resistant PTSD

Post-traumatic stress disorder (PTSD) is a complex and life-altering condition that can develop after experiencing an intensely traumatic event. While PTSD is commonly treated through medication or therapy, some individuals experience PTSD that is completely resistant to treatment. Further investigation is necessary to address the daily struggles these patients face without access to reliable therapies.

One critical part of the brain to understand and interpret when investigating PTSD is the amygdala, which is responsible for processing fear and emotions. In PTSD, a traumatic event can cause the amygdala to work itself into overdrive and lead to a prolonged hyperactive response to triggering stimuli. Despite this inextricable relationship, the neurophysiological mechanisms in the amygdala that underlie PTSD are still poorly understood.

To further clarify these mechanisms, Dr. Jean-Philippe Langevin, Associate Professor of Neurosurgery at UCLA and Chief of Neurosurgery in the Greater LA VA Healthcare System, along with a multidisciplinary group of other researchers, recorded electrical signals over the course of one year in the brains of two participants with PTSD. Both participants were previously implanted with amygdala electrodes for the management of treatment-resistant PTSD.

The researchers began by elucidating the patients' baseline electrophysiological responses to challenging and adverse states by exposing them to a series of unpleasant paradigms. As the participants experienced the negative stimuli, the researchers found selective increases in amygdala activity.



Jean-Philippe Langevin, MD

Subsequently, the researchers applied closed-loop neuromodulation, a type of treatment that changes nerve activity through targeted electrical stimulation, to the patients as a counterbalance to the increase in amygdala activity. By doing so, the researchers found a significant reduction in the patients' PTSD symptoms following one year of treatment. This demonstrates that elevated amygdala activity can be a worthwhile target for future PTSD therapies.

Dr. Langevin and his collaborators are currently conducting a clinical trial to further expand on these findings. To learn more about the clinical trial, click [here](#). To read the full article, click [here](#).

PREDICTING SEIZURE FREEDOM POST-HEMISPHERECTOMY

Online Calculator Improves Access to Predictive Data for Post-Hemispherectomy Seizure Freedom in Pediatric Patients

Hemispherectomy, or the surgical disconnection of one half of the brain from the other half and brainstem, is a type of epilepsy treatment for pediatric patients. While it is extreme, this procedure can be an integral step towards improving the lives of young patients with severe or drug-resistant epilepsy.

Despite the largely positive outcomes hemispherectomy can offer, there remains a significant amount of variation in seizure outcomes for patients post-hemispherectomy. This variability, along with an array of potential side-effects, can lead to significant anxiety for families deciding whether their child should undergo hemispherectomy surgery.

The Hemispherectomy Outcome Prediction Scale (HOPS), a tool spearheaded by Dr. Aria Fallah, Pediatric Neurosurgeon and Dr. Alfonsina Q. Davies Endowed Chair in honor of Paul Crandall, M.D., for Epilepsy Research at UCLA, and a multi-institutional team, was developed to better predict seizure freedom for patients undergoing a hemispherectomy. To make this groundbreaking resource more widely accessible, Dr. Fallah and his team set out to create an online calculator that would accurately predict the probability of seizure freedom post-hemispherectomy. For families faced with the uncertainty of a hemispherectomy, such a resource is invaluable.

To craft this calculator, the researchers returned to the data gathered during the original HOPS study. Using a regression model and the information gathered from these patients, they were able to predict the likelihood of post-hemispheric surgery seizure freedom at three time points: one year, two years, and five years. The researchers encoded their findings into a publicly accessible online calculator.

This calculator greatly improves accessibility to meaningful predictive data for physicians as they navigate treatment options with families facing the necessity of a hemispherectomy. With the introduction of this useful tool, families can now feel more confident about their child's post-hemispherectomy seizure freedom and quality of life.



Aria Fallah, MD

To read the full article, [click here](#).

To learn more about HOPS, [click here](#).

To access the online HOPS calculator, [click here](#).

