

Harvard Medical School, \$10 million. 133 in 1965; 141 in 1966. Plus eight.

University of California, \$10 million. 71 in 1965; 70 in 1966. That is a decrease of one.

University of California School of Medicine, San Francisco—the first being Los Angeles—\$9,500,000. 100 in 1965; 99 in 1966. Decrease of one.

University of Washington, nine million, 65 in 1965; 81 in 1966. An increase of 16.

Washington University, \$8 million. 83 in 1965; 85 in 1966. Plus two.

University of Chicago, \$8 million. 67 in 1965; 59 in 1966. Minus eight.

University of Pennsylvania, \$8 million. 124 in 1965, 132 in 1966. Plus eight.

Johns Hopkins, 82 in 1965, 84 in 1966. Plus two.

So, out of a total Federal grant expenditure of \$94 million, we graduated from these 10 schools in 1965, 928 students, in 1966, 947, for a net gain of 19, with almost \$100 million.

Certainly I would agree that medical research has brought about dramatic improvements in medical technology and education, and I certainly concede what the eminent doctor who preceded me said about the Salk vaccine. The thing that does disturb me, however, is that with the elimination of all of the patients that ordinarily would be treated by reason of the discovery of Salk vaccine, why do we not have enough doctors at the present time to take care of the other ailments, diseases and injuries, and why have not medical costs in most areas of treatment been reduced.

However, I am convinced that there is a major gap between the presently available advanced technology and the manpower now available to apply that technology.

This brings us to the argument of quantity versus quality. The contentions that any reduction in Federal research funds or abbreviation of medical school curriculum will result in diminished quality of the physicians is in my judgment, nonsense. It is the same contention that the National League of Nurses has employed to retain its power of accreditation over nursing schools. Acceptance of that contention by the Congress and by the Department of Health, Education and Welfare, has had disastrous effects on nursing education, particularly on diploma training schools which do not fit in the NLN's plans to make nursing a 4-year college degree program.

I thus view the title I, special project grants, section with hope, yet with some degree of apprehension. This section will provide Federal assistance to projects designed to "improve medical school curriculum with a view to helping increase the supply", and here is the key word, "increase the supply of adequately trained personnel in health professions."

Now, while I am talking about quality, as a member of the Subcommittee of the Judiciary Committee on Immigration and Nationality, I have been terribly disturbed by the number of foreign doctors who are coming into the United States and I know the gentleman from Florida realizes the work we have done in that committee in providing the State of Florida with needed help. But the figures as I have them, indicate that in the United States in 1966, we had 2,795