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Message from Desert Horse-Grant

Dear UCLA Health Community and Supporters,



UCLA Health achieved important innovation milestones during the past quarter, including the support of Health Records on iPhone®. These records combine information from hospitals, clinics and the existing Apple® Health app to make it easy for patients to see their available medical data from multiple providers, whenever they choose. We are committed to empowering patients, and now offer anytime access to their medical records from all UCLA Health hospitals and clinics through the myUCLA-Health web or mobile applications.

Another important innovation milestone happened in July 2018, when UCLA Health was certified to provide all FDA-approved CAR T-cell therapy to treat certain blood cancers. This certification allows us to provide tisagenlecleucel (Kymriah®) CAR T-cell therapy for children and young adults who have B-cell precursor acute lymphoblastic leukemia (ALL). This is an expansion of the initial program launched in February 2018 for adult patients with non-Hodgkin's Lymphoma.

Earning this clinical certification is step toward achieving our goal to become one of the few centers in the nation to offer all FDA-approved CAR T-cell therapies, as well as many clinical trials. This makes UCLA Health the destination of choice for patients receiving immunotherapy and other cellular therapies.

On a personal note, during National Hispanic Heritage month, I was given the opportunity to offer the opening keynote for the first annual SaludConTech Symposium, "Health Innovation in the Latinx Community." It was hosted by SaludConTech, Manos Accelerator and Google Developers on October 5, 2018, and held at the Google office in Venice, CA. The conference aimed to create a network of thought leaders to spur new ideas and connections among work involving health technology and co-design as well as health equity, health disparities and public health as they relate to Latinx/minority health. It was designed to increase awareness and appreciation for these issues with the hope of catalyzing ideas that will lead to improved care for the underserved. Another goal was to leverage accessible technology to create innovative solutions that will improve the health of Latinx and other underrepresented minority populations, regardless of geographic obstacles and borders.



Our physicians, nurses, clinical care teams and researchers at UCLA Health and the David Geffen School of Medicine at UCLA have in-depth expertise with advancing novel therapies, medical technologies and the latest clinical care offerings.

To see our expertise at work, review the Innovation and Entrepreneurship spotlight on pages 37-38 of Dr. Kelsey Martin's Annual Dean Report: <https://medschool.ucla.edu/workfiles/Site-System/2018-Annual-Deans-Report-Final.pdf> — and enjoy more UCLA Health innovation highlights in the coming pages. Feel free to contact me at dhorsegrant@mednet.ucla.edu to submit a future newsletter feature.

Desert Horse-Grant
Senior Director, UCLA Health Research and Innovation

INNOVATION AWARDS, COMPETITIONS, HONORS

UCLA Mattel Children's Hospital Named One of Nation's Most Innovative

Parents magazine has named UCLA Mattel Children's Hospital one of the most innovative children's hospitals in the United States. The magazine surveyed more than 150 member hospitals of the Children's Hospital Association to identify those that were leaders in medical advancements, research, family support and technological innovation. UCLA Mattel Children's Hospital was one of only 20 pediatric hospitals in the country — and the only center in California — to receive the distinction for 2018.

“In addition to the medical advances in pediatric cancer and stem cell gene therapy, UCLA Mattel Children's Hospital prioritizes the comfort of the patient and family,” said Liz Vaccariello, editor-in-chief of *Parents magazine*. “The hospital established a family dinner program, partnered with a community group to provide a summer camp experience and started a unique initiative that makes it easier for hospitalized kids to get a good night's rest.” The list of most innovative children's hospitals appears in the October issue of *Parents magazine* and online at <http://www.parents.com/hospitals>



FDA Grant Awarded to UCLA Health and Collaborators for MedTech Innovation



UCLA Health joins the University of Southern California (USC) and Children's Hospital Los Angeles (CHLA) to support and expand the Southern California Consortium for Technology and Innovation in Pediatrics (CTIP). CTIP is an FDA-funded Pediatric Device Consortia (PDC) dedicated to promoting and advancing the commercialization of pediatric medical devices. It was established to address the most important component missing from pediatric device innovation: simultaneously engaging clinicians, engineers, regulators, hospital administrators, patients and the business community in the processes of technology assessment and development.

