it a low funding priority in an overall system that directs insistent light upon bricks, mortar, systems, and machines.

ATTITUDES OF MEDICAL STAFFS

Hospital medical staffs have been both active and passive in adding plaques to the sclerotic communications pipeline. The measurable shortage of physician manpower tends to confine their immediate thought to the care tasks at hand, which are all too time consuming. Physicians have tended to regard the medical colleges, which spawned them, as sophisticated purveyors of a type of intellectual exercise that is impractical in terms of temporal, physical, and emotional pressures in the community setting. With some justification, they look on medical college faculties and functions as consuming inordinately large numbers of physicians, in both intern and resident programs and staff positions. Their plea to the medical colleges too frequently has been based on what they believe to be a clearly demonstrated need for house staff in the operation of their hospitals and for passive spoon-fed, time-consuming continuing education programs. That these pleas have fallen on deaf and unsympathetic ears is understandable in view of the content of the pleas and the nature of the institutions and individuals to whom they are directed.

Although many other factors have contributed to a lessening of effective communication between the sources of our knowledge and the institutions of its application, those discussed would seem to be the most important and relevant to the effects of federal support on the individuals and institutions at each end of the

'knowledge to application" transport system.

Suddenly, into this potpourri of understanding, misunderstanding, interest, and disinterest has come a tremendous force for motivating change. After decades of providing major fund support for both medical research and medical care institutions, the federal government, representative of the consumers of our product, recently has discerned that much of its investment in research has been unproductive because the information, techniques, and skills produced in the research centers have not been transmitted *effectively* to the operational arm of the medical care system—the community hospital and its medical staffs.

Whether the failure of effective transmission is due to simple lack of information transfer is open to serious question, even though it is a convenient theorem. Campbell Moses, medical director of the American Heart Asociation, identifies the real problem as validation of knowledge—that is, inability of the practitioner to accept and adopt new knowledge or technique until he has had the experience of "seeing" it used and using it under direction. Perhaps the "information gap" is really a "validation gap," but probably it is both—certainly the therapy for

either lies in continuing education.

Forces within government also are beginning to recognize that much of the support assigned to the construction of community medical care facilities has been less than totally effective in producing efficient and knowledgeable delivery of medical care. Funding instead has produced an overemphasis on inpatient care and medical staff direction and administration, to the detriment of a coordinated system of patient care involving logical division of inpatient and outpatient activities, and to the detriment of the continuing updating of physician knowledge, techniques, and skills.

With the recognition of its less than complete success in the past, the consumer. group, represented by the Regional Medical Programs, the National Institutes of Health, and their parent body, the Department of Health, Education, and Welfare, have come up with a very efficient and almost certain to be effective

mechanism to correct some of the past inadequacies.

A "SHOTGUN WEDDING"

Stated simply, medical care and medical education, the two ends of our sclerotic pipeline for the transmission of knowledge and understanding, are about to be subjected to one of our more common social relationships—the inevitable progression from the spurned proposition, to the proposal, to the engagement, and finally to the marriage. Considering the divisive factors above, this is certain to be a stormy junction, but it is just as certain that it will be consummated and productive, for it is a "shotgun wedding." The people of our nation are holding the shotgun. It is loaded with cash—the greatest motivator in our society. Of