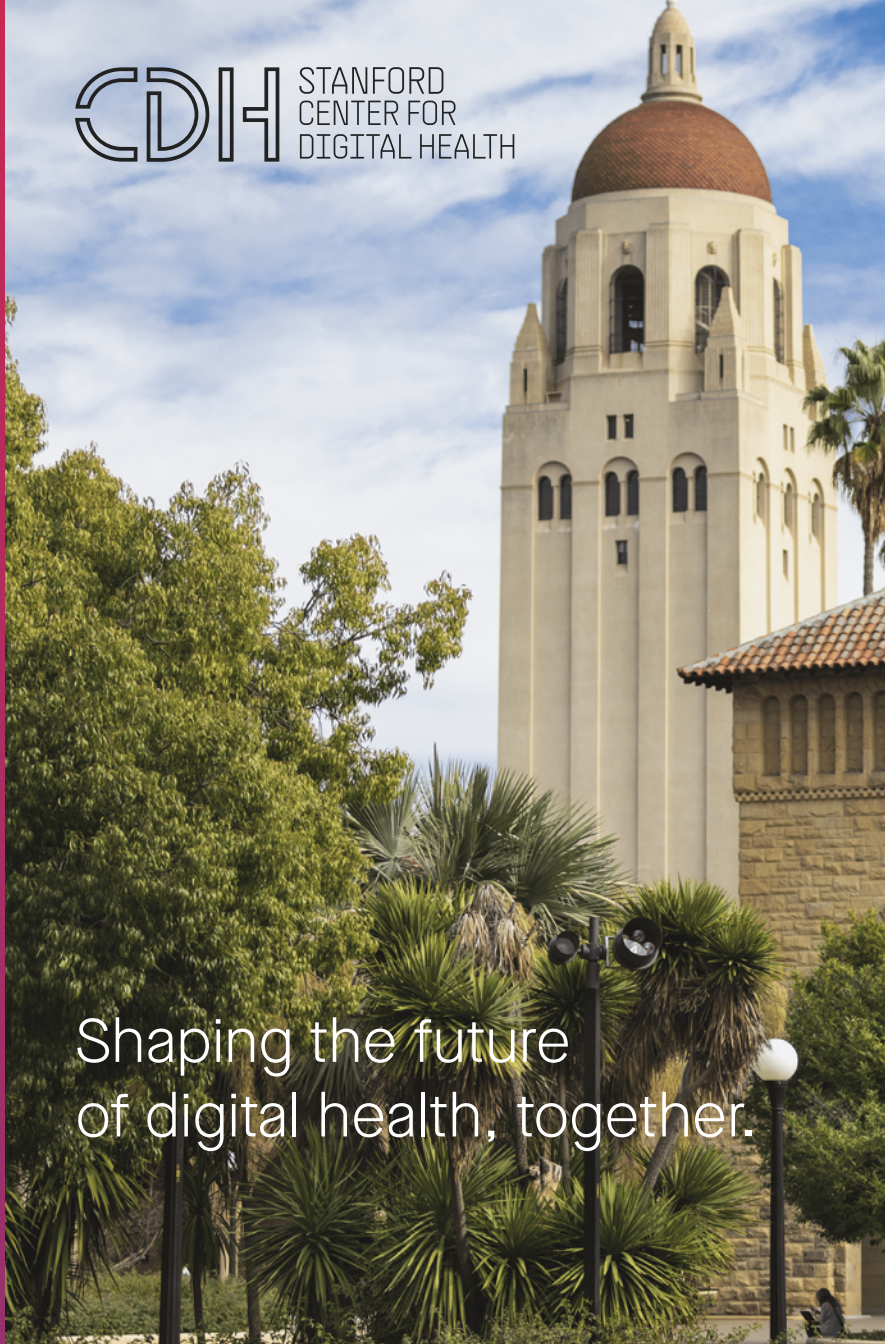
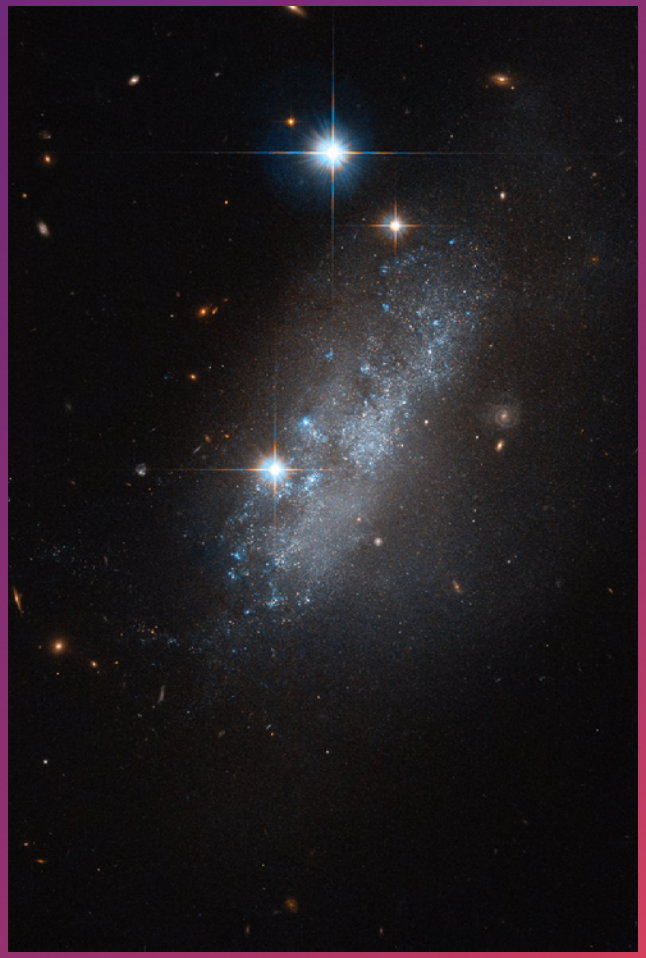

CDH
STANFORD
CENTER FOR
DIGITAL HEALTH
Shaping the future
of digital health, together.

