

2005 Distinguished Service Award— J. Kent Garman, M.D., M.S.

Presentation by R. Lawrence Sullivan, Jr., M.D.

Each year, the Committee on the Distinguished Service Award reviews the nominees for the CSA's highest award, only one of whom can be presented to the House of Delegates for consideration. The Bylaws specify that a recipient be an individual who has demonstrated outstanding and meritorious service to anesthesiology and the CSA. Since the inception of the Distinguished Service Award in 1974, there have been 20 such individuals who have been deemed worthy of this prestigious recognition. Last year, the CSA House of Delegates voted unanimously to present to Dr. J. Kent Garman the CSA's Distinguished Service Award, the 21st such honoree, in recognition of his outstanding contributions to this organization, to our specialty of anesthesiology, and to the myriad of other activities in which he has participated.

This occasion is not only special for Kent but it is equally special for the members of his family. So I would like first to welcome Kent's family—his lovely wife, Judy, without whose support and tolerance Kent would not be here today to receive this award, and their children, Ingrid, Greg, Kim, and Karen. Ingrid's husband, Giacomo Bacca, is also here, although Greg's wife, Molly, needed to remain at their home in Denver.

It would be tempting for me to use this occasion as an opportunity to roast my good friend and colleague, Dr. Garman. In fact, Kent suggested that I might keep my remarks on the light and humorous side. I think that we would all agree that there is much fodder that could be used for this purpose. However, Kent's career in medicine is so unique in every aspect that I would be remiss if I did not mention some of the reasons why we are here today to honor this individual who has touched most of us in some positive way as doctor, teacher, problem solver, leader, aviator, husband, father, and friend.

I first met Kent in 1973 following his arrival from the University of Pennsylvania, his recruitment to the anesthesia faculty being one of the best acquisitions during Phil Larson's tenure at Stanford. Being the obstinate resident that I was in those days, I was determined to show Kent how things were done in the heart room at Stanford. Such was not the case. Kent quickly established his presence and raised cardiac anesthesia to a whole new level. His easy-going demeanor and sense of confidence enabled him to gain the support of the members of a world-renowned cardiac surgery program under the leadership of the transplant pioneer, Dr. Norman Shumway, who proved to be one of Kent's biggest fans and admirers. Kent's reputation as clinician, teacher and problem solver grew quickly among

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the residents, faculty, and operating room staff. I was fortunate to be there and to learn many valuable things from Kent in those early years at Stanford, although Kent would admit that teaching anything to me was not easy!

Kent’s career at Stanford blossomed during his tenure as chief of cardiac anesthesia and the establishment of a fellowship program in which Kent continued to teach and perform clinical research. He also endeavored to coordinate the resources of the Stanford operating rooms, thus establishing the anesthesia department as a leader in operating room management. During this time, Kent proudly provided anesthesia for the first successful heart-lung transplantation in the world. In 1982, Kent began a nine-month sabbatical during which he completed a Masters of Science in Management, with honors, from the prestigious Sloan Program at Stanford Business School under the mentorship of the renowned health economist, Dr. Alain Enthoven.

Kent left Stanford in 1984 and joined a community practice at Sequoia Hospital in Redwood City, where he soon became chief of the department and, not long thereafter, president of the Medical Staff. His involvement extended beyond the walls of Sequoia to active involvement in the San Mateo County Medical Association, the CMA, and local foundation boards. These experiences in private practice enabled him to better understand the economic and political challenges of anesthesiologists in the private sector. In 1998, he returned to Stanford as an Associate Professor of Anesthesiology, pursuing academic advancement in the tenure track.

During his career, Kent has contributed to our specialty and to various community activities in many ways. He was a Senior Examiner for the American Board of Anesthesiology for over 20 years. He volunteered his services to Interplast for over 12 years. He has been a consultant to the Medical Board of California and has conducted peer reviews around the country for the ASA. In 1976, he was president of the Association of Cardiac Anesthesiologists. Kent was also the founding president of the Stanford Anesthesia Alumni Association. Along the way, he has written innumerable peer reviewed and non-peer reviewed scientific publications, authored book chapters on cardiac anesthesia and information technology, and lectured at numerous national educational conferences. In 2003, Kent was elected as president-elect of the Medical Staff of Stanford Medical Center. Recently, he has agreed to assume the title of “Physician Advisor” for his community’s disaster preparedness committee. He has indeed been a busy man.

