just admitted expanded classes into the first of those buildings rather than already having turned people out of the long pipeline.

Mr. ROGERS. Yes. I was not so much concerned on the construction as I was with the facts that showed from 1957 to 1967 in effect an increase in permanent teaching staff of some 7,000, 8,000 or 9,000, and yet only an increase of about a thousand in medical graduates.

This is what made me wonder if we need to look at our whole process of education in the medical field, how we are utilizing the talents that we have, whether we are adequately utilizing them now, because, of course, you brought out that there are Ph. D.'s, and so forth, but still the mass—the problem exists in the first 2 years, 2 to 4 years. So this still is a concern to me on that.

Now, let me ask you this, Dr. Martin.

What would it take you at your school to increase—how many are we graduating from Florida?

Dr. MARTIN. We are graduating 64 and we are asking to go to 100.

Mr. ROGERS. Wonderful.

Now, suppose we were to—what would it take you to get that up to 200 and how long would it take you, do you think, assuming you have all the money you need?

Mr. MARTIN. Let me say this. I would probably, if I had my "druthers" and somebody asked me that question, I would say let's build another medical school in the State of Florida and we now in Florida have three medical schools, two in operation and one in the mill, and my feeling is, and my public statements are, that Florida should be planning another medical school right now——

Mr. ROGERS. Yes.

Dr. MARTIN (continuing). That in Florida we rank 37th in the Nation in the number of entering students per 100,000 population, which is a very bad position to be in, and when next year, or in 1971, as soon as we can get it, if we had 300 entering students per year in Florida, we would still be behind. And so we will have to build another medical school. And if you asked me, I would say don't put 200 students in Gainesville. Build another medical school.

Mr. ROGERS. This is what I am wondering. Is it easier to expand on present facilities——

Dr. MARTIN. It is easier to expand within limits but there probably is an optimum——

Mr. ROGERS. What would you think——

Mr. MARTIN (continuing). Optimum top figure, and I don't know what that is. I think it depends a lot—we have many good reports on new ways of doing this. There was the report in Indiana that said maybe the best thing to do is build one collosal medical center with three medical schools and then use the specialty hospitals to increase their efficiency. If we could do that in Florida and have two on the campus in Gainesville, fine. I think the point made here when you look over the statistics, is that 100 is not too many, and it is far easier to get up to 100.

Mr. ROGERS. Any other questions?

Mr. SKUBITZ. Only one thing. Suppose you increase the student body to 200. If we take Mr. Cahill's figure this morning, we are only going to get 15 general practitioners out of the group. We are not solving our problem at all. It is like our police force here in Washing-