At the Stanford Center for Digital Health (CDH), we bring together the brightest minds in technology, academia, and medicine to tackle pressing questions with scientific rigor and integrity.





A Note from Our Director

It is a great honor to mark three years since the Center for Digital Health was re-imagined with a simple premise: that advances in technology have the potential to radically transform health, but only if they are guided by rigorous science, informed by the expertise of clinicians and patients, with a clear focus on improving people's lives.

Over the last three years, CDH has grown into a multidisciplinary community spanning medicine, engineering, computer science, public health, and social sciences. Together with our faculty, trainees, industry partners and philanthropic supporters, we have built a collaborative ecosystem that accelerates research and translates new discoveries into real world impact.

The projects featured here reflect the incredible breadth of opportunities and responsibilities that accompany rapid technological change. Our researchers are developing new ways to deploy artificial intelligence in clinical care, exploring how wearable devices can improve the prevention and management of chronic disease, and studying how digital tools are reshaping the experiences of both patients and healthcare professionals. Their efforts have catalyzed substantial follow-on funding, expanded collaborations beyond Stanford, and contributed to hundreds of scientific publications.

Equally important is our center's role as a convenor, bringing together leaders across academia, clinical practice, industry, government and philanthropy to address challenges that no single organization can solve alone. Our cross-sector workshops on diverse topics, including accurate and safe health information in the era of AI, the impact of wearables on cardiometabolic health, the ethical use of AI in low- and middle-income countries and youth wellbeing online, have led to widely disseminated reports, informed international policy discussions, and helped shape new funding initiatives.

As we mark our third anniversary, I am most proud of the far-reaching connections that have grown through CDH. Our events have brought together researchers and cross-sector leaders who might never otherwise have met, sparking new collaborations and lasting friendships whose value extends far beyond any individual project. Technology will continue to change healthcare in ways we cannot fully anticipate. As we discover just how powerful these tools can be, we must also ask deeper questions about how best to use them, and what aspects of medicine must remain non-negotiability human. I remain excited by the opportunities and challenges ahead, and grateful for the support of this extraordinary community as we work to ensure that technological advances enrich the experience of patients and clinicians alike. Thank you for being part of this journey with us.



Eleni Linos, MD, MPH, DrPH
Director, Stanford Center for Digital Health, Ben Davenport and Lucy Zhang Professor of Medicine, Vice Chair, Department of Medicine, Stanford University School of Medicine

Our Vision

We guide the future of human health by bridging technology innovation with evidence and ethics.

Around the world, people face growing barriers not just to healthcare, but to health itself. Chronic conditions are on the rise, medical systems are strained, and even basic tools to monitor and manage well-being remain out of reach for many. Nearly half the global population lacks access to essential health services, and the shortage of health workers is expected to exceed 10 million by 2030. Traditional systems simply weren't built to reach everyone.

At CDH, we believe that thoughtfully implemented technology is invaluable in extending access to quality healthcare beyond traditional settings. At its heart, however, healthcare remains a human endeavor, and digital tools should be used to strengthen the interpersonal connections essential to good health.





Who We Are

Our vision is to reshape what it means to be healthy—and expand who gets to be healthy—by advancing how tools and technology like AI, robotics, and wearables are used to support everyday health, early detection, and smart responses.

We bridge Silicon Valley innovation with Stanford research to shape the future of health technology.

A CONVENER THE INDUSTRY NEEDS

In a landscape flooded with AI hype and product showcases, CDH fills a crucial gap: high-trust, cross-sector conversations grounded in science, ethics, and impact. We're nimble, independent, and focused on action. Whether it's our convenings on generative AI in low- and middle-income countries or our advisory work on AI regulation and safety, we create space for the real work to happen—where engineers, clinicians, policymakers, and patients are all at the table.

CLINICIAN-LED, COLLABORATIVE BY DESIGN

Unlike many initiatives in health technology, CDH is clinician-led and deeply embedded in patient care. We bring together Stanford's top minds in medicine, engineering, computer science, law, and ethics—and partner with Silicon Valley innovators and global institutions —to solve health problems that humans alone haven't been able to crack.

BIASED TO ACTION, GROUNDED IN RESEARCH

We don't just study problems, we help solve them. CDH identifies critical health challenges, develops practical solutions, and actively ensures real-world implementation. From early work on arrhythmias that helped shape the Apple Watch's heart monitoring, to research showing patients often prefer doctor-AI collaboration or AI alone—we are building a new model of accessible, distributed health.

How We Work

In addition to publishing our findings in academic journals, we continue the important work to identify critical gaps, develop solutions, and ensure real-world implementation.

Supporting innovative research projects through funding and technical expertise.

Shaping digital health policy and investment by publishing comprehensive white papers that reach decision makers.

Gathering key stakeholders in the health AI landscape—including funders, tech developers, policymakers, and academics—to align on pressing challenges and create actionable solutions.

Connecting academic researchers with industry partners to develop solutions aligned with clinical, operational, and market needs.

Training and mentoring the next generation of digital health leaders through our Digital Health Scholars program.

Our Impact

Our work advances digital health innovation through research, education, and policy, focusing on cultivating interdisciplinary collaborations, catalyzing impactful and scientifically rigorous research, and developing the next generation of leaders in digital health.

BY THE NUMBERS

3.02M+
Research Grants Awarded

318
Publications

117
Faculty Affiliates

24
Fellows & Students

8x
Follow-on Funding Among Grantees

Case Studies & Funded Researchers

CASE STUDY

Understanding the impact of AI on the Healthcare Workforce



5x
Increase in AI use

50%
Didn't use AI 2024-2025

14%
Didn't use AI 2026

Artificial intelligence is rapidly becoming part of everyday medical practice, with new tools supporting healthcare workers with tasks including clinical documentation, decision-making, and patient communication. The accelerating pace of adoption makes understanding medical professionals' evolving perceptions and usage of these technologies essential to ensure their integration into care delivery remains safe, effective, and equitable. To this end, CDH has established one of the largest ongoing surveys to date of healthcare workers' attitudes towards AI tools, capturing changes in usage rates, trust, expectations, and concerns over time.

