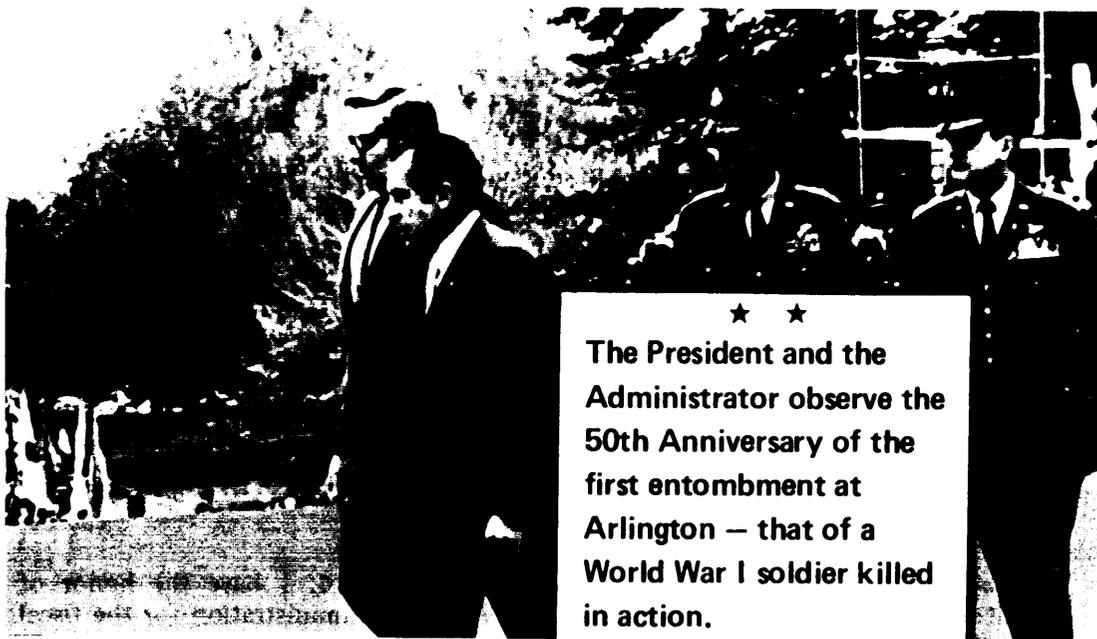


# ANNUAL REPORT 1972

## *Ceremony at Arlington*



★ ★  
The President and the  
Administrator observe the  
50th Anniversary of the  
first entombment at  
Arlington — that of a  
World War I soldier killed  
in action.

(November 11, 1971)

★ ★ ★



## *Letter of Transmittal*

To the President of the Senate and the Speaker of the House of Representatives  
of the 93rd Congress:

In accordance with the provisions of 38 U.S.C. 214, I have the honor of  
submitting a report on the activities of the Veterans Administration for the fiscal  
year ending June 30, 1972.

A handwritten signature in cursive script, which reads "Donald E. Johnson".

DONALD E. JOHNSON  
Administrator

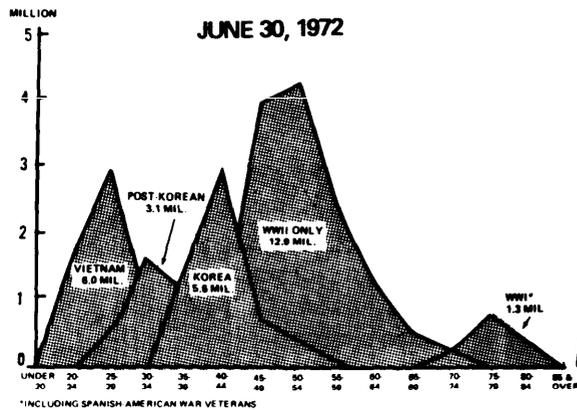
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# The Veteran

## THE CHANGING VETERAN POPULATION



### COMPARATIVE HIGHLIGHTS

	June 30, 1972	June 30, 1971	Percent Change
Total veteran population	28,804,000	28,288,000	+ 1.8
War veterans	25,691,000	25,169,000	+ 2.0
Vietnam era - Total	(5,976,000)	(5,138,000)	(+16.3)
a. With No Korean conflict service	5,626,000	4,837,000	+16.3
b. With Korean conflict service	(350,000)	(301,000)	(+16.3)
Korean conflict - Total	(5,908,000)	(5,887,000)	(+ 0.4)
a. With No World War II service	4,649,000	4,626,000	+ 0.5
b. With World War II service	(1,259,000)	(1,261,000)	(- 0.2)
World War II - Total	14,122,000	14,294,000	- 1.2
a. With No Korean conflict service	(12,863,000)	(13,033,000)	(- 1.3)
b. With Korean conflict service	(1,259,000)	(1,261,000)	- 0.2
World War I	1,291,000	1,408,000	- 8.3
Spanish-American War (on the rolls)	3,000	4,000	-25.0
Service Between Korean conflict and Vietnam era Only	3,113,000	3,119,000	- 0.2

### NUMBER OF VETERANS AND PERIOD OF SERVICE

The veteran population rose to 28,804,000 on June 30, 1972, as 870,000 servicemen returned to civilian life during the fiscal year. The number of returning servicemen, although 125,000 fewer than during the previous fiscal year, represents the fourth largest number to be separated from the service during any fiscal year since 1955. A continued reduction of troop strength in Vietnam, together with a general reduction in Armed Forces strength, has caused the increase in veteran population despite the fact that, during the year, 334,000 veterans died and 20,000 re-entered military service after returning to civilian life for a period of 24 hours or more.

The net separations (850,000) increased the number of Vietnam era veterans to nearly 6.0 million by the end of the fiscal year. Fifty-one thousand of those separated from service during the year had also served during the Korean conflict. (Eleven thousand of the latter group had also served during World War II.)

Of the 334,000 veterans who died in FY 1972, 10,000 were Vietnam era veterans who had not served during the Korean conflict or prior wars, 6,000 were post-Korean conflict peacetime veterans, 17,000 were Korean conflict veterans who had not served during World War II, 183,000 were World War II veterans, 117,000 were World War I veterans, and 1,000 were veterans of the Spanish-American War.

A small but as yet undetermined number of veterans of the Mexican Border Period, who had served in quelling the border clashes between May 9, 1916 and April 5, 1917 only, are not included in the veteran population estimates.

### FEMALE VETERANS

The veteran population at the end of FY 1972 included 537,000 female veterans (1.9 percent of the veteran population). More than one-half of these (307,000) are veterans of World War II. About 74,000 were veterans of the Korean conflict (no service in World War II), and 16,000 served during World War I or the

Spanish-American War. There were 83,000 female veterans in the Vietnam era veteran population, while the remaining 57,000 served in the Armed Forces only during the period between the end of the Korean conflict (January 31, 1955) and the beginning of the Vietnam era (August 5, 1964).

### AGE DISTRIBUTION OF LIVING VETERANS

The average age (44.7) of the 28.8 million veterans living on June 30, 1972 was only 0.2 years greater than that of the 28.3 million living at the end of the previous fiscal year. The one-year increase in the average age of the veterans, normally anticipated year-to-year, was largely offset by the more advanced age of the veterans removed from the veteran population due to death and the youthfulness of the 850,000 (net) newly-separated Vietnam era veterans.

Reference to the change in the average age of veterans, however, oversimplifies the description of the veteran population. The chart on page one depicts the complexity of the veteran population's age distribution. As can readily be seen, the average age is an abstraction based upon the overlapping age-distributions of veterans who served in the Armed Forces during specified periods of time. Each of these age-distributions describes a veteran population by itself. The peaks of these distributions approximate the average age for each period of service. Of course, the peak of the World War II distribution dominates the chart since World War II veterans account for nearly one-half of the entire veteran population.

As of June 30, 1972, 2.0 million veterans were 65 years of age or older. Looking at the age-distribution chart again, and mentally shifting the World War II distribution 20 years to the right, should readily convey the reasons why 7.0 million veterans 65 years and older are projected for FY 1992. The more than three-fold growth of this group of veterans, during the next 20 years, must be given attention now, so that veteran programs which are age-related may be readied for the requirements as they expand.

### VETERANS AND THEIR FAMILIES

There were 98.3 million veterans, members of

their families, and surviving widows, minor children, and dependent parents of deceased veterans in the 208.8 million civilian population of the United States at the end of the fiscal year. Thus, the benefits and services of VA are potentially available to 47.1 percent of the total population of our nation, either directly to veterans and surviving dependents, or indirectly to veterans' family members.

Of the 98.3 million, 94.5 million were veterans, their wives, minor children and other members of their families. The remaining 3.8 million surviving relatives of deceased veterans include 2.6 million unremarried widows, 1.0 million children under 18 years old, and 0.2 million dependent parents.

### *Veterans and Their Families—June 30, 1972*



### CHARACTERISTICS OF VETERANS

The VA obtains data on various socio-economic characteristics of male veterans from the monthly Current Population Survey (CPS), through contractual arrangements with the Bureau of the Census, with the approval of the Department of Labor. Data available from this survey include the current educational attainment and income, work experience and employment status.

**Educational Attainment and Income**—The median education level of the 27.4 million male veterans in the civilian non-institutional population of the United States in March 1972, was

12.5 school years. As of the same date, the median educational attainment of the 32.1 million male non-veterans was 12.1 school years. Veterans' median income during calendar year 1971 was \$9,100; non-veterans' median income was \$6,070. The correlation between education and income is readily apparent in the following table which shows the median income of veterans and non-veterans at different levels of educational attainment.

Educational level	Median Income in 1971	
	Veterans	Non-veterans
Less than high school	\$ 5,920	\$ 3,936
Some high school	8,080	6,331
High school graduate	9,160	7,557
Some college	10,060	5,334
College graduate	14,270	10,054

The data appear to show one exception to the general rule that income rises as education increases. Notice that non-veterans with some college had a lower median income than either high school graduates or those with only some high school. This seemingly anomalous situation, which has been reflected in other years, is explained by the fact that more than one-half of all the male non-veterans with some college were 20-24 years of age, were still enrolled in college, and had little or no personal income. Among veterans this did not occur in FY 1972 because less than one-tenth of all male veterans with some college were in this age-group, and their income was bolstered by veterans' educational benefits.