ELUCIDATING DRUG-RESISTANT EPILEPSY

Utilizing Hybrid Stereo-Electroencephalography (SEEG) in the Evaluation and Treatment of Drug-Resistant Epilepsy

Epilepsy is a complex life-disrupting and sometimes life-threatening disorder that is characterized by recurrent seizures. While medication can be an effective way to treat epilepsy, about a third of epilepsy patients experience seizures that are resistant to medications, meaning they must turn to other methods of treatment. Surgery may be helpful for these patients if the brain network causing the seizures can be identified and localized.



Itzhak Fried, MD, PhD

Stereo-electroencephalography (SEEG), sometimes called depth electrode surgery, is a neurosurgical procedure that is used in cases where the epileptic network cannot be identified by non-invasive means. In an SEEG procedure, depth electrodes are implanted into the brain to monitor electrical activity. This electrical activity can clue physicians into the areas of the

brain producing abnormal signals and can help them pinpoint the location of a patient's seizures. This information can direct subsequent treatments, such as neuromodulation or resection.

UCLA has pioneered the use of depth electrodes in the brain for monitoring seizures. Specifically, UCLA developed special hybrid electrodes that, when combined with EEG contacts containing

flexible tiny microelectrodes, enable recording of brain signals down to the level of single neurons. These electrodes, known as the Behnke-Fried electrodes, have been the main source of single neuron recordings in the human brain in awake patients.

Dr. Itzhak Fried, Professor of Neurosurgery and Director of the Epilepsy Surgery Program at UCLA, and colleagues evaluated the utility and safety of hybrid SEEG when guiding epilepsy surgery. They also studied how hybrid SEEG could be used to gather data at the level of a single neuron to further the understanding of the mechanisms involved in drug-resistant epilepsy, as well as the processes involved in cognitive functions such as perception, memory, decision making, and action.

To do this, the researchers retroactively evaluated the outcomes of 218 patients that underwent SEEG procedures from 1993 to 2018 at UCLA. They concluded that hybrid SEEG is a safe and effective way to locate epileptogenic zones and successfully guide surgery. In addition, the study affirms the utility of hybrid SEEG when studying neuronal networks within the brain in conscious patients, an approach that could prove useful when investigating neuronal networks associated with other brain disorders.

To read the full article, click [here](#).

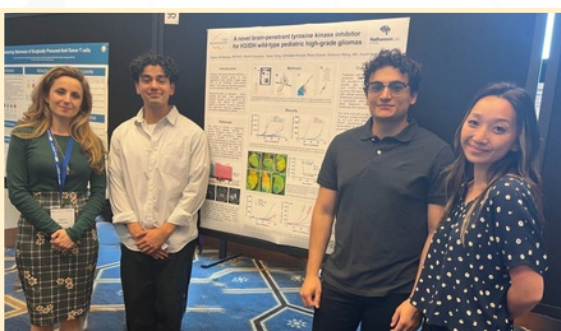
EDUCATION NEWS



Resident Research Day 2024

On Wednesday, June 5, 2024, the UCLA Neurosurgery Department held its fourth annual Resident Research Day! UCLA Neurosurgery Resident Research Day is an event that enables PGY-4, PGY-5, and PGY-6 residents to gain public speaking and presentation experience during a fun, lower-pressure event designed to mimic podium talks at national meetings. Alumni of the UCLA Neurosurgery residency program participate in the event as discussants and provide constructive feedback and advice.

Awards are presented during Resident Research Day to the top three research presentations. Congratulations to this year's winners: Dr. Wi Jin (Jason) Kim (Gold), Dr. Zoe Teton (Silver), and Dr. Maya Harary (Bronze)!



Research Announcements

Fourth-year Resident, Dr. Yagmur Muftuoglu, and her research team won second place at the UCLA Jonsson Comprehensive Cancer Center (JCCC) symposium for their project titled, "A novel brain-penetrant tyrosine kinase inhibitor for H3/IDH wild-type pediatric high-grade gliomas." Congratulations!



Grand Rounds

Over the course of the year, UCLA Neurosurgery invites a variety of distinguished neurosurgeons to give Grand Rounds lectures and spend the day with the Residents to build camaraderie and connection. Here, the Residents and Faculty are pictured with Dr. Richard Byrne, Chair of Neurosurgery at Rush University.