AI ADOPTION IN CLINICAL PRACTICE

The first phase of the survey, involving over 1,200 Stanford Health Care workers over two waves, found a substantial rise in workplace AI use in the space of a single year. Frequent AI use increased more than five-fold, while the proportion of respondents who had never used AI at work shrank from almost half in 2024–25 to just 14 percent in 2026. This growth was most marked in clinical applications including diagnosis, treatment planning, and electronic health record documentation.

UNDERSTANDING CLINICIANS' PERSPECTIVES

Changes in the attitudes expressed towards AI tools were more complex. Overall trust and views of AI's usefulness in clinical settings have remained stable, but uncertainties about privacy, liability and job displacement became more prominent, while long-standing concerns about accuracy, unethical AI use, and erosion of patient-clinician relationships remained consistently high.

LISTENING TO CLINICIANS

CDH has launched a new qualitative analysis to understand which parts of medicine should remain uniquely human. Through in-depth interviews with over 70 clinicians across specialties, geographic regions and experience levels we CDH is trying to understand how to keep the humanity and depth of the doctor-patient relationship, while leveraging AI to deliver safe and timely health information to people who may not have another option.

GUIDING RESPONSIBLE AI ADOPTION

As AI becomes embedded in clinical practice, these studies are providing an evidence base for how health systems can support responsible implementation. The findings show important differences in how AI is adopted across the workforce. By tracking these changes over time, CDH is helping to inform institutional approaches to AI governance, education and workforce support that reflect the experiences and priorities of clinicians themselves.

CASE STUDY

Reimagining the Modern Health Journey with GLP-1 Receptor Agonists

READ THE FULL REPORT



GLP-1 receptor agonists are radically reshaping the management of obesity, diabetes and cardiometabolic disease. While these therapies have demonstrated remarkable clinical benefit, important questions remain over how best to support patients throughout and beyond treatment. Over the past year, CDH has developed a multidisciplinary research program examining how digital tools can help reinforce healthy behaviors and ensure weight loss and other health benefits are sustained after treatment is stopped.

UNDERSTANDING THE PATIENT EXPERIENCE

Research published with JAMA explored the lived experiences of people taking GLP-1s through qualitative interviews. Participants described the medications as creating an opportunity to establish healthier routines by reducing "food noise" and enabling greater intentionality around dietary choices and physical activity. At the same time, they encountered challenges including a diverse range of side effects, inconsistent clinical guidance, access and cost barriers, and social stigma. The study underscored the importance of integrating behavioral support and patient education into routine weight management care.

DEVELOPING DIGITAL SUPPORT TOOLS

A complementary randomized clinical trial evaluated whether brief digital interventions could strengthen motivation for healthy lifestyle changes among people using GLP-1 therapies. Over 5,000 participants received text- or video-based behavioral prompts focused on nutrition, exercise, sleep and stress management. These "microsteps" increased participants' confidence and intention to adopt healthy behaviors, demonstrating the potential for scalable digital approaches to complement pharmacological treatment.

SHAPING THE FUTURE OF CARDIOMETABOLIC CARE

These research findings informed two multidisciplinary workshops convened by the CDH, bringing together healthcare professionals, researchers, policymakers and technology and retail sector leaders, to discuss the future of cardiometabolic care. The resulting reports explored how wearable technologies and digital companions can help individuals maintain muscle mass through weight loss, monitor health metrics beyond body weight, personalize support throughout treatment, and generate meaningful longitudinal data to inform care. They also highlighted the need for new approaches to defining success, recognizing that improvements in metabolic health, physical function, and quality of life are important outcomes alongside weight reduction.

This body of work exemplifies CDH's leadership in advancing evidence-based digital solutions that complement and optimize emerging therapies.

CASE STUDY

Project Lighthouse: Accelerating Transformative AI-Enabled Science



Rapid advances at the intersection of artificial intelligence and biomedical science are continually opening up new possibilities for research and healthcare. Yet uncertainty is inherent in ambitious early-stage research: some of the most consequential ideas emerge before their eventual outcomes are clear, and early results may point researchers in unexpected directions. Conventional funding mechanisms can struggle to accommodate this uncertainty in a field where progress may depend on rapid iteration, substantial computational resources, and access to expertise across disciplines.

FLEXIBLE FUNDING FOR AMBITIOUS RESEARCH

Project Lighthouse is a new cohort-based initiative from the Stanford Center for Digital Health designed to support exceptional early-career investigators at this critical stage. Awardees receive flexible research funding alongside access to computational resources, mentorship, and connections across Stanford and beyond. This support gives investigators greater freedom to respond to new findings, bring in specialized expertise, and pursue promising directions as their research develops.

AI ACROSS BIOMEDICINE

The inaugural Lighthouse cohort reflects the breadth of this ambition. Five funded projects are applying AI to challenges across biomedical science and healthcare: anticipating cancer drug resistance and designing more resilient therapeutics; improving pediatric cardiovascular imaging by transferring knowledge between cardiac MRI and echocardiography; using machine learning and point-of-care blood sensing to guide interventional procedures in real time; evaluating evidence about drug mechanisms at scale; and developing AI scientist agents that can work directly with biomedical data and methods.

BUILDING A RESEARCH COMMUNITY

The cohort itself is central to the program. Awardees will meet throughout the year to share work in progress and exchange approaches to common scientific and technical challenges. They will also have access to tailored mentorship as their needs evolve, with opportunities for shared programming with scholars in CDH's career development program. Over time, successive Lighthouse cohorts will create a growing community of investigators with experience in transformative AI-enabled biomedical research.