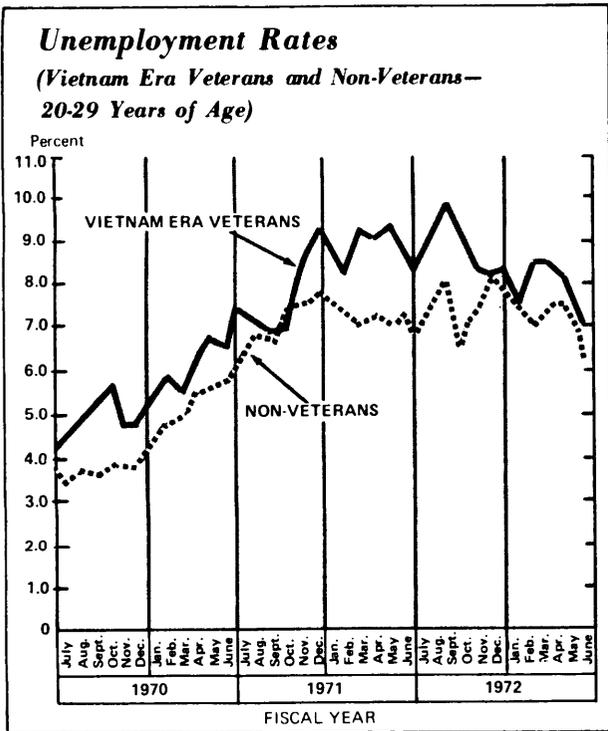
Abouts 82 percent of all Vietnam era veterans with no service during the Korean conflict are war veterans 20-29 years old. Using this age-group to represent Vietnam era veterans, their median educational level in March 1972 was 12.7 years of school, and their median personal income in 1971 was \$6,330. Male non-veterans in the same age-group had a median educational level of 12.9 years of school; however, their median income was only \$5,190. Education benefits (i.e., VA payments to veterans) explain some of the \$1,140 annual income advantage that this group of veterans has over their non-veteran counterparts.

**Work Experience** – Ninety percent of the veterans in the male civilian resident population of the United States worked during calendar year 1971. This percentage is markedly higher than the 81 percent of non-veteran males who worked. Among those veterans who worked, 79 percent were year-round workers, either full-time or part-time; while only 71 percent of the non-veteran males worked year-round.

Nearly 96 percent of all male veteran workers held full-time jobs for all or part of the year, as compared with about 88 percent of all male non-veteran workers.

The work experience of the 20-29 year-old Vietnam era veterans shows that only 90 percent of those in the civilian resident population worked during calendar year 1971, compared with 93 percent for non-veterans 20-29 years old. However, 92 percent of the young veterans who did work held full-time jobs for all or part of the year, compared with only 86 percent of the young non-veterans.

**Employment Status** – The rate of participation in the labor force during FY 1972 for all male veterans was 89 percent, while the rate of participation for male non-veterans was 72 percent, both rates being unchanged from the previous fiscal year. The average unemployment rate for veterans of all ages during FY 1972 was 3.8 percent (not materially changed from the previous fiscal year), and for all male non-veterans was 6.5 percent (also not materially different from FY 1971). Some 4.0 million of the 4.2 million Vietnam era veterans 20-29 years old in the labor force at the end of FY 1972 were employed, while 280,000 were seeking jobs. The number employed was 550,000 greater than it had been a year earlier, while the number unemployed was 20,000 less. The unemployment rate for these young veterans was 7.2 percent in June 1972, seasonally adjusted, compared with 8.9 percent in the preceding June. For non-veterans in the 20-29 year age-group, the seasonally adjusted unemployment rate was 6.5 percent in June 1972, slightly below the level prevailing during the earlier part of the fiscal year. However, the gap between the unemployment rate for veterans and the lower rate for non-veterans has been narrowing since October 1971, as shown by the next chart.



During the last half of the fiscal year, the difference averaged less than 1 percent, half of the difference which had prevailed during the same period of the preceding fiscal year.

### NEW LEGISLATION

A digest of the public laws, enacted during FY 1972, which are administered by the VA or are otherwise of particular interest to the Agency are outlined below:

**Public Law 92-54** – Provides transitional programs for unemployed persons in jobs providing needed public services and related training and manpower services, during times of high unemployment. One purpose is to enable such persons to move into productive, permanent non-subsidized employment.

Provides for equitable distribution of public service employment opportunities, including health care, public safety, education, etc., among significant segments of the unemployed population, giving special consideration to persons who served in Indochina or Korea after August 4, 1964. Special efforts are to be made to acquaint veterans with the program, and to co-ordinate their activities in this regard with

those of the Job Counseling and Employment Service for veterans or with similar activities carried out by other public or private organizations or agencies.

**Public Law 92-66** – Authorizes the Administrator to sell direct loans at prices he determines to be reasonable under prevailing mortgage market conditions.

**Public Law 92-69** – Extends the authority of the Administrator to establish and carry out a program of exchange of medical information.

**Public Law 92-78** – Appropriated to the VA almost \$11 billion for FY 1972.

Also authorized transfer of \$8 million from the Veterans Special Life Insurance Fund for veterans insurance and indemnities. Limited to \$350 million the amount of Loan Guaranty Revolving Fund assets available during the current fiscal year for operations under chapter 37 of title 38, U.S. Code.

**Public Law 92-95** – Authorizes the Administrator to purchase, from one or more life insurance companies, a policy or policies of mortgage protection life insurance on a group basis to provide protection against death for certain veterans (with permanent and total service-connected disabilities) who have received or may receive a grant under the VA program for specially adapted housing. The legislation automatically insures an eligible veteran unless he elects in writing not to be insured or fails to timely furnish information on which his premium could be based. The initial amount of the insurance cannot exceed \$30,000, or the amount of the mortgage loan outstanding on the date the insurance is placed in effect or, if the loan is thereafter made, the amount of the original loan, whichever is the lesser amount. The amount of the insurance is reduced as the mortgage is amortized. The premiums charged eligible veterans cover only the mortality cost of insuring standard lives. The Government bears the administrative cost of the insurance and the cost of the excess mortality attributable to the veterans' disability.

**Public Law 92-169** – Provides that the widow of any serviceman promoted while "miss-

ing” shall receive dependency and indemnity compensation at the prescribed rate for that grade even though his death is later determined to have occurred prior to his promotion.

**Public Law 92-183** – Designates the VA hospital now under construction at San Antonio, Texas, as the Audie L. Murphy Memorial Veterans’ Hospital.

**Public Law 92-185** – Extends the veterans’ preference benefits relating to Federal employment to widowers and husbands of ex-service-women; authorizes the separate maintenance allowance in foreign areas for the husband of an employee; and provides that married women employees shall receive the same benefits as married male employees do under any law or regulation granting benefits to Federal employees.

**Public Law 92-188** – Authorizes the Administrator, upon application by the insured and without proof of good health, to apply any dividend due and payable on policies of National Service Life Insurance to purchase paid-up insurance; and for 6 months after the effective date of this Act an insured can use his existing dividend credit to purchase paid-up insurance. Requires that holders of endowment policies use their dividends only to purchase additional paid-up endowment insurance which matures concurrently with their basic policy; all other policy holders may use their dividends only to purchase additional paid-up whole life insurance. Such insurance is in addition to any insurance otherwise authorized, and is not subject to the minimum and maximum amounts of insurance which may be issued to any one person.

**Public Law 92-193** – Authorizes the conversion or exchange of a National Service Life Insurance policy to a new policy of insurance on a modified life plan, under the same terms and conditions as are provided under existing law for modified life plan insurance, except that the face value of the policy or the amount of extended insurance is automatically reduced by one-half at age 70 instead of age 65.

Permits an insured person having in force an age 65 modified life plan to exchange such plan for an age 70 plan without proof of good health,

in an amount equal to the insurance then in force or in force on the day before the insured’s sixty-fifth birthday, whichever is the greater.

**Public Law 92-197** – Provides cost-of-living increases in the dependency and indemnity compensation benefits payable to the widows and children of servicemen and veterans whose death was service-related.

Also provides formulas (in lieu of tables) for payment of dependency and indemnity compensation benefits to eligible parents. The formulas specify a maximum monthly rate for each group within designated income levels. Each individual’s monthly benefit rate is to be computed by reducing the maximum rate by a specified number of cents for each dollar by which the minimum income limitation for that group is exceeded. Further, the formulas provide for increases in the monthly benefit rates and annual income limitations applicable to payment of dependency and indemnity compensation to parents.

Grants an additional monthly benefit of \$55 to parents, on dependency and indemnity compensation or death compensation rolls, in need of regular aid and attendance; and increases to \$55 the additional dependency and indemnity compensation allowance to a child who has become permanently incapable of self-support before age 18.

Removes the bar against payment of dependency and indemnity compensation to survivors of veterans who died while premiums on U.S. Government Life Insurance or National Service Life Insurance were under in-service waiver.

**Public Law 92-198** – Establishes formulas (in lieu of tables) for payment of disability and death pension to eligible veterans and widows. The formulas specify a maximum monthly rate for each group within designated income categories, and each individual’s monthly rate is to be computed by reducing the maximum rate by a specified number of cents for each dollar by which the minimum income limitation for the group is exceeded. Further, the formulas provide increases in the monthly benefit rates and annual income limitations applicable to payment of disability and death pension.

Increases income limitations applicable under

the prior pension law in effect on June 30, 1960.

Increases rates payable to widows for children in excess of one, and to eligible children receiving non-service-connected death benefits.

Excludes from income the amounts paid by a veteran, widow, or child for unusual medical expenses.

Defers until the end of the calendar year any reduction in compensation, dependency and indemnity compensation, or pension, required by reason of the loss of a dependent by a payee.

Liberalizes the present requirement of 90 days that a veteran must have served in Mexico on the borders thereof, or in the waters adjacent thereto, in order to receive a non-service-connected pension. The amendment requires merely that some portion of the 90 days service during the designated period be in the specified geographical areas.

**Public Law 92-315** – Extends coverage under the Servicemen's Group Life Insurance program to cadets and midshipmen at the service academies of the Armed Forces.

**Public Law 92-318** – Amends and extends the Higher Education Act of 1965 and other acts dealing with higher education. Among other things, provides the following:

Extends the student assistance programs authorized under title IV of the Higher Education Act of 1965. Provides for awarding Educational Opportunity Grant to a student of exceptional need who, but for the grant, would be unable to pursue a course of study at the institution. Furnishes basic criteria to be followed in determining students' financial needs. The expected family contribution would include any amount paid under the Social Security Act to, or on account of, the student, and one-half of any amount paid to the student under the veterans' or war orphans' educational assistance programs.

Extends the College Work-Study and Cooperative Education programs for 4 years.

Establishes a Work-Study for Community Service Learning program designed to provide part-time employment in community service for needy students attending institutions on at least

a half-time basis. Eligibility is to be determined by the institution under existing work-study criteria, but a preference in selecting students for participation is to be given to veterans who served in the Armed Forces in Indochina or Korea after August 5, 1964. The act requires a special effort to relate the projects performed by students to their general academic program and to a comprehensive program for college student services to the community.

Amends the student loan provisions under the National Defense Education Act. Provides that in determining eligibility for a loan, an institution shall not take into account the income and assets of the veteran's parents. Provides for cancellation of a loan made after June 30, 1972, for a member of the Armed Forces for service that qualifies for special pay in an area of hostilities. The cancellation is not to exceed 50 percent of the loan and is at the rate of 12½ percentum (plus accrued interest) of the total amount of the loan for each year of qualifying service.

Provides for a study commission to examine the crisis in post-secondary education financing, and to consider alternative methods of financing with special attention to the potential governmental and private participation in such programs, including existing student assistance programs administered by the VA.

Entitles an institution of higher education to a \$300 "cost-of-instruction" grant during each fiscal year from July 1, 1972 to June 30, 1975, for each undergraduate veteran who is receiving assistance under the veterans' educational assistance or vocational rehabilitation programs, or \$450 if the veteran is a high school drop-out. Payments are to be made to an institution provided its student-veteran enrollment is increased by at least 10 percent the first year, and are to continue each succeeding academic year that the new level of increased veteran enrollment is maintained.