Dr. Daniel Levi and Desert Horse-Grant are members of CTIP's steering committee. They will provide the Consortium with strategic guidance as well as access to business, financial, regulatory, reimbursement, engineering, scientific, clinical and intellectual property expertise. The duo will also provide resources to help develop and commercialize pediatric medical devices. The proposed new program, known as the West Coast CTIP, will be able to offer several \$50,000 awards a year for both direct or indirect services to inventors with concept to commercialization milestones. It will also expand resources to inventors through partnerships with the major pediatric academic centers on the West Coast.

Dr. Levi is a member of the the [UCLA Children's Discovery and Innovation Institute \(CDI\)](#). The CDI was founded to enhance the culture for innovation and groundbreaking collaborative research spanning from molecule to community. (Please link the words at the beginning to the CDI site).

VentureWell Grant for Sustainable Design and Prototyping in Medical Technology Innovation awarded to UCLA Biodesign Program

UCLA Biodesign received funding to support the development of a new curriculum for sustainable practices in medical device design. The rising global market segment of disposable medical components and supplies, as well as the need for life cycle assessments that encapsulate both sustainability and clinical utility early in the product development process are what motivated the new curriculum. Awardee Dr. Jennifer McCaney has partnered with several leading medical device materials manufacturers to execute this initiative, including W.L. Gore & Associates, Inc. and RAUMEDIC Inc.



UCLA Computer Science Innovation Fund Winner



The 2018 Computer Science Innovation Fund Pitch Day competition was held in late May at California NanoSystems Institute at UCLA, hosted by the UCLA Technology Development Group ([TDG](#)), and sponsored by [Bow Capital](#) and [Osage University Partners](#). The keynote was given by David Shadpour, founder and CEO of [Social Native](#).

The winner of the 2018 Computer Science Innovation Fund is the UCLA team behind “Automated and AI-integrated live cell tracking”

— Ms. Madhuri Suthar, Prof. Bahram Jalali, Prof. Alexander Hoffmann and Dr. Cejo Konuparamban Lonappan. Their company is developing an automated software tool that delivers all the necessary functionality to analyze time-lapse microscopy videos. It works by identifying cells in each frame and tracking the identified cells between frames with high accuracy and minimal human intervention. The tool also provides information about the velocity and trajectory of each cell, which is useful for computational biologists to gain insights about the biological behavior of each cell.

INNOVATION IN PATIENT AND SYSTEMS SERVICES

Smartphones for Good

Health Records on iPhone® App Available to UCLA Health Patients



UCLA Health now supports Health Records on iPhone (data is encrypted and protected with the user’s iPhone passcode, Touch ID or Face ID) and through the MyUCLA-Health portal on web and mobile. Previously, patients’ medical records were held in multiple locations, requiring patients to log into each care provider’s website and piece together the information manually. Apple® worked with the healthcare community to take a consumer-friendly approach and created Health Records based on FHIR (Fast Healthcare Interoperability Resources), a standard for transferring electronic medical records.

“All data, especially health data, belongs to the patient,” said Dr. Michael A. Pfeffer, assistant vice chancellor and chief information officer for UCLA Health. “We want the patient experience to be as easy and welcoming as possible by providing additional options that best suit the patient’s

needs. With this innovation, patients now have another access point for all of their available UCLA Health and other participating health system data.”

Already, more than 400,000 patients engage in their care through the MyUCLAHealth portal. For more information about how to register for the MyUCLAHealth portal, please visit <https://my.uclahealth.org/MyChart/>. For more information on Health Records on iPhone, please visit: <apple.com/healthcare/health-records/>.