FUNDED RESEARCHER

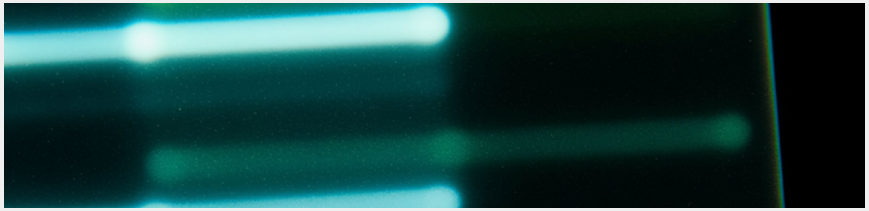


Allison Okamura, PhD, MS

Dr. Okamura is a Richard W. Weiland Professor in the School of Engineering, Professor in the Department of Mechanical Engineering and, by courtesy, in the Department of Computer Science, and Science Fellow at the Hoover Institution.

As the Director of Graduate Studies for Stanford Mechanical Engineering, Deputy Director of the Wu Tsai Neurosciences Institute, Science Fellow of the Hoover Institution, and Executive Committee Member of the Stanford Robotics Center, Dr. Okamura focuses her research across haptics, teleoperation, mixed reality, medical robotics, soft robotics, and rehabilitation, working to advance new approaches to human-machine interaction and assistive technology.

Adaptive Soft Robotic Furnishings for Aging in Place



WHY IT MATTERS

As America's population ages, millions of older adults rely on family caregivers to help with everyday movements that many of us take for granted: getting out of bed, into a chair, or onto a walker.

ABOUT THIS PROJECT

Dr. Okamura and her team are applying the power of robotics to elder care to help make aging in place safer and more manageable. Awarded the Stanford CDH Digital Health Grant in 2026, the work aims to support patient handling with transformative soft robotic physical assistance technology while reducing strain on caregivers, all while laying the groundwork for a new generation of assistive robotics. Dr. Okamura was also awarded a 2024 Digital Health Grant for "Feasibility of Using Smartphone Vibrations to Detect Sensory Deficits in Adults with Pre-diabetes and Type 2 Diabetes," a clinically relevant, patient-operated smartphone application with the potential to provide a precise, reliable, and accessible avenue for identifying individuals at risk of developing diabetic peripheral neuropathy complications, a condition that affects over 50% of those with diabetes.



Jure Leskovec, PhD

Dr. Leskovec is an Alfred and Rebecca Lin Professor of Computer Science affiliated with the Stanford AI Lab, Machine Learning Group, and the Center for Research on Foundation Models. In the past, he served as a Chief Scientist at Pinterest and investigator at Chan Zuckerberg BioHub. His research contributions have spanned social networks, data mining and machine learning, and computational biomedicine with the focus on drug discovery.

Zinaida Good, PhD



Dr. Good is an Assistant Professor of Medicine (Immunology and Rheumatology). With masters training in experimental immunology, doctoral training in computational and systems immunology, and postdoctoral work on chimeric antigen receptor (CAR) T cell therapies, Dr. Good and her research program are uniquely positioned to tackle complex challenges in cancer immunotherapy through innovative computational approaches. Her lab leverages internal and public clinical multi-omic T cell therapy datasets to build artificial intelligence systems for enhanced T cell designs with improved predicted clinical outcomes.

Artificial Intelligence Systems for T Cell Immunotherapy Design



WHY IT MATTERS

Engineered T cell therapies have already transformed cancer treatment, but many patients still do not have lasting benefits from these therapies. The challenge is in their complexity: As living therapies, they behave differently based on the state of the infused cells, the patient, and the tumor environment. They cannot be optimized using standard preclinical approaches alone.

ABOUT THIS PROJECT

Coming together to help accelerate next-generation T cell therapies in this 2026 Digital Health Grant-awarded project, Dr. Good and Dr. Leskovec are working to create a faster, more scalable way to design and validate new T cell therapies that are more likely to succeed in clinical translation. Their project will start with large B cell lymphoma, and later expand to other applications like autoimmunity, organ transplantation, and other malignancies.

The researchers recently presented their work on SpatialWhisperer at the International Conference of Machine Learning (ICML) in July 2026. SpatialWhisperer is a trimodal model connecting data across H&E pathology, transcriptomics, and natural text. It demonstrates a proof-of-concept for zero-shot image annotation and opens the door to a future where a pathology slide can reveal a wealth of data normally only accessible through deep spatial proteomics or transcriptomics analyses.

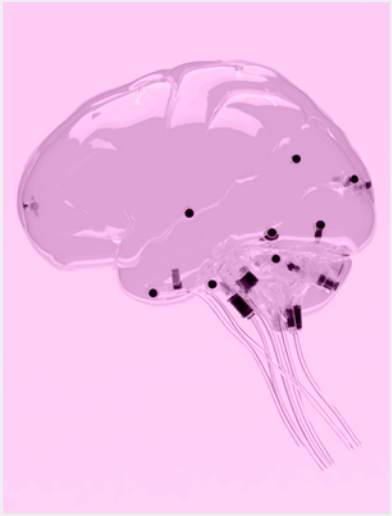
FUNDED RESEARCHER



Akshay Chaudhari, PhD

Dr. Chaudhari is an Associate Professor (Research) of Radiology (Integrative Biomedical Imaging Informatics at Stanford) and of Biomedical Data Science, the Interim Division Chief of the Imaging Informatics research section at Stanford Radiology, Co-Director of Clinical AI at Stanford Radiology, and the Associate Director of Research and Education at the Stanford Center for Artificial Intelligence in Medicine and Imaging (AIMI). He is a co-founder of Cognita Imaging, which received the first FDA breakthrough status for a generative vision language model. His research group develops representation learning and evaluation techniques focusing on large-scale, multi-modal, deep learning models in healthcare that use vision, language, and medical records data.