In addition, the institution would have to make adequate effort to: (1) establish and maintain a full-time office of Veterans' Affairs, with responsibility for veterans outreach, recruitment, and special educational programs and counseling; (2) establish a program for post-secondary education for educationally disadvantaged veterans, and, in the case of any institu-

tion located near a military installation, establish a PREP program; (3) carry out active outreach, recruiting and counseling activities with funds available under federally aided work-study programs; and (4) maintain an active tutorial program. Institutions with less than 2,500 students in attendance which alone cannot feasibly carry out any or all of the programs set forth, may carry out such program through a consortium agreement with one or more other institutions to the extent appropriate in terms of the number of veterans in attendance at the institution.

**Public Law 92-328** – Provides an increase of approximately 10 percent in veterans' service-connected disability compensation rates and dependency allowances.

Authorizes a clothing allowance of \$150 per year to each veteran who, because of a compensable disability, wears or uses a prosthetic appliance which tends to wear out or tear his clothing.

Authorizes an equalization of the rates of disability compensation payable to each veteran with a service-connected disability incurred during either peacetime or wartime, effective July 1, 1972.

Eliminates the provisions of law requiring reduction of service-connected disability compensation or retirement pay for veterans with no dependents who are being furnished hospital treatment institutional care, or domiciliary care by the VA.

Authorizes widows of Spanish-American War veterans to make an irrevocable election to receive a pension at the rates prescribed for widows of later wars, under conditions (except service requirements) applicable to pensions paid widows of veterans of World War I. In the case of such a widow who is in need of regular aid and attendance, payment of the greater pension is automatic, without action on the widow's part.

Permits the Administrator to extend relief to veterans, their dependents and other innocent third persons, from the consequences of an administrative error by the VA where loss is suffered by reason of reliance upon an erroneous determination of benefit eligibility or entitlement. The Administrator shall submit an annual report to Congress on the disposition of each case recommended to him for equitable relief.

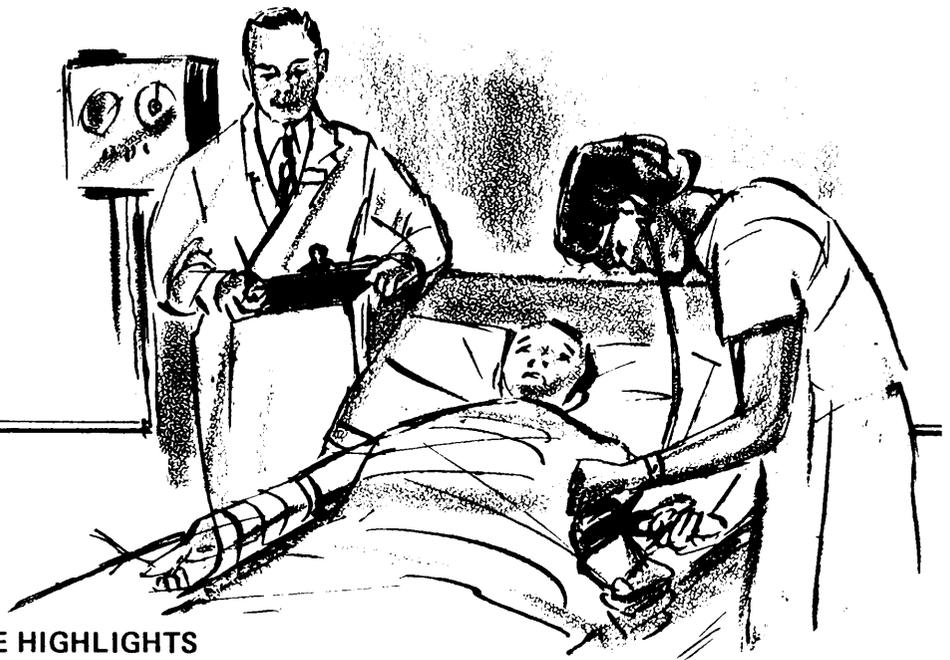
Prohibits the recovery of payments or overpayments of any benefits administered by the VA whenever the Administrator determines that recovery would be against equity and good conscience. Permits waiver of payment of an indebtedness to the VA by a veteran or his spouse, following the default and loss of his property, which was guaranteed, insured or made by the VA, where the Administrator determines that the collection of such indebtedness would be against equity and good conscience.

Permits the Administrator to release a veteran borrower from liability because of a default on a VA guaranteed, insured, or direct loan if the veteran conveyed the title to the residential property securing such loan without obtaining a release of liability, provided the veteran disposed of the property in a manner which would have qualified him for release from liability if he had applied for such release prior to his sale or transfer of the property. However, should transferee fail to assume by contract all the liabilities of the original veteran-borrower and no acceptable transferee, either immediate or remote, is legally liable to the Administrator for the indebtedness, the veteran however shall not be released from liability for the loan.

Authorizes the Administrator to review certain forfeiture actions imposed prior to September 2, 1959, which were based upon submission of fraudulent evidence in connection with the gratuitous veterans benefits; and to grant remission of each forfeiture which would not have been imposed under the law in effect after September 1959.



# Health Care



## COMPARATIVE HIGHLIGHTS

	Fiscal Year		Percent Change
	1972	1971	
<b>Facilities Operating at End of Year</b>			
Hospitals	167	166	
Domiciliaries	18	16	
Restoration Centers	8	6	
Outpatient Clinics	201	200	
Nursing Home Units	77	76	
<b>Employment</b>	<b>166,486</b>	161,669	+ 2.9
<b>Operating Costs (In millions)</b>	<b>\$ 2,360.5</b>	\$ 1,996.8	+18.2
Medical Care	2,269.2	1,913.5	+18.6
Research	69.0	63.1	+ 9.4
Other	22.3	20.2	+10.6
<b>Patients Treated</b>	<b>944,189</b>	912,342	+ 3.5
VA & Other Hospitals	876,274	847,475	+ 3.4
Other Facilities	67,915	64,867	+ 4.7
<b>Average Daily Patient Census</b>	<b>113,905</b>	115,758	- 1.6
VA & Other Hospitals	83,185	86,319	- 3.6
Other Facilities	30,720	29,439	+ 4.3
<b>Outpatient Medical Visits</b>	<b>9,526,881</b>	8,064,092	+18.1
VA Staff	7,930,080	6,798,146	+16.7
Fee-Basis	1,596,801	1,265,946	+26.1
<b>Outpatient Dental Examinations</b>	<b>256,738</b>	239,354	+ 7.3
VA Staff	142,919	147,794	- 3.3
Fee-Basis	113,819	91,560	+24.3
<b>Outpatient Dental Treatment Cases Completed</b>	<b>248,692</b>	228,388	+ 8.9
VA Staff	82,873	82,724	+ 0.2
Fee-Basis	165,819	145,684	+13.8
<b>Prescriptions Filled (In thousands)</b>	<b>16,706</b>	13,920	+20.0
<b>Specialized Medical Units</b>	<b>968</b>	791	

## SUMMARY

The Veterans Administration's Medical Care System at the close of FY 1972 was operating 167 hospitals, 201 outpatient clinics, 18 domiciliaries, and 77 nursing home care units. In addition, veterans were being tended, under VA auspices, in non-VA and State hospitals, State domiciliaries, and community and State nursing homes. The VA also authorizes, on a fee-for-service basis, visits to non-VA physicians and dentists for outpatient treatment.

Two new VA hospitals were opened during the year—a 811-bed hospital at San Diego, Cal., and a 470-bed hospital at Columbia, Mo. They will be fully activated in FY 1973.

The volume of patients treated rose to record-breaking levels. Over 944,000 were treated in FY 1972, a 3.5 percent increase from the previous year and the highest number ever reported for a single year.

Outpatient medical and dental workloads reached the highest level since World War II. Visits for medical care and dental examination and treatment cases completed by both VA staff and on a fee-for service basis, increased over last year.

Treatment of veterans for drug dependence received increasing emphasis. A total of 26 drug dependence treatment centers were added to the six previously activated.

Operating costs for the Department of Medicine and Surgery exceeded 2.3 billion dollars in FY 1972, an increase of 18 percent over FY 1971.

Regionalization, the delivery of health care on an area basis, was completed in FY 1972 and continued to prove its effectiveness.

## PATIENT CARE RECEIVED

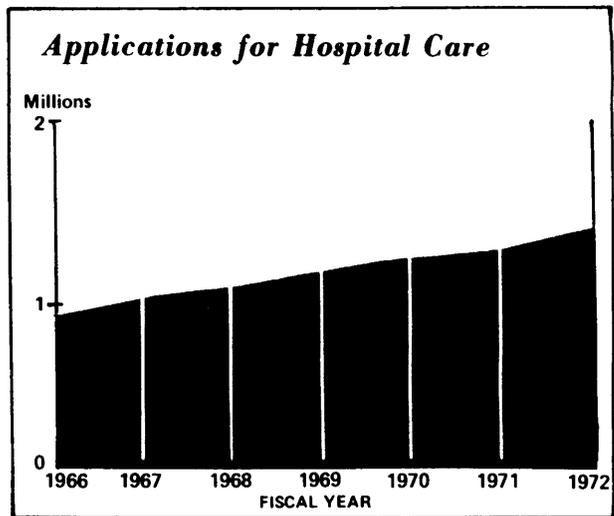
### Hospital Care

During FY 1972, the VA treated a total of 876,274 hospital patients—the highest number ever for a single year and almost 29,000 more than in FY 1971. Almost all of this increase occurred in VA hospitals (846,298 in FY 1972 compared with 818,579 in FY 1971) which were operating 96,593 beds at the end of the fiscal year, about the same as the number at the end of the previous fiscal year.

Each of the last several years has shown an increase in the number of applications received for VA hospital care. In the past year the increase over the previous year was 168,000, to a total of 1.4 million applications.

### Extended Care

The extended care program comprises several types of health care for patients who no longer need conventional inpatient hospital treatment, but still have chronic disabilities requiring continuing care. These types are nursing home care,

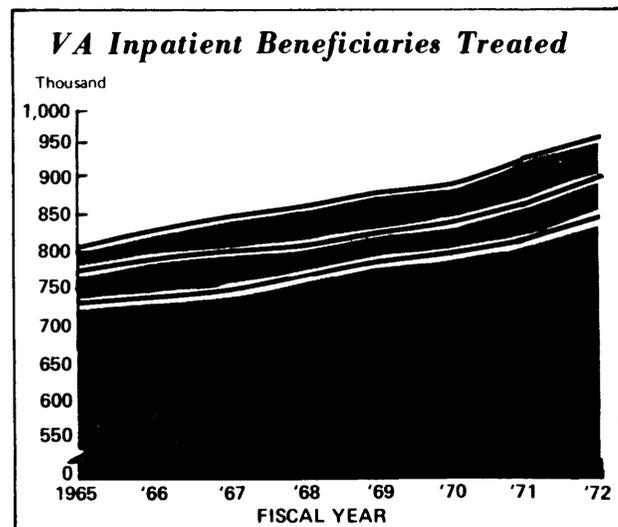


domiciliary care, and hospital-based home care. The extended care service also includes such special programs as blind rehabilitation, blind clinics, and audiology and speech pathology.

