

**Archival & Historical Committee
January 12, 2023**

**Interview with
Nicole H. Bixler, DO, MBA, FACOFP *dist.*
(ACOFP President October 2020-March 2022)**

1 Committee Chair: Good evening, Everyone, we are interviewing Dr. Nicole Bixler and it is the
2 twelfth of January 2023. Dr. Bixler, please tell us a little bit about this year
3 and a half, right?

4 Dr. Bixler: Correct. So, yes, I did have the honor, I guess you could say, of serving as
5 the ACOFP President for officially a year and a half and sort of as Co-
6 President for six months prior to that with Dr. Robert DeLuca. It was
7 certainly an interesting time, as we are all aware, as that also happened to
8 land right during the COVID pandemic, which is why it disrupted the
9 normal presidential way of beginning my term. So instead of becoming
10 inaugurated in March of 2020, as was originally planned to occur in New
11 Orleans, that did not happen. We shut down that convention as well as
12 most of our lives shut down and I did not officially get installed until
13 October 10th of 2020; and that was done virtually, which is also a first, as
14 far as I know, in ACOFP to be installed in a virtual context. So many
15 different things occurred that did not make it happen the way I had
16 envisioned it when I was preparing to become president, but, as the old
17 adage, is things happen at the right time for the right people for the right
18 reasons, so I think we managed to navigate the whole situation pretty well.

19 Committee Chair: I would say quite gracefully. It was really well done.

20 Dr. Bixler: Thank you.

21 Committee Member: Dr. Bixler, what was your presidential theme for the year, I guess, overall?

22 Dr Bixler. So, I know when I was preparing for my president-elect year that although
23 I had been guided by other past presidents before me who were
24 mentoring, guiding me ever since I came on the board that: Oh, you have to
25 pick out your theme for when your president. And what's your theme
26 going to be when you're the president? I honestly never had an actual
27 "theme" or tagline or whatever you want to call it when I was getting
28 ready to become president in March of 2020. I knew what my goals and
29 my initiatives were going to be and I thought that would sort of lend itself
30 to what the theme turned out to be, so my initial goals going into that year
31 when I was preparing as the president-elect was certainly focusing on
32 some of the requests through our membership and that was appointing a
33 taskforce on convention innovation and really looking at how we
34 organized, present, and actually do all the things that are associated with
35 our convention and modernizing it and making it more of what our
36 members were asking for. That was a huge part of what we were going to
37 put into play, and I actually had the opportunity to work on that even
38 before my presidential year, so actually March of 2020 was supposed to be
39 the debut of what we had worked on from that taskforce for the 2019
40 year and was super-duper excited that's what was going to happen in
41 March of 2020. We were going to have the dual tracks as far as the
42 educational tracks. We were going to change up the whole evening about
43 how we did the presidential awards, the other awards and the presidential
44 banquet and really were trying to hone in on what was going to make our

45 convention just a little bit more unique and different and appealing to our
46 younger members, our newer members, and our diversity of our members
47 going into 2020, so that would probably be what I thought was going to be
48 the biggest thing of my year. And then obviously not only did the
49 convention drastically change, as we all know, in a matter of a week's time,
50 our fantastic ACOFP staff managed to pull together a virtual convention
51 out of thin air, literally, and did it phenomenally well and so that then
52 catapulted a whole other focus really for my co-president-ing with Dr.
53 DeLuca, which that I think the focus then was perseverance and calmness
54 and getting through the storm just like we all were doing and supporting
55 our members through a time that none of us could've ever been prepared
56 for. And then that evolved into what I believe probably will hopefully be
57 looked upon as my president accomplishments I guess you could say or
58 what might have changed during my presidential time besides just being
59 know as the COVID President and the Virtual President was that we ended
60 up really focusing on a lot of our governance and DEI efforts; and I think
61 that's what I hope when I look back that what really turned out to be the
62 theme of my presidential year, year and a half, almost two years, was
63 really focusing on our members' requests, thoughts, and taking into
64 account what was going to modernize and make ACOFP last for years to
65 come by looking at our diversity of our membership and how to possibly
66 change our governance to meet those needs, so hopefully that's what it
67 gets remembered as for.

68 Committee Member: I think you did an amazing job, I mean your determination was amazing
69 and you accomplished so much, so I thought it was awesome.

70 Dr. Bixler: Thank you. Thank you. Appreciate that.

71 Committee Member: I'll go ahead and ask one. So, Dr. Bixler, you mentioned the word
72 "accomplishments". Given your historic year, what would you consider
73 your biggest accomplishment for this year?

74 Dr. Bixler: So, what I feel most proud of, I really do believe, is the work we did with
75 DEI. Of all the time I've been a member of ACOFP and all the committees
76 I've served on and all of my eight years on the board and I never was so
77 inspired than when we appointed the initial taskforce on what was racism
78 in health when we first started, and that really did spawn out of all of the
79 events of COVID and then the unfortunate events with George Floyd in
80 2020. That first group of 33 people that we got together and you, yourself,
81 were part of that, I really from what we did in those groups and subgroups
82 and then what we've worked on and how that has transformed and how I
83 do feel that ACOFP is really trying it's very best to keep a focus and a lens
84 on that diversity and equity and inclusion in our membership, I think
85 overall has to be my... And I don't even want to say, "My biggest
86 accomplishment." The biggest accomplishment that occurred under my
87 presidential because it clearly is an accomplishment that I can't take full
88 credit for, it's the board that was very supporting of those efforts. It was
89 that original 33 people who volunteered to be on that taskforce and it's a
90 phenomenal staff that has been able to have the vision, the determination
91 and all the other things to make those efforts and to be a thought leader, a
92 thought changer on changing it up and getting away from just thinking
93 that things have to keep staying the same way because that's the way
94 we've always done them, so in one word that's my biggest

