

Exhibit J

Excerpt From
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Prescribing and Dispensing of Drugs

This report is intended to state the position of the American Medical Association regarding the considerations which are pertinent in determining under what circumstances the physician should prescribe generically or by brand name.

The present policy of the American Medical Association is that physicians should be free to prescribe drugs generically or by brand name for all of their patients, whether they are paying, medicare, or indigent patients, the primary consideration being the best interests of the patient. Medical considerations must be paramount in the selection of drugs. In addition, the physician also has an obligation to be mindful of the economic consequences of the treatment he prescribes.

The issue of cost is not simply a matter of prescribing drugs generically as opposed to brand name prescribing. Often there will be substantial variations in the cost of the same drug marketed under different brand names by a number of reputable manufacturers. However, generic prescribing alone will not assure that the least costly brand will be dispensed or that the savings will be passed on to the patient. Nor will generic prescribing alone assure the physician that his patient is receiving the product of a manufacturer in whom he has confidence.

If the physician prescribes by brand name, he designates the source of supply. If the physician prescribes generically without naming a manufacturer, the pharmacist or some other third party chooses the source of supply.

The attending physician should not delegate this choice, that is, he should not prescribe generically, unless he is convinced that he can rely upon the quality and purity of the drug that will be dispensed to his patient. If this is not the case, then the physician himself should designate the source of supply by prescribing by brand name or by adding the name of his choice of supplier to the generic name of the drug.

Cost Considerations

If medical considerations lead the physician to the conclusion that he should not delegate the choice of supplier to anyone else, then he must make the decision. And in doing so he should supplement medical considerations with considerations of cost to his patient.