Kris Brickman, M.D. Interview for the Boonshoft School of Medicine 50th Anniversary Oral History Project

Kris Brickman

Kristen Dilger
Wright State University - Main Campus

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KB
Sorry about that Kristen, I got-

KD
Hi!

KB
I got tied up in another meeting late, so I apologize.

KD
Totally okay. I'm glad you're able to start early. How are you today?

KB
Just fine, trying to weather it out cold here so I think I'm getting to the end of it. But, yeah, it's not COVID, fortunately. So, it's just one thing after another, but nope, we're doing fine. How about you?

KD
I'm doing good. After this, I'm going to turn in my last final and then I'm done for the semester, so I'm just-

KB
Congratulations.

KD
Thank you. It's been a long semester. It's my first year of grad school, so I'm just getting by, surviving.
KB
Well, that's great. So, how did you come across this project?

KD
So, at Wright State I am in the public history program, and I'm taking an Intro to Archives class, and so the Archives had, like, a job position specifically for this project.

KB
Mm. Hmm.

KD
And my teacher told me about it and I applied, so I kind of just fell into it, being in the class, and I worked with an archive in Chicago that did something similar to this, but with dance people. So, I have a lot of experience with it.

KB
All right. Interesting. So, tell me how you want to proceed. What's the game plan here?

KD
Game plan is I have a list of questions, but basically, we are just going through your medical school career at Wright State and,

KB
Okay.

KD
-just to have a little bit of a conversation about it. Does that sound good to you?

KB
Okay, that's good, because my career was quite different than most, but that's fine. You know, good.

KD
That's what I like to hear. I like variety. We're just trying to get as many personal stories about Wright State and the Boonshoft School as we can.

KB
Yeah. I'm not sure how much you're going to want to embrace my story, though. So, you know, you'll find out as we get into it.

KD
I am an unbiased participant in this, so-
Let's just say, you know, my medical school career was fairly absentee almost the entire time, which of course all medical schools, you know, kind of turned in that direction. But I sort of was the trailblazer on not showing up for any of the lectures, so I'll leave it at that. Different time, different story, and of course, let's just say where we are right now in medical school is probably closer to the way I managed it than most of my classmates.

Fair enough. So, first, I'm just going to have you state your name, the year you graduated, and what you do now.

Okay, name is Kris Brickman. B R I C K M A N. Year I graduated from medical school was I'm pretty sure '83, you know, if I got that right, and I'm trying to coordinate on my other little, you know, graduate issues. So, that was Wright State, we were the third class. And let's see, what else, what am I doing now?

Mm hmm.

What I did after that, what I'm doing now is I've had a number of different positions. Right now, my primary title is the Chief Physician Executive at the University of Toledo Physicians, working at the University of Toledo Medical Center. Associate Dean for Simulation and Innovation here in the School of Medicine. Also, I started and developed the global health program here at the university and so I'm the Director of the Global Health program at the University of Toledo. I think those are the main titles. I'm a professor in the Department of Emergency Medicine. I actually developed the residency program in emergency medicine here at the University of Toledo about… let's see, '08… getting to be year 14, 13-14 years ago now. But like I said, I'm doing primarily more administrative type things. I also run several nursing facilities, so if you just want the scattered background, those are all the things that I'm doing today.

Wear many hats, right?

A few.

So, my first question to get us started is why did you decide to go Wright State for medical school?
KB
Well, that's where I got accepted to medical school. So, yeah, I went to Wright State, you know, mainly because that's the- I was on a waiting list and I got accepted and that was the first school that accepted me, so I took it. And so, it wasn't any more complicated than that. You know, it looked like an interesting place, and it was going to be the third class, they just got started, and I thought it was kind of an interesting place. And the way their format was arranged, you know, where there wasn't a base hospital on the campus, you know, like most medical schools. I thought that was kind of unique, gives you some diversity of being able to work at various different places. With all that being said, I went there because I got accepted there. That's it.

KD
Very good. And so, then what were the classes like?

KB
What the classes were like?

KD
Mm hmm

KB
As in good, bad, or indifferent, or what I felt about it?

KD
Let's do everything. First of all-

KB
I assume you're talking about the first two years?

KD
Yeah.

KB
Yeah, which were the more basic sciences, when you say classes, because obviously you don't have classes in your third and fourth year.

KD
Yeah.