95 accomplishment; although, I think there were many others. I think the
96 others speak for themselves. I think how we did as an organization to
97 navigate COVID in and of itself could be an accomplishment, but that
98 certainly wasn't just me. Hopefully, I think it was just because it was me. It
99 was Dr. DeLuca. It was the right staff and the right board that made the
100 right decisions and worked as a team to make those decisions, so I think
101 that's the greatest accomplishment. Thanks for asking.

102 Committee Chair: Dr. Bixler, what do you think are the biggest challenges coming up with the
103 ACOFP?

104 Dr. Bixler: Well, I think the biggest challenge for every organization, every
105 professional organization, is remaining relevant to its current members;
106 and I think that's an ongoing challenge that will never end. I don't know, I
107 feel like I'm in that demographic where I may have been part of this
108 organization long enough to feel like I had a sense of it when it was like:
109 Well, this is what you do. You're a DO. You're a family physician. Of course,
110 you join your professional organizations. There are no questions asked
111 and what they do for you is what they do for you and that's the way it is.
112 And now seeing that there's a lot more accountability to being an
113 organization that's responsive to its members, right, and that if we're
114 going to remain relevant, it takes I think a lot more work today. And in
115 today's environment when there's so many more choices and information
116 is so readily available and so many things are at everybody's fingertips of:
117 Why do I need to be part of a professional organization? What does it do
118 for me? What does it mean for me personally? What is it going to do for my
119 career, and do I ultimately need to be a part of it? So, I think the

120 overarching biggest challenge is always finding where we will remain
121 relevant to new members because obviously without matriculating new
122 members, our organization will never survive. Like I said, I feel like I'm
123 part of the old guard where it's just that's part of what you do, but I very
124 much realized was working with students and residents and being a part
125 of this organization, we can't just expect that that's what people are going
126 to do when there's choices and there's options, so I think that's definitely
127 challenge number one. I think challenge two is related to that. It's how to
128 as we have a stronghold for ACOFP has always been education. It's clearly
129 one of our pillars, is again in this environment where virtual education and
130 CME and information at your fingertips is so readily available as: How do
131 we continue to be the place where people come to for education as family
132 physicians and maintaining being that what I feel is very superior in that
133 role. We need to be able to continue to be able to do that for years to come,
134 and I think that will continue to be more and more of a challenge because
135 there's so many more places where people can get that education. They
136 don't need to come to us for it. And then probably third is probably the
137 challenge for every organization is that we have to remain financially
138 viable, and I think we've done a phenomenal job over the last couple years.
139 I'm impressed with ourselves. Some days I just can't believe how well
140 we've done as a board, as a staff, as an organization to remain very
141 financially sound. So, with anything, that's always going to have to be
142 something; and I think we have a lot of other ways that we're trying to
143 diversify what we can do as an organization to maintain that. We can't just
144 rely on dues and our CME we have to get a little bit more creative and I

145 think that's the thing that we've been working on for the last couple years
146 and will continue to do.

147 Committee Member: Dr. Bixler, you had mentioned membership being a possible concern down
148 the line and obviously in your presidency with COVID how did you
149 particularly address the issue of membership during your tenure as
150 president?

151 Dr. Bixler: Well, I think that COVID was probably a blessing in disguise quite honestly,
152 right. I mean there's no doubt if we all could turn the clock back, we would
153 clearly not go through what we've all gone through over the last almost
154 three years now at this point, but I think there was a connection and a
155 bond, whether it not be in person but it was by experience. And so I think
156 for family physicians, especially osteopathic family physicians, that whole
157 concept of having to be together and being with people who knew and
158 understood what you were going through, so I would like to think when I
159 look back at particularly the first part of 2020 when Dr. DeLuca and I were
160 "co-president-ing" and getting ready that I think was trying to be in the
161 forefront of communicating and being real about our communication,
162 being that it was from the heart. It was that we're living it every day just
163 like all of you are. This is no different. We understand. Trying to put
164 together some of those virtual doctor's lounges that we did, which was a
165 place, a safe haven for people to get together and just sort of be like: Wow,
166 this stuff's really tough. Like how do we get through that? So, I think that
167 camaraderie and that networking that we always had in person, we tried
168 really hard to adapt that into a virtual environment. So, I think we can all
169 agree, it's not nearly quite as good, but I do believe we did a really good

170 job of that; and I think that trickled down even to the members. We really
171 amped up our webinars and our online education, and I think that our
172 members appreciated it and they saw it. I know myself at that time and
173 then even throughout the rest of my presidency was trying to
174 communicate even in ways that I didn't think I would have to do as much,
175 webinars myself and Zoom meetings and recordings and things that I will
176 honestly say by the end of my presidency, I was very tired of doing
177 recordings, but it was what we had to do at the time, so I think that was
178 one way. And I do think in the aftermath and as we continue, I mean we
179 saw and you well know as a board member, our membership, we didn't
180 decline. We stayed stable and we seem to be a little bit on the growth
181 pattern now slightly, so I think that shows that our members appreciated
182 what we did for them in that time of need and I think that now we have to
183 kind of get out of that and now look to what we need to do to continue to
184 grow that membership, so yeah. Thanks.