Like many of us, Kent got his feet wet in medical politics as a CSA delegate. Subsequently, he was elected to the CSA Board representing District 4, having successfully survived one of the most spirited and closest races in my memory,

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by running against both Tom Feeley and me. Later, Kent served as CSA treasurer during a time that CSA’s finances were in a downward spiral. I credit him for bringing fiscal stabilization and structure to this organization. Kent served as CSA president with distinction from 1994-1995. Other than having had experience in the academic as well as in the private sector to help understand the issues and the challenges of all CSA members, Kent has always been the consummate problem-solver. How often have those of us, faced with a seemingly unresolved problem, said “Let’s ask Kent” or “Maybe Kent can fix it”? To his friends and colleagues, Kent has always been the “go-to” guy! In that spirit, Kent was instrumental in the establishment of the CSA Web Site and today he remains as CSA’s editor of electronic media. At the time of Art McGowan’s retirement as editor of the *CSA Bulletin*, Kent and Steve Jackson shared the title as co-editors.

Following the encouragement of his friend from childhood, former ASA President, Dr. Rick Siker, as well as timely committee appointments by his former colleague from Penn, also a former ASA President, Dr. Skip Ellison, Kent’s energy and experience were tapped for national use. For several years, Kent chaired one of the most important and prestigious ASA committees, the Committee on Quality Improvement and Practice Management. He continues today as a member of that committee which has since evolved into the Committee on Quality Improvement and Departmental Administration, as well as on the Committee on Performance and Outcomes Measurement. Likewise, his expertise in electronic communications gadgetry has ensured his longevity on ASA’s Committee on Electronic Media and Information Technology, otherwise known as EMIT. Kent has served in the ASA House of Delegates for 20 years and currently is the alternate director from California on the ASA Board of Directors. Had Kent decided to ascend in the officer ranks of the ASA, I have no doubt that he would have been one of the finest-ever ASA presidents.

It is often difficult to figure out what makes someone like Kent Garman tick. Many of us have been molded by our medical school and post-graduate training experiences. Kent is an undergraduate product of Duke University and completed medical school at Temple University in 1965. After fulfilling a three-year commitment to the U.S. Navy, he completed his training and research fellowship in anesthesiology at the University of Pennsylvania in 1972. Much of his demeanor and personal characteristics, however, can be traced back to his experiences in the military, especially during his 13-month tour in Vietnam from 1967-1968. It was in Chu Lai that he was assigned to a 400-member Marine Corps attack squadron for which he served not only as the flight surgeon but was designated to fly on 25 combat missions. His duty in Vietnam earned him numerous decorations including the Marine Corps/Navy Air Medal and Naval Commendation Medal for Valor in

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Combat. Although the medals and the uniform have long been put away, what remains and defines the persona of Kent Garman are those unique qualities of dedication, discipline, challenge, adventure, strength, integrity, perseverance, and camaraderie. He has been a role model for young physicians as well as for his contemporaries.

We as representatives of our colleagues in anesthesiology pay tribute today to Kent Garm an for his contributions to our specialty, for striving for perfection in all that he has done, and for exemplifying the finest qualities of a true physician.

It is thus with great pleasure that I present to this gathering the recipient of the Distinguished Service Award for 2005, Dr. J. Kent Garman.

Acceptance Speech by J. Kent Garman, M.D., M.S.

Dr. Sullivan, Madam President, Officers, House of Delegate members, CSA staff, distinguished guests, and my family.

Well, I asked Larry to do only one thing: to be funny. I would much rather be roasted than eulogized. I must thank Larry for all the effort he put into this. I also need to acknowledge and thank the many people who made this award possible. I will not list names for fear of leaving someone out, but it certainly includes the past and current leadership and office staff of the CSA and many others. I will tell you that I was genuinely surprised when I was announced as the recipient of this award. This is a once in a lifetime honor, and I do not take it lightly. I hope I deserve it.

I would like to talk very briefly about the concept of “service.” I am aiming this at the numerous young people in the audience, many of whom are just starting their involvement with the CSA. My hope is to encourage your enthusiastic and continuing participation in this organization.

My own definition of service means anything that you do, usually unpaid or poorly paid, that contributes something good to your country, your community, your profession, your hospital, your university, and any other organization that you can think of. I guess I really believed the words of JFK when he said: “Ask not what your country can do for you, ask what you can do for your country.” This important quotation applies to service to any entity.

I deeply believe in the concept of service. You have to have a strong belief that your efforts are actually important in the long run. It is not always easy to serve, especially in the military. Unfortunately, there is a high opportunity-cost associ-

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ated with any service. In other words, you trade money for time. If anyone here thinks a Naval Reserve Captain on active duty during Desert Storm made a good salary, you are badly mistaken. It was about one-third of an average private practice income. Also, the president of the CSA gets a token salary that comes nowhere close to actual compensation for the time spent away from your paying job. Being chair of your department or chief of staff of your hospital does not pay well, if at all.