KB
But, no, I mean, they were good, but that kind of gets into the way I handled medical school. You know, let's just say as a third class, back then we just started a note service. In fact, it just sort of was kind of a new thing that was developing in the medical schools, so that you would have somebody in the class that would be responsible for taking all the notes of whatever the
lecture had so that you could distribute it to all the other people in the class so that we knew we were all on the same page. In medical school, let's face it, the approach is different than undergrad. You know, as an undergraduate, let's face it, you're competing against the guy sitting next to you, you know, in the anatomy lab, you know, or in your physiology course. That guy's trying to get your position, you're trying to get his position, you know, and you're all trying to get into medical school. Once you're there, It tends to be- and I think we had this at Wright State- it tends to be more camaraderie, you know, it's like, “Okay, we're all in this together. Let's help each other out”. There's no reason to compete. Why would we compete? You know, so we kind of- it was more of a collaborative relationship. So anyway, you know, you had a note service, we all shared everything, we all took our turns doing the notes and shared that information with everybody. And then we'd have study groups that sort of went over everything and, let's just say, I was kind of the first of I guess the absentee students, you know. I, um, I had a job on the side, you know, that I worked full-time. I didn't have anybody to support me. Obviously, I could have got some loans, I guess, but I really didn't want to go too in debt to loans, so I worked a full-time job while I was in medical school. So just having the note service allowed me to keep up, and quite frankly, the main reason I didn't go to class and basically, I among all my fellow students never went to class, you know, and I don't say that proudly. I'm just saying it's just what it is. And it's mainly because of how I think and how I learn. I'm more visual, tactile, you know, I can't hear stuff and pay attention. In other words, what I found when I tried to go to class in the first few weeks is I'd be asleep in about ten minutes virtually every day. You know, I would not last more than ten minutes in any class with a lecturer giving a lecture. It had nothing to do with their quality and had nothing to do with them being good or bad or whatever. It's just that I can't stay awake listening to somebody giving a lecture, you know, and so I just said, this is crazy, this is stupid, you know, and I may as well just go to work and then with the notes service I'll study on my own, and that's how I learned. Basically, I kept up by studying on my own, and it worked out pretty well overall, and so I was kind of notorious for never being around.

KD

Was it hard to hold a full-time job while going to medical school?

KB

Not really. I mean, I worked in a restaurant, I did what I wanted to do. It was fun, you know, fun working in a restaurant, working in a Mexican restaurant. Took care of all my buddies, you know, in medical school and so everybody had a good time with it because, like I said, I worked there, in fact I worked in that restaurant all four years, you know. During my clinical rotations I still worked in the restaurant, so needless to say, I would help out the class with drinks when they needed them, you know. So, they would come into the restaurant and I'd take care of them. So, it was a fun thing actually, you know. I enjoyed the people I worked with, it was obviously a restaurant business, very different than the people I'm sitting in a classroom in medical school with, and I kind of liked that. You know, I sort of like being around people that are a little more diverse and don't necessarily look like me, think like me. So, it was enjoyable for me, you know, to do the restaurant. It was a diversion, gave me something else to do, and I kind of don't sleep much, and didn't sleep much back then. So, you know, I would work until one and two in the
morning and then I'd study the rest of the night, and then I'd sleep for a few hours in the morning, and that was my routine.

**KD**

My goodness, and so how was your third and fourth year? Let's talk a little bit about that because that's when you start doing the rotations, right?

**KB**

Sure. Yeah, in the third and fourth year, you rotated through all the various hospitals, you know, you kind of got to pick and choose. One of them, St. Elizabeth- which was one of the main hospitals at that time- no longer exists, you know, there in Dayton, but it was one of our primary rotation sites that I think everybody enjoyed. It tended to be a little more intimate hospital than some of the others. Miami Valley, of course, very busy, very busy place. And Good Sam, and the same facilities that are there now, were our main rotation sites and so, you know, it was a good experience. For me, nobody in my family was a doctor, you know, in fact I knew nothing about medicine, quite frankly, going into it, and going into medical school. I understood science and everything, but, quite frankly, I'd never even been in a hospital until I did my third-year rotations, you know, so, all that was kind of a unique new experience for me. Because, like I said, I had not been in a hospital. My dad actually was a veterinarian, so the upside of that is that he never took me to a doctor, he always took care of me himself. So, needless to say, it's probably why I'm dysfunctional at this point, because I was treated with horse and dog medicine growing up. And so, we never did go to a doctor, so, it was- other than I think getting in our immunization shots, I think that was the only reason we ever ended up in a pediatrician's office, and the rest of it, pretty much, my dad took care of it.