185 Committee Member: So earlier we touched on accomplishments. Do you have any
186 disappointments or rather missed opportunities perhaps?

187 Dr. Bixler: Oh, yeah, I knew this question was going to come. This is probably going to
188 be the hardest one for me to talk about, so I could look back on my
189 presidency and say that clearly on the surface there were a lot of personal
190 disappointments. It was clearly not the way I had envisioned my
191 presidency to be, and not just all about the pomp and circumstance and all
192 that stuff, but I really felt that as the fourth female president and as the
193 youngest president of ACOFP to ever be elected and as someone who
194 teaches students and teaches residents and feel that I can connect with

195 those groups very well, my biggest disappointment was that I did not get
196 to visit our schools in person. I didn't really get to connect with those
197 students and residents in person over that year and a half. I only had three
198 events in two years that I did live in person. Everything else was done
199 virtually, so overall that is by far the lost opportunity. I just feel like I
200 could've done a lot more in engaging our younger members; and I say that
201 only because whenever I do get to be usually somewhere live and in
202 person, I don't think it's because it's just me, Nicole Bixler, I think it's
203 because I am a 40-something-year-old female, full-time working physician,
204 married to a physician who has three kids who can relate to a
205 demographic of our members that many of our past presidents could not.
206 And so, I think it would've been really a unique opportunity and
207 experience for me to be able to have done that and to have connected on
208 that level and I really think that's the biggest part that I got to miss, so I did
209 get to do a lot of that as working my way up on the board. I hopefully still
210 have opportunities to do that in the future; although, I'm not quite as
211 young as I was; and I did certainly try very hard to create some of those
212 opportunities through Zoom meetings and things like that throughout the
213 year but still never quite the same. So that's by far my biggest
214 disappointment. And then clearly, yes, not having like the great big
215 presidential shebang that we were supposed to have in New Orleans, but
216 really more not just about what was about for me, it was really about, as I
217 mentioned earlier, it's about what we had worked on to make that entire
218 convention and event be like a debut of sort of like the footprint for what
219 we were hoping to go forward with. I think that was more of the

220 disappointment. I've never really been a person where any of this is about
221 me. This is not about me. This is about the organization, so by far that
222 combined is my biggest disappointment.

223 Other than that, I mean I think my board rocked it. I think we did great. We
224 did really, really good stuff and I have absolutely no real regrets on
225 anything else that we've done, maybe a few, but honestly not really. All the
226 things and all the things that we've done, I'm just laying groundwork for
227 the next people to keep carrying on that work, so yeah.

228 Committee Chair: Can you talk a little about how you connected with the students, whether
229 it be virtually or what have you, during the pandemic to ensure the
230 viability of our organization and the osteopathic tradition?

231 Dr. Bixler: Sure. So, I mean obviously the real mechanism that we had was trying to
232 do these Zoom meetings, so I had reached out to our chapters and just
233 offered that any time that they wanted to have a meeting, I'd get together
234 and do something with them, so I think I did like five or six (I'm trying to
235 remember off the top of my head.) that were definitively just with the
236 chapter. It may only have been like five or 10 people on it, but it didn't
237 matter. It was five or 10 people more than what I didn't get to talk before,
238 so I think that was the biggest touch point, reach out. Obviously the very
239 few opportunities I did get to go places, likewise, trying to do the same.
240 The best thing I feel is always with the students and/or residents or even
241 physicians newer in practice is honestly just being open forum for asking
242 questions. It's not my agenda what they want to hear or what they want to
243 know, it's what they want to ask and so I always felt like that was my role
244 is when I had that opportunity to be with those groups is just listen and

245 answer the questions they have. I'll give my five or 10-minute spiel of why
246 I think osteopathic family medicine is the way to go and why ACOFP is the
247 best organization to be a part of, but ultimately many of the questions
248 often delve into what we know is really important for students and
249 residents to get answered. A lot of it's about quality-of-life issues and how
250 do you make this work and how are you going to pay off your debts and
251 what kind of jobs are out there and how much money you're going to
252 make. I mean that's really more what they want to hear, honestly, than it is
253 about how do I maintain my osteopathic distinctiveness while I'm in
254 practice. Of course, that's important, but we want to get down to some of
255 the real questions they have as well.

256 And then personally for me as being again just very much like you, Dr.
257 Kessler, being a female physician, working mom, how do you do that,
258 right? How do you do it all? So that's always something I love to talk to
259 females and males about, that it is quite possible. So, yeah, those are the
260 ways I tried to connect with the students as much as possible, but it was
261 really quite hard because obviously the schools were also really not on
262 normal schedules for that 2020, so even the chapters weren't really as
263 organized as they normally are because they weren't seeing one another
264 either, so it was really not till a little bit more into like 2021 that we
265 started getting some of that. Yeah, 2020, as we all know, just kind of sort
266 really kind of went into like shutdown mode, so it was a little bit tough so,
267 but yes.

