



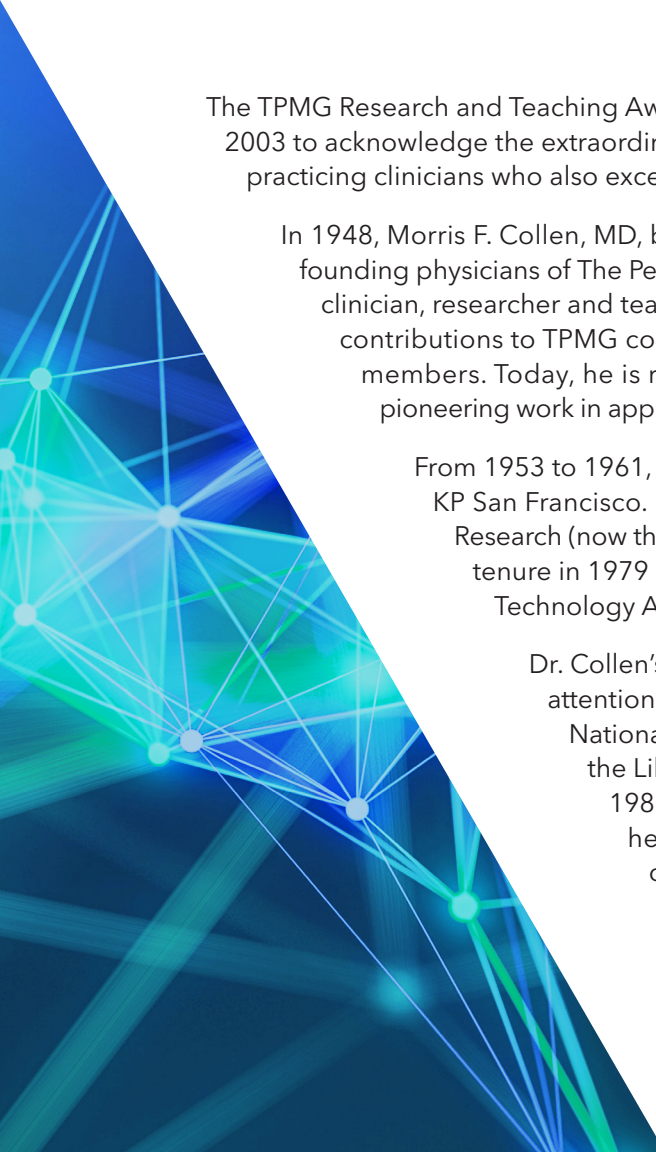
2022 RESEARCH AND TEACHING AWARDS

PERMANENTE MEDICINE®
The Permanente Medical Group

A portrait of an elderly man with white hair and glasses, wearing a dark suit, white shirt, and red tie. The background is dark with a blue and green geometric pattern on the right side. The text is overlaid on the image.

Morris F. Collen, MD

"To be a good physician, you have to keep up with what is new, which means you have to be involved in research and training. Patient care is our first obligation, and to maintain a high quality of care, we must also research and teach. And we do."



The TPMG Research and Teaching Awards were established in 2003 to acknowledge the extraordinary accomplishments of practicing clinicians who also excel in research and teaching.

In 1948, Morris F. Collen, MD, became one of the seven founding physicians of The Permanente Medical Group. As a clinician, researcher and teacher, Dr. Collen made significant contributions to TPMG colleagues and Kaiser Permanente members. Today, he is recognized internationally for his pioneering work in applying computer technology to medicine.

From 1953 to 1961, Dr. Collen served as physician-in-chief at KP San Francisco. He became director of Medical Methods Research (now the KP Division of Research) in 1961, ending his tenure in 1979 when he became director of the Division of Technology Assessment.

Dr. Collen's work in medical computing attracted national attention. He was elected to the Institute of Medicine of the National Academy of Science in 1981 and served as chair of the Library of Medicine's Board of Scientific Counselors from 1985 to 1987. As a scholar-in-residence from 1987 to 1993, he wrote a definitive history of medical applications of the computer. From 1983 onward, Dr. Collen served as a consultant with the KP Division of Research, where he remained an enthusiastic supporter of research and teaching in TPMG.

Dr. Collen passed away in 2014 at age 100.

