Dr. Carolyn Dacey Seib is a fellowship-trained endocrine surgeon and board certified general surgeon. Her practice is focused on surgery of the thyroid, parathyroid, and adrenal glands.

Dr. Seib has clinical and research expertise in the surgical management of endocrine disorders in older adults, including primary hyperparathyroidism, thyroid cancer, and hyperthyroidism. Dr. Seib completed her undergraduate education at Princeton University, graduating summa cum laude in 2004. She received her M.D. at the New York University School of Medicine and then attended residency in General Surgery at UCSF. Dr. Seib also completed a fellowship in Endocrine Surgery at UCSF, during which she cared for patients with complex disorders of the thyroid, parathyroid, and adrenal glands.

Dr. Seib focuses on providing individualized care for patients with thyroid malignancy, hyperthyroidism, primary hyperparathyroidism, and adrenal disorders. She has received funding from the National Institute on Aging and the American Thyroid Association to study the surgical management of endocrine disorders in older adults and has a number of peer-reviewed journal publications on this topic that have received national attention, including being featured in the New York Times.
CLINICAL FOCUS

• Endocrine Surgery
• Thyroid Cancer
• Thyroid Nodules
• Primary Hyperparathyroidism
• Hyperthyroidism
• Primary Aldosteronism
• Adrenal Cushing's Syndrome
• Pheochromocytoma
• General Surgery

ACADEMIC APPOINTMENTS

• Assistant Professor - University Medical Line, Surgery - General Surgery

PROFESSIONAL EDUCATION

• Board Certification: General Surgery, American Board of Surgery (2017)
• Fellowship: UCSF Endocrine Surgery Fellowship (2017) CA
• Residency: UCSF General Surgery Residency (2016) CA
• Medical Education: New York University School of Medicine (2009) NY

Publications

PUBLICATIONS

• Risk of Fracture Among Older Adults With Primary Hyperparathyroidism Receiving Parathyroidectomy vs Nonoperative Management. JAMA internal medicine Seib, C. D., Meng, T., Suh, I., Harris, A. H., Covinsky, K. E., Shoback, D. M., Trickey, A. W., Kebebew, E., Tamura, M. K. 2021


• Patient Factors Associated With Parathyroidectomy in Older Adults With Primary Hyperparathyroidism. JAMA surgery Seib, C. D., Suh, I., Meng, T., Trickey, A., Smith, A. K., Finlayson, E., Covinsky, K. E., Kurella Tamura, M., Kebebew, E. 2021


Kidney stone events following parathyroidectomy vs. non-operative management for primary hyperparathyroidism. *The Journal of clinical endocrinology and metabolism*
2022

Factors associated with postoperative complications and costs for adrenalectomy in benign adrenal disorders. *Surgery*
Sung, T., Tennakoon, L., Alobuia, W. M., Seib, C., Cisco, R., Lin, D., Kebebew, E.
2021

Superior sensitivity of 18F-fluorocholine: PET localization in primary hyperparathyroidism. *Surgery*
2021

Racial disparities in the utilization of parathyroidectomy among patients with primary hyperparathyroidism: Evidence from a nationwide analysis of Medicare claims. *Surgery*
2021

Accuracy of 18F-fluorocholine PET for the detection of parathyroid adenomas: prospective single center study
SOC NUCLEAR MEDICINE INC.2021

Prioritizing Quality Improvement in Geriatric Surgery in 7 Veterans Administration Hospitals: Current Levels of Implementation of Standards Defined by the American College of Surgeons: Geriatric Surgery Verification Program through Structured Processes
Kazaure, H., Lagoo-Deenadayalan, S. A., Ahuja, V., Seib, C., Balentine, C., Iannuzzi, J., Robinson, T., Russell, M.
ELSEVIER SCIENCE INC.2020: E24–E25

Postoperative Function as a Measure of Quality in Geriatric Surgical Care-Can We Do Better? *JAMA surgery*
Seib, C. D., Arya, S.
2020

Anatomic Variations From 120 Mental Nerve Dissections: Lessons for Transoral Thyroidectomy. *The Journal of surgical research*
2020; 256: 543–48

Analysis of Primary Hyperparathyroidism Screening Among US Veterans With Kidney Stones. *JAMA surgery*
Ganesan, C., Weia, B., Thomas, I., Song, S., Velaer, K., Seib, C. D., Conti, S., Elliott, C., Chertow, G. M., Kurella Tamura, M., Leppert, J. T., Pao, A. C.
2020

Reducing Opioid Use in Endocrine Surgery Through Patient Education and Provider Prescribing Patterns. *The Journal of surgical research*
2020; 256: 303–10