268 Committee Chair: Tell us your fondest memories of your presidency.

269 Dr. Bixler: I'd probably have to say that.... Wow, well I think there's lots of ways I can
270 answer this question, but I think if I really had to say my fondest memory,
271 I do have to say that it still was my virtual inauguration because I think
272 any time when you become president, obviously that's when it's solidified.
273 That's when it's real. It meant a lot to me that my mentor, my friend, my
274 boss, Dr. Jeffrey Grove, was willing to do that at his home here in Florida
275 and that we were able to have some modicum of an inauguration event. I
276 was floored by the fact that, honestly, I had no idea that there would be
277 anybody there. I literally thought I was going to Dr. Grove's house that
278 night with myself, my husband, and my three daughters and my in-laws
279 and Jeff and Jerry Grove. And when I walked in, there were a number of my
280 friends and family there be it COVID or not. Bob Moore was there, our
281 Executive Director. It was a really special time in a really horrible year, so I
282 think that was probably still my fondest memory, even though it wasn't
283 the way I had envisioned my installation as the ACOFP President, but it
284 was still really cool and it's a really great story.

285 And beyond that, I think my fondest memory then would probably then
286 in... I have to remember all the years. it seems like it's so long, so I guess
287 that was in 2021, right, because I stopped being president in '22, so '21,
288 June of '21, when we did have an in person meeting together with our
289 Board because that was the first time really in my presidency we got to do
290 that and that was when we were in Virginia, so that was also really nice
291 because it was such a much needed time to be able to get together. It'd
292 been like a year since we'd seen each other in person, so that was really
293 great too.

294 And really honestly then, I'm just going into whether somebody asks the
295 next question, a lot of people asked me: What do you like miss most about
296 being president? So I can truthfully, honestly say this, and even if all of
297 them were on the phone, I would say the same or this call, I would say the
298 same thing: "Despite all the other stuff, the thing I miss the most once I
299 wasn't president anymore was having my weekly phone calls with Bob
300 Moore, Robert DeLuca, and Bruce Williams, so it's such a connection of
301 when you're president, elect-president of the closeknit group and so
302 despite all the other stuff that we do in a year, I think that's what I miss the
303 most and so I think that reflects on that being a really fond memory of
304 being president is being able to talk to that group of gentlemen,
305 professionals, and friends and honestly people I like rank right up there as
306 close to family and missing those connections with them, so clearly that
307 meant that had quite an impression on me of being a pretty fond memory
308 if that's what I miss the most once it was all done.

309 Committee Member: Was there any special advice that you gave Dr. Williams before he became
310 president?

311 Dr. Bixler: Yeah, don't screw it up. No, I'm just kidding. No, I have no other experience
312 except for what my experience was, right? I think everybody, it all depends
313 on who's on the board, who's your like wingman, wing gals, who's on the
314 front and back of you as to what your experience is, but I mean I could not
315 have asked to be in between two greater people than Robert DeLuca and
316 Bruce Williams and I just felt like we worked as such a team that it was
317 almost... That's why sometimes when asking these questions, I have to
318 kind of think: Wait a minute, which of us was the president at the time?

319 Like it's hard to remember because it wasn't about one person. It was
320 about the team together and so I didn't even feel like I had to give Bruce a
321 lot of advice. It was almost like we'd been kind of doing it together for six
322 months leading into it because that's what we started doing. That's what
323 Dr. DeLuca did with me even than before we kind of ended up being co-
324 presidents is like he really like looked to me for those six months and then
325 I did the same with Bruce, so like I want you to be on those calls every
326 week. I want us to be making those decisions together, so I think it's just
327 knowing that we were on the same page. We were looking for the same
328 things for ACOFP and it was just continuing the good work, right; and I
329 think overall if I had to ever give anybody advice whoever gets to this
330 point, it's that keeping in mind that being the president is not about you.
331 It's about the board as a whole and it's about the membership because I
332 think anybody who gets to this role and if you think it's just about you, you
333 don't deserve to be in that role, so I didn't really have to tell Bruce that.
334 Bruce is a selfless leader, as are many of the people on our board, present
335 company included, so I have no worries. I have no worries for the future of
336 ACOFP for many years to come because there's just such great, great
337 people on this board and I think we're all working for the same goals at
338 the end of the day, so yeah.

339 Committee Member: You had kind of mentioned a little bit, Dr. Bixler, about some of the people
340 that had kind of influenced you and things along those lines. So, in your
341 time so far, who's probably influenced you most, both in your state or
342 nationally or anywhere else?

343 Dr. Bixler: Right, so there's no doubt about that that I would not have served even
344 probably on the board of ACOFP let alone become ACOFP president or had
345 the latitude to do that and make that commitment if it wasn't for Jeffrey
346 Grove. By far, he is the mentor I've had. He's the person who's helped
347 guide me for the past 15 years since I moved to Florida and everything I've
348 done, so I'd be remiss if he wasn't on top of that list. I also would have to
349 say when it comes to really truly being on the board, Ronnie Martin would
350 be another person who honestly was the person who said, "Nope, it's time
351 for you to apply for the board." I'm like: I just had a baby six months ago.
352 He's like: "Yep, it's time for you to apply for the board." I'm like: Okay, sir,
353 yes. Yes, that's what I will do, so Ronnie's always been someone I've
354 always really looked up to as a phenomenal speaker, a family man, and
355 obviously a pillar of our profession, so I kind of have to say he ranks pretty
356 high up there. And certainly, and not to be cliché or anything like that, but
357 I'm pretty blessed to have the husband and the family I have because
358 without them, I certainly couldn't have done any of this. So in their ways of
359 mentoring me and keeping my head on straight and making me keep
360 what's important and focused and being my sounding board and being
361 there to listen to me vent about the good and the bad and everything in
362 between, it would have to be my husband, Brian Bixler, MD, fellow doctor,
363 my partner in crime at work and obviously my daughters who've been
364 there all along the way, so I've been pretty lucky. Some people might not
365 say those are mentors, but to me they are because they keep me knowing
366 why I do what I do and knowing that I serve as a role model for them. If
367 I'm right in their eyes, then I think I'm doing everything else pretty okay,