**KD**

And so, did you like having to go to other hospitals? Because, you know, the most unique thing you said about Wright State is not having a hospital on campus, so let's talk about that.

**KB**

I thought it was unique. I mean, every hospital is different, you get to understand, you know, as a medical student, let's just say it's all kind of new for us, particularly when you're a third-year medical student and then going into your fourth year. And you find, you know, you find you have certain favorites, and you get to know some of the people. Now that's... I mean, that's part of the drawbacks. The drawbacks, you don't tend to get to know some of the attending physicians as well because they're not truly- they're not solely academic docs that work there, at least when I was there, and keep in mind this is the third year of the medical school. These were all physicians who were working in the community. You know, they previously... they may have done some teaching on the side, but ultimately their jobs were not teaching. They weren't typically academic docs that we worked with back then. These were surgeons, and these were internists, and these were people that actually their primary role was to take care of patients and not to necessarily teach students or teach residents. So, for Wright State, you know, year three- which would have been, you know, I was the third class to actually do rotations- it was still relatively new, you know, for most of the docs to be involved in that. And so, it was interesting. It
was a different experience, you know, some much better than others. And some hospitals you tended to like more because you liked the docs that you worked with, quite frankly. So, no, I can say major downside from that, other than you're not quite as familiar when you're rotating to several different hospitals as you would be if you have a base hospital in your medical school.

**KD**

For sure, and so then let's talk a little bit about you and your classmates. So, other than, you know, giving them drinks at your restaurant, what are some other activities that you guys did outside of school?

**KB**

Well, I was kind of the one responsible for putting together extra-curricular activities, so we’d put together sports teams, so we would have a football team, and we played baseball, and basically we’d just- I would be kind of helping to organize just different teams with different students, you know, fellow classmates, guys, girls, both, you know, and so that was fun. So, we would do that. I would… I had a pilot's license, so I would take them flying from time to time, and I got in trouble for dive bombing one of the award ceremonies Wight State one time. So, you know, I had fun doing that kind of stuff from time to time. I was kind of a troublemaker, I guess. But yeah, those are some of the extra-curricular things. I ran- because I had worked in a restaurant quite frankly before, you know, I was obviously waiting on tables there and at the Mexican restaurant- but prior to that, I was a cook in a restaurant in Columbus. I worked, you know, [as] an undergrad in a restaurant and so I was a cook- actually an assistant chef- at one of the top restaurants in Columbus, and so I learned to cook pretty well. Well, as you can imagine, you know, in medical school, most of the girls in medical school were too busy studying and not learning how to cook. So, I ran a cooking club, where I taught all the girls how to cook. I couldn't get any of the guys to show up, you know, but the girls all did. So, basically, I think it would be once a month, I would have everybody over to my- I had a condo in the south part of Toledo, I mean, south part of Dayton, near… oh, shoot… Miamisburg. Not Miamisburg, but that area anyway. So, I would have people over and we would do practice cooking lessons. So, I would have a number of my fellow female classmates working with me, and we would do cooking lessons, and it was a lot of fun. So, that was some of the things that I could think of off the top of my head.

**KD**

Yeah, and so then I know you didn’t show up to class, but are there any notable faculty that you remember?

**KB**

Notable faculty. Well, hmm. I mean, I can't say anybody specifically sticks out right now. Like I said, I kind of wasn't present that much there, and so it's not like I had much of any kind of rapport with anybody there. It was more the clinical faculty, you know, that that I worked with, but, of course, like I said, they were not necessarily Wright State. At this point. I'm sure Wright State has full time faculty that do the teaching, you know, when it comes to clinical sciences. Back then, like I said, it was just… it was just using the faculty in Miami Valley, using the faculty
at Good Sam. I had, I tended to migrate more towards the surgeons, you know, they're the ones that I kind of spent more time with, and they were encouraging me to kind of focus on that area, because they felt that was something I was pretty good at. So, there were the vascular surgeons there, Dr. Randell was the main guy in that group that I worked with that kind of- let's just say I kind of followed his direction. Keep in mind, with nobody in my family being a doc, I'm just an impressionable student, so needless to say, whatever anybody tells me, I'm going to believe. So, you know, he said that this is something you probably are suited for and are good at, so that's kind of the direction I went coming out of medical school.