Using Mobile to Monitor Depression

Currently, mental healthcare providers rely on mostly subjective assessments for depression, like self-report symptom surveys. But remote monitoring of objective measures for depression enables more timely interventions. That’s why Depression Grand Challenge researchers and scientists are developing and refining an app to measure daily patterns and routines such as sleep patterns, physical activity and social interaction.

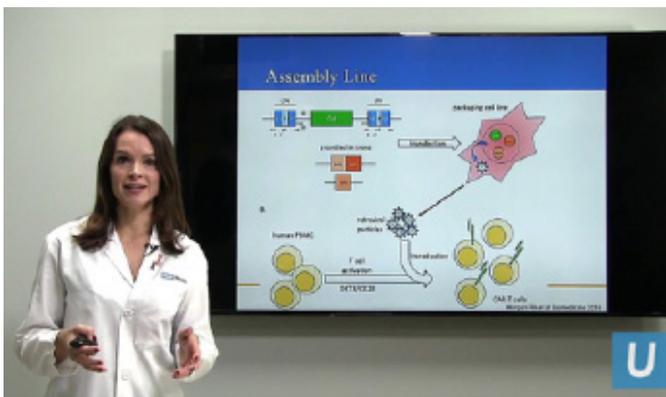


The Depression Grand Challenge team is focused on:

1. Tracking and monitoring objective measures that indicate early signs for, or actual symptoms of, depression
2. Evidence and internet-based cognitive behavioral therapy for those with low to moderate levels of depression and anxiety

This app in development is passive, meaning it runs in the background on a phone and captures objective measures that can be analyzed. It also creates automated notifications for clinicians when there are significant changes in activity patterns that might be a sign of depression symptoms — enabling earlier interventions. This app may also help inform genomic analysis because Depression Grand Challenge team members will be able to analyze how specific depression symptom patterns are connected with certain genetic traits.

Clinical Care Offering — Pediatric CAR T-cell Therapy



UCLA Health is now certified to provide the chimeric antigen receptor T-cell (CAR T) therapy, tisagenlecleucel (Kymriah®). Kymriah is an FDA-approved therapy for the treatment of relapsed or refractory B-cell acute lymphoblastic leukemia (ALL) in pediatric and young adult patients up to 25 years of age. It’s also used to treat relapsed or refractory diffuse large B-cell lymphoma in adult patients.

CAR T therapy is a form of immunotherapy. It involves the collection of a patient’s own T-cells (a type of white blood cell that is part of the immune system), reprogramming of the T-cells by viral gene transfer to express CARs, and then reinfusion of the reprogrammed T-cells back into the patient. The insertion of the CAR allows the reinfused T-cells to recognize and target cancer cells for elimination. The reprogramming of the CAR T-cells also includes modifications that promote CAR T-cell proliferation and persistence after infusion — factors associated with sustained remission. To learn more about CAR T-cell therapy at UCLA, [watch a video](#) of one patient’s story.

Kymriah is a very exciting new therapy for childhood cancer treatment because it provides an increased chance to cure patients with high risk B-cell ALL resistant to standard therapies. ALL is the most common childhood cancer. While multiagent chemotherapy regimens have achieved a high cure rate for pediatric ALL overall, there are still a significant number of cases in which a patient's disease is either resistant to treatment or relapses after treatment. Up to this point, these cases have been so difficult to treat that leukemia accounts for more childhood cancer deaths than almost any other cancer, second only to brain tumors. In contrast, Kymriah has been shown in phase 2 clinical trials to induce remission in the majority of patients with these cases of high-risk leukemia, with the earliest recipient of Kymriah still disease-free more than six years after her treatment.

However, CAR T therapy comes with serious potential side effects. Kymriah and Yescarta® have a significant risk of cytokine release syndrome (CRS), which is an inflammatory reaction that can occur after CAR T-cell infusion. It manifests on a spectrum from mild constitutional symptoms to severe multi-organ toxicity. Both CAR T therapies also carry a significant risk of serious neurological side effects. While they are generally temporary, these CAR T side effects can be severe enough to require intensive care. Those taking care of patients receiving CAR T therapy receive special training and patients are selected carefully to ensure the treatment is in the patient's best interests.

