



## Charles J. Garven, M.D.

### **1. Where did you go to medical school? Where was your residency?**

I graduated from Case Western Reserve University School of Medicine, Cleveland, Ohio, in 1987. I completed my family medicine residency at Medical University of South Carolina, Charleston, S.C., in 1990. I had terrific faculty and fellow classmates at both places.

### **2. Please describe your current (and past) practice setting/patient population - (i.e. rural, urban office setting; geriatrics, sports medicine, academic medicine, etc.)**

I have had a number of practice settings in the past 18 years. I have been in the heart of inner-city Cleveland full-time. I also worked for a number of years in the western suburbs of Cleveland. For the past two years, I have been the medical director of a primary care office for Lakewood Hospital. I get to work with two other dedicated family physicians. We are right on the border of an "inner-ring" suburb and the city of Cleveland. I have never been in one place with a more interesting and diverse patient population. We serve downtown CEOs, very successful professionals and at the same time and place we serve uninsured, "street people." We clearly deal with every socioeconomic level. We have physicians and staff that embrace our multicultural, multiethnic neighborhood.

### **3. Why did you choose family medicine? Was there a particular event/person that helped you decide to enter family medicine?**

I chose family medicine because of its inclusiveness, diversity and long term continuity of care. I wanted to take care of men and women, children and the elderly. I valued the long term relationships possible as a family doctor. There was no one event that triggered this, but I was very impressed by the interactions I saw between family doctors and their patients.

### **4. While working, what is the best part of your day? Why?**

I enjoy most moments in the exam room with patients. What a privilege it is to be with them as they share some of their most private and intimate worries, pains and losses. It is also great to celebrate their medical successes and other life events.

### **5. What is the most difficult part of your day? Why? How do you deal with it?**

The clerical parts of being a physician are a grind - satisfying insurance companies, pharmacy formularies and pre-authorizations. I find it all annoying and time consuming, but try to never let it consume me. It is a price worth paying for everything else I get to do.

**6. What do you think is the most important personality trait that a family physician can possess? Why?**

A family physician needs to be flexible. The same style of interaction does not suit every patient. Some need or want more formal interactions - some much more casual. Some want clearer directives - others want much more collaboration and joint planning. Some require more face to face time - others want to quickly get to the point and move on.

**7. What do you think patients value the most in their physician? Why?**

Patients assume a baseline of very good knowledge base and sound judgment from their doctors. You cannot compensate if you are missing that. I think that patients value the quality of the interaction with the doctor. They want to know that their doctor is listening, and that they have the doctor's full attention. Patients can tell when - for the duration of that visit - that the patient's health is the most important thing on the doctors' mind.

**8. What have you learned from your patients?**

My patients have taught me how to practice medicine. Medical school gave me the tools to begin to work with patients. My patients are still teaching me about good health, normal development throughout the lifecycle, acute and chronic illness, and even dying. They allow me to join with them during all these events and provide me with experiences to help the next patient.

**9. What can medical students do right now (other than study) to make themselves become more ready to become family physicians in the future?**

Take advantage of any opportunity to hang out with family physicians. Seek out doctors on the faculty, near school or near home.

**10. What other advice do you have for students who are interested in family medicine? And, for those who are not sure yet?**

If you are bright enough to get into medical school, you are bright enough to learn the science of the highest standards of care to diagnose and treat illness. There is a lot of challenge and excitement associated with successful diagnosis and treatment of illnesses. I think that family medicine is a great home for physicians who are more challenged and enthused about the long-term relationships with patients and families.