368 so I think those are probably some of the biggest ones. Obviously, there's
369 so many more people who've had such an impact on me and my leadership
370 and my role of where I am. There are a number of other phenomenal
371 female leaders - Dr. Jan Zieren, Dr. Carol Henwood, Dr. Ronna New and Dr.
372 Becca Lewis. I mean that list goes on and on that that's like the squad of
373 other female leaders. Dr. Ioanna Kessler, who's also on this call, yet
374 another. There's just so many; it'd be hard. I feel like I'd be leaving people
375 out if I went through the whole list. And then really to form my thoughts
376 more as not just as a physician leader, but as an organizational leader, I
377 really have to thank Bob Moore. He's just a phenomenal person that I just
378 am enamored with when it comes to organizational management
379 leadership and him being able to expose myself and the rest of us on the
380 board and for those who haven't had the chance who will get the chance to
381 be a part of seeing leadership from a different lens, not just as being a
382 doctor but what it really means just to be an organizational leader. The
383 programs and the perspective and everything that he's brought to the
384 organization, I don't think I could've done the job the way I was able to do
385 it or to get through some of the challenging parts of it without that
386 mentorship from him, so pretty special, so anybody I think who gets to
387 work with him is pretty lucky, so yes. Thanks for that question. It gave me
388 a chance to thank some people, so thank you.

389 Committee Member: No problem.

390 Dr. Bixler: I'm sure I forgot like 10,000 people, so I'll have to go back to that list and
391 reedit it, I'm sure.

392 Committee Member: When I was looking at some of these and I almost feel like this is kind of
393 your talk, do you have a favorite story from your time at the ACOFP or a
394 that makes you think back to?

395 Dr. Bixler: Favorite story of any time, oh my gosh, wow. Wow, my favorite story.

396 Committee Member: I didn't mean to give you a tough one. I just...

397 Dr. Bixler: No, that's okay. I mean so here's a prelude to it while my mind's thinking,
398 so I got to - - like sometimes I just got to start talking because I clearly
399 have no problem talking. It's just a matter of reining it in sometimes. So,
400 first of all, I find it very unique and Dr. Porcelli's on the call and stuff, but I
401 find it so unique that there's so many mentors and other people that I've
402 been privileged to be a part of with ACOFP. Robert DeLuca, Bruce
403 Williams, Jeff Grove, Greg James, all these people, and Ronnie Martin as I
404 mentioned before, and I feel like they could tell you: Well like in 1992
405 when we were at this convention doing this, remember when we did that.
406 And I'm like: How in God's green earth do you remember the exact time,
407 date, and place? Like I'm lucky I remember what happened yesterday. Like
408 I just don't... So, I can say I'm not one of those people whose like super
409 great at like being able to like say, "I remember this time, date, blah-blah."
410 I'm just not for some reason. I don't know why. But if I had to try to think
411 about more specifically in just my president time, since I didn't get the
412 opportunity to travel too much, I would have to say my trip to Maine was
413 pretty memorable, was pretty fun. It was a good group of people, a
414 beautiful place to be, so that was a lot of fun. I don't know if there was any
415 one real super great story, but definitely got to meet a lot of great people,
416 eat some good lobster and have my family with me and travel for one time,

417 so that was fun. But when I think about it overall fond stories or anything,
418 probably the one that, as I mentioned, probably just kicks off like my
419 whole sort of 15 years of living in Florida and becoming more active with
420 ACOFP and all the organizations was that I was at a meeting in Chicago for
421 ACOFP at the time. I would've been in my second year of full-fledge
422 practice in Philadelphia, a place you're familiar with, Dr. Bidey, but I was in
423 Chicago at a meeting for ACOFP, and I don't remember exactly what
424 committee, but it was a committee meeting and that was when I was in the
425 Chicago O'Hare Airport and happened to be in line with Dr. Jeff Grove and
426 Dr. Patrick Hanford from Texas and we were in the TSA line, because
427 remember back 15 years ago that was still when TSA lines were like super
428 long and there was no like pre check and all that stuff, and so we were in
429 that TSA line for probably 45 minutes to an hour and that's when Dr.
430 Grove who barely really knew me at the time, he just knew I was on an
431 ACOFP committee, I've seen him a few times, he just kind of said, "Well
432 would you ever think about moving to Florida?" And I was like: Yeah, okay
433 sure, why not? And then like literally six weeks later, it was the ACOFP
434 Convention, and I met him and came down to Florida to check it out and
435 six months later I moved to Florida. And so I can say as an ACOFP fond
436 memory, that if I had never gone to that ACOFP Committee meeting in
437 Chicago and been standing in that TSA line with Patrick Hanford and
438 Jeffrey Grove talking about the state of medicine and why I didn't like my
439 practice in Pennsylvania at the time, I would've never moved to Florida
440 and I probably would've never been down this whole trajectory of
441 everything I've done ever since, which was be the Florida State Society

442 President, the Florida Osteopathic President, joining the ACOFP Board and
443 join the practice I'm in and everything else that's been the domino effect
444 since that, so I guess that's a good ACOFP story.; and I tell that often when I
445 talk to students and residents and people. You never know. You just never
446 know when you're going to meet the next opportunity, right, so you've just
447 got to put yourself out there, have some conversations, and see what
448 happens. So, I don't know, that's probably one of my stories, but I still feel
449 bad that I don't have some like these really good ones. Like Dr. DeLuca's
450 the best at that. Dr. DeLuca always has a story. I should ask him about my
451 stories, and he would know better than me.