CAR T therapy continues to rapidly evolve, with work being done to expand the indications for CAR T therapy, enhance its effectiveness and improve its safety. In addition to providing all the currently approved CAR T therapies, UCLA Health and the UCLA Jonsson Comprehensive Cancer Center are actively involved in research to advance the development of CAR T therapy. This includes clinical trials for new indications and laboratory research to find new ways to improve cell therapy.

If you have any questions, or would like to learn more about this therapy, please do not hesitate to contact Dr. Joshua Sasine, clinical director, UCLA CAR T-cell therapy program, at jsasine@mednet.ucla.edu or Dr. James Ch'ng, director of pediatric CAR T-cell therapy, at jchng@mednet.ucla.edu.

Clinical Trial Offering — Gene Therapy Cancer Treatment

After more than five years in the making, an early-stage, phase I, gene therapy cancer clinical trial at UCLA has finally launched. This clinical trial uses an innovative immunotherapy approach to reprogram a patient's own immune system to fight cancer. In this First-in-Human research study led by UCLA Jonsson Comprehensive Cancer Center faculty member Dr. Antoni Ribas, a patient's own immune cells are genetically modified to learn how to recognize and eliminate cancer cells that have the targeted NY-ESO-1 protein.



While a number of studies use gene-modified immune cells to fight cancer cells, this experimental therapy pushes the envelope by also modifying the blood stem cells that make the immune cells. The combination of these two kinds of engineered cells are administered to the patient with hopes they land in the patient's bone marrow and make a new and continuous source of gene-modified immune cells. This would not only eliminate the cancer cells, but also prevent them from growing back.

This past June, the first patient enrolled in this clinical trial completed the initial treatment with these newly modified stem cells and immune cells. To begin the treatment, blood stem cells and immune cells were collected from the patient. The patient's cells were then modified and manufactured with a gene to locate the cancer cells that express the NY-ESO-1 marker. Following a course of chemotherapy to prepare the patient's body by making space in their bone marrow for the new cells, the gene-modified cells were injected back into the patient to see how the cancer would respond.

In order to find out where those newly modified cells would go, some extra tools were built into the genes to track the location

of the stem cells and make sure the cells do what they were programmed to do. The cells equipped with these trackers light up, indicating their location and potential function, during a PET (Positron Emission Tomography) scan.

This new cancer immunotherapy brings hope to patients with multiple myeloma and sarcoma in whom other options had not worked. “The ability to genetically program blood stem cells to become cancer-fighting immune cells has the potential to result in an immune cell therapy that could have long lasting cancer-fighting ability” said Dr. Ribas. However, only time will tell if these engineered cells will be able to create new durable immune fighting cells.

For more information about this trial and to discuss the screening process, please contact:

Clinical Research Coordinator Justin Tran by email at justintran@mednet.ucla.edu or by phone at 310-206-2090.

For more information, please visit:

<https://clinicaltrials.gov/ct2/show/NCT03506802>

To view the IRB approved video, please visit: <https://youtu.be/K1vaa7la9EI>

For more information about the sponsors and collaborators of this trial, please visit [CIRM](#), the [UCLA Broad Stem Cell Research Center](#) and the [UCLA-UCI Alpha Stem Cell Clinic](#), or the [Parker Institute of Cancer Immunotherapy](#).

INNOVATION AS A LEARNING HEALTH SYSTEM

Advances in Treatment Planning — 3D Printing and More Effective Cardiovascular Surgeries

By BRIANNA ALDRICH

A novel Congenital and Structural Heart 3D Printing program that is transforming treatment for patients facing complex, time-sensitive heart surgeries. The UCLA School of Dentistry’s new Innovative Digital Dentistry Systems (iDDS)— a school-wide effort to integrate advanced technologies into dental education, clinical care, community service and research — is teaming up with UCLA Health’s Division of Pediatric and Adult Congenital Cardiology and the Department of Radiology to create the program.