But—this does not really matter when you feel the self-satisfaction of being able to do something that you feel is worthwhile. Jobs like these make life interesting and give you a chance to branch out into other areas of life. Those who do not serve in some way are simply relying on others to do those service jobs that ultimately benefit them. The best example of this is those physicians who refuse to join CMA or contribute to political action committees, yet who have benefited over the years from the massive reductions in malpractice rates produced by the CMA -instigated MICRA legislation.

Now—a few words about the CSA. My first, rather reluctant, exposure to the CSA came about in the mid-1980s when Dr. Caryl Guth, the district director and soon to be president, called me. She said that she was going to nominate me for a CSA alternate delegate slot. I replied that I was really busy and might not have time for this. She, however, would not take “no” for an answer and assured me that it would be a minimal time commitment. Little did I know what I was getting into.

My thought at my first House of Delegates meeting was that I really did not understand what was going on—all that talk about resolutions and consent calendars. (It probably took me a year until I understood that a consent calendar actually had nothing to do with a calendar.) Well, to make a long story short, I slowly rose up the ranks and actually got elected to president in 1994.

Anyone in this room can be President if you want to—the secret is being willing and available to do the work and making sure you have fun as you do it. It is also important to respect others’ opinions and to allow minority opinions to be debated. One of the most important lessons I learned is that the person who loses his temper in a debate automatically loses the debate.

Why did I continue and progress in this organization? Well, it wasn’t because I thought things got done quickly and progress was immediate. On the contrary, things move glacially slow. I discovered the “small bite” theory. If you have a goal, you can reach it if you are logical, stubborn, persistent, and keep nibbling

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away at the obstacles. Surprisingly, once you reach your goal, no one really understands how you got there.

I also discovered that if we didn’t speak for California anesthesiologists, no one would. If you don’t have a place at the negotiating table, bad things happen. In short, it is slow but important work to be a part of the CSA leadership structure.

I urge all of you who are alternate delegates or delegates to aspire to the presidency of the CSA. If I could do it, anyone can. I also urge the Directors and Officers of the CSA to nurture and encourage those juniors who are willing to serve and do the work. Look for those persons in your district who have already shown a tendency toward leadership. Call them up and tell them that you want them to be an alternate delegate or delegate. Just as Caryl Guth did with me, do not take “no” for an answer. They are the future of CSA. We must all be mentors.

Last, I would like to thank my family for supporting me. I especially need to thank my wife of 40 years, Judy, who had an amazing amount of love and patience during my many absences away from home.

Finally, I would like to introduce my family members in the back of the room who are here for this award. My wife Judy, my daughter Ingrid, her husband Giacomo, and my two grandchildren, Dario and Erica. Also my son Gregory and my third grandchild, Maxwell. His wife Molly is still back in Denver and could not come. Then my other two daughters, Karen and Kimberly (Kim was unable to come today). And last, my brother-in-law and sister-in-law, David and Sharon Low. I thank all of you for coming.

I would also like to thank a very important mentor and friend who could not be here in person today. I would most certainly not be on this podium today except for the advice and counsel of Dr. Rick Siker. Dr. Siker shaped my education and career from undergraduate school all the way to the specialty of anesthesiology. I thank him and his wife Eileen for their guidance.

In closing, I am deeply humbled by this award and thank you for giving it to me.

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Letter to the Editor:

Congratulations to Dr. J. Kent Garman on being the 2005 CSA-DSA Recipient. I have learned more about Dr. Garman’s career and service to anesthesiology as I read your personal introduction in the current *CSA Bulletin*.

There is a vignette I would like to share with you about Dr. Garman, though I do not know him as well as you. You probably have noticed a picture adorning the wall in his office of a certain leader in anesthesiology on which he might have scribbled, “Blame it all on him!” or something of that nature.

Decades ago, Dr. Rick Siker talked to a neighbor’s kid mowing his lawn. That young man was going to college and asked Dr. Siker’s advice for a major field of study. Dr. Siker suggested medicine, and the young man did. He came back after medical school to ask further advice for specialty consideration. Dr. Siker encouraged him to go to anesthesia. He did, and then came back after residency for more advice to decide practice opportunity. Dr. Siker thought that Stanford would be perfect, and again, he listened to the sage and joined the faculty at Stanford. That young anesthesiologist was Dr. J. Kent Garman, and the picture on his office wall of Dr. Siker bears this hidden story.

I might over dramatize Dr. Garman’s career story, but Dr. Siker told it with great pride and affection, and with his trademark humor. You might have heard of this story. If not, I hope you would enjoy this vignette of the Siker-Garman friendship of decades.

With warmest regards,

Patrick Sim
Librarian, Wood Library-Museum of Anesthesiology