**Nursing Home Care**—Nursing home care units have been established in 77 VA hospitals averaging 5,819 operating beds. These units are designed for veterans who have attained maximum hospital benefits but still need skilled nursing care. There were 8,586 veterans treated at these units in FY 1972. The average daily census was 5,440.

In addition to nursing home care units in VA hospitals, the VA has contracts with over 3,400 community nursing homes in the 50 States and Puerto Rico, having a total capacity of 300,000 beds. Community nursing homes provide skilled nursing care for a period not to exceed 6 months to veterans in their home communities as a transition from VA hospitals. Veterans hospitalized primarily for a service-connected disability are exempt from the 6-month limitation. A total of 14,789 patients were treated in community nursing homes during the year. The average daily census was 3,990.

**Domiciliary Care**—During FY 1972, the VA increased the number of its domiciliary facilities from 16 to 18. The additional facilities were established mainly to absorb a portion of the Los Angeles domiciliary population. The Los Angeles facility's capacity had been drastically reduced by the closing of several buildings as a



result of a seismic safety survey.

The domiciliary program is directed toward providing medical and comprehensive professional care in a residential-type setting to aging and disabled veterans who need care but neither hospitalization nor skilled nursing services. Both medical and professional care programs are tri-level, responding to the needs of long-term residents, intermittent residents and those requiring short-term restorative services to enable their return to community living.

In addition, a number of domiciliaries offer alcoholic rehabilitation programs and a variety of vocational training programs.

In FY 1972, the VA domiciliaries operated an average 12,338 beds and treated 23,992 patients. The average daily census was 11,355. Patient-members participated in the incentive therapy program with an estimated 1,920 attaining the assigned goal of self-reliance and rehabilitation.

A total of 2,444 patients were treated in VA restoration centers, which maintained an average daily census of 633.

**Hospital-Based Home Care**—This program allows an early discharge of some patients to their own homes under the professional supervision of a hospital treatment team. The family provides the necessary personal care with professional support for treatment objectives. The treatment team directs the medical, nursing, social and other therapeutic regimes. The key-stone to a successful program lies in a coordinated effort—the VA hospital staff, family and patient. Six hospitals were funded for the program. During the year 59 patients were placed, and 850 visits were made to patients maintained in their homes under this program.

**State Home Programs**—Through grants-in-aid, financial assistance is furnished to States for the construction of nursing home care facilities and the modernization of existing domiciliary/hospital facilities. Per diem payments (not to exceed \$3.50 for domiciliary care, \$5.00 for nursing home, and \$7.50 for hospital care), are made to States for care provided to eligible veterans in State homes. Thirty-eight State homes provided care to 25,345 veterans during the fiscal year. Of these homes, 36 provided 11,886 veterans with domiciliary care; 28 pro-

vided 6,218 veterans with nursing home care; and eight provided 7,241 veterans with hospital care.

**Audiology and Speech Pathology (Communicative Disorders)**—Audiology and speech pathology services provided by VA increased from 222,399 in FY 1971 to 261,442 in FY 1972, or 17.5 percent. The role of the audiologist and speech pathologist is to assess speech, hearing and language functioning. In instances of impaired communicative ability, a restoration program is planned and carried out. VA's main concern is with the more serious disorders such as impaired hearing, removal of the larynx with loss of voice, and disordered language as a consequence of brain damage.

**Blind Rehabilitation**—VA's three blind rehabilitation centers, besides providing blind rehabilitation services to 270 veterans during the past year, also expanded their programs for evaluating low vision aids with the blind veterans who will use them. In the last few years, many new and complex types of low vision aids have appeared, with concomitant need for improved evaluation techniques on the part of VA's specialists.

The psychiatric-blind rehabilitation clinics, established for blind veterans too ill (psychiatrically) to benefit from the program of VA blind rehabilitation centers, provided services to 67 such veterans during the past year. While most of the patients discharged from the program were transferred back to the hospitals which had referred them, several were able to return to their homes.

Visual impairment services teams are now in operation at 72 outpatient clinics. During the past year, these teams reviewed the health, circumstances and adjustments under blindness of nearly all of the 5,700 eligible blind veterans.

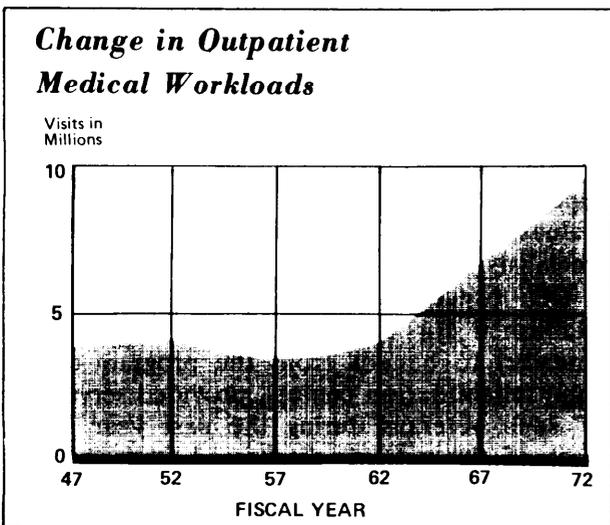
### **Outpatient Care**

During FY 1972, the VA placed major emphasis on its outpatient care program. Outpatient activities continued to increase, with over 9.5 million visits for outpatient medical care, 256,738 dental examinations, and 248,692 dental treatment cases completed.

**Medical**—Most of the increase in the outpatient medical program occurred in visits to VA staff—from 6.8 million to 7.9 million. By related category of visit, the percentage increases of staff visits in FY 1972 over the previous year are:

	Percent
Pre-bed care . . . . .	179
Post-hospital care . . . . .	35
Examination to determine need for hospital or domiciliary care . . . . .	9
Treatment, service-connected . . . . .	8

The substantial increase in the pre-bed care program is attributed to the accomplishment of diagnostic and treatment procedures prior to the patient's admission to the hospital.



In an effort to extend services to as many veterans as possible, the VA activated, on June 5, 1972, an outpatient clinic at Corpus Christi, Texas, as a satellite to the VA outpatient clinic at San Antonio, Texas. The clinic serves five counties in the southern part of Texas with an estimated veteran population of 37,600. Similar clinics or arrangements for providing outpatient services are planned for activation early in FY 1973 at McAllen, Texas; City of Ponce, Puerto Rico; and Las Vegas, Nevada.

Several other actions were taken during the year to improve operations and service to veterans:

(1) An admission practices test was conducted to ascertain the characteristics of the patient mix, and to determine the probable impact of an ambulatory care program.

(2) The criteria for placement in the pre-bed care program were simplified to provide earlier treatment and to reduce waiting lists for bed care.

(3) A procedure of issuing permanent outpatient ID cards, instead of reissuing them each year, was adopted to reduce administrative processing.

(4) Billing and payment procedures for medical services were simplified by consolidating instructions in approximately 32 publications into one manual directive.

(5) The number of pending requests for compensation and pension examinations was reduced from 51,843 to 44,316, which is considered to be very close to a normal in-process workload.

**Dental**—Returning Vietnam era veterans applied for outpatient dental benefits in FY 1972 at a rate exceeding the FY 1971 level by more than 8,000 for a total of 309,606 applications. Although this comprised less growth than the previous year's increase, the program reached its highest level since World War II. Management of this program continued to require urgent attention for the timely delivery of outpatient dental benefits. Among the major administrative actions taken were the following:

(1) A collaborative agreement was initiated with the California Dental Service Corporation which enables veterans in Northern California to obtain outpatient dental treatment from private practitioners, with payment made on pre-filed usual and customary fees. The project improves service to the veterans and reduces administrative processing, while allowing a more equitable method of payment for dental services performed. The concept is being expanded to the entire State of California, and plans are in progress to evaluate the feasibility of extending the usual and customary method of payment to other States.

(2) The regulations governing eligibility for one-time dental outpatient treatment were modified to provide for the replacement of missing teeth without formal adjudicative action. The new authority enables the veteran to receive more timely treatment for teeth extracted or lost during service.

(3) The existing spot-check program of completed cases was strengthened to assure that entitled beneficiaries are receiving dental care as authorized, and to provide uniform guidelines for conducting the program.

## PATIENT CHARACTERISTICS

### Age

The average age of the 776,000 patients discharged from VA hospitals in 1972 continues the downward trend observed for the recent past, having dropped from 53.1 in 1968 to 51.4 in FY 1972. While more younger men (aged under 35) were discharged this year than last year (128,000 compared with 109,500), at the same time more men 65 and over (147,000 vs 145,000) were discharged. These counterbalancing changes resulted in the relatively insignificant average age change observed between 1972 and 1971 (51.4 vs 51.6). One factor which could have reversed this trend is Public Law 91-500 which afforded World War I and World War II veterans age 65 and over eligibility for medical care irrespective of service connection. The effect, if any, of this new eligibility class on the average age may be noted next year. The age distribution of the 1972 hospital discharges was as follows:

Age Group	Number Discharged	Percent
Total	776,227	100.0
Under 25	61,990	8.0
25 - 34	66,058	8.5
35 - 44	102,502	13.2
45 - 54	239,231	30.8
55 - 64	159,205	20.5
65 and over	147,241	19.0

The average age for different groups of diseases varied and may be of interest. The youngest

average age—44.1 years—is found among patients discharged after treatment for a psychiatric disorder. Patients with neoplasms had the oldest average age—59.6 years. The average age for each of approximately 100 diagnoses, or groups of diagnoses, is given in Table 22.

### Service Connection

By law, the VA provides hospital care to veterans for their service-connected conditions, to medically indigent veterans, and to certain veterans 65 years of age or older who are neither indigent nor have a service-connected condition. More than one-half of the 776,227 patients discharged in FY 1972 had a service-connected condition, or were receiving a pension. Almost 192,000 patients discharged were among the approximately 1.1 million veterans on the VA pension rolls. This means that almost every sixth pensioner was hospitalized in FY 1972—the same proportion as last years.

For FY 1972, the following qualifications applied to those discharged:

Qualification	Number	Percent
Total service connection or pension	420,069	54.1
(1) Service connected	106,757	13.8
(2) Service connected veteran getting care for a nonservice connected condition	121,256	15.6
(3) Veteran on VA pension rolls	192,056	24.7
Total non-service connected	356,158	45.9
(4) No claim for VA compensation or pension and no claim pending	345,409	44.5
(5) Non-veteran	10,749	1.4

### Diagnosis

The steady increase of chronic diseases associated with an aging population is evidenced by noting the continued steady increase in recent years in the number of patients discharged from VA hospitals with a principal diagnosis of heart and vascular conditions, digestive diseases (including hernia), and malignant neoplasms. Heart and vascular conditions have increased from a level of 88,000 in 1969 to almost 100,000 for FY 1972; digestive diseases from 83,000 to 84,200; and malignant neoplasms from 46,000 to 53,000. Since a moderate increase in the number of veterans 65 years of age or older will

take place between 1975 and 1980, and a very sharp increase between 1980 and 1985, one may anticipate severe pressure on the medical services pertaining to this aging population.