RESIDENT GRANTS & AWARDS



NATIONAL INSTITUTES OF HEALTH (NIH)—T32 INSTITUTIONAL RESEARCH TRAINING GRANT & L.B. RESEARCH AND EDUCATION FOUNDATION—H.H. LEE RESEARCH GRANT

“Investigating the Role of CEST MRI Positive Regions in Contributing to Recurrence of Glioblastoma”

Awarded to: Shivani Baisiwala, MD (Resident, PGY-3)



L.B. RESEARCH AND EDUCATION FOUNDATION—H.H. LEE RESEARCH GRANT

“Advanced Quantification and Prediction in Degenerative Cervical Myelopathy Using Machine Learning on Multimodal Data”

Awarded to: Matiar Jafari, MD, PhD (Resident, PGY-3)



L.B. RESEARCH AND EDUCATION FOUNDATION—H.H. LEE RESEARCH GRANT

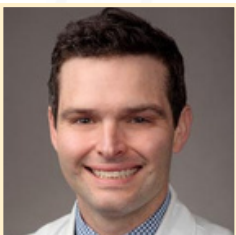
“Ligamentum Flavum Changes in Adolescent Idiopathic Scoliosis”

Awarded to: Peter Wu II, MD (Resident, PGY-3)



**SOCIETY OF NEUROLOGICAL SURGEONS (SNS)
Neurosurgeon-Scientist Training Program (NSTP) Grant**

Awarded to: Yagmur Muftuoglu, MD, PhD (Resident, PGY-4)



**AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS (AANS)—NATUS
RESIDENT/FELLOW AWARD FOR NEUROTRAUMA**

“Hyperosmolar therapy for acute traumatic spinal cord injury”

Awarded to: TJ Florence, MD, PhD (Resident, PGY-5)

INCOMING RESIDENTS



Ryan Gallagher, MD

Medical School: Perelman School of Medicine at the University of Pennsylvania

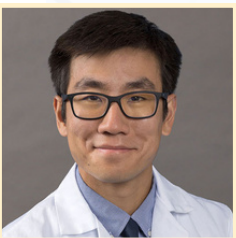
Ryan was born in Philadelphia and raised nearby in Cherry Hill, New Jersey. He attended Duke University to study biomedical engineering, where he found a passion for medical devices, electrophysiology, and signal processing in the heart and the brain. In medical school at Penn, these interests guided him to the field of neurosurgery and research in functional neurosurgery. Ryan spent an extra year in a neuroengineering lab sponsored by an NIH T32 grant researching clinical and iEEG markers of focal seizure onset in epilepsy patients. He is thrilled to join UCLA neurosurgery and hopes to continue research in functional neurosurgery and neural electrophysiology while receiving excellent training across the clinical sites. He enjoys cycling and peloton, is learning classical guitar, and wrote this just before scuba diving in Belize on his honeymoon.



Ryan Tripathy, MD

Medical School: David Geffen School of Medicine at UCLA

Ryan grew up in the suburbs of St. Paul, Minnesota as the third of four kids. Fascinated by the physiological underpinnings of cognition and behavior, she obtained her bachelor's degree in psychology with a minor in chemistry at New York University. Following college, she spent three years working in neurorehabilitation research at Weill Cornell Medicine. Her exposure to the study of life-changing interventions for individuals with chronic neurological disability during this position inspired her interest in neurosurgery. Through her interactions with neurosurgical faculty, residents, and patients while obtaining her MD at UCLA, her early interest quickly grew to steadfast commitment to the clinical and academic missions of the field. Her research interests include investigating the pathophysiology of cognitive, behavioral, and motor recovery following neurological insult to improve prognostication and intervention. Her clinical interests are vast, and she looks forward to exploring each subspecialty in greater depth throughout her residency.