A Multi-Modal Foundation Model of the Brain for the Diagnosis and Management of Epilepsy



WHY IT MATTERS

Epilepsy affects an estimated 50 million people worldwide, making it one of the most common neurological disorders. But despite its prevalence, the condition remains challenging to diagnose and manage.

ABOUT THIS PROJECT

In their 2026 Digital Health Grant-awarded project, Dr. Chaudhari and co-PI Curtis Langlotz, MD, PhD propose the development of a multi-modal foundation model of the brain, using artificial intelligence to integrate both structural data from magnetic resonance imaging and neurophysiological data from electroencephalography to make robust clinical predictions around epilepsy risk and treatment responsiveness.

Dr. Chaudhari was also awarded a 2025 Digital Health Grant for "Empowering Patients with AI: LLM-Based Summarization of Clinical Reports for Patient Experience Improvement," and a 2024 Digital Health Grant for "Development and Validation of an Incidental Atherosclerotic Risk Score using Already-Acquired Abdominal Computed Tomography Scan."

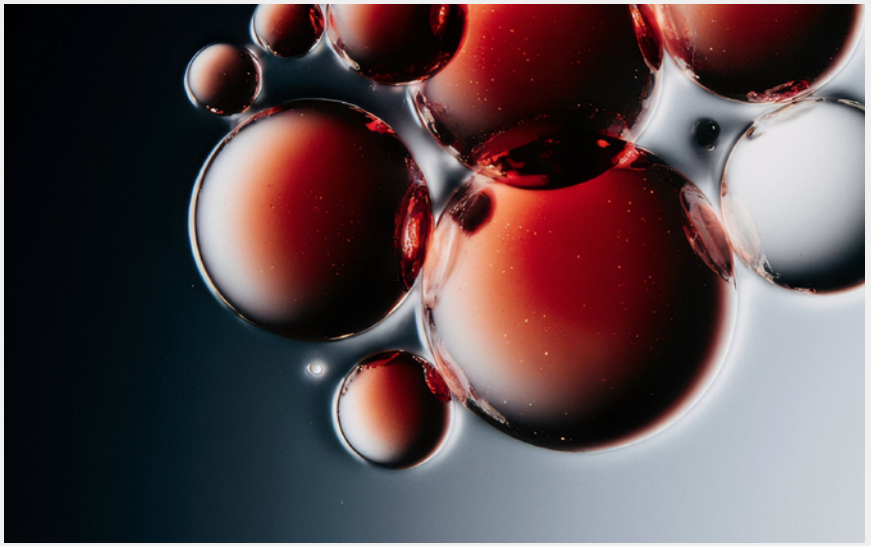
FUNDED RESEARCHER



Tom Soh, PhD, MS

Dr. Soh is a W. M. Keck Foundation Professor of Electrical Engineering and Professor of Radiology (Diagnostic Sciences Laboratory) and of Bioengineering. Before joining Stanford in 2015, he was the technical manager of MEMS Device Research Group at Bell Laboratories and Agere Systems and a faculty member at the University of California, Santa Barbara. His current research interests are in analytical biotechnology, especially in high-throughput screening, directed evolution, and integrated biosensors.

Biosensor for Continuous Measurement of Metabolites and Hormones Including Glucose, Lactate, and Cortisol



WHY IT MATTERS

Most molecular biomarkers can only be measured intermittently, giving clinicians snapshots of a patient's picture of health rather than a continuous monitoring system to observe.

ABOUT THIS PROJECT

Awarded the Digital Health Grant in 2025, Dr. Soh and his team explored a novel biosensor technology that can be generalized to measure a wide range of biomolecules in living subjects, with the potential to provide a critical window into the health status of patients and their response to therapeutics.



Matthew Muffly, MD, MS

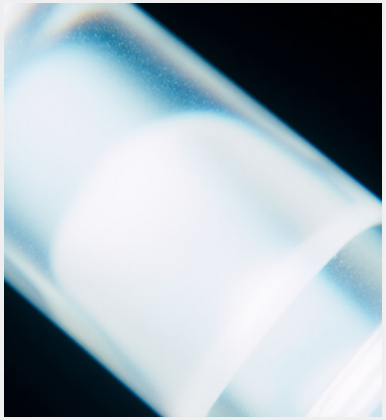
Dr. Muffly is a Clinical Associate Professor of Anesthesiology, Perioperative and Pain Medicine. He is a pediatric anesthesiologist at Lucile Packard Children's Hospital, where he serves as the Physician Director of the Children's Perioperative Quality Improvement Team, as well as a health technology innovator developing practical monitoring systems that detect respiratory compromise earlier to prevent avoidable patient harm alongside his longtime collaborator, Dr. Chafe.

Chris Chafe, DMA, MA

Dr. Chafe is the Chair of Stanford University's Department of Music and Ducca Family Professor at the Center for Computer Research in Music and Acoustics (CCRMA). A composer, improvisor, and cellist who develops his music alongside computer-based research, Dr. Chafe is also the co-founder of Cerebella, a provider for Point-of-Care EEG and co-founder of JackTrip Labs, a solution for distributed low latency, high-quality audio collaboration online.



Tracheal Acoustic Monitoring for the Detection of Respiratory Airflow



WHY IT MATTERS

Breathing obstructions are common in patients undergoing anesthesia, but detecting them early is critical to preventing dangerous drops in oxygen levels. Current monitoring tools can miss these obstructions or detect them only after their effects have occurred, leaving clinicians to periodically assess airflow with a stethoscope, where breathing obstructions can go unnoticed until oxygen levels drop significantly.

