Government representatives and one AMA, for a total of 18. There were 14 present on the 25th of October. And 13 of those voted, and all 13 voted for the resolution.

The CHAIRMAN. And then you were saying that at another executive session—what do you mean by executive session versus full session?

Dr. PITTMAN. Well, the Chairman of the DRB, Dr. Shideman, felt that we might be able to get out issues by having smaller meetings with representatives of other groups such as FDA, AMA, and PMA. And this was one of those meetings.

The CHAIRMAN. And how many were at that? That isn't the full 18 member group?

Dr. PITTMAN. No.

The CHAIRMAN. I get you.

Mr. GORDON. May I ask a question here?

You say right at the top of page 2 "should be required either to delegate to the pharmacist, or explicitly to retain to himself."

Dr. PITTMAN. Would you like me to read through that resolution? That is the heart of the matter. I will stop and read through the whole resolution.

Mr. GORDON. When you mentioned "required", you mean you are required by law. That is the only way to require?

Dr. PITTMAN. Yes. I erred in not reading the resolution aloud at the beginning of this testimony. Here it is.

The title, which has been on a number of releases within the DRB, is "Resolution of the Drug Research Board With Regard to Drug Product Antisubstitution Laws."

1. Whereas, the patient's welfare should be the ultimate goal of statutes and regulations concerning drug product selection, which in operational terms means the best product for the lowest cost, and

2. Whereas, the physician must have the ultimate responsibility and authority in drug product selection, since he has the fullest knowledge of the patient's needs and responses with attendant obligation to be held accountable for his selection of particular drug products, and

3. Whereas, the pharmacist may, in some situations, have greater knowledge of drug products than other health professionals, including knowledge of both quality and costs, and

4. Whereas, It is appropriate that decisions with regard to the choice of drug products be made by the health professional possessing the greatest amount of information involved in the particular selection in question, with the attendant accountability, therefore be it

5. *Resolved*, That the physician, having selected the chemical entity to be used for therapy, should be required either to delegate to the pharmacist, or explictly to retain to himself, selection of the particular drug product to be dispensed and received by the patient.

Now, the whole thrust of the history of this resolution, which was finally passed October 25, 1974, came from considerations of the drug antisubstitution laws, from the very outset in the meeting on the 11th of July 1973. And the first "whereas" in the resolution itself mentions "statutes and regulations concerning drug product selection."

So that my understanding—and I think anyone else's who would look at the data here—is that the thrust of this is toward the antisubstitution laws of the States.

Mr. GORDON. As a matter of fact, when Dr. Crout abstained, didn't he state that he is abstaining because the FDA has not taken a position on the antisubstitution law?