The Vietnam era veteran has required increasing psychiatric care, including care for drug dependency. The number of discharges of Vietnam era veterans following treatment for a psychiatric condition increased from 27,000 in FY 1971 to 40,000 in FY 1972, or roughly 50 percent. With respect to treatment for drug dependency, the growth in this VA program is reflected by the number of drug dependency discharges effected each year since FY 1968 as follows:

Fiscal Year	Discharges
1969	3,108
1970	3,900
1971	6,800
1972	22,000

#### Days of Care

One of the most remarkable changes which occurred in the VA hospital system in FY 1972 was the overall reduction in length of stay of discharged patients, to 50.4 days, from 69.1 days in FY 1971.

The 776,000 veterans discharged from VA hospitals during FY 1972 accumulated 39.1 million days of care before discharge, or an average of 50.4 days per discharge. The 1972 figure was 12.2 million days less than the 51.3 million days attributed to 1971 discharges, representing 18.7 days of reduction in the average length of stay. This reduction was due almost entirely to shorter institutional stays of psychotic patients. In prior years, a considerable transfer of long term psychotic patients to VA extended care facilities (VA nursing homes and domiciliaries) occurred. This has virtually stopped. Efforts to reduce the institutionalization of psychotic patients, already hospitalized for long periods, by placement in non-hospital environments, have dominated recent treatment regimen philosophy in both community and VA facilities. The average length of stay of these patients went from 357.9 days in the first quarter of FY 1972 to 227.3 in the last quarter of FY 1972, a drop of 36 percent.

It is noted also that between 1971 and 1972 the average lengths of stay of psychotic patients decreased in every age group except under 20 and over 85, each of which had a relatively small number of cases. For example, the age group with the heaviest concentration of psychotic discharges (age 45-49, with 10,000-12,000 per year) showed an average length of stay of 447.0 days in 1971 as compared to an average of 266.6 days in FY 1972. The down trend in the average length of stay of discharged psychotic patients is expected to continue for some years to come.

#### Disposition Status

Of the 776,227 patients discharged from hospital care in FY 1972, 666,115 (85.8 percent), returned to the community. About 64.3 percent of these continued as VA outpatients. Only 24,756, or 3.2 percent, of those discharged from VA hospitals during FY 1972, went on to further care in VA domiciliaries, VA restoration centers, or in nursing home care (either in the VA system or in the community at VA expense).

There were 42,375 deaths at VA hospitals in 1972. Of this number, 48.8 percent were autopsied. Among 53,546 patients who were treated for a principal diagnosis of cancer there were 12,707 deaths, or 23.7 percent, and among the 63,588 whose principal diagnosis was heart disease there were 7,077 deaths or 11.1 percent. These two groups of conditions account for 15.1 percent of the discharges and 46.7 percent of the deaths.

The number of females discharged from VA hospitals in 1972 was almost 11,000 approximately 9,500 from general hospitals and 1,500 from psychiatric hospitals. Among the 11,000 females discharged, almost 3,000 had a service-connected condition, while 2,200 were pensioners.

#### Marital Status

Lack of a family unit to which the discharged veteran patient may be returned after completion of hospitalization presents a problem in VA outplacement activities. The aggregate of single, separated, widowed, or divorced veterans constituted 44.4 percent of the total discharges

from VA and non-VA hospitals in FY 1972. The figure for 1971 was similar.

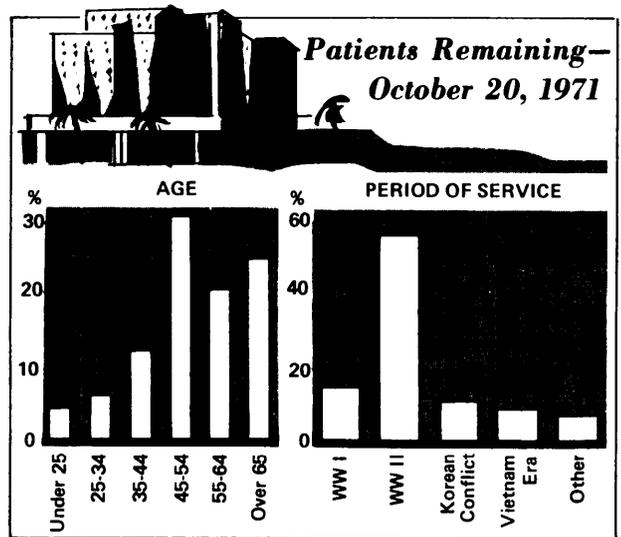
### Principal and Associated Diagnoses

Since the average VA patient is treated for two or more diagnoses, the treating physician makes a selection, for statistical purposes, as to which diagnosis should be considered each patient's principal one. This selection is governed by the rule that the diagnosis responsible for the major portion of the patient's length of stay, as judged by the attending physician, will be designated as the principal diagnosis. All other treated diagnoses are then considered associated diagnoses. This rule is not universally used outside of VA. Some systems of medical care designate, as principal diagnosis, that condition which caused the patient to seek hospitalization; others require that the most serious condition be so designated, and still others list diagnoses in presumed order of importance.

Counting both principal and associated conditions, as some of the tables appended to this report do, gives a better insight into the numbers of patients with various conditions who have been cared for during the year, thus enhancing its potential use for determining allocation of services and resources. From data included in tables reporting both principal and associated diagnoses it is observed that about three times as many patients had diabetes mellitus reported as an associated condition than as their principal diagnosis (15,877 as principal diagnosis and 45,294 as associated diagnosis for a total of 61,171 diabetes discharges). Similarly, emphysema was reported as the principal diagnosis of about 11,000 discharges and as an associated diagnosis of about 28,000 discharges, for a total of 39,000 emphysema discharges. In another example, while only 3,900 discharges reflected diseases of the oral cavity, salivary glands and jaws as principal diagnosis, some 91,000 discharges had these conditions reported as associated diagnoses—thus indicating that one out of every eight discharges had a condition of the teeth and mouth sufficient to require oral treatment.

### Census

The preceding accounting described the characteristics of patients discharged from VA hospi-



tals, giving an insight into VA patients who have completed inpatient treatment. The VA statistical system also provides data on patients still in the hospital. Both kinds of information (discharges and census) are needed for program planning and budget purposes. While the information from both types of data would be expected to be alike, it is frequently different. For example, the long term psychotic patient is predominant in the census of patients remaining in hospital but is much smaller among discharges because of the chronic nature of the psychoses. Thus, 32 percent of the patient load on October 20, 1971 was psychotic. Similarly, the age 65 and over group comprised 19.0 percent of the 1971 discharges but 24.8 percent of the census.

The annual VA hospital census, taken on October 20, 1972, was based on 20 percent sample of the VA hospital population. On this "typical" day there were 81,150 patients in VA hospitals and 1,550 in non-VA hospitals under VA authorization.

Some of the resulting medical and demographic data from the census are given below:

Of the total patient load, about 41 percent (33,258 veterans) were hospitalized for general medical and surgical conditions, 32 percent for psychotic conditions, an additional 16 percent for other psychiatric conditions, 9 percent for neurological conditions, and 2 percent for tuberculosis.

About 34 percent of the 81,150 veteran patients in VA hospitals on October 20, 1971 had service-connected disabilities, but while 22

percent of these were being treated for their service-connected disabilities, the remaining 12 percent were under treatment for a non-service-connected condition. The data given previously on discharges showed that 13.8 percent of the discharges were service-connected. These different proportions, census 22.0 percent versus discharges 13.8 percent, are due in large measure to the fact that the long duration service-connected psychotic cases comprise a much greater proportion of the census (15.4 percent) than of the discharges (4.3 percent). The remaining 66 percent were veterans with non-service-connected disabilities, almost one-half of them on the pension rolls. In 1965, the corresponding service-connected vs non-service-connected figures were 39 percent and 61 percent respectively. A small but consistent decline in the proportion of veterans with service-connected disabilities has been reflected in the annual census since 1965.

Veterans hospitalized for psychotic conditions had the longest attained hospital stay on the day of the census. About 75 percent had been inpatients 90 days or more, and 14.5 percent had been in the hospital for 20 years or more. Inroads are being made on the very long periods of psychotic hospitalization.

For neurological conditions, about 55 percent had been in the hospital less than 90 days, and 45 percent for 90 days or more. On the other hand, only 12.0 percent of the patients with general medical and surgical conditions had been in the hospital 90 days or more.

The average age of the 81,150 VA patients in VA hospitals on October 20, 1971, was 54.3 years, up slightly from the average of 53.6 one year earlier. The section on discharges indicates that the average age of patients discharged in FY 1972 was 51.4, down slightly from the year before. Thus, in the past 2 years, the average age of discharges has declined while the average age of census patients has increased. Long duration chronic patients (who are aging in the hospital) are counter-balanced by the younger Vietnam era veterans, resulting in an almost steady census age. Since 1965 there has been remarkable constancy in the average age of the VA census patient at 53-54 years. The average age of discharges has decreased from 54.7 in 1965 to 51.4 in 1972.

The following data for 1965 to 1971 shows

the year by year decrease in the proportion of the veteran hospital census population aged 65 and over; from 33.0 percent in 1965 to 24.9 percent in 1971. Conversely, the proportion of those under 35 years of age has increased from 7.1 percent to 10.9 percent during the same seven year period.

Census Date	Total		Under 35 years old		65 years and over	
	Number	Average Age	Number	Percent	Number	Percent
October 27, 1965 . .	107,295	54.3	7,558	7.1	35,408	33.0
November 30, 1966 .	104,870	53.7	8,495	8.1	30,870	29.4
November 30, 1967 .	98,390	53.8	8,085	8.2	27,545	28.0
November 26, 1968 .	90,930	53.9	7,765	8.5	23,940	26.3
October 15, 1969 . .	87,545	54.3	7,985	9.1	22,276	25.4
October 14, 1970 . .	85,550	53.6	9,018	10.5	20,247	23.7
October 20, 1971 . .	81,150	54.3	8,813	10.9	20,196	24.9

## Census and SCI

Some interesting findings in the 1971 annual census derived from a special question which identified an estimated 2,646 spinal cord injury (SCI) patients: one-half of the spinal cord injury patients are in the 14 VA spinal cord injury centers; a high proportion of current traumatic SCI patients are under 35 years of age; 15 percent of SCI patients, or about 400, are Vietnam era veterans. A table showing how many SCI patients are at SCI centers, and how many are at hospitals not so designated, is shown below, along with their age distribution.

SCI Patients in VA Hospitals and SCI Centers	Total	Percentage in Age Groups					
		Under 35	35-44	45-54	55-64	65-74	75-84
Total VAH . . . . .	2,646						
SCI Patients . . . . .	(100.0)	22.0	20.4	30.8	17.9	4.5	4.4
Traumatic . . . . .	1,766						
(100.0)		30.6	21.4	30.0	14.0	2.0	2.0
Non-Traumatic . . . . .	880						
(100.0)		4.8	18.5	32.5	25.7	9.4	9.1
Total SCI . . . . .	1,312						
Center Patients . . . . .	(100.0)	30.3	20.0	30.0	15.1	2.0	2.3
Traumatic . . . . .	1,064						
(100.0)		36.0	19.4	28.4	12.3	2.0	1.9
Non-Traumatic . . . . .	248						
(100.0)		6.1	23.8	37.1	27.0	2.0	4.0

## SERVICES PROVIDED

### Specialized Medical Services

At the end of FY 1972, there were 27 different types of specialized medical services available in VA hospitals. The addition of 177

new medical service units in FY 1972 raised to 968 the number in operation on June 30, 1972.