3D models are becoming the standard of care for complex interventions in the field of Congenital and Structural Heart Disease. Prior to this program, printing of the complex 3D models had been outsourced to private companies that required more than two weeks to print. The models were expensive and the turn-around time and print quality were less than ideal. This new collaboration takes advantage of UCLA’s existing world class expertise to produce realistic models within three days.

Dr. Sanjay P. Sinha, interventional pediatric cardiology and assistant professor in the UC Irvine and UCLA Department of Pediatrics, initiates the clinical cases. Dr. Sinha recently had a patient who suffered from Tetralogy of Fallot, a rare heart condition caused by a combination of four congenital abnormalities. The patient suffered a pseudoaneurysm, which could have resulted in serious, potentially fatal complications.

First, the patient’s MRIs were processed (segmented) into files combining hard and soft materials with colored zones defining the septum between the previous pulmonary homograft and the large pseudoaneurysm. This integral part of the process is managed by David Nelson and Marc-Anthony Lecky in the UCLA Department of Radiology’s 3D printing/manufacturing

section.

Second, realistic models were printed in specified colors and mechanical stiffness. The team in Dr. Ben Wu's lab is responsible for the models. Dr. Wu, a renowned pioneer and leading expert in 3D printing, is chairman and professor of advanced prosthodontics at UCLA Dentistry, and professor in UCLA's renowned engineering and medical schools. Dr. Wu is also the executive director of iDDS.

Within days, the realistic 3D model helped Dr. Sinha determine that the proximal landing zone was too large, and a bench test using sizing balloons proved that there would be no proximal seal if he were to try to cover this aneurysm in the cath lab. After a thorough evaluation of the 3D heart model with various surgery accessories, the team adjusted their approach and the surgical outcome was successful.

After only a few months, this new Congenital and Structural Heart 3D Printing program has already produced seven prints that have directly impacted patient care. These models were used to complement state-of-the-art 3D visualization tools in planning access to the lesion in question. Most importantly, they served as realistic models to test out potential interventions prior to surgery. The ability to offer accurate 3D models that match complex anatomy provides several benefits to the primary implanters. It gives them an unprecedented ability to enhance tactile familiarity for implanting transcatheter valves, attempting to close perivalvular leaks, assisting in surgical pre-procedural planning, and, more recently, assessing the fea-



sibility of a procedure that has never been done at UCLA.

"We are thankful for the generous donations that enabled us to acquire the most advanced 3D printers, along with interdepartmental support to combine the amazing expertise on campus. We are at a point where real-time 3D models of anatomical organs and parts can be processed rapidly," said Dr. Wu. "By staying at the cutting edge of 3D printing, we will continually improve technologies to positively impact patients' lives. This collaboration is a wonderful example of it."

"The most impressive thing about our newly launched Structural and Congenital Heart 3D Printing program has been the great teamwork between departments, divisions and campuses, as well as the rapid turnaround," said Dr. Sinha. "We were able to segment the information from the CT scan and print within two and a half days. A quick decision was key to the outcome of the surgery."

Performance Improvement Projects

The Performance Excellence team helps UCLA Health organize the institution around performance improvement goals and strategies. UCLA Health provides Lean training and coaching in a comprehensive eight-week program where staff and clinicians learn how to problem solve, engage frontline staff and structure projects to improve our patients' experience.

Recently a team worked on The Philipps Cardiac Monitor Replacement Project and produced a patient-centric process. It introduced new, innovative, wireless monitors that continuously and seamlessly monitor patients in CareConnect so staff don't have to burden patients by removing and replacing cardiac leads. The process also created efficiencies in how we manage equipment and inventory thereby reducing cost.