Patient complexity by surgical specialty does not correlate with work relative value units. *Surgery*
Ramirez, J. L., Gasper, W. J., Seib, C. D., Finlayson, E., Conte, M. S., Sosa, J. A., Iannuzzi, J. C.
2020

The influence of cosmetic concerns on patient preferences for approaches to thyroid lobectomy: A discrete choice experiment. *Thyroid : official journal of the American Thyroid Association*
2020

Ensemble machine learning for the prediction of patient-level outcomes following thyroidectomy. *American journal of surgery*
2020
Trends in Adrenal Surgery-The Changing Nature of Tumors and Patients
JOURNAL OF SURGICAL RESEARCH
Chen, Y., Chomsky-Higgins, K., Nwaogu, I., Gosnell, J. E., Seib, C., Shen, W. T., Suh, I., Duh, Q.
2019; 236: 129–33

Treatment of Primary Aldosteronism Reduces the Probability of Obstructive Sleep Apnea
JOURNAL OF SURGICAL RESEARCH
2019; 236: 37–43

Invasive Procedures to Improve Function in Frail Older Adults Do Outcomes Justify the Intervention?
JAMA INTERNAL MEDICINE
Seib, C. D., Finlayson, E.
2019; 179 (3): 391–93

Risk Factors Associated With Perioperative Complications and Prolonged Length of Stay After Laparoscopic Adrenalectomy
JAMA SURGERY
Chen, Y., Scholten, A., Chomsky-Higgins, K., Nwaogu, I., Gosnell, J. E., Seib, C., Shen, W. T., Suh, I., Duh, Q.
2018; 153 (11): 1036–41

Postoperative Pain and Opioid Use after Thyroid and Parathyroid Surgery: A Novel, Prospective Short Messaging Service-Based Survey
ELSEVIER SCIENCE INC.2018: E121

Patient Frailty Should Be Used to Individualize Treatment Decisions in Primary Hyperparathyroidism
WORLD JOURNAL OF SURGERY
Seib, C. D., Chomsky-Higgins, K., Gosnell, J. E., Shen, W. T., Suh, I., Duh, Q., Finlayson, E.
2018; 42 (10): 3215–22

Parathyroid Cryopreservation: Clinical Applications in the Era of Synthetic Parathyroid Hormone
ELSEVIER SCIENCE INC.2018: E120
Nwaogu, I., Sedaghati, M., Sukpanich, R., Chomsky-Higgins, K. H., Chen, Y., Seib, C. D., Suh, I., Shen, W. T., Gosnell, J. E., Duh, Q.

Association of Patient Frailty With Increased Risk of Complications After Adrenalectomy
JAMA SURGERY
Anderson, J. E., Seib, C. D., Campbell, M. J.
2018; 153 (10): 966–67

Hidden in Plain Sight: Transoral and Submental Thyroidectomy as a Compelling Alternative to "Scarless" Thyroidectomy
JOURNAL OF LAPAROENDOSCOPIC & ADVANCED SURGICAL TECHNIQUES
Chen, Y., Chomsky-Higgins, K., Nwaogu, I., Seib, C. D., Gosnell, J. E., Shen, W. T., Suh, I., Duh, Q.
2018; 28 (11): 1374–77

Less is more: cost-effectiveness analysis of surveillance strategies for small, nonfunctional, radiographically benign adrenal incidentalomas
MOSBY-ELSEVIER.2018: 197–203

The Underestimated Risk of Cancer in Patients with Multinodular Goiters After a Benign Fine Needle Aspiration
WORLD JOURNAL OF SURGERY
Campbell, M. J., Seib, C. D., Candell, L., Gosnell, J. E., Quan-Yang Duh, Clark, O. H., Shen, W. T.
2015; 39 (3): 695–700

Differences Between Bilateral Adrenal Incidentalomas and Unilateral Lesions. JAMA surgery
2015; 150 (10): 974–78

Utility of serum thyroglobulin measurements after prophylactic thyroidectomy in patients with hereditary medullary thyroid cancer
SURGERY
Seib, C. D., Harari, A., Conte, F. A., Duh, Q., Clark, O. H., Gosnell, J. E.
2014; 156 (2): 394–98

Adrenalectomy Outcomes Are Superior with the Participation of Residents and Fellows
JOURNAL OF THE AMERICAN COLLEGE OF SURGEONS
Seib, C. D., Greenblatt, D. Y., Campbell, M. J., Shen, W. T., Gosnell, J. E., Clark, O. H., Duh, Q.
2014; 219 (1): 53–60

Vandetanib and the management of advanced medullary thyroid cancer
CURRENT OPINION IN ONCOLOGY
Campbell, M. J., Seib, C. D., Gosnell, J.