Specifically, I suggest consideration by this subcommittee of these additional amendments to H.R. 15757:

(1) That it is the sense of Congress that the Department of Health, Education, and Welfare has the responsibility for stimulation of new approaches in health manpower. This responsibility should be discharged, initially, by reporting in 1 year:

(*a*) On the extent to which the medical profession is already involved in developing new health professions, and, specifically, in developing training programs for physicians' assistants who can assume some of the important, but routine, burdens of medical care, under the supervision of doctors, so that our limited professional resources can be more fully and efficiently used;

(*b*) The steps which the Department of Health, Education, and Welfare has taken to encourage and assist there developments; and

(*c*) The further steps by which HEW can assist and stimulate the medical profession in developing curriculums, training institutions, and approaches to accreditation and licensing necessary to achieve the fullest possible use of such new health personnel.

Mr. Chairman, I have spoken many times in the past few months before doctors and medical educators on the state of our medical care and the need for increasing the efficiency with which we use our health manpower. I have found, as I anticipated, considerable reluctance by many doctors both to accept the basic criticism that our present medical care system is inefficient, discriminatory, and unfair, and the need for broadening and improving the use of paramedical personnel.

But I have been amazed and pleased to find many doctors who agree with these criticisms and who favor more help for the new pioneers in medical care research who are already at work today in America.

Today's doctors are aware of the kind of work being done by Dr. Eugene Stead at Duke University in training a whole new class of physicians' assistants and by Dr. John Niebauer's orthopedic team at the Presbyterian Medical Center in San Francisco which is training former army medical corpsmen to take over some of the routine and even menial duties performed traditionally by orthopedists. Doctors are becoming aware, in short, that there might be better ways to practice medicine than those they know today.

One of the bars to further development of these ideas is the resistance to change not only within the medical profession, and specifically within the American Medical Association but within the Federal Government which finances so many important medical research programs.

It is this unspoken but influential alliance between traditional medicine and some program administrators in the Public Health Service and the National Institutes of Health which is the real obstacle to more and better clinical medical research.

This amendment will encourage those leaders both in HEW and in medical education who want to improve our medical care system by updating clinical medical research. It will provide Congress with the information we need to judge the adequacy and extent of our support for promoting better medical care. And it will demonstrate to both