452 Committee Member: I think that was really a good story.

453 Dr. Bixler: Thank you.

454 Committee Member: Yeah, I agree. I didn't know that. That's interesting that you met in a TSA
455 line.

456 Dr. Bixler: You didn't know that?

457 Committee Member: No.

458 Dr. Bixler: Oh my gosh, see I feel like everybody's heard that story already, so that's
459 why I was kind of like: Oh my God, that one's kind of getting an old true
460 and true, but that is.... Yeah, we actually... To really add to that story, to be
461 quite honest, we were leaving wherever we were having the meeting, but
462 we were definitely in Chicago, and Dr. Grove had a car, like of course he
463 always has a car, like no cab for him, and he's like: Hey, I got room in the
464 car. Do you want to have a ride? And that was it. We started the
465 conversation in the car, and I remember much then we were talking about
466 physician extenders and nurse practitioners and the level of providers and

467 the state of medicine and how bah-bah-bah-blah and that's when Dr.
468 Grove exposed me to his type of managed care medicine that he does; and
469 I was like: Wow, that's sounds really awesome. I only have to see like six
470 patients a day. That would be phenomenal. I would love that. I'm seeing 25
471 and it's horrible, so, yeah, that's how it all started, and it literally was. That
472 was in January of 2007, and I was moved and living in Florida by July of
473 2007, so that's six months I was here, so yeah here we go.

474 Committee Member: Earlier you had mentioned that you felt like you could really connect with
475 residents, students, the younger next generation, however. Do you have
476 any specific advice for people who are up and coming, whether they're just
477 starting medical school to finishing residency?

478 Dr. Bixler: So my advice, my first advice because I teach third and fourth-year med,
479 mostly third year medical students, so even though I would love
480 everybody to be a family physician, obviously, and clearly that's what I
481 push for, I think my best advice I give everybody is: This is such a long
482 haul and such a long road, you have to get to listen to what speaks to you.
483 You've got to do what you want to do because you see yourself doing that
484 for the next 30 years or 40 years, right? I think when I talk to students and
485 some come in with these ideas of like: I want to be an interventional
486 cardiologist, then I kind of got like: Why? Like you have to know your why,
487 right; and that's ultimately what it is, so I think that's what I try to talk to
488 students about- know your way. Know why you're doing it. It's not
489 because someone told you that's a good career. It's not because someone
490 else you know in your family does that. It's not because you think you'll
491 make more money doing that. It's because you find that you identify with

492 it and that you love it and that's who you want to be, what you want to be
493 because medicine is all encompassing no matter how much you try to
494 make it not. It just is a profession that is. You know what I mean? I have
495 great I think work life/quality of life balance, but I'm always a physician
496 every day no matter what, right, and there's still always days that it's hard
497 to get away from that identify, so I think that's the one basic thing I was
498 always trying to mentor. And then after that, it's as those who then really
499 decide they want to do family medicine, I just really, really hone in on the
500 diversity of family medicine. That, wow, you can like truly make your
501 career what you want it to be and that career can ebb and flow and change
502 and morph and do and I don't know many other specialties within
503 medicine that allow you that much flexibility as one day I'm taking care of
504 a two-day-old and the next day I'm taking care of a 98-year-old and one
505 day I'm working in the hospital and the next day I could work in a nursing
506 home and I could just do outpatient. I could do inpatient. I could be
507 academic. I can do whatever. I mean I know there are other ways to do in
508 other specialties, but family medicine is just so unique that once we are
509 trained and we are trained so well and so broadly that the sky's the limit
510 how you choose to set your career and to never sell yourself short. I truly
511 believe that family physicians are the smartest physicians. I tell my
512 students that every day. I'm sure Dr. Bidey as an educator has something
513 to that effect too. I mean let's face it, there's like not many other specialists
514 who have to walk into like a blank canvas as much as we do and have to
515 know at least something about everything. When you walk in to see a
516 patient, right, you don't just get to say, "Oh, if it's not the top 10 heart

517 diagnoses, it's not my area, go to another specialist." No, we're expected to
518 know a little bit of everything about everything; and I find that
519 challenging, but I find that fulfilling and so I think when I talk to students
520 and residents, that's part of what I sort of put out there is like some of the
521 really great aspects of being a family doctor and that you also can make a
522 really great living being a family doctor. I mean all present company
523 included, like none of us are down on our luck, I don't think, so I think it's a
524 great life and so I think those are the things. And then ultimately, too, I
525 always try to tell my students and residents, you still always have to have
526 and find a passion outside of what we do every day because this is always
527 going to be a grueling profession. The statistics are there. We're all very
528 well aware of it. The mental health component of this is that it's not joke.
529 You do have to have that outlet. I kind of came off the tail end of training
530 where that wasn't at all focused on. That wasn't and Dr. Porcelli, even
531 probably Dr. Kessler work hours and all that stuff and so I can see the
532 difference of how and what that means and so it is really taking care of
533 yourself because we aren't good osteopathic family physicians if we don't
534 do that. I think those are kind of probably the three things as the most
535 general things I try to work on with my students. And then on a much
536 more very singular level, the way I try to connect with my students and be
537 with them is that I want to know something about them, just like I want
538 when I go into a room to see a patient, I need that connection point. I need
539 to know something about them that has nothing to do with their medical
540 history. I need something to know about them so that when I click, I
541 trigger them, so I always try to teach my students. I think it's kind of funny,