A portrait of Kern Guppy, MD, PhD, a middle-aged Black man with a goatee, wearing a dark blue suit, white shirt, and light blue tie. He is smiling slightly and looking towards the camera. The background is a blurred outdoor setting with greenery and a building. The image is framed by a purple geometric overlay on the right side, featuring a network of white lines and dots.

**Kern Guppy,
MD, PhD**

Neurosurgery
KP Sacramento

“My motivation for doing research is a passion for solving problems and figuring out how to give the best care to our patients. Research is one way I can get those answers.”

"Career contribution to research can take many forms," says Betty Suh-Burgmann, MD, chair of the Central Research Committee. "Some people spend their careers conducting original research. Others dedicate their time to mentoring up-and-coming researchers. And still others invest in the infrastructure of research systems to make research more possible. Dr. Guppy is one of those rare individuals who has done all three."

Dr. Guppy has conducted more than 40 original research projects, ranging from rare case studies and case reviews to research projects with thousands of subjects, since joining The Permanente Medical Group in 2004. He also cofounded the Kaiser Permanente Spine Registry in 2009, a collaboration between KP Northern and Southern California that automatically collects data on patients in these regions undergoing spine surgery. Data collected includes demographics, diagnoses, operative times, lengths of stay, and reoperations.

Using this registry, which today includes more than 30,000 subjects, Dr. Guppy and his colleagues have published more than 15 research papers, some of which have changed clinical practice in Kaiser Permanente and beyond. One breakthrough study, published in *Spine* in October 2014, examined the usefulness of bone morphogenetic protein, a costly bone additive for spinal fusions.

"Our research showed that this bone additive did not change fusion rates," Dr. Guppy says. "After our findings were published, we noted a nearly 50% reduction in its use in Kaiser Permanente regions throughout the country over the next 5 to 8 years. Several papers by outside institutions subsequently duplicated our findings."

For nearly 2 decades, he also has been the offsite director of the UC Davis and UC San Francisco neurosurgery residency programs at Kaiser Permanente, as well as an associate clinical professor of neurosurgery at UCSF and clinical assistant professor at UC Davis.

"One of things that characterizes Dr. Guppy's career is his selflessness," says Dr. Suh-Burgmann. "He's motivated by wanting to improve care for his patients, his colleagues, and the organization. He sees a huge opportunity to do that through research, and has steadfastly pursued every avenue available to him to achieve those goals."

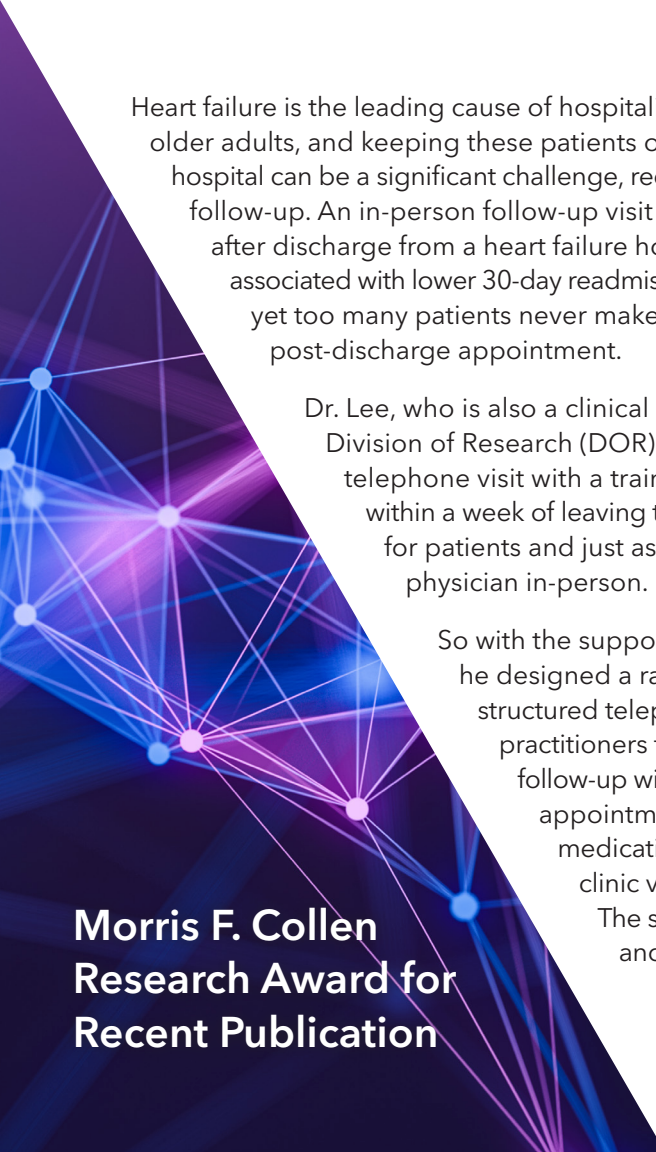
**Morris F. Collen
Research Award for
Career Contribution**