Another team worked on Utilization Review to improve our documentation, staff and patient satisfaction. It also boosted the organization's bottom line by reducing claim denials and increasing revenue by \$2,000,000. If you and/or your team would like to participate in performance improvement activities through Lean Academy, please contact Jerome Crawford at jcrawford@mednet.ucla.edu.

INNOVATION WITH BIOMEDICAL TECHNOLOGIES

Metabolism-focused Startup Aims to Shorten Time Between Scientific Insight and Therapies

One of the major challenges in modern medicine is the length of time required to turn new scientific insights into treatments that help patients. Enspire Bio is a virtual drug development company co-led between the Metabolism Research Theme at the David Geffen School of Medicine and UCLA's Technology Development Group. It hopes to speed the process between discovery and medicine.

"As scientists, we have a responsibility to cure disease," said Dr. Orian Shirihai, leader of the Metabolism Research Theme. "This company will help us accomplish that goal by ensuring researchers have the tools and the diverse expertise, not just the funding, needed to develop new drugs."

Traditionally, a new startup is launched once a potential therapy has been identified. The researchers behind it patent their intellectual property, then team up with outside investors and entrepreneurs who license the compound into a company that takes on the translational work to develop its therapeutic potential. With the new virtual portfolio model from Enspire Bio, much of the early translational work will stay on campus and the company will develop a portfolio of projects rather than just a single asset.

"Collaborating with industry to further develop UCLA technologies via a portfolio model such as this allows us to increase their value and also reduce risk for investors," said Earl Weinstein, PhD, senior business development officer in the Technology Development Group. "This model can incentivize industry and investors to take on early-stage projects and transition them to clinical use to benefit patients."

Enspire Bio was launched with two therapeutics projects licensed from UCLA. A number of additional projects are under discussion with the company. All projects receive a funding commitment designed to bring drugs to fruition. Ultimately, the company hopes to identify five to 10 projects within the theme that could lead to new therapies. As the company grows and demonstrates the success of the innovative virtual portfolio model, the hope is to inspire a broader adaptation of it.



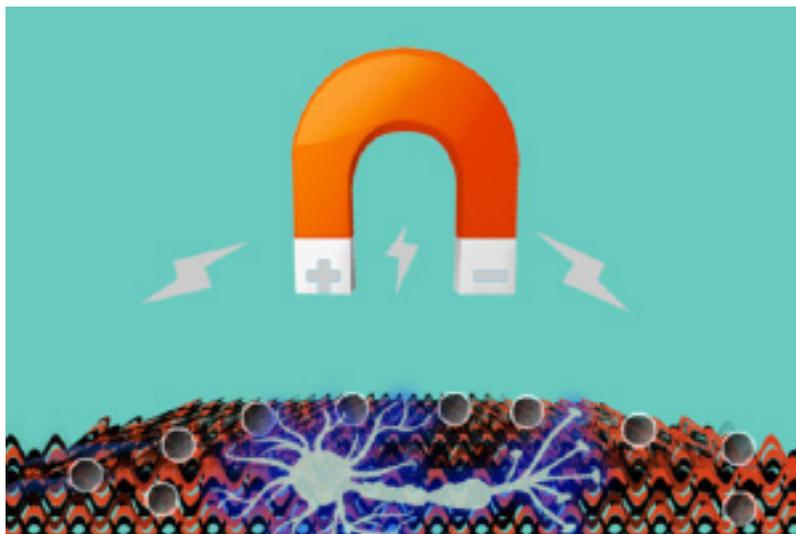
To read press release <http://newsroom.ucla.edu/releases/metabolism-focused-startup-aims-to-shorten-time-between-scientific-insight-and-therapies>

UCLA Bioengineers Use Magnetic Force to Manage Pain — Early Findings with Mechanoceuticals

UCLA bioengineers have demonstrated that a gel-like material containing tiny magnetic particles could be used to manage chronic pain from disease or injury. Broadly, the study demonstrates the promising use of biomechanical forces that push

and pull on cells to treat disease.