KD
So, then what was Match Day like for you and your class?

KB
Match day for me, well, see… I don't have a whole lot, you know, to really- in fact, I'm not even sure that I showed up for Match Day, quite frankly. So, I think that's one of the things- I had something come up, and I know I got my card pulled, but I know I wasn't there, you know, and I can't really remember off the top of my head what was going on. It wasn't that big of a deal back then. I mean, it still was for certain people, you know, and doing it. I didn't know. I didn't know much about history. I didn't know that much about how all of this worked, and of course it was a new medical school, so I have to say Match Day wasn't a major overwhelming event. Like I said, I remember I wasn't able to make it because I had a conflict, and I can't tell you exactly what that was at this point. But, yeah, it's not an overwhelming inspirational point for me anyway, but I matched in the surgery program, you know, there at Wright State. Now, with that being said, and that's probably why it's underwhelming at this point, because obviously, I did surgery for a year but then I switched over and decided to go into emergency medicine. In fact, I was in it for about a year and a half and then, and then I decided, hey, you know, I was moonlighting on the side emergency medicine was a new specialty, I saw opportunities there, you know, to get involved in, and I was able to get licensed right out of medical school when I went into residency. And so, I switched into emergency medicine, and I was able to get a residency program up here in Toledo. So, that's why it's kind of a bit of a distant memory, because I really didn't even follow through with that. It wasn't that inspirational moment like it is for a lot of students.

KD
It's definitely a much bigger deal now than it was back when you were. . .

KB
Absolutely, yeah. I just don't ever- I mean, now that you bring it up, I don't even remember it being a big deal at all. You know, quite frankly, it just wasn't.

KD
It just kind of happened.
KB
At least it wasn't with me.

KD
And so then looking at your early career, what are some lessons you took from the medical school while starting out?

KB
Lessons from medical school. Well, let's see. So, you mean, as far as residency is concerned, is that what we're referring to? Or-

KD
Yeah, residency and then going on, like, wherever you want to go. I'm very flexible.

24:20

KB
All right. Hmm. Well, you know, I guess the lessons… I mean, let's face it, you know, everything that you did as a third and fourth- once again, everything was new to me and quite frankly, it was all about learning how to interact with patients, and at the end of the day, just understanding that you can't save everybody, you know, and I think part of the part of the lessons is that death, you know, I had never seen anybody die in front of me, and that was actually the second day of my rotation, you know, somebody died. I was on a service, took care of a patient, the patient coded, and died right there. So, for somebody that had not seen a physician before or not really spent any time in hospitals, you know, that was kind of a unique experience. But you realize that this is all part of medicine. You can't fix everybody, you can't fix everything. Basically, you can do the best you can do and some people aren't going to survive. You know, so I think it's learning those lessons that there's a limit on what you can do, and knowing how to communicate with patients, take care of patients, I think that's the one thing that Wright State was particularly good at, is learning communication skills, and quite frankly probably something we don't do so well anymore in medicine. I think we've kind of lost that art a little bit, because everybody's kind of coming through, you know, growing up in an electronic world, where we really don't have those one on one interactions as much. So, I would have to say probably the biggest lesson is learning how to, learning how to interact, communicate, with patients, with colleagues, and at a level that they trust you, that they believe in you. You can't make stuff up. You can't bullshit your way through it, I guess, is what I'm getting at. Because if you do that you're just not trustworthy, you know. So, I think it's just being honest, and basically, show that you care and you have compassion. I mean, and Wright State, I think did a good job of teaching that, overall.

KD
And so, looking back on your whole experience there, what do you think sets Wright State apart from everywhere else?
KB  
Well, from everywhere else. So, and that I didn't go to too many other medical schools, you know, um-