Bryan Zheng, MD

Medical School: Warren Alpert Medical School of Brown University

Bryan is from Westborough, MA and studied applied physics at Cornell University before attending medical school at Brown. At Brown, he investigated the neurophysiologic basis of memory in epilepsy patients under the guidance of Dr. Wael Asaad. Bryan is profoundly grateful to have matched at UCLA. At UCLA, he plans to continue studying functional neurosurgery. In addition, he would like to investigate brain tumors in more depth to see where it leads him. Lucky for him, UCLA is filled with dedicated mentors in every subspecialty!

GRADUATING RESIDENTS



Joseph Bell, MD, PhD
Neurocritical Care Fellowship, UCLA

Dr. Joseph Bell grew up in Virginia Beach, Virginia, and attended Harvard College, graduating magna cum laude in Physics. He then enrolled in the Harvard Medical School Medical Scientist Training Program, completing his MD and PhD in Neurobiology. He is now completing his residency training in Neurological Surgery at the University of California, Los Angeles with a focused residency experience in Epilepsy and Functional Neurosurgery. During residency, Dr. Bell performed research applying quantitative analysis techniques to neurosurgical problems. Following graduation, he will remain at UCLA for an additional year of subspecialty training in Neurocritical Care, and continue working to use intracranial physiology to advance the care of critically ill patients. Dr. Bell is grateful to the faculty, co-residents, and patients at UCLA who have helped him to learn the craft of neurosurgery, and most of all to his wife and three young children for supporting him during training.



Sophie Peeters, MD
Skull Base Fellowship, MD Anderson Cancer Center

Dr. Sophie Peeters was born in Liège, Belgium and was raised around the world, including Belgium, the Netherlands, Chile, the U.A.E., and the U.S. She graduated summa cum laude from Rice University double majoring in Sports Medicine and Psychology, with a minor in Biochemistry and Cell Biology. She then went on to medical school at the University of Texas Southwestern Medical Center, where she also participated in the Global Health Exchange program for a year. Dr. Peeters is completing her residency training at the University of California, Los Angeles. She was a two-time recipient of the NIH R25 research grant. Dr. Peeters obtained further research funding from the NREF SBTF and the Glioblastoma Foundation to continue pursuing her project of cold atmospheric plasma as a potential therapeutic tool for malignant glioma. Dr. Peeters is an author on over 75 research publications. She completed an endowed fellowship at UCLA in neurosurgical oncology. After graduation, Dr. Peeters will be completing a Skull Base Fellowship at the MD Anderson Cancer Center.



Bayard Wilson, MD, MAS
Spine Fellowship, Rush University

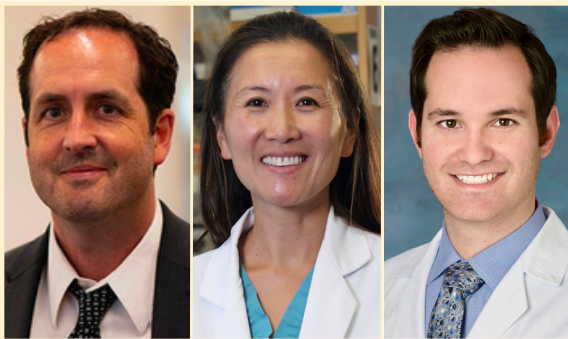
Dr. Bayard Wilson was born in New York, NY but grew up in various parts of the United States and abroad. He graduated from the University of Pennsylvania magna cum laude with a BA in Biology in 2010. He then attended the UC San Diego School of Medicine, where he graduated with both his MD and a master's degree in clinical research. He joined the UCLA Neurosurgery Residency Program in 2017 and developed an interest in spine surgery early on in his training. As a resident, he worked in Dr. Daniel Lu's lab studying the effects of electrical spinal cord stimulation on chronic spinal cord injury. Next year Bayard plans to continue pursuing his interest in spine surgery as a neurosurgical spine fellow at Rush University Medical Center in Chicago, IL. He considers himself incredibly fortunate to be graduating alongside two fantastic individuals in Joe Bell and Sophie Peeters, and to have had the opportunity to train under the guidance of the phenomenal faculty at the UCLA Neurosurgery Department.

