2024
Sidney R. Garfield, MD
Exceptional Contribution Award
The Exceptional Contribution Award was established by the Board of Directors of The Permanente Medical Group in 2000 to recognize physicians who are instrumental in the development and dissemination of ideas and programs that have a significant impact on patients, colleagues, and the broader community.

About the Sidney R. Garfield, MD Exceptional Contribution Award

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Sidney R. Garfield, MD was the physician founder of Kaiser Permanente and one of the great innovators of 20th century American health care delivery.

Dr. Garfield was a surgeon and visionary. He first applied the novel principles of prepayment, prevention, and group medical practice in the 1930s, while he was providing medical and hospital services for construction workers building the Colorado River Aqueduct in the Mojave Desert.

Then, during World War II, he developed a medical care program for hundreds of thousands of workers and family members at Kaiser shipyards in the San Francisco Bay Area, the Vancouver/Portland area, and at the Kaiser Steel Mill in Southern California. His health care system focused as much on the prevention of illness as on caring for the sick.

Dr. Garfield looked for innovations in health care throughout his career. In the 1950s, his revolutionary hospital designs drew international praise. In 1960, he was in the vanguard of physicians who embraced the computer as a tool that could radically improve the delivery of medical care.

Historians writing about events of the 1900s see the work of Dr. Garfield in co-founding Kaiser Permanente as one of the major social contributions of the century.

“Keep your arms on each other’s shoulders and your eyes on the stars for innovation and change in the future.”

– Sidney R. Garfield, MD
2024 Awardees

Jitesh Vasadia, MD
Amiodarone Monitoring Program

Gregg Gayre, MD & Bonnie Quiroz, MD
Enterprise Eye Care Imaging Modernization

Gregory Marelich, MD
TeleCritical Care
"Patients feel cared for. They feel that somebody is watching over them with this powerful medication. It’s been very rewarding from both the safety and patient comfort perspectives."

Amiodarone Monitoring Program

Amiodarone is a powerful medication commonly used for treating cardiac rhythm disorders such as atrial fibrillation. While highly effective, if prescribed improperly, it can have serious side effects.

"Amiodarone is a toxic medication when used outside the prescribing guidelines, and we felt there was a safety gap that we could address with a technology and workflow solution," says Jitesh Vasadia, MD, who spearheaded the Amiodarone Monitoring Program.

Working with the KP chiefs of cardiology, Division of Research, and TPMG Consulting Services, Dr. Vasadia developed a workbench tool in the electronic medical record that automatically imports all patients taking amiodarone, creates alerts for missing and abnormal tests, and tracks quality metrics. A pharmacist-led medical assistant uses the workbench tool to monitor all patients taking amiodarone twice annually.

"Dr. Vasadia understood that to launch a successful program, he would need to pull on resources from many distinct parts of our integrated health care organization," says Brian Missett, MD, TPMG associate executive director. "He did this extremely efficiently to create a model program for the patients."

“People enjoyed the work they did, and within 4 months we had a very robust process that could be tracked to show efficiency and success,” Dr. Vasadia says.

After the Amiodarone Monitoring Program was launched at 12 KP medical centers, compliance for recommended biannual laboratory monitoring jumped from 30–40% to upwards of 80%. Likewise, the program halted inappropriate prescribing, reducing associated risks to patients. Plans are now underway to extend the program to all KP medical centers and other arrhythmic medications.

“Across the region, more than 200 cardiologists are extremely grateful to Dr. Vasadia,” says Howard Dinh, MD, KP Northern California chair of cardiology chiefs. "In this day and age of physician burnout, he was able to centralize the process, allowing us to take care of more urgent issues and loop us in when our expertise is really needed."
Enterprise Eye Care Imaging Modernization

The field of ophthalmology is transforming from examining eyes directly to using images for monitoring disease progression and intervening to prevent vision loss. Reviewing digital images is now essential to how ophthalmologists diagnose and treat eye conditions.

By the early 2020s, KP’s antiquated system for managing digital images was not keeping up. “We were acquiring hundreds of thousands of images each year,” says Gregg Gayre, MD, TPMG chief technology officer and former TPMG chief of ophthalmology. “We needed to organize, access, pull up and process them, and make medical decisions on the fly.”

Dr. Gayre partnered with Bonnie Quiroz, MD, KP North Valley ophthalmologist and a member of the KP national technology standards committee, to completely overhaul and modernize the technology that KP doctors use to review digital eye images. Dr. Gayre had the strategic vision while Dr. Quiroz took the tactical lead on training and user acceptance.

KP ophthalmologists across all 8 regions now have the ability to quickly access and compare multiple images. “We built in functionality to give ophthalmologists what they want with the least number of clicks,” Dr. Quiroz says.

Poorab Sangani, MD, KP Northern California co-chair of ophthalmology chiefs, says, “All of us who work in ophthalmology went from absolutely frustrated to absolutely ecstatic in a span of less than two and a half years.”

The new system is also fully integrated with KP’s electronic medical record. “They came up with an order-based workflow to integrate from one system to another, which reduced the time physicians spent manually entering images,” says Smita Rouillard, MD, TPMG associate executive director. “It was brilliant.”

The American Academy of Ophthalmology now describes KP as the model for digital eye imaging standardization. Drs. Gayre and Quiroz are working on expanding the new technology to additional image-reliant KP specialties such as radiology and integrating artificial intelligence to further improve efficiency.

