CHINESE HOSPITAL • UCSF • FCMS
HEALTHCARE CONFERENCE 2026

CHINESE HOSPITAL

UCSF

23rd Healthcare Conference

TECHNOLOGY TRANSFORMING MEDICINE

CONFERENCE DATES

Nov 7–8, 2026

UCSF Mission Bay
Robertson Auditorium
Asian Art Museum

SAN FRANCISCO
CALIFORNIA

fcmshealth
FCMShealth
FCMShealth

fcms2026.org

The UCSF Health Department Presents

CH/UCSF/FCMS Health Conference 2026

November 07, 2026
7:30 AM - 5:00 PM
Mission Bay Conference Center at UCSF

Gordon L Fung, MD; Erica Pan, MD, MPH, FDSA, FAAP; Ida Sim, MD, PhD; Yuman Fong, MD; Nancy Liu, PhD; Vivian Lee, MD, PhD; Francis Yao, MD; Lynda Chin, MD, MPH; Timothy S Chang, MD, PhD; Jeanne Tsai, PhD; Ning Lin, MD; Eugene Yang, MD; Samuel So, MD; Alex Leow, MD, PhD; Jonathan Chen, MD, PhD; Bryant Lin, MD; King Li, MD; Velda Chow, MD; Anthony Kim, MD; Stanley Qi, PhD; Scarlett L Gomez, PhD

Purpose:

This two-day conference will bring together physicians, healthcare leaders, researchers, and innovators to explore the evolving role of technology in medicine. The program features more than 20 distinguished speakers from leading institutions, including UCSF, Stanford, UCLA, Harvard, Weill Cornell, City of Hope, Hong Kong, and others.

Download / Print This Year's Health Conference Flyer

Educational Objectives:

An attendee completing this course will be able to improve skills and strategies for:

1 Identify the AI needs for Chinese or Diverse communities to utilize AI in diagnosing and treating from a team-based perspective.
2 Apply AI tools in clinical decision-making across multiple specialties
3 Evaluate AI outputs for bias, accuracy, and clinical relevance in patient care
4 Integrate precision medicine and genomic data into multidisciplinary treatment planning

5 Use digital health tools, including wearable data, to support patient monitoring and Management

6 Demonstrate interprofessional collaboration in the interpretation and application of AI-driven clinical information

7 Analyze equity and cultural considerations in the use of AI for diverse patient Populations

Accreditation:

In support of improving patient care, this activity has been planned and implemented by UCSF Office of CME and San Francisco Chinese Hospital. UCSF Office of CME is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

This CME activity meets the requirements under California Assembly 1195, continuing education, and cultural and linguistic competency.

Designation:

UCSF designates this Live Activity for a maximum of 14.00 *AMA PRA Category 1 Credits™.* Physicians should only claim credit commensurate with the extent of their participation in the activity.

This activity has been approved for 14.00 continuing pharmacy education credits under the UAN #: Pharmacist UAN : JA0000302-9999-26-013-L01-PPharmacy Technician UAN: . Credits will be reported to CPEMonitor(R) within 45 days.

UCSF Office of CME designates this Activity for a maximum of 14.00 ANCC contact hours.

This activity was planned by and for the healthcare team, and learners may claim up to 14.00 Interprofessional Continuing Education (IPCE) credits for learning and change.

Additional Credit Information:

Pharmacists and Pharmacy Technicians: Accreditaton Council of Pharmacy Education (ACPE) credit: ACPE credit is recorded in CPE Monitor. If you submitted your claim for credit to UCSF Office of CME within 30 days of the end date of the Activity, your credit will be uploaded to the CPE Monitor section of your NABP e-Profile no later than 61 days after the end-date of the Activity.

Nurses: Please note that ANCC credit cannot be used toward educational requirements for re-licensure in the state of California. California nurses are permitted to use AMA PRA Category 1 Credit™ or credit approved by the California Board of Registered Nursing (BRN).