542 but on day one, I always make them tell me. I have the same five questions
543 I ask every student and I answer them myself, so you know whatever I'm
544 going to ask them, I'm going to tell you I'm an open book. I'll tell you
545 everything you want to know, but I always make them tell me something
546 really interesting, really exciting, fantastic, something that someone else
547 may not even know about you because that's how I'm going to remember
548 you and always to not take yourself so seriously. It's okay to step outside
549 of that box. It's funny because I love hearing the stories I get. I've heard
550 some really great ones, so... But I think that's kind of the little bit of the
551 levity you need sometimes to be able to get through the really tough times
552 because there'll be tough times, but there's so many more great times in
553 being a family doctor. Hopefully when my students leave, that's what
554 they're thinking too, so my goal is always that especially teaching students
555 is that I inspire one more person to be an osteopathic family physician.
556 That's my goal, so. And then when I teach my residents, it's to make sure
557 that they are obviously a well-rounded physician first and that they
558 continue to practice with the tenets of what they were given in osteopathic
559 medical school because there's just no reason to think that you don't have
560 to have a little part of that somewhere along your way to continue using
561 that for the rest of your career because it's such a gift that we're given in
562 DO school to learn some of the things that we learn that our counterparts
563 never learn, so it's a shame if we waste it, so those are probably my big
564 words of wisdom for all the students and residents I teach, so yeah.

565 Committee Member: Dr. Bixler, forgive me if you addressed this, but we just don't have enough
566 ladies on our group and we don't have enough good female leaders, and

567 you probably covered this, but I couldn't lip read everything, but again
568 why you served and your passion and some just don't finish, but you went
569 all the way to the end. We've had some good ladies, but I guess
570 circumstances. But I guess my question is: Any comments on that?

571 Dr. Bixler: Well, I'm glad you asked that because we haven't actually specifically
572 addressed that topic.

573 Committee Member: Good.

574 Dr. Bixler: So you're right, it's a pretty small crowd of people for me to have looked
575 up to as to how to navigate that to get to do what I've done on the state
576 and the national level and why do I do it and how do I try to get other
577 women to do it. So, I mean I think first and foremost, right, you have to
578 have that passion for yourself. I don't think that any female leader can go
579 into it thinking like: I'm doing it because I need to be the role model for
580 other female leaders; and I don't ever want someone to fall into that trap,
581 that imposter syndrome so to speak. I know for me that was a little bit of a
582 challenge is that when I was asked to initially come on the board, although
583 I had all intentions of probably doing that one day, I didn't think I was
584 quite ready at that time and I was like I don't want to be put on this board
585 just because I am a female. I don't want to be that token female. I want to
586 be here because I earned it. I want to be here because I will continue to
587 earn it and I do feel good about thinking that I did so on my term on the
588 board, so I don't think that's the problem. I think you hit it on the head. I
589 think circumstances still affect female physicians more so than our male
590 counterparts. It's just the nature of what it is. It is a struggle. I'm not going
591 to lie, and I also mentor all the other females that are up and coming in our

592 profession. There are going to be times when they're going to be tough. I
593 remember that my daughter who's now 11 who pretty much grew up on
594 this board, but I missed her very first swim because I was at a board
595 meeting somewhere else. I mean did I cry? Yes, I cried. Did I cry when I
596 left? I cried when I left to get on the plane. I cried while we were in the
597 meeting. I cried when I left to come home because that's just not
598 something that as a mom, and I'm sure dads don't want to miss it either,
599 I'm not saying that they don't, but it was just something that was a really
600 tough thing. When Dr. Bidey and I first got on this call, something that's
601 never taken into account like we do all these Zoom calls and meetings.
602 Well, Dr. Kessler was coming from her seven-year-old's basketball game to
603 get on this call. Dr. Bidey missed bedtime to get on this call. I haven't seen
604 my daughter yet since 6:30 this morning, and I know she's out on the
605 other side of that door, but I think those are sacrifices that sometimes have
606 to get made; and I don't know if it's only just because I'm a female, of
607 course it is, but I think it's also the age and the generation. It's because I
608 didn't at this point in my life when I did have young children, that make it
609 a little bit tougher. And I think that's what gets a little hard because if you
610 get a little too far out and if you kind of maybe were active as a student
611 and resident and then you maybe take off some time because you're
612 starting your career or you're starting a family then I think our hardest
613 challenge, whether it's males or females, might just be how do you get
614 people back into the fold when it might be more convenient for their time
615 in their life, right, because it really isn't the most convenient to be quite
616 honest, but I do think that we've made strides in my year because I do

