University School of Medicine supervise sixty-five Georgetown interns and residents and twenty postdoctoral fellows at D.C. General. The hospital swarms with our students. Many members of the full-time and volunteer faculty serve as visiting physicians, assuring that the least fortunate of our citizens receive the same or better medical care than that received by our most fortunate citizens.

Of the full-time faculty stationed at D.C. General, ten receive no income whatever from the District of Columbia. They are paid entirely by Georgetown University. Georgetown has made a large commitment to service in our city hospital. To be sure, D.C. General provides a magnificent training ground for our medical students and graduate trainees in the numerous specialties of medicine. But we are there because we want to be there. Since Georgetown is in the business of rendering health care, if has assumed the obligation of rendering health care to all citizens of Washington, regardless of economic status, in its own hospital and in the municipal hospital. (Statistic: In 1965, 5,800 babies were born at D.C. General. Of these, 2,000 were delivered by Georgetown people, teachers and students.

Fifty members of the full-time faculty of the School of Medicine and many members of the part-time faculty serve as consultants and committee members in the health and other agencies of the United States government. Many are members of committees and clinical study panels of the National Institutes of Health. Others serve the Armed Services, the Veterans Administration, NASA, the Social Security Administration, CIA, and the Civil Service Commission. All serve at significant material and temporal sacrifice. All feel the obligation to assist in the smooth functioning of governmental operations by lending "know how" to the government's programs in health, education, and research.

Why did Georgetown University undertake this program? We felt we must supply our share of the health resources necessary for the Washington area. Georgetown University was confronted with the question *go* or *stop*. We *went*, in the spirit of faith and hope. I trust that this Committee will enable us to fulfill this faith and hope.

STATEMENT BY WALLACE WERBLE, PRESIDENT, CHILDREN'S HOSPITAL

Mr. WERBLE. As president of Children's Hospital, I am grateful for the opportunity to appear before you on behalf of our board, medical staff and sick children.

When you get right down to the heart of the matter we are discussing today, it is appropriate to point out that, whenever the board of a hospital makes a significant money decision, it most often involves, in one way or another, a single, but difficulty question: How much is life worth?

At Children's Hospital, the underlying question always confronting the board is: How much is the life of your child or grandchild worth? My child or grandchild? Or Joe Smith's child or grandchild?

Boards of general hospitals are confronted with the question of how much is the life of any human being worth—your life, my life?