Credit Claiming Instructions:

In order to receive credit you must certify your attendance in this live activity and claim your credits earned in the activity within 30 days of its conclusion.

Additional Information:

Feedback person for this educational activity is: <PlannerEmail>

Acknowledgement of Commercial Support:

This activity is not commercially supported.

Exhibitors:

<Exhibiting Companies>

Faculty:

Timothy S Chang, MD, PhD
Associate Professr
UCLA

Jonathan Chen, MD, PhD

Stanford Medicine

Lynda Chin, MD, MPH

Velda Chow, MD

Yuman Fong, MD
Chairman
City of Hope

Gordon L Fung, MD

UCSF

Scarlett L Gomez, PhD, Professor
Professor
University of California, San Francisco

Anthony Kim, MD

Vivian Lee, MD, PhD

Vivian Lee Orthodontics

Alex Leow, MD, PhD

King Li, MD

Ning Lin, MD

Bryant Lin, MD

Stanford University

Nancy Liu, PhD

Erica Pan, MD, MPH, FDSA, FAAP
Director and State Public Health Officer
California Department of Public Health

Stanley Qi, PhD

Ida Sim, MD, PhD
Professor
UCSF

Samuel So, MD
Lui Hac Minh Professor
Stanford Asian Liver Center

Jeanne Tsai, PhD

Eugene Yang, MD

Francis Yao, MD
Professor of Clinical Medicine and Surgery
University of California, San Francisco

Disclosures:

Due to the regulations required for CE credits, all conflicts of interest that persons in a position to control or influence the education must be fully disclosed to participants. In observance of this requirement, we are providing the following disclosure information: all relevant financial relationships disclosed below have been mitigated.

Name of individual	Individual's role in activity	Nature of Relationship(s) / Name of Ineligible Company(s)
Vanessa Chan, MD	Other Planning Committee Member	Nothing to disclose - 03/19/2026
Timothy S Chang, MD, PhD	Faculty	Nothing to disclose - 09/10/2026
Jonathan Chen, MD, PhD	Faculty	Honoraria-insitro (Relationship has ended) - 03/09/2026
Jennifer Chen, MD	Other Planning Committee Member	Nothing to disclose - 03/07/2026
Clifford Chew, MD	Other Planning Committee Member	Nothing to disclose - 04/21/2026
Lynda Chin, MD, MPH	Faculty	
Velda Chow, MD	Faculty	
Ryan Chu, Other	Activity Administrator	Non-Clinical Exception
Patricia Chung, Other	Other Planning Committee Member	Non-Clinical Exception
Hareld Craig, Other	Activity Administrator	Non-Clinical Exception
Yuman Fong, MD	Faculty	Consulting Fee-Medtronic (Any division)|Consulting Fee-Boston Scientific Corporation|Consulting Fee-Vergent Biosciences|Consulting Fee-XDemics|Consulting Fee-Eureka Biologics|Consulting Fee-CMR Surgical|Consulting Fee-LivsMed Surgical|Consulting Fee-Sovato Health|Consulting Fee-Imugene (Relationship has ended) - 08/31/2026
Gordon L Fung, MD	Co-Director, Faculty	Nothing to disclose - 04/29/2026

