The National Drug Code System was developed under the direction of the Nomenclature and Coding Subcommittees of the Task Force on Prescription Drugs and there was close cooperation with representatives of drug manufacturers and distributors, private insurance companies, and government agencies.

Recommendation 18 also suggested that the Department introduce appropriate legislation to require coding of all drugs in interstate commerce. Such legislation was introduced in the 91st Congress, and as mentioned earlier, has now been resubmitted.

The drug code just discussed has been adopted. The Department has published and distributed two editions of the National Drug Code Directory. The second edition, published in June 1970, includes coding data for more than 18,400 drug products marketed by some 265 companies. We have supplied copies of this document earlier to the committee.[1]

Many manufacturers have begun to use national drug code identifications in catalogs and promotional material. Some firms have voluntarily placed product identification symbols of the code on tablets and capsules. Use of the code is voluntary, however, and we cannot at this time require it on labeling or on tablets and capsules.

Recommendation 20 requested that the National Center for Health Services Research and Development support pilot research projects looking toward the development of good prescription drug utilization review methods. Shortly after the task force report appeared, the Center supported a comprehensive study of drug utilization review. The study was published in April 1970 in a document entitled "Drug Utilization and Drug Utilization Review and Control." I have a copy here for the information of the committee.[2]

Since July 1970 the Center has provided consultation to a number of universities and community hospitals and other groups regarding their responsibilities in relation to drug utilization review.

Other studies have been and are being supported not only by the National Center for Health Services Research and Development as suggested in recommendation 20 but also by the Social Security Administration and the Social and Rehabilitation Service of HEW. A number of examples are:

A study at the University of Rochester on patient care research in adverse drug surveillance.

A study at the University of Alabama Medical Center of a hospital pharmacy-based drug communication service.

A study at the University of Kentucky Research Foundation of guidelines for practical hospital unit dose systems.

A study at the University of Mississippi of the pharmacist's role in hospital pharmacy committees.

A study at the University of Pittsburgh of socio-economic analysis of EDP-based drug utilization.

A study at Johns Hopkins University of the development of a methodology for evaluating the drug prescribing patterns of physicians in a given community.

[1] The document, "National Drug Code Directory, 2d Edition," June 1970, has been retained in committee files.

[2] See pp. 8348–8422.