ABOUT THIS PROJECT

Awarded the Digital Health Grant in 2024, Dr. Muffly and Dr. Chafe continue to make significant progress on this pilot project, featuring a wearable device prototype that detects respiratory obstruction during sedation or anesthesia. After receiving the CDH grant, the work was awarded the Bio-X Interdisciplinary Initiatives Program Seed Grant, Stanford High Impact Technology (HIT) Grant, and Stanford eWear Chen IPL Grant, and was patented in 2024. The latest iteration of the device now has an expanded monitoring platform that includes pulse oximetry and detection across motion/accelerometry, temperature, heart rate, and respiratory airflow. The researchers plan to use the device to monitor respiratory airflow in patients undergoing anesthesia without breathing tubes, and while transporting patients from the operating room to the recovery room.

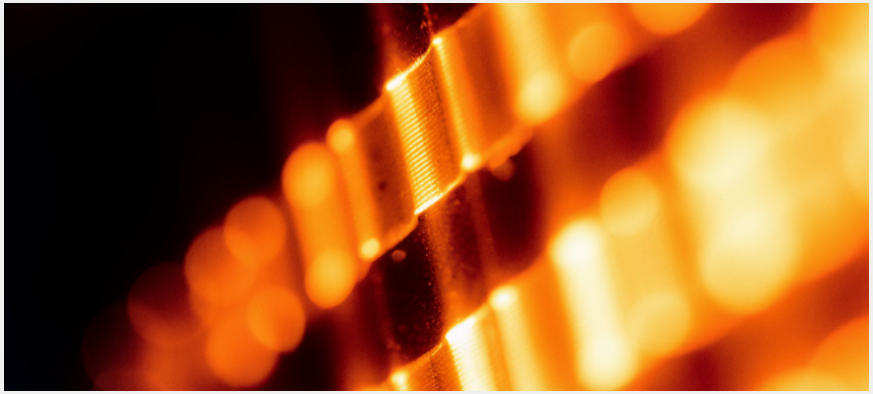
FUNDED RESEARCHER



Brian Hie, PhD, MS

Dr. Hie is an Assistant Professor of Chemical Engineering, the Dieter Schwarz Foundation Stanford Data Science Faculty Fellow, and an Innovation Investigator at Arc Institute. He supervises the Laboratory of Evolutionary Design, where he and his team conduct research at the intersection of biology and machine learning.

AI-guided Biological Discovery and Design for Human Health



WHY IT MATTERS

Dr. Hie and his team are exploring the next frontier of genomics: from interpreting and reading the human genome to understanding and engineering it.

ABOUT THIS PROJECT

In his 2025 Digital Health Grant-awarded project, Dr. Hie and his co-authors explored the development of genomic foundation models that can predict how genetic variants affect human health. Dr. Hie also led the creation of Evo 2, a biological foundation model trained on 9 trillion DNA base pairs that can identify important and potentially harmful variants without task-specific fine-tuning. He and his team made Evo 2 fully open source, giving researchers around the world the tools to amplify the exploration and design of biological complexity.

FUNDED RESEARCHER



James Dickerson, MD, MS

Dr. Dickerson is a Clinical Assistant Professor of Medicine (Oncology). In addition to his day-to-day practice as a medical oncologist, he researches how health policy, data science, and emerging technologies can improve cancer care delivery.

Automating Chart Review at Scale with Large Language Models



WHY IT MATTERS

Large language models have the potential to transform healthcare, but there's still a critical bottleneck: The extraction of high-quality clinical data from clinical research still relies on labor and time-intensive chart review to create usable datasets.

ABOUT THIS PROJECT

Funded by the Center for Digital Health in 2025 as a Faculty Fellow, Dr. Dickerson and his team are developing tools to automate the large-scale extraction of high-fidelity clinical data, transforming unstructured patient charts into research-ready datasets. By making this process faster and more scalable, their work could dramatically expand the scope and feasibility of observational, health services, and translational research across medicine.

FUNDED RESEARCHERS



Kavita Sarin, MD, PhD

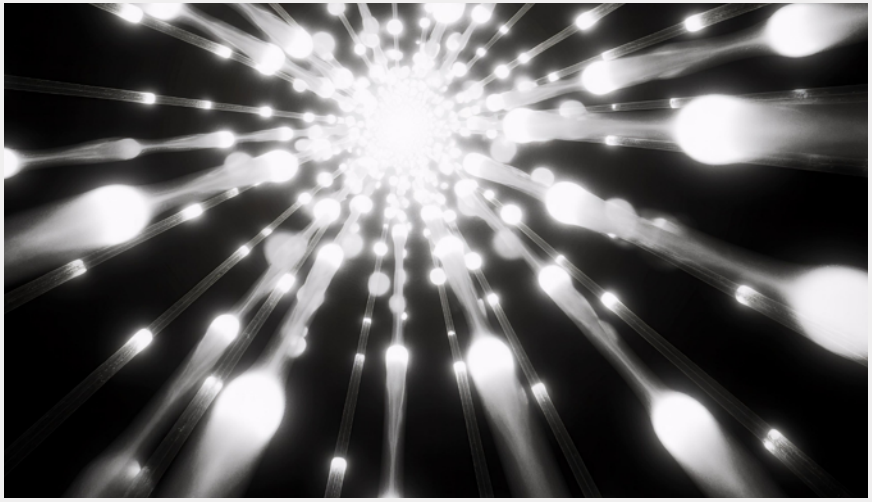
Dr. Sarin is a Professor of Dermatology and practicing medical dermatologist focused on Precision Medicine, with a special focus on the integration of genetic and clinical patient data to inform susceptibility, prognosis, and treatments in skin cancer and other rare dermatologic disorders. Her lab applies cutting-edge sequencing and imaging technologies to better understand skin cancer and rare immunologic skin diseases.

Helen Bronte-Stewart, MD, MSE, FAAN, FANA



Dr. Bronte-Stewart is a John E. Cahill Family Professor, Professor of Neurology and Neurological Sciences (Adult Neurology) and, by courtesy, of Neurosurgery. She is a neurologist, neurophysiologist, and movement disorders specialist who has used her training in mathematics and physics, bioengineering, neurology, movement disorders, and single unit electrophysiology in primates to develop a rigorous translational program in motor control research in individuals with movement disorders.