Specialized Medical Services	Units Operating 6-30-71	New Units Activated FY 1972	Units Operating 6-30-72
Total Units	791	177	968
Alcohol Treatment Units	37	4	41
Blind Clinics	1	2	3
Blind Rehabilitation Centers	3	-	3
Cardiac Catheterization Labs	56	1	57
Day Hospitals	16	5	21
Day Treatment Centers	38	2	40
Drug Dependence Treatment Units	6	26	32
Electron Microscopy Units	24	5	29
Epilepsy Centers	1	2	3
Hemodialysis Units	35	7	42
Home Dialysis	-	33	33
Satellite (Self) Dialysis <sup>1</sup>	1	6	7
Hospital Based Home Care	-	6	6
Hospitals with Intensive/Coronary Care Units	89	10	99
Intensive/Coronary Care Beds	(1,306)	(183)	(1,489)
Mental Hygiene Clinics	70	3	73
Nuclear Medicine	84	9	93
Open Heart Surgery Centers	33	3	30
Prosthetic Treatment Centers	16	2	18
Pulmonary Function Labs	97	15	112
Respiratory Care Centers	74	19	93
Reference Laboratories (Special)	6	1	7
Renal Transplant Centers	5	7	12
Speech Pathology Units	64	8	72
Spinal Cord Injury Centers	12	2	14
Stereotactic Brain Surgery Centers	3	2	5
Supervoltage Therapy Units	20	3	23

<sup>1</sup> Includes limited care units where hemodialysis units already exist.

## Medicine

VA's Medical Service is rapidly implementing the concept of comprehensive care which includes management of both acute and chronic illnesses in the context of both bed and ambulatory patients. Within this framework, certain hospital and outpatient programs previously assigned to other Services are now supervised by the Medical Service.

During the past year, the VA Medical Service was expanded to cover the treatment of patients formerly included in the categories of psychiatric medically infirm and of extended care. In the past the medical management of these patients had been performed by the Psychiatric Service, with Medical Service consultation as necessary. Under this change, the Medical Service has primary responsibility for the treatment of these patients, except for their psychiatric problems (which continue to be treated by the Psychiatric Service).

Also, in the past almost every VA hospital included a Pulmonary Disease Service (formerly called the Tuberculosis Service) which was separate from the Medical Service. As the number of tuberculosis cases declined, and the number of other types of pulmonary disease cases increased, the treatment of these patients was increasingly placed under the supervision of the Medical Service under a Chief of the Pulmonary Disease Section. During the past two years, nine

VA hospitals which were still operating separate pulmonary disease services converted these services to sections under their Medical Service.

VA's hypertension and blood pressure treatment program was initiated as a result of the VA Cooperative Study on Hypertension which has been carried on under VA's Research Service for several years. Hypertension ranks only second to coronary artery disease as a leading cause of death and disability in American men. The National Health Survey found that 15 to 20 percent of adults have hypertension with a systolic blood pressure of 160 mm or higher and a diastolic of 95 mm or higher. In most cases, the presence of hypertension causes no symptoms and is detected during the course of a routine physical examination. The chief dangers of continuing hypertension are stroke and hypertensive heart disease. The ultimate objective of the VA program is the detection, screening, and treatment of every affected veteran for blood pressure elevation.

Plans were initiated in FY 1972 for the establishment of specialized diagnostic and treatment units. Such units are designed to aid thorough diagnostic evaluation of complex clinical problems and to facilitate prolonged and difficult courses of therapy. Each unit will make its facilities available to physicians from all of the hospital's bed services, and will contain four to 12 beds.

The units could study dietary control, timed collection of body fluids, performance of studies involving potent chemicals, special monitoring procedures, specialized laboratory testing and close observation of special therapeutic procedures.

The hemodialysis program has been in operation for several years, and there are now 42 dialysis centers in VA hospitals throughout the country. A recent development is the addition of home dialysis training facilities at each center.

The training facilities are so established and located that they can be semi-isolated from the dialysis center itself. In these training facilities, the patient and the patient's spouse are trained to perform dialysis in the patient's home. The spouse is also trained in the extraction of blood samples which can be returned to the center for analysis. Often, the patient must return to the center once a year to re-stabilize his blood chemistry.

At the end of the training period, a dialysis apparatus is loaned to the patient, and installed in his home.

When the patient's home is inadequate to support the apparatus or when the patient does not have a spouse or responsible relation to assist him, "satellite centers" are being developed, in smaller hospitals, where the home trained patient may go for his dialysis and be assisted by one or two technicians.

A joint VA Central Office Committee of Internists and Surgeons has been formed to supervise the establishment and operation of renal transplant centers. This and the Home Dialysis Program have greatly assisted in opening up beds in the regular dialysis centers for patients who require repeated hospital dialysis. In many cases, this has made it unnecessary to send patients long distances from their homes to obtain this treatment.

Progress is continuing in the establishment of respiratory care centers and pulmonary function laboratories.

The program in intensive care units and coronary care units is continuing to be developed in all VA general hospitals and in those VA psychiatric hospitals where such a program is warranted.

A pilot program in the use of the problem oriented medical record, developed by Dr. Lawrence Weed of the University of Vermont Medical School, has been initiated in 50 VA hospitals. So far, this has been limited principally to the Medical Services in these hospitals. An advisory committee has assisted with the initiation of this program and is helping to review and comment on the quality of the records kept in the participating hospitals. Present planning is that this program will be expanded to include all VA hospitals and all bed services.

## **Surgery**

VA surgeons continued to explore and provide new services and procedures in all specialty areas:

(1) The first atomic-powered pacemaker in the U.S. was implanted at the VA Hospital, Buffalo, N.Y., by a noted team. These new units provide a demand heart rate for prolonged

periods up to 12 years and eliminate the necessity to replant the devices every 2 years.

(2) At the VA Hospital, Oklahoma City, Okla., surgeons demonstrated the feasibility of removing lethal blood clots from the heart and pulmonary artery without operating upon the chest.

(3) The recent breakthrough in the treatment of disabling joint disease by U.S. and European orthopedists has resulted, according to a VA survey, in total hip and knee replacements now being successfully performed at 37 VA hospitals.

(4) The transient toxicity upon the kidney of a popular anesthetic agent was revealed in two separate reports by VA anesthesiologists and surgeons.

(5) The delicate operation of "vitrectomy" (removal of bloody vitreous fluid from the eye) in the treatment of vitreous and retinal diseases has been successfully developed by an ophthalmologist at the VA Hospital, Miami, Fla.

(6) Transplantation continues to be in the forefront of surgical activity. Over 200 kidney transplants were performed in VA centers in FY 1972. Such VA facilities are also providing services for local communities on a sharing of professional resources with university and other hospitals. VA transplant surgeons and immunologists are also continuing careful studies of the problems of organ rejection, with elaborate tissue-typing services and the use of various agents to suppress the normal process of such rejection. Organ preservation equipment has been tested at several centers so that "emergency" kidney transplants are no longer necessary. Transplantation of other organs (liver, pancreas) is proceeding slowly but with occasional, outstanding successes.

(7) Other work includes carefully developed clinical studies of remote experience (World War II veterans) which have led to the publication of an important long-term report on the treatment of the Intervertebral Disc Syndrome, a new study of liver injuries among Vietnam veterans being developed in conjunction with the Department

of Defense, and a careful evaluation of usefulness of a electroanesthesia being conducted by anesthesiologists at the VA Hospital, Wood, Wisconsin.

The volume of cardiac surgery continues to rise. New criteria for heart surgery centers have been developed by a national advisory group and a reassessment of ongoing as well as proposed services is underway. The cooperative study of the surgical treatment of coronary artery disease continues, but insufficient time has elapsed for proper evaluation.

Studies in the VA of more appropriate amputations for irreversible vascular diseases of the lower extremity have led to an entirely new approach to the rehabilitation of these patients. A special orthopedic section for such conditions has been established at the VA Hospital, Seattle, Washington.

New treatment programs are currently in the planning stages. These relate to neoplastic disease, pain control and emergency medical and surgical services.

A major tribute to the high degree of quality among VA surgeons was evidenced in recent elections to the prestigious American Surgical Association. Five VA Chief Surgeons (20 percent of those selected from among the country's outstanding surgeons) and three former VA surgeons were so honored.

### **Mental Health and Behavioral Sciences**

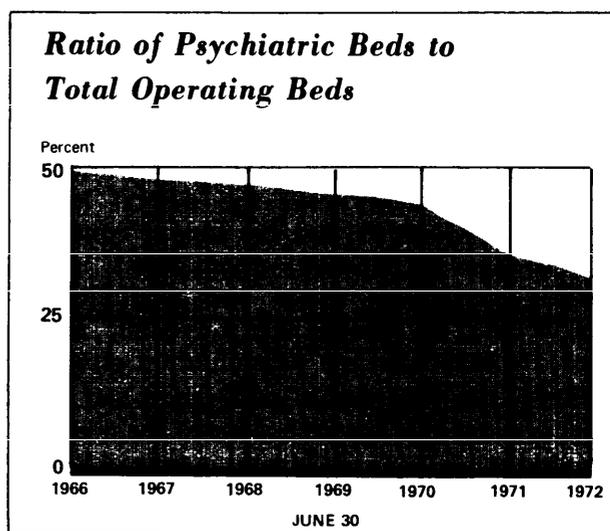
Last year a categorical program committee was established to integrate VA's central office activities relating to planning and evaluation of clinical, research, and educational programs in the mental health and behavioral sciences areas. As a result, the psychiatry, neurology, and psychology service in VA's central office was reorganized on a more functional basis with a broader multidisciplinary staff, and redesignated as the Mental Health and Behavioral Sciences Service. The new Service utilizes the collective skills of psychiatrists, psychologists, nurses, social workers, rehabilitation specialists, and other mental health workers to maximize the extent to which the VA contributes to the human growth and social effectiveness of every veteran receiving medical care. This includes assistance in coping with the psychological impact of injury or illness, improving psycho-

social adjustment and vocational skills, and attention to the ways in which institutional policies and procedures affect those veterans being served, as well as a wide range of techniques for increasing control over disruptive emotions and behaviors. Four functional divisions have been developed to carry out this comprehensive goal.

Phasing in of this change optimized the objectives of improved utilization of mental health manpower, initiation of multidisciplinary training through conferences, workshops, and educational courses in specialized treatment methods, reexamination of manpower needs and staffing criteria for quality service delivery, improved patient treatment programming through regionalization, and an examination of treatment programs as related to the wide age range of veterans requiring mental health and vocational restorative services.

The VA currently has 28 designated psychiatric hospitals, and active Psychiatric Services are operating in most of its general hospitals. On any given day over 24,600 psychiatric inpatients are receiving comprehensive psychiatric care, ranging from the traditional psychotherapies and chemotherapies to innovative programs in human relations' training, behavior modification, and vocational rehabilitation. Improved staffing, increased patient turnover, and better quality therapeutic programs are goals which were attained in FY 1972.

