Dr. MARTIN. I will draw this, but the health pattern here is—let me draw this 8-year trained person. The total block is that large, 8- to 12-year trained people, and then you go down and under that the 7 years and 6 years and 5 years, and then we come to the 4 year, 3 year, and then—these 8-year trained people are resting on a spindle.

Now, if you look at how industry does this, industry takes their 8-year people that they support but they support them with an ever-increasing base of less well-trained people, and we haven't done this in health. So that I would agree very thoroughly with what the Congressman said, that we need people right out of technical high school trained to do things in the health manpower field.

Mr. ROGERS. Well, is this where we should put the extra emphasis, then, in building—filling out the supporting personnel?

Dr. MARTIN. It isn't either/or. You have got to work at both ends of the spectrum because you have got a fantastic—we have a fantastic problem coming towards us, an anticipated 24 percent increase in demand for services, and the services now that people need are not the old services as I pointed out before, they don't need a drop of opium. They need a heart-lung machine and they need all of these new things in addition to kind, tender, loving care, and what you have to do is to look at the whole manpower spectrum. Yes, I think we should expand the physician, we should expand him markedly, but if you expand the physician without giving him any undergirding, 5 to 10 years from now we are going to be sitting here crying the same song.

Mr. ROGERS. Now, what are we doing, and you should know this picture from the medical standpoint, what are we really doing producing allied health professional people and are they really being used by the doctors?

Dr. MARTIN. Yes. We are doing everything we can to expand it with——

Mr. ROGERS. To what extent? Could you give us some figures on this and how they are being used? I know the dental assistants have come into their own very well but what about a physician? Who does he really use in the system as an assistant?

Dr. MARTIN. He now is using a large number of these people but not nearly to the degree that we would like to see this done.

Mr. ROGERS. Could we get some examples of where they ought to be using them?

Dr. MARTIN. Yes.

Mr. ROGERS. If you could furnish us that, it would be helpful.

Dr. MARTIN. I will be glad to write you a picture of how I think they ought to be used.

(The information requested was not available at time of printing.)

Mr. ROGERS. The committee would like to have this so we can start putting some emphasis on it.

Dr. BERSON. I might add that all of these personnel who are being trained are being used. They are in great demand, and academic——

Mr. ROGERS. To the extent to which they are trained or for lesser——

Dr. BERSON. Efforts are being made to make this optimal and a good bit of progress has been made, I think a good bit more needs to be made, and virtually every academic-medical center as well as many