President's Address: Making It Personal Through a Career of Service

Ronald M. Fairman, MD, held center stage at the Vascular Annual Meeting to present his presidential address, highlighting the personal side of vascular surgery and a career of service.

After acknowledging his family, friends, mentors, the international surgeon community, and his “family” at the University of Pennsylvania, he took the audience on “an abbreviated journey” to share events he hoped would resonate.

“Yes, it is true I was born at Penn and I am still there,” he joked. A rotation on the Penn Vascular Service led him to vascular surgery. “I was drawn to many aspects of the specialty: really sick patients, the opportunity to do tons of surgery, fast pace, the engagement of the faculty,” and more.

He was struck, too, he said, by the endurance of those with whom he worked. “They had incredible energy, resiliency, and commitment,” he said. “They reminded me of professional athletes, but obviously with a much more daunting vision and mission, constantly striving to become better surgeons and save more lives. It was all personal to them. The stakes were palpable, there was physical and emotional exhaustion, the successes and failures were obvious to everyone, and I wanted in.”

He started his own private practice after his fellowship. With hard work and a 24/7 schedule, he built a large practice with staff, incorporated, and began running a business. Feeling good about his contributions to his hospital, he requested new imaging equipment. The request was denied, with the CFO telling Dr. Fairman, “you are a financial loser for our hospital,” because length of stay for his ruptured AAA patients was much longer than the national average. “I was a loser because my patients were surviving,” he said, astonished that this CFO didn’t understand this. He told the CFO, “If I am a financial loser, I’m outta here. … This was personal and yes, I got the equipment for our vascular lab.”

He told several patient stories, including that of one who nearly died, but whose wife refused to let Dr. Fairman give up and stop the surgery. Complications arose from a left-behind sponge and Dr. Fairman ultimately had to operate again. He told the couple a large settlement would certainly be theirs if they sued, which they refused to do. Indeed, they sent Christmas cards for years. "This was personal," Dr. Fairman said.

“But above all else, keep your eye on the prize, those things that keep you human and grounded and help you maintain your humility. You will make it highly personal, and you will make a difference to your
patients through a career of service."

In the 1990s, with health care changing, he decided he needed to re-create his career. He returned to Penn; hospital officials - who "had discovered I wasn't a financial loser after all" - were not happy. And patients followed him. "It was personal and I provided a valued service," he said.

He took advantage of a new emphasis on clinical trials that allowed researchers to advance endovascular aortic and carotid therapies, among others, and the division became nationally recognized. The specialty became interesting to him again.

A 2007 malpractice case brought him low. During this self-described "dark time," SVS member Dr. David Gillespie put together a volunteer program to send members to Landstuhl, Germany, to provided additional vascular support for soldiers wounded in Iraq and Afghanistan. As a result of his inspiring two-week tour of duty, Dr. Fairman recovered "my sense of service, duty, and mission." Between 2007 and 2014, 177 SVS members participated, with 28 members performing multiple tours of duty. "Talk about making it personal and commitment to service!" he said.

Dr. Fairman also discussed his efforts at Penn to discuss the financial component of worth and service, in advance of his address. The exercise was illuminating. "For every dollar we primarily generate on the inpatient side, at least another dollar is generated for other services," he said.

He also highlighted many Society achievements and initiatives, including:

- An emphasis on quality outcomes; communicating the value of membership; practice guidelines, government relations work, and increased collaboration with other organizations.
- The relevance and value of VAM.
- A new initiative with the American College of Surgeons, the Vascular Validation Project, to create Vascular Centers of Excellence. "This will be of vital importance to the future success of our specialty and you will hear more about this over the next year," he promised.
- Efforts for the SVS to support members who increasingly practice in outpatient centers.
- Alignment around "advocacy, practice, education, the vascular team, and you, our membership."
- Integrating community-practice members into the SVS leadership and governance.

He ended with "pearls" of advice for the younger audience, including considering their careers as a sprint, not a marathon. Collaborate when possible, but retain ownership. Don't be afraid to make career changes and fail. Remain flexible; reinvent yourself. Don't flip out too often (which elicited a laugh from attendees). Retain professional passion. Start new programs. Become a mentor. Remember the mission is to serve patients.

"But above all else, keep your eye on the prize, those things that keep you human and grounded and help you maintain your humility," he said. "You will make it highly personal and you will make a difference to your patients through a career of service."

Paraphrasing U.S. Rep. Shirley Chisholm's quote that "Service is the rent we pay for the privilege of living on this earth," he applied it to vascular surgeons, who have a purpose to serve patients. "Service is the rent we pay for the privilege of patient care. It is deeply personal," he said.

"Colleagues, thank you for allowing me to be your president this past year," he concluded. "In this highly dangerous and volatile world, may God bless all of us and our mission to our patients."

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