Scarlett L Gomez, PhD, Professor	Faculty	Nothing to disclose - 09/11/2026
Scott Huang, DO	Other Planning Committee Member	Stocks or stock options, excluding diversified mutual funds-Gilead Sciences, Inc.|Stocks or stock options, excluding diversified mutual funds-Apple|Stocks or stock options, excluding diversified mutual funds-OHI|Stocks or stock options, excluding diversified mutual funds-Amazon|Stocks or stock options, excluding diversified mutual funds-NVIDIA|Stocks or stock options, excluding diversified mutual funds-Meta|Stocks or stock options, excluding diversified mutual funds-UnitedHealth Group|Stocks or stock options, excluding diversified mutual funds-Alphabet Inc|Stocks or stock options, excluding diversified mutual funds-Microsoft Corp|Stocks or stock options, excluding diversified mutual funds-Grail Inc - 04/22/2026
Calvin Kang, BA	Other Planning Committee Member	Nothing to disclose - 06/01/2026
Samuel Kao, MD	Other Planning Committee Member	Nothing to disclose - 03/06/2026
Anthony Kim, MD	Faculty	
Vivian Lee, MD, PhD	Faculty	
Alex Leow, MD, PhD	Faculty	
King Li, MD	Faculty	
Cynthia Lin, MD	Co-Director	Nothing to disclose - 03/30/2026
Ning Lin, MD	Faculty	
Bryant Lin, MD	Faculty	Ownership-Sound Health|Ownership-Anemos Bio - 09/14/2026
Nancy Liu, PhD	Faculty	Nothing to disclose - 08/27/2026
Randall Low, MD	Other Planning Committee Member	Nothing to disclose - 04/23/2026
Shelagh Nolan, RN	Other Planning Committee Member	Nothing to disclose - 06/18/2026
Erica Pan, MD, MPH, FDSA, FAAP	Faculty	

Stanley Qi, PhD	Faculty	
Ida Sim, MD, PhD	Faculty	Grant or research support-CareX, Inc|Advisor-Knit Health, Inc - 09/13/2026
Samuel So Md, MD	Faculty	Nothing to disclose - 09/17/2026
Jeanne Tsai, PhD	Faculty	
Dorothy Wong, MD	Other Planning Committee Member	Membership on Advisory Committees or Review Panels, Board Membership, etc.-Roche (Any division)|Membership on Advisory Committees or Review Panels, Board Membership, etc.-AstraZeneca (Any division) (Relationship has ended) - 03/24/2026
Eugene Yang, MD	Faculty	Advisor-Sky Labs|Advisor-Kestra|Membership on Advisory Committees or Review Panels, Board Membership, etc.-DiaMedica - 09/10/2026
Francis Yao, MD	Faculty	Nothing to disclose - 06/12/2026
Weiwen Zheng, MD, Physician	Other Planning Committee Member	Nothing to disclose - 04/28/2026

This UCSF continuing education activity was planned and developed to: uphold academic standards to ensure balance, independence, objectivity, and scientific rigor; adhere to requirements to protect health information under the Health Insurance Portability and Accountability Act of 1996 (HIPAA); and, include a mechanism to inform learners when unapproved or unlabeled uses of therapeutic products or agents are discussed or referenced.

UCSF adheres to the ACCME's Standards for Integrity and Independence in Accredited Continuing Education. Any individuals in a position to control the content of a CE activity, including content planners, reviewers, authors, presenters, moderators, panelists, or others are required to disclose all financial relationships with ineligible entities. All relevant financial relationships have been mitigated prior to the commencement of the activity.

Copyright, Privacy & Social Media Policy:

Federal and State Law Regarding Linguistic Access and Services for Limited English Proficient Persons:

I. Purpose.

This document is intended to satisfy the requirements set forth in California Business and Professions code 2190.1. California law requires physicians to obtain training in cultural and linguistic competency as part of their continuing medical education programs. This document and the attachments are intended to provide physicians with an overview of federal and state laws regarding linguistic access and services for limited English proficient ("LEP") persons. Other federal and state laws not reviewed below also may govern the manner in which physicians and healthcare providers render services for disabled, hearing impaired or other protected categories

II. Federal Law – Federal Civil Rights Act of 1964, Executive Order 13166, August 11, 2000, and Department of Health and Human Services ("HHS") Regulations and LEP Guidance.