A portrait of Keane Lee, MD, a man with dark hair, smiling, wearing a dark blue suit, light blue shirt, and dark tie. The background is a blurred outdoor setting with greenery and a building. The image is framed by a dark blue diagonal shape on the right side, which contains a network diagram of glowing blue and purple nodes connected by lines.

Keane Lee, MD

Cardiology
KP Santa Clara

“Many patients vulnerable to adverse outcomes find it difficult to keep in-person appointments, likely due to frailty, lack of social support, or caregiver fatigue. Now we can offer remote alternatives, while maintaining the highest quality of care.”



Heart failure is the leading cause of hospitalization in older adults, and keeping these patients out of the hospital can be a significant challenge, requiring close follow-up. An in-person follow-up visit within 7 days after discharge from a heart failure hospitalization is associated with lower 30-day readmission, for example, yet too many patients never make it to their early post-discharge appointment.

Dr. Lee, who is also a clinical investigator at the KP Division of Research (DOR), wondered whether a telephone visit with a trained nurse or pharmacist within a week of leaving the hospital might be easier for patients and just as effective as seeing their physician in-person.

So with the support of a DOR Delivery Science grant, he designed a randomized trial that compared a structured telephone follow-up with nonphysician practitioners trained in heart failure to an in-person follow-up with their primary care physician. Telephone appointments included a structured protocol for medication titration, lab orders, and booking urgent clinic visits as needed, under physician supervision. The study compared the effect on 30-day readmission and death.

Among nearly 3,000 participants, Dr. Lee and his research team found no significant differences in 30-day heart-failure readmission, all-cause readmission, or all-cause death. In fact, 92% of patients who were randomized to telephone follow-up completed their 7-day visits, compared to 79% in those assigned to physician clinic follow-up. These findings show that remote care with trained non-physicians in an integrated healthcare system improves completion of follow-up and maintains effectiveness for preventing readmission and death, compared with in-person physician appointments.

“Dr. Lee’s success in designing and carrying out a pragmatic, rigorous, randomized trial that answers a fundamental, yet challenging question like how best to do follow-up care with heart failure patients is commendable,” says Betty Suh-Burgmann, MD, chair of the Central Research Committee. “Also commendable is the breadth of the study - the median age was 78 years old, and 41% were non-white, effectively demonstrating that it is indeed possible to recruit an inclusive, diverse population into research studies.”

**Morris F. Collen
Research Award for
Recent Publication**

A portrait of Tran Nguyen, MD, a middle-aged man with dark hair, wearing a light blue dress shirt and a striped tie. He is smiling slightly and looking towards the camera. The background is a blurred outdoor setting with a brick wall and greenery. The image is framed by a dark blue diagonal overlay on the right side, which contains a network diagram of glowing blue and purple nodes connected by lines.

Tran Nguyen, MD

Pediatric
Hospital-Based
Medicine
KP Roseville

"We're always concerned about missing a serious bacterial infection in a young infant. At the same time, we don't want to put the baby and parents through the challenge of a lumbar puncture or antibiotics that end up having been unnecessary."

When an infant who's less than 2 months old shows up with a fever, which tests are truly critical? Dr. Nguyen asked himself this question many times before embarking on a study that would ultimately address it.

"Some infections, such as a urinary tract infection, bacteremia, or meningitis, can make young babies very ill, have long-lasting disability, or be fatal," he explains. "So it's critical to distinguish which of the few cases are high risk and treat them promptly, without having to subject the majority of febrile infants to a potentially unnecessary battery of tests or antibiotics."

