For example, physicians are not expected to prescribe according to a national formulary, but usually function through a therapeutics committee, established by the center. One of the committees' functions is the improvement of patient health through the utilization of the most effective pharmaceutical product for an intended therapeutic effect.

The present logistics of drug procurement among neighborhood health centers are relatively adequate. One problem experienced by some health centers results from imperfect transmission of knowledge concerning drug prices. This lack of information has created the situation whereby pharmacists occasionally pay different prices for the same drug. Sometimes this difference is due to the market segment in which the acquisition occurs. In other instances, it is due to

purchasing the drug from a different supplier.

A second difficulty results from the distributing system. For the most part the procurement of pharmaceuticals through Veterans' Administration has been satisfactory. However, there have been some unexplained timelags between the ordering and consequent receipt of drugs which have necessitated ordering in the open market at higher prices per unit. Other problems relate to administrative issues. Early in the development of the health care program, drug volume may be only modest. Therefore, it is impractical to order pharmaceuticals from the VA or have special agreements worked out with pharmaceutical manufacturers. In other instances, due to the relatively small number of patients being seen by physicians, it is a better utilization of management time to purchase through non-Federal sources of supply. This practice requires a minimum of time being devoted to purchasing aspects and maximum time for the direct delivery of health services.

PRESCRIBING PATTERNS

The Office of Health Affairs, Office of Economic Opportunity has encouraged the adoption of drug formularies in all individual neighborhood health centers whether or not the program utilizes an inhouse pharmacy. The formulary concept enables all professional staff to become acquainted with the clinical aspects of the drugs considered most useful therapeutically and the amounts of medication needed to arrest a disease. The formulary concept does not interfere with medical practice; however, it does create a climate in which health practitioners can strive to attain better therapeutic results with patients. Various centers which utilize formularies have different policies concerning the restraints which are placed upon prescribing physicians. Some programs require written authorization to dispense a product which is not contained in the formulary. In other programs the physicians are encouraged to prescribe those items in the restricted drug listing.

Health centers usually evaluate a patient's progress on a continuing basis, using a peer group of health professionals. Part of their review involves the prescriptions written by physicians, to see whether the medication prescribed was appropriate for the condition diagnosed, whether the quantity prescribed was sufficient and whether the number of prescriptions utilized was excessive. During