Combining Quantitative Digitography and Skin Biopsy for Early Detection of Parkinson's Disease



WHY IT MATTERS

According to the World Health Organization, the global prevalence of Parkinson's disease has doubled over the past 25 years. In 2019, an estimated 8.5 million people worldwide were living with the disease.

ABOUT THIS PROJECT

Bringing together a diverse set of disciplinaries across dermatology and neurology, Dr. Sarin and Dr. Bronte-Stewart are working to develop a practical early biomarker for Parkinson's in their 2026 Digital Health Grant-awarded project. Linking digital cognitive motor signals with molecular pathology, the team is looking to see if these tools can detect Parkinson's well before traditional diagnosis is possible.

FUNDED RESEARCHER



James Zou, PhD

Dr. Zou an Associate Professor of Biomedical Data Science and, by courtesy, of Computer Science and Electrical Engineering at Stanford University, and a part of the Stanford AI Lab. He received his PhD from Harvard in 2014, and was once a member of Microsoft Research, a Gates Scholar at Cambridge, and a Simons fellow at UC Berkeley. Dr. Zou works on making AI more reliable, human-compatible, and statistically rigorous, with a special focus on how it applies to human disease and health. His research is supported by two Chan-Zuckerberg Biohub Investigator Awards, the Sloan Fellowship, the NSF CAREER Award, a Top Ten Clinical Achievement Award and faculty awards from Google, Adobe, and Amazon.

Paper2Agent: Reimagining Research Papers As Interactive and Reliable AI Agents

The Virtual Biotech: A Multi-Agent AI Framework for Therapeutic Discovery and Development

WHY IT MATTERS

Artificial intelligence has already made its mark on scientific discovery. AI agents, systems that can autonomously perform tasks on behalf of a user, have the potential to take that progress even further, making scientific research even more accessible and actionable.

READ MORE

ABOUT THESE PROJECTS

Featured in the New York Times this year (“A.I. Agents as ‘Co-Scientists’? This Lab Says They Could Speed Drug Research.”), CDH-funded researcher Dr, Zou and his team have been hard at work exploring the role of AI in biomedical discovery. Their work includes Paper2Agent, an automated framework that turns research papers into AI agents capable of functioning as knowledgeable research assistants, and VirtualAgent, a coordinated team of AI agents that brings together fragmented data and expertise to accelerate drug discovery. “Dr. Zou’s team at Stanford University is working to develop a future where the technology is doing more than just carry out a researcher’s bidding,” says The New York Times. “He envisions fleets of A.I. agents that work as ‘co-scientists,’ rapidly accelerating the drug discovery process by independently generating hypotheses and running experiments on the computer with the oversight of a human researcher.”

FUNDED RESEARCH

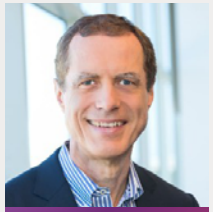
Here are some examples of research projects we have funded in 2026. For a full list of the CDH research portfolio visit **cdh.stanford.edu/research**

RESEARCH PROJECT	PRINCIPAL INVESTIGATOR(S)
Advancing Target Discovery and Biomarker Development in Gastric Cancer Using Artificial Intelligence	Anuja Sathe
Combining QDG and Skin Biopsy for Early Detection of Parkinson's Disease	Kavita Sarin, Helen-Bronte Stewart
Adaptive Soft Robotic Furnishings for Aging in Place AI-based Automatic Scoring of Human Speech Recognition	Allison Okamura
Wearable Technology to Optimize Language Development for Children who are Deaf or Hard-of-Hearing	Margaret Cychosz, Matthew Fitzgerald
Artificial Intelligence Systems for T Cell Immunotherapy Design	Zinaida Good, Jure Leskovec
Agentic AI for Lung Cancer Screening in Electronic Health Records: Accurate Eligibility from Unstructured	Summer Han, Natalie Lui, Shreya Shah
A Multi-Modal Foundation Model of the Brain for the Diagnosis and Management of Epilepsy	Curtis Langlotz, Akshay Chaudhari
Preventing Post-ICU Syndrome (PICS) with Computer Vision and Ambient Intelligence	Ehsan Adeli, Arnold Milstein
Evaluating Patient Comprehension of AI-Translated Discharge Instructions: A Multi-Language Non-Inferiority Study	Jonathan Chen, Fatima Rodriguez, Stephen Ma

Congratulations to the inaugural Project Lighthouse Awardees

PROJECT LIGHTHOUSE	PRINCIPAL INVESTIGATOR(S)
Designing Evolutionarily Resilient Cancer Therapeutics with Generative AI	Brian Hie
A Multi-Agent AI System for Accurately Determining Drug Mechanism-of-Action at Scale	Jason Sheltzer
Agentifying Biomedical Data and Knowledge with Application to Wearable Health	James Zou
The PHAROS Study: AI-Enabled Point-of-Care Blood Sensing for Real-Time Guidance of Interventional Procedures	Alexander Vezeridis, Matthew Hung
Aligning Cardiac MRI and Echocardiography Foundation Models for Pediatric Cardiovascular Care	William Hiesinger, Mrudang Mathur
Technology Development for Continuous in Vivo Biochemical Measurements	Tom Soh
Early Detection of Pediatric Pneumonia Spikes in Ethiopia Using AI and Cloud-Based Data Integration	John Openshaw, Rishi Mediratta
A Human-Centered AI Database for Multi-Organ Point-of-Care Ultrasound (POCUS) Education	Andrew Kumar, Akshay Chaudhari
Empowering Biomedical Researchers with Microbiome-Specialized AI Agent Co-Pilots	Justin Sonnenburg, James Zou