Several published protocols have been available for some time to help identify infants at higher risk, but in Dr. Nguyen's mind, they are far from perfect. Some require tests not universally available; others require invasive and/or painful procedures like lumbar punctures, parenteral antibiotics and hospitalization.

So in 2016, he and his team developed and implemented a new guideline called the "Roseville protocol." This newer protocol modifies previous guidelines by adding a high-risk temperature criterion of 38.5°C for infants who are 7 to 28 days old and by allowing febrile infants 29 to 60 days old

with abnormal urinalysis but reassuring complete blood cell counts to be discharged home on oral antibiotics without receiving a lumbar puncture.

In 2019, Dr. Nguyen collaborated with the KP Division of Research to conduct a retrospective study comparing the performance of the Roseville protocol to other published protocols. What they found is that the Roseville protocol is just as effective at identifying babies at high risk for infection, but that it results in fewer babies needing to have lumbar punctures, parenteral antibiotics, and hospitalizations.

"The Roseville protocol helps pediatricians better target interventions to those babies who are really most likely to benefit from them," says Betty Suh-Burgmann, MD, chair of the Central Research Committee. "Dr. Nguyen's research is a great example of a clinician asking a question that relates to his own clinical practice, but in the end produces an answer that is affecting not only the care of babies and their parents in KP Northern California, but nationwide."

**Morris F. Collen
Research Award for
Recent Publication**

A portrait of Sumanth Rajagopal, MD, a middle-aged man with short grey hair, wearing a light grey suit jacket, a light blue shirt, and a yellow patterned tie. He is smiling slightly and looking towards the camera. The background is a blurred outdoor setting with green foliage. The image is framed by a teal and blue geometric design on the right side, featuring a network of white lines and dots.

Sumanth Rajagopal, MD

Infectious Diseases
KP East Bay

“In our specialty, we’re regularly called on to make sense of confusing situations. My colleagues and I took the same approach we use at the bedside to respond the pandemic - sifting through information and applying best practices to provide optimal care for our patients.”

When Dr. Rajagopal became chief of Infectious Diseases for the East Bay in January 2020, he couldn't have predicted what was to come. Yet just 2 months later, when faced with the harrowing reality of the COVID-19 pandemic, he didn't bat an eye. Instead, he rolled up his sleeves and went all in, helping to translate nebulous information about a then unknown disease into relatable and actionable clinical education.

"In just 2 years, Dr. Rajagopal delivered more than 100 educational sessions and hospital-wide grand rounds, far exceeding any individual's contribution to CME in the East Bay in the past," says Rita Ng, MD, physician-in-chief at KP Oakland. "His talks were tailored to each department's needs, and he went the extra mile to support staff, nurses, and respiratory therapists, too, to create a safety net of best practices in our hospitals."

In his educational talks, Dr. Rajagopal shared the latest COVID-19 evidence and workflows, and helped colleagues make sense of changing testing protocols and criteria for therapeutics. He digested and communicated new data at a rapid pace, and also collaborated with local county health departments and external hospitals to ensure accurate workflows and treatment plans.

"I see my role as an infectious disease physician to be that of a problem-solver," says Dr. Rajagopal, "with the ultimate goal of providing the best possible care for any patient who comes my way. Every case is unique and presents an opportunity to share some of the skills and learning I have acquired over the years to the next generation of physicians."

"He's an exceptional human being," Dr. Ng says, "an expert in his field, a phenomenal clinician educator, and a tremendous leader. And most of all, Sumanth is a kind, authentic, and caring colleague and friend, someone we can all lean on and have a good laugh with. He embodies all the best attributes of a Permanente physician: a leader in the community, a powerhouse within our medical center, and a true visionary guiding us into the future."

**Teaching Award
for Excellence in
Continuing Medical
Education**

A portrait of Kian Mostafavi, MD, a middle-aged man with short, graying hair, smiling warmly. He is wearing a dark gray textured blazer over a white collared shirt and a red, black, and white plaid tie. The background is a blurred outdoor setting with greenery and a building. The image is framed by teal geometric shapes on the left and right sides. On the right, there is a graphic of a green network with nodes and connecting lines.

Kian Mostafavi, MD

Vascular Surgery
KP San Leandro

“What I enjoy most about teaching are the individual connections I make. While students have different backgrounds and different things that motivate them, we all have a common thread - the underlying fact that we love helping others.”



