

for only one more year, and hopefully will be making major adjustments next year. Of the changes recommended, however, I would like to comment on the ones concerning "Development of New Methods" as they relate to medical technology. We strongly urge that the public and nonprofit private agencies, organizations and institutions that are to receive grants to develop, demonstrate, or evaluate curriculums and methods for medical technology be those in which medical technologists themselves are active, and be those which have shown by their activities in the past and their interest at present to be concerned with this area of improvement of medical technology education.

The clause on funds for evaluation purposes indicates that the government may be evaluating curriculums. We suggest that the role of evaluator is better and more properly fulfilled by educational accrediting agencies outside the government.

I have indicated that while the Allied Health Professions Act is very much the right step in the direction of solving the shortages of manpower in the medical laboratory, the present law for all its good intentions cannot in its present form and under its present appropriations move noticeably toward solving all the basic problems.

In order to make a thoroughly rounded attack, we feel that other provisions need to be included in the Allied Health portion of the Act. These are provisions that would aid all the allied health professions concerned and not just medical technology.

(1) Undergraduate loans with cancellation clauses are needed in a manner comparable to those provided for nursing, physical education, social work, medicine, dentistry and others. While medical technology students may avail themselves of National Defense Education Loans, the fact is that a medical technologist averages about \$6,000 during her first years of employment, a very inadequate salary for bearing the burden of a large loan. Furthermore, this puts us at a distinct disadvantage in recruitment especially since we must compete with other professions with accessibility to such loans.

(2) No scholarship funds are available for undergraduate students in medical technology, as there are for nursing, medicine, dentistry, veterinary medicine and others. Again, this puts us at a disadvantage in recruiting.

(3) Although graduate traineeship money is available for graduate study, there is no provision in the present law for the development of graduate curriculum into which these graduate trainees could enroll. There are only five universities in the United States today which offer graduate education in medical technology. These few graduate programs are chiefly devoted to masters programs in technology education are sorely needed. Over 780 schools of medical technology and laboratory assistants in hospitals as well as the academic programs on campus are crying out for more teachers and instructors. It becomes obvious that if we are to produce more medical technologists, we must, at the same time, produce more teachers to keep up with the enrollments.

(4) Support of part-time study for graduate education through which current faculty and supervisors could upgrade their knowledge and skills could go a long way in improving the educational process.

Hopefully, these suggestions will be incorporated into law to give it additional strength in developing educational programs, opportunities for students, teaching facilities and expansion of educational facilities.

Again, I thank you for the opportunity to bring you the views of the American Society of Medical Technologists and their support of H.R. 15757.

Mr. NELSEN. No questions, but thank you for cooperating with the committee so well.

Mr. JARMAN. We appreciate your being with us, and we certainly will give careful consideration to your statement and your comments today.

Dr. ROSS. Thank you very much.

Mr. JARMAN. The subcommittee will stand adjourned until the same time tomorrow morning, at 10 o'clock.

(Whereupon, at 12:15 p.m. the subcommittee adjourned, to reconvene at 10 a.m., Wednesday, June 12, 1968.)