Increasing emphasis during the year was placed on outpatient psychiatric activities. At



the end of FY 1972, 73 mental hygiene clinics were in operation. Such clinics provided treatment to over 60,000 patients, representing over 531,000 individual interviews, and another 21,000 patients were provided fee-basis mental hygiene treatment. Day treatment centers increased by two to a total of 40. These centers provide continuing treatment to over 2,000 long-term psychiatric veterans on any given day. During the year, five new day hospital programs devoted to short-term crisis intervention treatment were started, making a total of 21 such programs now in operation. These day hospital programs provided treatment to 2,831 patients, an increase of 1,954 patients over last fiscal year; similarly the number of patient visits climbed to over 74,000, an increase of over 29,000 since the last fiscal year.

This expansion of all facets of the psychiatric ambulatory care program reflects the philosophy of the newly established service, which emphasizes the importance of early short-term treatment on an ambulatory basis as the treatment of choice. Such programs provide a broad array of comprehensive psychiatric services so that quality treatment can be given without undue separation of the veteran from his family, job, and community.

A review of innovative psychiatric admission procedures is underway. This is a first step in the development of a mental health admission model which is psychotherapeutically beneficial, efficient, and time saving. Special multidisciplinary professional groups were also assembled to devise means of making the day hospital program more effective and to examine some of the problems relating to mental health and the law. Many of the recommendations of the latter group have been adopted by the agency to assure more responsive actions. Renewed efforts were made to bring truly interdisciplinary approaches into the mental health treatment process so that the unique contribution of the psychiatrist, psychologist, social worker, psychiatric nurse, and rehabilitation worker could be blended into a dynamic, multi-faceted therapeutic and rehabilitation program.

During the year, special conferences and team visits to numerous hospitals stressed the need for a multidisciplinary involvement in mental health problems. Indices of the success of this approach have already been evidenced. Related to the

increased use of the multidisciplinary approach is the emphasis given to regional mental health efforts. Mental health committees and task forces have been implemented in several VA medical districts to minimize duplication of efforts but more importantly to assure that each patient with psychiatric problems, within the district, has access to all available treatment and rehabilitative approaches and programs. This year is especially noteworthy as the time of inception of this new way of combining and maximizing mental health resources.

Demands for skills of psychologists and psychological technicians have been steadily expanding. This is a result of the influx of Vietnam veterans and of the greater diversity of responsibilities inherent in the new mental health and behavioral sciences service.

Greater emphasis in professional programming is being placed on group therapeutic techniques and on the direct application of psychological principles of learning to achieve more effective self-control over disruptive or non-productive behavioral patterns. For example, through conditioning techniques, hard-core drug addicts at the VA Hospital in Miami, FL., have been taught aversive reactions to the act of inserting needles into their bodies for the purpose of injecting heroin, thereby blocking the continuation of the habit and making these veterans more amenable to reconstructive therapy. Group interactional processes are now employed in many VA stations and include "rap groups" and confrontational techniques important in resolving the doubts and questions which many Vietnam veterans have about society and in identifying constructive civilian activities.

Major emphasis has been placed on multidisciplinary training as one of the better approaches to facilitating patient care, innovative programming, and evaluation. Multidisciplinary training courses and conferences were conducted during FY 1972, on the principles of behavior therapy, the use of group therapy, and the treatment in day hospitals.

### **Neurology**

During FY 1972, in line with the structure now utilized at most medical schools and at many VA hospitals, Neurology became organizationally an independent professional service in VA's Central Office.

An Acute Stroke Care Unit was established at the VA hospital, West Haven, Conn., in FY 1972, to develop methods for improving the delivery of care to the veteran patient with a stroke. Although the unit has not been in operation long enough to fully assess its effectiveness, it is apparent that the period of hospitalization for stroke patients is being shortened and the incidence of respiratory and urinary complications reduced. Also, the quality of survival has been improved—the patients who have had care in the unit are generally able, at the time of discharge, to do more for themselves. Fewer show a need for nursing home care, as compared with patients who were discharged prior to the development of the Acute Stroke Care Unit.

The need to provide facilities where an epileptic veteran whose seizures are extremely difficult to control may receive the most thorough, meticulous diagnostic evaluation and advanced treatment is being met by the VA through the establishment of specialized epilepsy centers. The second such facility went into operation in FY 1972.

### **Spinal Cord Injury**

On June 30, 1972, the VA operated 14 centers with 1,223 beds for spinal cord injury patients at Bronx, N.Y.; Castle Point, N.Y.; Cleveland, Ohio; East Orange, N.J.; Hampton, Va.; Hines, Ill.; Houston, Texas; Long Beach, Calif.; Memphis, Tenn.; Miami, Fla.; Richmond, Va.; San Juan, Puerto Rico; West Roxbury, Mass.; and Wood, Wisc. This represents an increase of four centers (Hampton, Va.; Houston, Texas; Miami, Fla.; and San Juan, Puerto Rico) and 101 beds, in the last 2 years. Upon completion of major modernization projects of the SCI Centers at Bronx, N.Y., and Richmond, Va., the total number of operating beds will be adjusted to 1,229. With the exception of the SCI Center at West Roxbury, Mass., (which is also planned for modernization) all VA SCI Centers will then be located in new hospitals or in completely modernized space in existing hospitals. VA also plans to activate more new SCI centers.

During June 1972, the average daily census of patients in VA SCI Centers was 1,089, or 88 more than during June 1971. There were 1,101

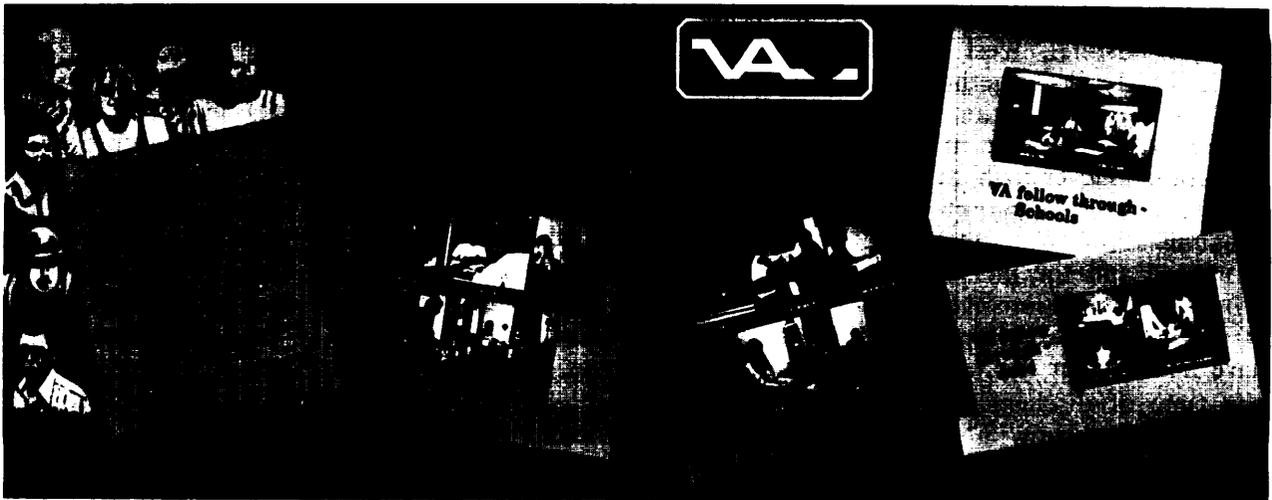
patients remaining in VA SCI Centers on June 30, 1972, of whom 293 were service-connected.

Staffing in VA SCI Centers has increased from 1,670 (full-time equivalent) in June 1971 to 2,028 in June 1972. This has provided a significant improvement in the staffing ratio (employees per patient) from 1.67:1 to 1.86:1. Further improvements are planned to gradually bring the staffing ratio to 2:1.

In recent years, the VA has expended more than \$2,823,000 for new construction and new equipment for its spinal cord injury bed sections in existing VA hospitals. These costs do not include the SCI Centers which were included in new hospital construction at Cleveland, Ohio (80 beds), Hines, Ill. (160 beds), Memphis, Tenn. (160 beds), and San Juan, Puerto Rico (20 beds). In addition, the VA purchased two new buses at a cost of \$50,000 each, with specially designed lifts to load and transport wheelchair patients to recreation and entertainment activities, which were delivered to the VA hospitals at Bronx, N.Y., and Long Beach, Calif., in March 1972. Other projects scheduled for improving the physical facilities of VA SCI Centers include: enclosing two roof decks at Hines, Ill., for additional recreational area; air conditioning the SCI Center, PM&R Clinic and other SCI support services at Long Beach, Calif., and installing centralized tray service; improvement of the GU Clinic at Richmond, Va.; in collaboration with the Harvard School of Medicine, the establishment of an acute rehabilitation center with special emphasis on spinal cord injury at West Roxbury, Mass., as part of a complete modernization project which includes a new building addition; and a specially designed SCI Center in a planned new VA hospital at Bronx, N.Y.

Many special facilities are included in several VA SCI Centers. These include PM&R Clinics, reserved parking areas with covered entrances and telephone communication to SCI wards, therapeutic swimming pools, recreation areas, and bowling lanes.

In the past year, over 250 multidisciplinary staff members have received specialized training in comprehensive rehabilitation and 400 physicians—both in the VA and the private sector—have received postgraduate or continuing education in the care of the spinal cord injured. A special training program for career physicians



in Spinal Traumatology was begun in FY 1972 at the VA Hospital, Long Beach, Calif., and the first four physicians trained have received significant appointments in Spinal Cord Injury Centers. Education and training of both on-duty and newly acquired staff in all categories is emphasized in the Spinal Cord Injury Centers' qualitative progression plan. In addition, several programs have been piloted and implemented to meet special needs of the severely disabled, such as home health care for spinal cord injury, renewed emphasis on bio-engineering and environmental control, research and enriched patient recreation and training.

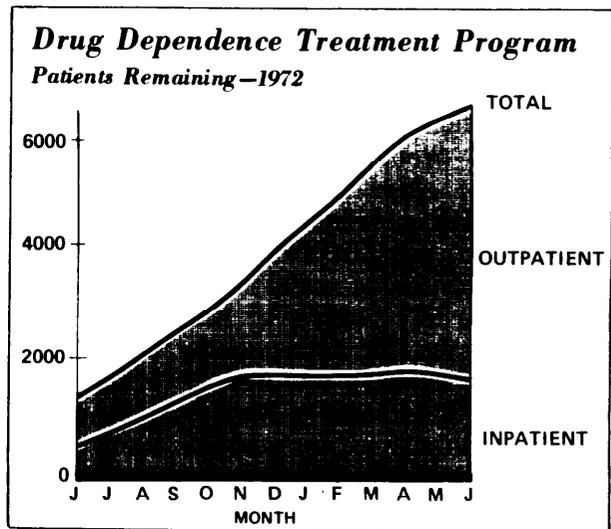
### Alcohol and Drug Dependence

One of the programs receiving great emphasis was Alcohol and Drug Dependence. During the fiscal year, 26 Drug Dependence Treatment Centers were added to the six previously activated. In addition, 28 Drug Dependence Rehabilitation Units were designated to serve as a back-up to the centers. Two satellite drug clinics, one in Houston, Texas, and one in San Francisco, Calif., were also established to test the feasibility of using this small type of clinic, near the center of the patient population to be served, for treatment and outreach.

