legislation passed in—I believe it is present in all but two, maybe it is in all the States now.

Senator Nelson. Which legislation is that?

Dr. Weston. This requires the reporting by a physician when he suspects that a child has been abused by its parents, and it just has not proven to be of the value that it was anticipated to be because even with an immunity clause in it, in that particular instance, providing immunity to the physician in case he did make a false accusation, you have other factors to consider. You have the factor that this family is treated by the doctor in this particular instance and the doctor reports this family, so he loses all the patients in the block as soon as word gets around.

Senator Nelson. Maybe you did not understand my question. Maybe

I did not make it clear.

Dr. Weston. Well, you have exactly-

Senator Nelson. I am saying hospitals, only hospitals, would report the medically significant statistical information on drug side effects. They have the patient there. The patient's records are there. They have qualified physicians in the hospital. For example, say that you have found a blood dyscrasia as a consequence of chloramphenicol. At the end of the year the significant statistics which you have accumulated would be reported to a central place. That is my question. I was not referring to known side effects of a drug like penicillin that

has been used over a period of many, many years.

Dr. Weston. Well, you have two cases now, one in excess of \$200,000 and one approaching \$200,000 in which awards have been made to families on the basis of Chloromycetin. Do you suppose a doctor is going to be naive enough if he treats a patient with an upper respiratory infection with Chloromycetin to admit this patient into the hospital and write down at the end of the hospital chart, if there is any way to mask it, the fact that he has used this drug and that this patient has ultimately died from the untoward reaction? I do not believe so. You cannot get the information either by voluntary or--the accurate information either by voluntary or compulsory reporting systems.

Senator Nelson. I am not talking about getting information for purposes of prosecuting doctors, but we have heard you and some other distinguished doctors testify and nobody can give us any idea really of how many cases of serious blood dyscrasias occur from this drug or apparently from any other drug. All I am saying, for the benefit of educating the medical profession about the drugs, if you have x number of cases of a certain side effect from a particular drug, would not it be valuable to the researchers in the profession to know that the drug is causing it? This is what the medical profession hopes to learn as fast as it can about every drug and I am suggesting that they might learn it faster if the information accumulated in the hospitals around the country was furnished to FDA and the American Medical Association. That is my question.

Dr. Weston. Oh, I agree with your point. Do not get me wrong.

I agree wholeheartedly with your point, but somewhere along the line,