“Many mainstream modern medicine centers are using pharmaceuticals to make chemical or molecular changes inside the body to treat disease,” said [Dino Di Carlo](#), UCLA professor of bioengineering and the principal investigator of the study. “However, recent breakthroughs in the control of forces at small scales have opened up a new treatment idea — using physical force to kick-start helpful changes inside cells. There’s a long way to go, but this early work shows this path toward so-called ‘mechanoceuticals’ is a promising one.”



peutic pain relief.”

To make the magnetized gel, they started with a polymer, hyaluronic acid, a gel-like material found naturally in the spinal cord and the brain, which helps provide structural support to cells in those parts of the body. The material is also produced artificially and used in cosmetics and beauty products as a filler and moisture barrier. The researchers put tiny magnetic particles into the biocompatible gel. Next, they grew a type of primary neural cell — dorsal root ganglion neurons — in the gel.

In laboratory tests, they applied a magnetic field to generate a “pulling” force on the particles, which was transmitted through the gel to the embedded cells. The researchers found that the magnetically induced mechanical forces led to an increase in calcium ions in the neurons. This influx of ions indicates that the neurons responded to the forces. By increasing the force steadily over time, the researchers found that the neurons adapted to the continuous stimulation by reducing the signals for pain.

In the study, the team suggested that the magnetic gel could be tailored with different biomaterials for therapies for cardiac and muscle disorders. These types of biomaterials could also be used in scientific studies to emulate concussions or other traumatic events where cells in the body are impacted by significant physical forces.

UPCOMING PROPOSALS, MEETINGS AND DEADLINES

Accelerators on Campus

Magnify at UCLA CNSI

In the beginning of 2018, the California NanoSystems Institute launched a fully restricted and reorganized incubator called [Magnify](#). Magnify is designed to accelerate the growth and success of transformative technology startups by providing high-quality, affordable facilities, services and expertise in a vibrant community of innovation.

Centrally located at UCLA, Magnify features flexible laboratory and office spaces for companies developing transformative technologies in life science, energy, advanced materials and information technology. Portfolio companies have access to more than \$36 million worth of scientific equipment and instrumentation, a rich network of mentors and investors, and a growing community of entrepreneurs all designed to increase their likelihood for success. Since launching, Magnify



has supported 29 startup companies from across the U.S., 80 percent of which are in the life science space (therapeutics, medical devices, diagnostics, digital health). In just the past two quarters, Magnify companies have raised over \$18 million, which brings the total funding secured while in the incubator to \$144 million since 2014.

Applications are reviewed on a quarterly basis and Magnify has the capacity to accept up to six companies per quarter. So if you are a highly-motivated entrepreneur seeking a home to grow your transformative startup while conducting necessary key de-risking activities to attract follow-on investment or acquisition, [apply today](#). The next quarterly deadline is December 15, 2018.

For more information on Magnify and the application process visit <https://cnsi.ucla.edu/incubator/> or email magnify@cnsi.ucla.edu.

Lunch and Learn Series:

Magnify is partnering with Wilson Sonsini Goodrich & Rosati (WSGR) to host a series of workshops on IP, licensing, term sheet negotiation, etc. and for startups seeking venture funding. The next workshop will be on campus at CNSI on November 13th from 11:30 – 12:30pm followed by 1-1 office hours. This is a great resource for entrepreneurial faculty and student teams. Please contact magnify@cnsi.ucla.edu email to participate.

Anderson Venture Accelerator

UCLA Anderson has an active six-month program, called the Venture Accelerator, which is open to all UCLA students and alumni. Accelerator startups receive customized and actionable programming catered to their vertical and stage, peer support and mentorship, as well as unlimited access to a 10,000 square foot, state-of-the-art coworking space on campus.