FACULTY NEWS



Novel Low Back Pain Clinical Trial Patient Speaks About Experience

Ausaf Bari, MD, PhD, who serves as the principal investigator (PI) for the novel clinical trial that utilizes deep brain stimulation (DBS) to target chronic low back pain, sat down with a current clinical trial participant to speak about his story, struggle with low back pain, and experience with the trial. Watch the full interview [here](#).



High-Impact Research

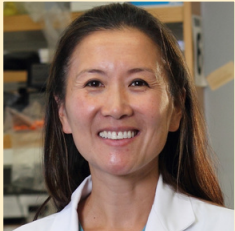
In a new article published in Nature, Robert Prins, PhD, Linda Liau, MD, PhD, MBA, Richard Everson, MD, and team evaluated the effectiveness of adding the TLR agonists, poly-ICLC or resiquimod, to autologous tumor lysate-pulsed dendritic cell (ATL-DC) vaccination in patients with newly diagnosed or recurrent WHO Grade III-IV malignant gliomas. Their findings suggest that combining ATL-DC with poly-ICLC can induce a polarized interferon response in circulating monocytes and CD8+ T cells, which may represent an important blood biomarker for immunotherapy in this patient population. Read the full article in Nature [here](#).



Grateful Patients

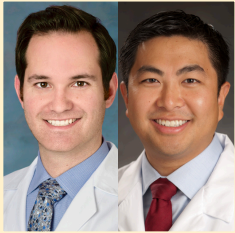
In honor of World Moyamoya Day, actress Keala Settle spoke about her experience with Moyamoya and shouted out Cerebrovascular Neurosurgeon Anthony Wang, MD and the UCLA Neurosurgery team. We are honored to provide top-notch, individualized care to all Moyamoya patients that visit us at UCLA Neurosurgery.

FACULTY GRANTS & AWARDS



**SOCIETY OF NEUROLOGICAL SURGEONS (SNS)
H. Richard Winn, MD Prize**

Awarded to: Linda Liau, MD, PhD, MBA



**UCLA JONSSON COMPREHENSIVE CANCER CENTER—STRATEGIC PLAN ALIGNED
PROJECT GRANT**

**“Expansion of the UCLA Brain Tumor Center Molecular Database to Enhance the
Access of Underrepresented Neurosurgical Oncology Patients in Los Angeles County
to Brain Tumor Clinical Trials”**

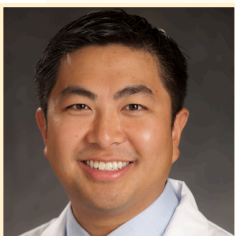
Awarded to: Richard Everson, MD and Isaac Yang, MD



TOWER CANCER RESEARCH FOUNDATION—CAREER DEVELOPMENT GRANT

**“Targeting infiltrating glioblastoma via pH sensitive visualization of tumor and pH
modulation through bicarbonate transporter SLC4A4”**

Awarded to: Kunal Patel, MD



**NORTH AMERICAN SKULL BASE SOCIETY (NASBS) RESEARCH GRANT & ACOUSTIC
NEUROMA ASSOCIATION RESEARCH GRANT**

**“Investigating the Role of Epithelial Membrane Protein 2 (EMP2) as a Biomarker for
Vestibular Schwannoma (VS)”**

Awarded to: Isaac Yang, MD



**INTERNATIONAL STEREOTACTIC RADIOSURGERY SOCIETY (ISRS)
Fabrikant Award**

Awarded to: Antonio De Salles, MD (Emeritus Professor)

NEW FACULTY

Welcoming Jeffrey Chiang, PhD to the UCLA Neurosurgery Faculty

Dr. Jeffrey Chiang is an Assistant Professor and Research Scientist in the Department of Neurosurgery. He completed his PhD in Cognitive Psychology at UCLA, where he developed algorithms for neuroimaging analysis, after which he held research positions in industry. He returned to UCLA as faculty in the Department of Computational Medicine, where he holds a joint appointment.

Dr. Chiang's research aims to bridge the gap between advances in artificial intelligence (AI) and medicine. His group has developed AI algorithms which are used in operational, critical care and perioperative settings, and he is particularly interested in how AI can enhance the understanding of recovery trajectories in traumatic brain injury and brain cancer. In addition, Dr. Chiang's group studies the limits of modern AI and their implications for healthcare equity and delivery.



