can't do it nor can a 4-year trained brain do it. In fact, it is hard at times even for the 12-year trained brain to pick the right chute as you suggested.

Mr. SKUBITZ. Doctor, perhaps the 4-year student could take care of the 90 percent I am talking about. If he gets puzzled, he can call for the brain.

Dr. MARTIN. The big problem is you may be dead or down the wrong chute before that is called on and I still feel very strongly that you must see that talented person first, and I think if we relieve the physician of all of the nonmedical things he does, as I pointed out in pediatrics, he can increase his output five times. The dentists have shown us this very clearly, that a dentist can increase his output three times by putting in his office three well trained assistants, and he increases his productivity, and this is where we should be spending our effort and money, in addition to turning out physicians, is to turn out these people that will be sure that the physician then has his time to make that crucial decision, are you in the five, are you in the 95?

Now, once that decision is made, the process is much simpler because if you are in the 95, a hot water bottle and an aspirin and tender loving care is what you need because you will get well anyway. But if you are——

Mr. SKUBITZ. You should have been an insurance salesman.

Dr. MARTIN. If you are in that five, what happens to you in the next 2 minutes after you walk in may mean whether you survive or not.

Mr. ROGERS. Of course, what we are looking at now is what is our present system of delivery. When you go into the hospital, in an emergency room, and you don't have the best often, where there are communities where they don't have any.

Dr. MARTIN. Yes.

Mr. ROGERS. Then what is the solution here?

Dr. MARTIN. Well, I think——

Mr. ROGERS. This is what we are trying to get at.

Dr. MARTIN. I think the solution is let's don't go backward. Let's go forward and let's——

Mr. ROGERS. What is this going to take?

This is what we are trying to get at. Is it going to take building 12 new medical schools? Will it mean expanding by 50 percent present medical schools? This is what I wonder.

Dr. MARTIN. Let's don't talk only on medical schools. This is going to mean that you are going to have to support medical schools, yes, but you are going to have to support health profession education even in technical high schools.

Mr. ROGERS. I think we are doing those, aren't we?

Dr. MARTIN. In junior colleges. You have this already, that is right.

Mr. ROGERS. The allied health program was put in for this.

Dr. MARTIN. Junior colleges, technical high schools.

Mr. ROGERS. This is just beginning to start.

Dr. MARTIN. This is right, and you are going to have to support, then, the baccalaureate and masters programs and it is going to have to be across the board.

In the excellent publication on manpower recently it had the health pyramid and if you draw this—I don't have a chart.

Mr. ROGERS. We can see.