617 think that that was obviously important to me is keeping that in mind and
618 keeping that at the forefront that maybe not everybody to be a great
619 leader means that you have to come on and serve on this board for 12
620 years. Being a great leader just means being a really good chair of a
621 committee, being a great leader could be possibly just being a board
622 member for a couple years and we've had some really people do that who
623 make that decision. I think it's also good that we recognize and empower
624 that that is fine. If that's the decision you have to make for yourself, it's
625 perfectly acceptable and fine. And then if your life finds you in 10/15 years
626 able to maybe come back and volunteer and give your time again, well
627 then great. That's awesome, so I think a little bit is that culture shift that
628 we might just have to accept that in order for younger physicians or
629 female physicians to be active and be in leadership roles, that sometimes
630 the job, being in this role, has to be a little bit different in order for that to
631 happen because the way it's set up sometimes is not the easiest for people,
632 so it's looking at timing of meetings. It's looking at what needs to actually
633 happen in live events. Now that we've gone to so much virtual stuff, I'll be
634 honest with you, that was another huge blessing in disguise for me during
635 my year. Of course, I was ecstatic and excited to serve and I would've done
636 every single thing that was asked of me as president to travel all over and
637 be gone for hundred days out of the year, but would it have been hard? It
638 would've been horribly hard. At that time, I had a nine-year old, so, yeah,
639 it would've been really hard, but I would've done it. But nobody probably
640 would've seen it except for my close inner circle. I would've kept a good
641 straight face, but I was kind of blessed that I got to do most of it from

642 home, so I got the best of both worlds. I got to serve our profession, but I
643 got to also still be at home most of that time. So I think as a profession,
644 these things are going to continue to evolve because they're going to just
645 have to I think in order for that; and I'm excited because I do see a lot of
646 traction and energy and excitement from our younger physicians and
647 more diverse group of physicians. I think it's extremely important that our
648 board as a whole looks like the membership that we represent and so we
649 do need more women on the board. There's no doubt about it, and we're
650 getting there, so I'm excited that although now it's not my year as
651 president, I have the inside notion that there's more females to come on
652 the board, so that's a good thing. So, yeah, I don't know; I wish I had the
653 best answers. I wish I had a way to make it all happen, but it is a lot
654 circumstantial. It still is momma heartstrings that get tugged on as far as
655 when you have to make those decisions about being able to be there for
656 picking up a kid from school or being able to be on a committee meeting,
657 so - - and I think that even happens in our day-to-day jobs too is what you
658 do in your own work environment, academic environment, or whatever it
659 is, so, but I think we're making progress. We'll get there, so thank you.

660 Committee Member: I think you said it well!

661 Committee Member: I only have two sign apps, I guess, so anyway. Did you discuss your legacy
662 serving and then I think segue into these constitutional changes that we'll
663 probably see in March about the board makeup please., the feather in your
664 cap that you'll have.

665 Dr. Bixler: Oh, is that what we're going to call it. I don't know, so what is my legacy?
666 Gosh, I unfortunately think my legacy will be one of the COVID presidents.

667 I mean that's just the natural fact of what it's going to be. I think that when
668 you look back, that Dr. DeLuca and I will have that claim to fame. I hope
669 though, as what you alluded to, that my legacy, which we did touch on
670 briefly before, really does end up being more about how myself and the
671 board worked really hard in trying to bring DEI efforts to the forefront and
672 some governance changes too. Although our organization has been
673 phenomenal and awesome and all those things, it's that all great things
674 also need to reflect and sometimes need to change slightly in order to stay
675 relevant to all of its members, so I think that probably my legacy for good,
676 bad, or otherwise will be that right, but it was kind of shaking up the
677 governance part of ACOFP a little bit, which we did have some changes
678 already pass last year and, right, as it stands, we'll have potentially more to
679 come here in this next year, but the whole goal of the entire governance
680 work and what we worked on for my president-elect year and then my
681 kind of two-year prolonged president, so three years, was really looking at
682 nonprofit organizations, how they remain viable, efficient, technologically
683 savvy, responsive to their members, inclusive of all people and ultimately
684 anything that we proposed and we worked upon was keeping those goals
685 in the forefront and really trying to make it so, as you pointed out, that we
686 can continue to have more women to serve, younger members to serve,
687 and just generally members to serve because it's not about what the
688 demographic of the person who's serving. We just need people to continue
689 wanting to be leaders in this profession, so I do hope that remains part of
690 the legacy that it was part of that to maintain ACOFP and its viability and
691 its pipeline of leaders for many, many, many years to come and we'll see

692 how that all still ends up panning out since there's still work to do. The
693 work never ends. It just gets passed along and the board now is very I
694 think cohesively worked on that. We had for the last three years, so now it
695 just continues that same work, so we'll see how the reset of it pans out
696 under Dr. Williams' watch and Dr. Park. It'll still keep going, so maybe
697 hopefully that's my legacy is that the stuff we started continues to keep
698 working, so that's a good thing. That it didn't just start and end with me.
699 That those ideals continue on, so thank you.

700 Committee Chair: Dr. Bixler, I want to thank you for your service.

701 Dr. Bixler: Sure.

702 Committee Chair: You're an inspiration to the ACOFP and I really appreciate everything
703 you've done for us.

704 Dr. Bixler: Thank you. It is truly barring outside of probably marrying the best person
705 in the world and giving birth to my daughter probably one of the greatest
706 honors of my life to serve this profession and do so in the capacity of
707 ACOFP President. And I thank you all for your time and your questions and
708 your due diligence in sitting here and listening to me, so thank you so
709 much.