Jeffrey Chiang, PhD

Learn more about Dr. Chiang [here](#).

Welcoming Janel Le Belle, PhD to the UCLA Neurosurgery Faculty

Dr. Janel Le Belle is a new adjunct associate professor. She has worked for several years on the etiology of brain overgrowth, abnormal sensory processing, and abnormal behaviors in neurodevelopmental mouse models. Her lab currently researches the shared brain functional circuitry, physiological (heart) responses, and cognitive function in mice and humans with sensory over-responsivity and post-concussion sensory hyper-sensitivity to identify if there are convergent mechanisms between disorders and across species. The lab is also pursuing research on the effects of neuro-inflammatory risk factors like Diabetes and prior Covid infections on sensory, motor, and cognitive outcomes following repeat concussion injury. Dr. Le Belle has both a research and academic interest in furthering our understanding of human consciousness and conscious sensory experience and interoception.



Janel Le Belle, PhD

Learn more about Dr. Le Belle [here](#).

COMMUNITY NEWS



UCLA Neurosurgery-LAUDS Health Care Career Day

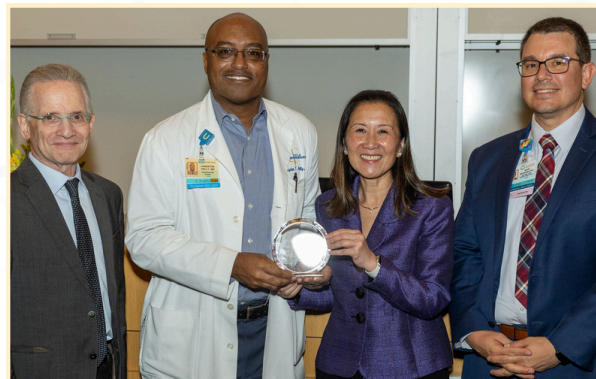
UCLA Neurosurgery had the distinct honor of hosting high school students from four high schools in the LAUSD system for an in-person health care career event. At this event, the students listened to talks given by healthcare professionals at UCLA working in a diverse selection of fields, from radiology to case management to nursing. The event aimed to demonstrate to the students that there are countless careers in the health field and to spark connection and interest.

Over the past year, the UCLA Neurosurgery Department has partnered with the LAUSD to deliver a series of lectures to high school students online. The topics centered on Neuroscience and were given by a variety of researchers and clinicians from UCLA. To learn more about the event and partnership, visit our EDI [website](#).



Recognition of Excellence

The UCLA Neurosurgery Department received the inaugural Justice Equity, Diversity, and Inclusion (JEDI) Impact Award from the David Geffen School of Medicine at UCLA. The JEDI Impact Award recognizes the department that had the largest demonstrated impact in six EDI-related domains, including people, climate, structural equity, professional development/education, community engagement, and equitable patient care.



APPOINTMENTS

Scheduling an Appointment as a Patient

To make an appointment with a UCLA neurosurgeon, please call 310-825- 5111 or visit [our website](#) for more information.

For information about spine related conditions and treatments, visit the [UCLA Spine Center in Santa Monica](#).

Over the past several years, UCLA Health has been dedicated to making services more accessible to patients outside the immediate Los Angeles area. To make a Telemedicine appointment with a UCLA neurosurgeon, please visit [our website](#) or call 310-825-5111.

Referring as a Healthcare Professional

Our partnership with health professionals in the community is key to our success at UCLA Health. Registered nurses and referral coordinators are available to assist referring physicians. Case managers can access services at UCLA Health through the toll-free UCLA Physician Referral Service phone line 1-800-UCLA-888 (825-2888). Visit [our website](#) to learn more.

GIVING

Thank you for your interest in supporting the UCLA Department of Neurosurgery. Donations help fund innovative research that has the potential to alter patients' lives. We are grateful for your life-changing generosity.

[**Donate Now**](#)

If you would like more information, please contact:

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