Teaching Award for Excellence in Undergraduate & Graduate Medical Education

Dr. Mostafavi has been a vascular surgeon for 17 years, 9 of which have been with The Permanente Medical Group. Having had previous practices in Toronto, Canada, and Dayton, Ohio, he's had his fair share of adapting to the many facets of different health care systems. But one thing that has remained a constant has been his involvement in medical education.

"Teaching has been a passion of mine for nearly 2 decades," he says. "It's the secret ingredient that makes my medical practice all the more enjoyable."

Dr. Mostafavi expressed an interest in teaching from the moment he joined the medical group, and has been involved for nearly a decade with multiple teaching institutions as clinical faculty in the Greater Southern Alameda service area (GSAA). "He's really helped our service area establish a footprint in graduate medical education," says Eric Cain, MD, physician-in-chief at KP Fremont.

According to those who know him, what sets Dr. Mostafavi apart most as a teacher and mentor is his individualized approach. He creates a separate learning plan for each resident because he understands that each one has different approaches to how they learn. And he ensures everyone feels he or she is a member of the team.

"One of his students once commented to me that when he walked in the room, Dr. Mostafavi made him feel like he was just as important as the lead surgeon himself," says Kapil Dhingra, MD, physician-in-chief at KP San Leandro.

He's also had an impact on his colleagues. "When they see him teach, they often comment, 'I want to be just like him,' and then say something about how much he's done for our entire program," says Dr. Dhingra. "Kian is warm, he's humble, and he's compassionate. If you need anything for your patient, regardless of what specialty you're in, he will always go the extra mile. And the students see that."

"I've always believed in teaching the humanism behind being a physician – emphasizing the importance of attentiveness, humility, connecting with patients, and treating them like you'd want to be treated," Dr. Mostafavi says. "This is my ultimate objective when I'm working with students."

Morris F. Collen Research Award

2021

Ronald Melles, MD, Ophthalmology, KP Redwood City
Bethan Powell, MD, Gynecologic Oncology, KP San Francisco
Thomas Urbania, MD, Radiology, KP Oakland

2020

Dan Li, MD, Gastroenterology, KP Santa Clara
Nareg Roubinian, MD, Pulmonary Medicine, KP Oakland

2019

David Baer, MD, FACP, Oncology, KP Oakland
Douglas Corley, MD, PhD, Gastroenterology, KP San Francisco
Theodore Levin, MD, Gastroenterology, KP Walnut Creek
Andrea Wickremasinghe, MD, Neonatology, KP Santa Clara

2018

Dustin Ballard, MD, MBE, Emergency Medicine, KP San Rafael
Uli Chettipally, MD, MPH, Emergency Medicine, KP South San Francisco
Tara Greenhow, MD, Pediatric Infectious Diseases, KP San Francisco
Mamata Kene, MD, Emergency Medicine, KP Fremont
Dustin Mark, MD, Emergency Medicine, KP Oakland
Dana Sax, MD, MPH, Emergency Medicine, KP Oakland
David Vinson, MD, Emergency Medicine, KP Sacramento

2017

Robert Lundstrom, MD, Cardiology, KP San Francisco
Jamal Rana, MD, Cardiology, KP Oakland

Previous Award Winners (2017–2021)

Visit tpmgawards.kp.org
for complete list.

Teaching Award for Excellence in Continuing Medical Education

2021 Ingrid Lim, MD, Emergency Medicine, KP San Francisco

2020 Diane Chan, MD, Pediatrics, KP North Valley

2019 Neelesh Kenia, MD, Pediatrics & Sports Medicine,
KP San Francisco

2018 Victor Silvestre, MD, Internal Medicine, KP Oakland

2017 Cynthia Carmichael, MD, Family Medicine, KP Pinole

Teaching Award for Excellence in Undergraduate & Graduate Medical Education

2021 Amanda Williams, MD, MPH, FACOG
Obstetrics and Gynecology, KP Oakland

2020 Cheryl McBride, DO, Emergency Medicine, KP Santa Rosa

2019 Mary Patton, MD, FACP, Internal Medicine, KP Oakland

2018 Gabriel Flaxman, MD, Family Medicine, KP Vallejo

2017 Diane Sklar, MD, Urogynecology, KP San Francisco

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