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matter is currently receiving attention within DOD as part of its effort to comply with the need of the GSA-led Interagency Committee for identification of those items which should be managed on a central basis. In this connection, we were informed by DOD officials that the Defense Medical Materiel Board—which selects items for DOD's central stocks—is currently studying ways to accelerate the process for adding items to the central stock system. We were told that DOD's current emphasis is on providing for certain activities in the selection process—such as item classification and specification development—to be performed simultaneously rather than sequentially, as has been the practice in the past.

Finally, we made recommendations to both DOD and VA regarding the need for (1) improvements in their reporting systems for drug procurements made by agency activities outside of the central stock systems, and (2) a standardized coding system—such as the National Drug Code—for reporting local purchases of drugs not having Federal stock numbers. These matters, being related to the issue of central stocking, are also of interest to the GSA Interagency Committee. In our follow—up, DOD and VA officials indicated that:

⁻⁻DOD has underway an effort to standardize the three services' procedures for reporting local drug purchases made by field activities. Currently the services employ different procedures for reporting such purchases.