The Anderson Accelerator is now accepting applications for the upcoming SPRING Cohort, which begins the week of January 14th, 2019. https://ucla.qualtrics.com/jfe/form/SV_3jwbfkMClo1jNSB

Applications are due November 12th.

University of California Pitch Day — Upcoming Event

UC BRAID and UC CAI are partnering with UCI Applied Innovation to host a forum for UC Faculty to pitch advanced translational programs to a group of potential investors on November 30, 2018.

This program proposes to extend the UC CAI activities beyond heart, lung and blood diseases across all therapeutic areas. Therapeutic areas can cover any health condition where there is an unmet medical need or the potential for significant improvement over current treatments, diagnostics, devices, tools or services. Successful applicants will receive

extensive hands-on mentoring to develop a pitch deck for presentation to a group of selected and interested investors.

Following Pitch Day, investors interested in projects will work with the faculty and Technology Transfer Office associated with that respective faculty's campus to determine whether terms can be reached for investment and potential company launch. Each faculty applicant will submit a one-page description of their technology. Submission period is September 17–24, 2018.

Read the RFA at bit.ly/ucpitchday.

Faculty in all series at all ranks at UC Davis, Irvine, Los Angeles, San Diego and San Francisco are eligible. Postdoctoral scholars are eligible to submit as Co-PI with a faculty PI.



Nursing: New Knowledge, Innovations and Improvements Council Meeting

The New Knowledge, Innovations, and Improvements (NKII) council at UCLA Santa Monica Hospital is one of the four Magnet councils. Bedside clinicians lead monthly meetings with the support of nursing leadership as mentors. Through this council, we challenge our nurses to continuously seek and adopt evidence-based best practices to guide innovative patient care. The council consists of three subgroups: Technology, Innovations, and EBP and Research. NKII has worked on projects such as CareConnect optimizations to improve nurse workflow, presentation forums to better prepare our nurses presenting at conferences, and promotion of nursing research throughout the hospital.



This year, the council goals include promoting utilization of the myUCLA-health Bedside tablets and collaboration with Nursing Prioritization to create a place to document patient eligibility and/or usage. These goals will ultimately help improve patients' understanding of their conditions and help increase engagement and strengthen the partnership between patients and their care teams. With the new Professional Governance

model at UCLA Health, the NKII council also hopes to align their efforts with the newly established NKII councils over at Ronald Regan UCLA Medical Center and at Resnick Neuropsychiatric Hospital at UCLA.

If you are interested in joining this meeting, please contact Yesenia Valle at yvalle@mednet.ucla.edu.



UCLA Bioscience Innovation Day — Upcoming Event

Save the Date for TDG's UCLA Bioscience Innovation Day on May 22–23, 2019 at the UCLA Luskin Conference Center. More information to follow.

TDB Biopharmaceuticals — Staff Spotlight

Mark Wisniewski**Senior Director of BioPharmaceuticals**

Mark Wisniewski joined UCLA TDG in September 2017 as the Senior Director of BioPharmaceuticals. His career has spanned multiple roles in biotech management, entrepreneurship and as an R&D scientist in both startup and Fortune 100 companies. Prior to joining UCLA TDG, Wisniewski was the head of special projects at Prolacta Bioscience, a producer of human milk nutritional products for premature infants in the neonatal intensive care unit, leading the strategic planning and business development functions. He was also a principal advisor to the National Institutes of Health SBIR Commercialization Accelerator Program which provides business strategy, product commercialization, fundraising and strategic partnership guidance to hundreds of biotech and life science companies. Wisniewski began his career at Baxter Healthcare where he held positions in business development, strategic planning, marketing and R&D. He received his MBA from the UCLA Anderson School of Management and his Master of Immunology and Microbiology at the UCLA School of Medicine.

At UCLA TDG, Wisniewski oversees the licensing of biopharmaceutical and life science intellectual property and new inventions originating at UCLA. With his experience, he can advise UCLA PI on how to pursue business and product commercialization strategies for new therapeutics, diagnostics and life science tools.