The Federal Civil Rights Act of 1964, as amended, and HHS regulations require recipients of federal financial assistance ("Recipients") to take reasonable steps to ensure that LEP persons have meaningful access to federally funded programs and services. Failure to provide LEP individuals with access to federally funded programs and services may constitute national origin discrimination, which may be remedied by federal agency enforcement action. Recipients may include physicians, hospitals, universities and academic medical centers who receive grants, training, equipment, surplus property and other assistance from the federal government.

HHS recently issued revised guidance documents for Recipients to ensure that they understand their obligations to provide language assistance services to LEP persons. A copy of HHS's summary document entitled "Guidance for Federal Financial Assistance Recipients Regarding Title VI and the Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons – Summary" is available at HHS's website at: http://www.hhs.gov/ocr/lep/.

As noted above, Recipients generally must provide meaningful access to their programs and services for LEP persons. The rule, however, is a flexible one and HHS recognizes that "reasonable steps" may differ depending on the Recipient's size and scope of services. HHS advised that Recipients, in designing an LEP program, should conduct an individualized assessment balancing four factors, including: (i) the number or proportion of LEP persons eligible to be served or likely to be encountered by the Recipient; (ii) the frequency with which LEP individuals come into contact with the Recipient's program; (iii) the nature and importance of the program, activity or service provided by the Recipient to its beneficiaries; and (iv) the resources available to the Recipient and the costs of interpreting and translation services.

Based on the Recipient's analysis, the Recipient should then design an LEP plan based on five recommended steps, including: (i) identifying LEP individuals who may need assistance; (ii) identifying language assistance measures; (iii) training staff; (iv) providing notice to LEP persons; and (v) monitoring and updating the LEP plan.

A Recipient's LEP plan likely will include translating vital documents and providing either on-site interpreters or telephone interpreter services, or using shared interpreting services with other Recipients. Recipients may take other reasonable steps depending on the emergent or non-emergent needs of the LEP individual, such as hiring bilingual staff who are competent in the skills required for medical translation, hiring staff interpreters, or contracting with outside public or private agencies that provide interpreter services. HHS's guidance provides detailed examples of the mix of services that a Recipient should consider and implement. HHS's guidance also establishes a "safe harbor" that Recipients may elect to follow when determining whether vital documents must be translated into other languages. Compliance with the safe harbor will be strong evidence that the Recipient has satisfied its written translation obligations.

In addition to reviewing HHS guidance documents, Recipients may contact HHS's Office for Civil Rights for technical assistance in establishing a reasonable LEP plan.

III. California Law – Dymally-Alatorre Bilingual Services Act.

The California legislature enacted the California's Dymally-Alatorre Bilingual Services Act (Govt. Code 7290 et seq.) in order to ensure that California residents would appropriately receive services from public agencies regardless of the person's English language skills. California Government Code section 7291 recites this legislative intent as follows:

"The Legislature hereby finds and declares that the effective maintenance and development of a free and democratic society depends on the right and ability of its citizens and residents to communicate with their government and the right and ability of the government to communicate with them.

The Legislature further finds and declares that substantial numbers of persons who live, work and pay taxes in this state are unable, either because they do not speak or write English at all, or because their primary language is other than English, effectively to communicate with their government. The Legislature further finds and declares that state and local agency employees frequently are unable to communicate with persons requiring their services because of this language barrier. As a consequence, substantial numbers of persons presently are being denied rights and benefits to which they would otherwise be entitled.

It is the intention of the Legislature in enacting this chapter to provide for effective communication between all levels of government in this state and the people of this state who are precluded from utilizing public services because of language barriers."

The Act generally requires state and local public agencies to provide interpreter and written document translation services in a manner that will ensure that LEP individuals have access to important government services. Agencies may employ bilingual staff and translate documents into additional languages representing the clientele served by the agency. Public agencies also must conduct a needs assessment

survey every two years documenting the items listed in Government Code section 7299.4, and develop an implementation plan every year that documents compliance with the Act. You may access a copy of this law at the following url: http://www.spb.ca.gov/bilingual/dymallyact.htm