

improvement grants and special improvement grants for schools of medicine, dentistry, osteopathy, optometry, and podiatry. But we do wish to express our gratitude for construction funds and for financial assistance to our students made possible under these acts.

H.R. 15757 would make schools of pharmacy eligible to apply for special project grants (sec. 772) but would exclude them from receiving institutional grants (sec. 771). We ask, Mr. Chairman, that H.R. 15757 be so amended as to make schools of pharmacy eligible for institutional grants.

Manpower

Approximately 90 percent of our professional personnel are practicing in the community pharmacies throughout the country. The remaining 10 percent are engaged in the many other areas of the profession: in the pharmacies of our hospitals; in the control, research, or product development laboratories of the manufacturing plants; as medical service representatives to the physicians; in our educational programs; in Government; and in the Armed Forces. The schools of pharmacy are making every effort to respond to the demands for personnel from all of these public health areas. The educational program in pharmacy provides our graduates with an excellent background in the basic sciences as well as in the professional courses. For this reason allied health fields are utilizing an increasing number of our graduates. To provide an adequate number of pharmacists for the profession and the allied health fields, our schools and colleges of pharmacy will continue to need financial assistance through the provisions of this legislation.

In the important area of hospital pharmacy where about 10,000 pharmacists are employed, the demand is greater than the supply. Of the 7,000 hospitals only 2,339, less than one-half, have the services of a full-time pharmacist and only 2,644 (38 percent) have the services of a pharmacist on either a full-time or part-time basis. The annual replacement factor for full-time hospital pharmacists is estimated to be 12.8 percent or 621—about 17 percent of the 1967 graduating class.

The continually greater demand for pharmaceutical services by our increasing population necessitates an increased output of pharmacists. The annual increase in the number of prescriptions filled in the community and the hospital pharmacies is one factor in this increasing demand for the professional services of pharmacists. In 1967 nearly 1.1 billion prescriptions were filled—about 70 million more than in 1966.

I might mention that the increase in the number of prescriptions filled in 1967 represents a 205-percent increase over the number filled in 1947. Also in 1967 the average community pharmacy filled 21,000 prescriptions as compared to 7,000 in 1947, an increase also of 200 percent.

This increased number of prescriptions alone—that is, the 70 million—on the average requires the yearly services of about the entire graduating class of 1967. Thus, the annual increase in the number of prescriptions and the failure to graduate a sufficient number of pharmacists to meet our annual manpower replacement needs clearly indicate that all pharmacists—in our hospitals and in our community pharmacies—are having greater and greater demands made of them for professional services.