KD  
Even as, you know, you are in Toledo, like the University of Toledo-

KB  
No, I know what you're saying. I mean, I think what made it unique is it was, I have to say, compared to other experiences, other situations, it was more of a collegial atmosphere than I think what you're going to find elsewhere, for the most part. The class was relatively smaller, you know, you had enough people, you got to know everybody and it was, you know, you were all in it together. So, what did you learn? You learned to help each other out, you weren't competing against each other anymore, and it was basically collaborating and working together, and again, learning how to communicate effectively in this new language that you're trying to understand and learn, you know, called medicine, and to be able to communicate in a way that you can convey confidence and trust in patients. I think that probably would be the thing. I'm not sure if they do it better than everybody else, but I got to say that would be the thing that I would say stood out that you learned what you had to learn over the course of medical school that we were able to get out at Wright State, and I think Wright State did a good job of preparing you for that. And obviously, diversity, where you had multiple hospitals to go to, you had diversity of people. You didn't have just a set group of three or four physicians that you're working with that you got to know, and those are the people that carry you through, you had to know twenty and thirty different physicians, and people in hospitals, and staff and nurses and so forth. So, you learn to, again, you learn to diversify.

KD  
And so, I don't know if you keep up with all the happenings of the Boonshoft School of Medicine, but how do you think it has changed over the years, if you can touch on that?

KB  
Oh, God. You know, and I got to be the first to say I don't, because I haven't been back in over twenty years, if not longer. So, I really don't have much to offer there, Kirsten, that can say how it's evolved. I'm, you know, I'm aware of people that of course still work there, still work at Wright State, and of course, obviously, it's grown as a health science campus, as a health care facility, and with people in their careers, and it's got a good reputation for developing primary care. And so, and I think it's served that mission well, and again, you still have full opportunities to be anything you want to be, you know, and I think what sets it apart is I think it provided opportunities, unique opportunities to explore career options that you might not necessarily get elsewhere. So, if I had to pull anything out, I guess I would say, you know, it's that, and you got to see a spectrum of health care opportunities but focused around primary care, and I think what it does better than everybody else, I think it's that primary care preparation and focus is probably one thing that they do I think better than the most.
KD
For sure. And so, then kind of in the same theme, do you keep up with any of your old classmates?

KB
Can't say that I do that very well, either. You know, I run across them from time to time and I'll communicate with some of them here and there, but I have to say, I haven't really maintained any relationships, I got to say, with any of my classmates. Other than Dave Mallory. Dave Mallory was a family medicine doc who I went to medical school with, so Dave and I have been buddies, but of course he grew up in Toledo and came back to Toledo, and so he's the main, I mean, he would be the one guy that I have to say- I'm sure I'm going to be missing somebody and I'll be embarrassed, so I'm trying to think if there's anybody else that I've been in touch with from medical school on a regular basis. I mean, yeah, it's pretty much Dave, because as you can understand, we all kind of scattered in all different areas of the country for our residency programs and careers and so forth, and so it's just, you know, in emergency medicine, let's face it, not that many people back then went into that. So, in my specialty it's not like I'm running across a lot of people there. Jim Augustine, I run across him from time to time, who I know is still involved with Wright State. But, yeah, other than Dave, Dave's kind of the main guy that I've been in touch with, stay in touch with, but that's been about it.

KD
That Jim Augustine was actually my first interview for this, so it's funny-

KB
Oh, really?

KD
Yeah, so it's funny that you mentioned him.

KB
Yeah, that's nice.

KD
Interestingly enough, I'm interviewing a lot of emergency medicine people.

KB
Yeah, Jim was a terrible football player, by the way. [Kirsten laughs] You can put that down.

KD
I'll write that down. Put it on all their stuff: "Jim was terrible at football"

KB
He tried. You know.
KD
As long as he tried. I mean, you guys are doctors, not football players.

KB
No, I was a good football player. So, no, we had some guys that were actually pretty good, you know, but Jim wasn’t one of them. But no, Jim tried hard, I’m just joking around.

KD
Absolutely.

KB
He's okay, I guess.

KD
Yeah, I mean, his interview already passed, so he can’t dispute that claim.

KB
No, there’s nothing he can do now.

KD
So then, any final comments, stories or anything you want to share with me?

