fessional medical service groups. Agency policy statements and regulations, where available, are generally limited to setting out the scope and authority of the P and T Committees. Headquarters may provide recall and adverse reaction information about specific drugs, and furnish data on the commercial availability and prices of drugs. However, the selection of drugs for inclusion in the station formulary is reserved to the P and T Committees. At military hospitals, the hospital commander is responsible for approval or disapproval of drugs recommended by P and T Committees.

Most of the information on specific drugs which is made available to members of the P and T Committees in their consideration of changes to the station formulary comes from two sources; professional journals and the drug manufacturers.

Senator NELSON. May I interrupt a moment, Mr. Staats? How did you reach that conclusion?

Mr. STAATS. On the basis of our reviews at a number of locations where our staff visited the facilities themselves. There were, what, seven?

Mr. AHART. Five.

Mr. STAATS. Five; and I believe this is confirmed also by interviews with headquarters personnel here in the VA and in the Defense Personnel Support Center.

Senator NELSON. This is the pharmacy and therapeutics committee of Veterans hospitals?

Mr. STAATS. The VA facilities, say, for example.

Senator NELSON. And military hospitals?

Mr. STAATS. That would be an example, right. We can supply you a list of the facilities we visited, if you like.

Senator NELSON. If you would.

(The information referred to follows:)

HOSPITALS AND CLINICS VISITED

1. Walson Army Hospital, Fort Dix, New Jersey
2. Philadelphia Naval Hospital, Phila., Pa.
3. Veterans Administration Hospital, Washington, D.C.
4. U.S. Public Health Service Outpatient Clinic, Washington, D.C.
5. Veterans Administration Hospital, Hines, Illinois

Senator NELSON. As I understand it, a number of those physicians are coming out of private practice into military and Veterans facilities and then go back to private practice. Is that right?

Mr. STAATS. These would be medical personnel at the facility.

Senator NELSON. Yes, and a substantial number of them are not permanent physicians at these facilities.

Mr. STAATS. You are quite correct.

Senator NELSON. They come out of civilian practice or out of medical school, go into the military or into Veterans hospitals, serve their period of time, and go back to their medical practice, is that not correct?

Mr. STAATS. That would be correct.

Senator NELSON. And most of the testimony we have had on the prescribing practices of the physician indicated that the detail man is a very significant factor in influencing the selection of the drug. Then drug advertising, as well as professional journals, ranked behind the detail man.