“The new system is reliable and fast, and we can do lots of things we couldn’t before,” says Robin Vora, MD, KP Northern California co-chair of ophthalmology chiefs. “Most importantly, the clinicians love it. We went from a pain point to a great source of pride.”

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“Gregg Gayre, MD
Ophthalmology, KP San Rafael

Bonnie Quiroz, MD
Ophthalmology, KP North Valley

“We are now contributing to the transformation of eye care delivery throughout the world.”

“It was a lot of hard work, but I knew that this ophthalmic imaging system was going to be so much better than what we had before.”

“Poorab Sangani, MD, KP Northern California co-chair of ophthalmology chiefs, says, “All of us who work in ophthalmology went from absolutely frustrated to absolutely ecstatic in a span of less than two and a half years.”

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“TeleCritical Care

Across KP Northern California, the TeleCritical Care program spearheaded by Gregory Marelich, MD, now provides patients in the intensive care unit (ICU) and their nurses with access to a TPMG “teleintensivist” during the critical nighttime hours. “We utilize telepresence and remote monitoring systems to deliver rapid, early interventions for our intensive care unit patients,” says Dr. Marelich, regional medical director of TeleCritical Care. “We have demonstrated reductions in mortality as well as in ICU and hospital length of stay in facilities that have TeleCritical Care.”

Operating at three regional hubs from 8 p.m. to 8 a.m., 73 intensivists and 12 nurses provide coverage to more than 330 ICU beds nightly. If a nurse is concerned about an ICU patient, they contact the TeleCritical Care hub, consult with an ICU nurse, and may be transferred to a physician for remote evaluation of the patient. “Physicians are taking over 100 calls a night, so there’s a clear need for this kind of coverage,” says Stephen Parodi, MD, TPMG associate executive director.

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“I’ve spoken with families with questions about care in the middle of the night and have been able to alleviate their concerns. For patients and caregivers, the ability to talk to an intensivist overnight is very meaningful.”

Gregory Marelich, MD
Critical Care Medicine, KP South Sacramento
2023

Douglas Balster, MD, PhD
Pediatrics, KP Redwood City
Gender Expression Care

James Click, MD
Dermatology, KP Diablo Service Area
Home Phototherapy for Psoriasis

Katherine Clyman, MD
Dermatology, KP Diablo Service Area
Home Phototherapy for Psoriasis

Maisha Daves, MD
Family Medicine, KP Napa-Sonoma
Home Phototherapy for Psoriasis

Daniel Greninger, MD
Pediatric Ophthalmology
KP Diablo Service Area
Pediatric Vision Screening

Ngoc Pham, MD
Dermatology, KP Santa Clara
Home Phototherapy for Psoriasis

Priya Rao, MD
Hematology, KP San Jose
Subcutaneous Diabetic Ketoacidosis Treatment

Charles Shih, MD
Facial Plastic and Reconstructive Surgery, KP East Bay
Gender Expression Care

Jennifer Slovis, MD
Family Medicine, KP East Bay
Gender Expression Care

2022

Simon Ashiku, MD
Thoracic Surgery, KP East Bay
Gastric-Esophageal Cancer Program

Subhendra Banerjee, MD
Gastroenterology, KP Fresno
Senior Surgical Program

I-Yeh Gong, MD
Medical Oncology
KP South Sacramento
Gastric-Esophageal Cancer Program

Yan Li, MD
Medical Oncology, KP East Bay
Gastric-Esophageal Cancer Program

Betty Sub-Burgmann, MD
Gynecologic Oncology
KP Walnut Creek
Standardized Ultrasound-Based Ovarian Cancer Risk Assessment

Swee Teh, MD
Gastrointestinal Surgery
KP South San Francisco
Gastric-Esophageal Cancer Program

2021

Allen Fisher, MD
Neonatology, KP Walnut Creek
Early Onset Sepsis Calculator

Mark Gasparini, MD
Urology, KP South San Francisco
Kidney Stone Prevention Program

Tatjana Kolevska, MD
Oncology, KP Vallejo
Transforming Oncology & Hematology Care

Michael Kuzniwicz, MD
Pathology, KP San Francisco
Early Onset Sepsis Calculator

Charulata Ramaprasad, MD
Infectious Diseases, KP San Jose
Covid-19 Pandemic Response

2020

Gabriel J. Escobar, MD
Hospital Operations Research
KP Division of Research
Advance Alert Monitor

James Jang, MD
Cardiology, KP San Jose
Helping Low-Income and Homeless Populations

Leonid Pravoverov, MD
Nephrology, KP Oakland
Optimal Renal Replacement Therapy

David Witt, MD
Infectious Diseases, KP Oakland
Preventing Hospital-Acquired Pneumonia

Naveen Chandra, MD
Ophthalmology
KP Diablo Service Area
Corneal Crosslinking

Jason Lee, MD
Pathology, KP Santa Clara
Bovine Conversion Program

Suchada Nopachai, MD
Ob-Gyn, KP San Jose
Turner CRI into Law

Bethan Powell, MD
Gynecologic Oncology
KP San Francisco
Women’s Hereditary Cancer Centers

Please visit tpmgawards.kp.org for a complete list of award recipients.