KB
Oh, gosh. Well, let’s see, any final comments or stories. Yeah, because I wasn’t really sure if this was talking about history or it was- because like I said, I’ll be honest with you, I should have probably dug into what it was going to be about and I could have been maybe a little bit more prepared for it. I didn't know if it was kind of trying to pull or piece together a history lesson of what the early years of Wright State were like, as opposed to individual responses, but just-stories, any specific stories. like I said, I think the most significant story… well, the one story, most of my classmates have heard about it- as I told you, I worked in this restaurant for four years, all four years that I was in medical school. So, needless to say, your third and fourth year you're on an OB rotation. So, it was my third year and I was doing OBGYN, and you're delivering babies and I think I was doing that rotation at Miami Valley, and so, you know, the OBGYN docs were great to work with, they let you deliver the babies, as long as everything was uneventful and you didn't look like an idiot, they would let you do more. So, you know, I think there was this one day I delivered two or three babies that came in that day and I got to be involved in that, and then of course I go work my night shift in the restaurant. I have to be there at five o'clock and it was six o'clock, you know, I was always in there late because I had to wait until all my clinical stuff was over. So, I'd usually get there a little late around 6, and people would cover me, I mean, all my restaurant workers, the other waiters and waitresses, they thought it was kind of cool, you know, to have somebody in medical school that was actually working in the restaurant. So, they always looked out for me and took care of me, that's why it was kind of fun. But anyway, so I'm waiting on the tables and then sure enough, you know, and
I'm on this, like I said, this OB rotation and I go take care of this table, and I'm kind of always goofing around with the customers, because let's face it, this isn't going to be my career plan, you know, long term. So, I sort of wasn't the norm in how you took care of people, I would joke around with them with the customers quite a bit, and sure enough, I go to take care of this person and I'm looking at her and I'm going, “Oh, my God, she's really familiar”, you know, and it was her and some significant other, and then it just strikes me, I delivered her baby a week ago. You know, I remember seeing her, and of course she looked a little different than when she was in stirrups than when I was looking at her in the restaurant. But I was taking, I was waiting on her table, and I happen to remember the baby's name for some reason. I can't remember, I don't know, I can't remember it now, but I remembered the baby's name specifically, and I just took care of her, and I noticed she kept looking at me, too, which was weird, like, there's something weird about this, and then it just, like I said, it hit me that I delivered her baby, like I said, the week before, and she obviously was doing well enough, she was able to get out of move around and go out to a restaurant. So, you know, everything went well, and then I cashed out the final check, and then I just said, I just made some comment, and she did say something about, “Have I seen you before?” and I said, “No, I don't think so”. You know, because I sure wasn't going to say I was the person who delivered your baby, and then he goes, “I don't think so”, I just said that, and then I gave her the change back or gave husband the change back from the check, I just said, “Hey, and how's…”, and I somehow remembered, like I said, the baby's name was Mariah or something, and I said, “So, How's Mariah's doing?” and then she immediately- her eyes got about as huge as saucers and she goes, “I knew it! I knew it! You're that doctor! You're that doctor!” So, she yelled it, the whole dining room could hear it, and so, anyway, it was let's just say it was a really bizarre moment, you know, where everybody's going, “What the hell was that?” and I said, ”Yeah, I delivered her baby a week ago”, and not too many people working in Mexican restaurants can say that. So, if I had to give any kind of anecdotal story, that's my anecdotal story. I was waiting on tables in the Mexican restaurant, and actually waited on this lady that I delivered her baby a few days earlier. You know, and she thought that was pretty surprising. So, that's about it. You still with me, Kirsten?

[Long pause- connection issue]

KB
Hello? Kirsten you there? [Long pause] Okay, I think I lost my host here. Hello? Hello? All right, Kirsten, I can't hear you if you're talking. I don't know if you can hear me. Maybe I'll try to sign off and sign in again. Hello? Alright, Kristen. Can you hear me now?

KD
I can, I'm so sorry, I don't know what went wrong.

KB
Okay, I lost you there. I didn't know how much you heard, or if you... I think you got most of that story.
KD
I got most of it. I got the end where you said, “Oh, how's Mariah”, so I think I got. I think I got all of it until it all started going wonky.

KB
Unraveling. Okay, good. So, yeah, so I guess that would be my, I guess my most entertaining story. You know, not too many too many waiters in a Mexican restaurant can say that they delivered their babies, you know. so that was a little unique.

KD
Well, that is the perfect story to end this off.

KB
Good. So, anything else I can help you with?

KD
No, I think you've got it, you did everything I wanted.

KB
All right, well, it's great talking to you, Kirsten, and good luck with your project here, and I'll be interested to see what you come up with here in the end.

KD
Absolutely. We'll keep in touch, Angela Clements will also keep in touch. So, we'll see how it goes, okay?

KB
Terrific. You have a great weekend now.

KD
You, too! Bye.

KB
Bye, bye.