Board of Advisors



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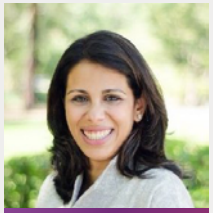

SUMBUL DESAI
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Health | Apple



HARVEY FINEBERG
President | Gordon and
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LOGAN GREEN
Co-Founder & Chairman
Lyft



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Learning & Sustainability
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MUBARIK IMAM
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KX JIN
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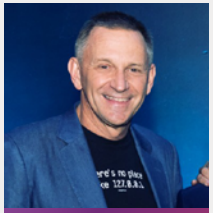
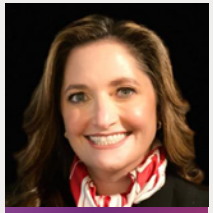
Head of Health | Meta



NICK MCKEOWN
Professor of Engineering
and Computer Science |
Senior Fellow Intel



JESSICA MEGA
Co-Founder | Verily
An Alphabet Company



LAURA PAULUS
Investor | Philanthropist

Stanford Sites & Bites

When you come to visit us on campus, be sure to explore some of our favorite things to do.

01 **CDH SYMPOSIUM LOCATION**
Frances C. Arrillaga Alumni Center

02 **RESTAURANT**
Cafe Wisteria Allied Arts Guild

03 **MUSIC**
Bing Concert Hall

04 **CAMPUS MUST-SEE**
Memorial Church

05 **ART**
Anderson Collection, Cantor Arts Center & Rodin Sculpture Garden

06 **CAMPUS MUST-SEE**
Hoover Tower

07 **CAMPUS MUST-SEE**
Windhover Contemplative Center

08 **CAMPUS MUST-SEE**
Arizona Garden

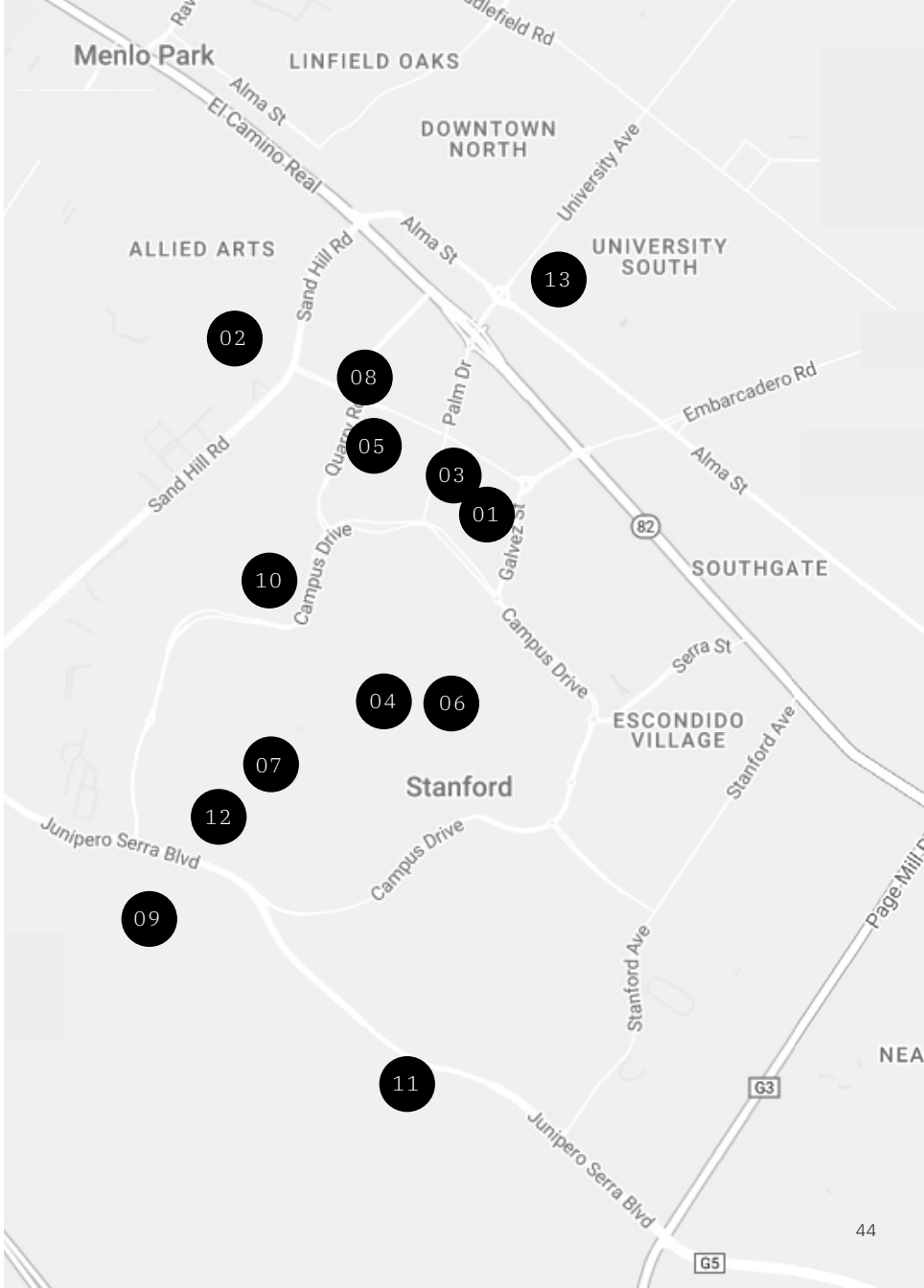
09 **STARGAZING**
KIPAC Observatory

10 **SCHOOL OF MEDICINE**
Li Ka Shing Building

11 **CAMPUS MUST-SEE**
Stanford Dish Loop Hiking Trailhead

12 **CAMPUS MUST-SEE**
Lake Lagunita Trail Walk

13 **RESTAURANT**
Verve Coffee Roasters



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