The increase in the number of veterans treated for drug dependence surpassed the estimates made at the beginning of the fiscal year. Admissions to VA hospital care for the treatment of this condition increased from 11,287 during the entire calendar year 1971, to 11,490

during the 6-month period, January 1 to June 30, 1972, and to 22,777 during FY 1972. Of the admissions during FY 1972, 3,009 were active duty servicemen referred to VA through the Armed Services Medical Regulating Office, and the remaining 19,768 were veterans who voluntarily requested treatment.

Treatment is provided on both an inpatient and outpatient basis. On June 30, 1971, there were 574 inpatients receiving treatment and 660 outpatients. A year later, the corresponding loads were 1,292 and 5,308 respectively.



By the end of FY 1972, over 100 ex-addicts were employed in the Drug Dependence Treatment Centers as drug rehabilitation technicians,

and it is expected that ex-addicts will be employed increasingly in these and other VA facilities.

Contracts were negotiated with community agencies for the treatment of 80 drug-dependent veterans in Philadelphia and 1,100 in New York City. Such fee-for-service arrangements will be made in other communities when such arrangements provide the best care possible for selected veterans.

Technical assistance has been provided to all the Drug Dependence Treatment Centers in operation, and those starting in the summer of 1972. Plans for evaluating the cost effectiveness of the centers, and the effectiveness of varying modalities of treatment, have been initiated. These evaluations will enable VA to use its resources where they are most needed.

### **Pathology and Allied Sciences**

The laboratory services of the VA continue to provide a broad spectrum of patient care support. In FY 1972, more than 67 million tests were performed with the assistance of extensive use of automated equipment, and there was significant upgrading of laboratory equipment.

Introduction of automatic data processing for laboratory services continued during FY 1972, with projects at VA hospitals in Boston, Mass., Durham, N.C., and Minneapolis, Minn., and in the VA's Southern California Medical District. Based on the experience of these four systems, a comprehensive set of functional requirements for automatic data processing for laboratory services has been developed, and will form the basis for much future planning in this area.

A new method of recording laboratory workload, developed by the College of American Pathologists, was introduced on July 1, 1971, and is gaining nationwide acceptance. This method employs weighting factors directly related to the technical-clerical-aide time required for each procedure. Thus, the workload recording method provides a good tool for assessing productivity and staffing requirements. An added advantage is that VA laboratory activities can be compared more meaningfully with those of university and community hospitals.

On July 1, 1971, testing for the hepatitis associated antigen, thought to be the infectious agent responsible for serum hepatitis, became

mandatory on blood for transfusion. Although available methods for testing do not detect all infected blood, the methodology is constantly being improved.

Two special reference laboratories for tuberculosis and other mycobacterial diseases were opened in FY 1972. One is located at the VA hospital, West Haven, Conn., to serve the eastern part of the country, and the other at the VA hospital, Long Beach, Calif., to serve the western part. The more specialized laboratory support for diagnosis and treatment of tuberculosis and other mycobacterial diseases will be concentrated at these locations, rather than diffused throughout the VA, for better and more efficient operations.

The electron microscopy program was augmented by five new installations in FY 1972, and by significant upgrading, particularly in staffing and supplies, for many of the established units.

### **Prosthetic and Sensory Aids**

Prosthetic and Sensory Aids Service continued to expand its facilities to serve the increasing numbers of seriously disabled veterans requiring prosthetic services. In FY 1972, 506,154 prosthetic services were provided (30,603 to Vietnam era veterans) compared with 461,425 (32,945 to Vietnam era veterans) in FY 1971.

Two new prosthetic treatment centers were activated by VA in FY 1972, bringing the total to 18. Such centers provide special facilities in selected locations to assure that the most sophisticated prosthetics treatment is available to the nation's most seriously disabled veterans. Further activations are planned. The 18 prosthetics treatment centers provided a total of 147,445 prosthetics services, during FY 1972, of which 8,680 were for Vietnam era veterans.

VA's orthopedic shops were increased by nine, during FY 1972, to a total of 44. The existence of in-house orthopedic shops greatly facilitates the prosthetics treatment of patients in hospitals, particularly for paraplegic and quadraplegic patients who require constant prosthetics care. Additional shops are planned.

In FY 1972, there were 8,358 special items of adaptive equipment, and repairs to approved adaptive equipment, processed for 2,984 veterans at a cost of \$1,020,957. In compliance with the law, VA established a special program

to develop standards and specifications for safety and quality for all adaptive equipment available to veterans.

The Prosthetic and Sensory Aids Service continued its integrated program, arranging for the best available devices and techniques to assist disabled veterans, and simultaneously improving such aids by a national program of research, development, evaluation and education. An orderly transition procedure brings research results from the laboratory into clinical use for veterans, and a widespread dissemination of results through publications, seminars, and courses, assists other disabled nonveterans. Among the disability groups served are amputees, the blind, the hard of hearing, and the victims of spinal cord injury. Because of experience with these many types, the program is especially equipped to cope with the problems of those Vietnam era veterans who have sustained multiple injuries—blind amputees, individuals with multiple amputation, etc. During FY 1972, an average of 47 employees were assigned to VA's prosthetic research program, and operating costs amounted to \$2,245,000. Some major projects are described below.



*Stereotoner*

A major new reading aid for the blind, the Mauch Laboratories Stereotoner was developed, and 50 copies are on order for wide-scale clinical trial. A distinct improvement over the earlier Visotoner, the Stereotoner is the smallest, lightest, least expensive, and most versatile reading aid available.

Mauch Laboratories also continued to improve the Cognodictor personal-type reading machine for the blind. Already semi-portable, the device is being made even lighter, and an ingenious two-dimensional multiple snapshot recognition principle will make it more resistant to misalignment in tracking of the probe over the line of type.

Closed-circuit TV magnifying systems, now commercially available, were evaluated in conjunction with other optical aids for visually handicapped veterans. Criteria for prescription were drafted.

A night-vision aid, originally developed for military use, was tested on partially-sighted veterans at the VA Hospital, Palo Alto, Calif.

Eight blind veterans were trained in August 1971 in the use of the bionic laser cane and use them effectively for travel near their homes. Mobility instructors made repeated telephone calls and personal visits to check on progress and to record performance (through tape-recorded video cameras) for study by other instructors. Thirty-five models of an improved laser cane were ordered.

Kay binaural ultrasonic "spectacles", used to supplement conventional long canes, were given clinical trials by blinded veterans. They were trained by four mobility instructors at the VA Hospitals, West Haven, Conn.; Hines, Ill.; and Palo Alto, Calif. Continued usefulness in the veteran's home community is being monitored.

Russell "Pathsounder" ultrasonic aids and Mims lightemitting-diode "spectacles" are also being evaluated on a small scale. The Path-sounder was useful for blind patients confined to wheelchairs or endangered by skull injuries.

Evaluation and development of controls were continued for power wheelchairs and for adjustable beds, lights, radio, TV, tape recorder, telephone, and other aspects of the environment to aid quadriplegics and other patients with limitations of arms as well as legs.

The Mauch S-N-S hydraulic knee joint, to improve control of both swing and stance phases

of gait for above-knee amputees, was developed and refined over many years of persistent effort. Its value is indicated by some 2,000 units having been purchased already for fitting both to veterans and to private users. Some 70 bilateral above-knee amputees have benefitted by the improved stability and removal of fear of knee-buckling. A shortened "Standard Length" has been introduced. Meanwhile, work continued on the Mauch hydraulic ankle joint to improve comfort and function for a lower-extremity amputee of any level walking on hills or rough ground.

Texas A&M University developed a hip-disarticulation prosthesis with innovations in design and materials. The socket brim has tapered flexibility to improve comfort and reduce risk of dermatological problems. A novel knee joint uses a dilatant fluid to control swing and to resist buckling.

Modular construction, foam covering, and a plastic cosmetic skin-like covering continued under study at Texas A&M University, VA Prosthetics Center and elsewhere. The goals are rapid assembly, adjustment, and fitting of a prosthesis with greatly improved appearance, more normal response to touch, and decreased risk of damage to clothing. Rapid provision of a durable, attractive limb, complementing the immediate fitting of a patient after amputation, should improve his psychological outlook as well as accelerate his return to activity.

A nation-wide clinical application study of powered upper-extremity prostheses continues, with 72 amputees participating. This is the largest study of its kind in this country. Besides providing data on maintenance problems, and feedback to the designers of the electric hands and elbows involved, the study is also providing new insights for clinicians on this area of growing usefulness.

### **Physical Medicine and Rehabilitation**

Over 15 percent of all patients treated in VA hospitals and about 1 percent of the outpatients received some form of physical, mental, social and/or vocational rehabilitation treatment during the past year. This represents a modest increase over last year, made up chiefly of the younger Vietnam veterans. The rehabilitation problems produced in the Vietnam war have

been especially large in the areas of amputation and drug abuse.

There was a great deal of activity in educational and vocational rehabilitation. Many drop-outs from school completed their high school education while hospitalized. Over 8,000 patients took part in the Paid Industrial Rehabilitation program conducted in the Physical Medicine and Rehabilitation Service clinics. Some 650 patients were taken off station to work in private industry under guidance, with the majority completing the training program and becoming employed upon discharge from the hospital.

### **Radiology**

VA Radiology, a major supportive and consultative service to other specialties, performed 4,576,026 examinations of inpatients and outpatients and processed 12,673,219 X-ray films during FY 1972.

Twenty-three VA hospitals offered super-voltage radiotherapy to patients with deep-seated malignancies, and about 116,000 treatments were given with cobalt 60, linear accelerator, and betatron supervoltage therapy units. At other hospitals, radiotherapy was given to the VA patients through regionalization, by transferring the patient to the nearest VA radiotherapy center or, through a contractual or sharing agreement, to a community or university radiotherapy center.

Throughout FY 1972, efforts continued to improve the diagnostic capabilities of VA's radiology service, and special attention was given to upgrading the equipment of isolated outpatient clinics. Approximately \$13,924,000 was expended for new equipment.

In an effort to increase efficiency and provide better service to patients with more exacting appointments and reporting, a new radiology automatic data processing reporting system was introduced on a trial basis at the VA Hospital, Iowa City, Iowa.

With the rapid advancement in technological development and the increase in cost of equipment, the evaluation and quality control of radiology equipment has been most difficult. VA's Radiology Service, along with the Marketing Center, Hines, Ill., is involved in the

evaluation and in the purchase of equipment for all Government agencies (Federal and State).

## **Dentistry**

Although more conservative dental care was accomplished by VA's hospital dental staffs than ever before, one of the brightest spots of the VA hospital dental program continues to be the early detection and control of oral malignancies through the comprehensive dental examination of hospitalized veterans. This year, 597 oral malignancies were initially recognized by VA dentists.

Equipment and facilities are undergoing considerable upgrading in line with recent major design changes in dental equipment. During FY 1972, all VA hospitals became equipped with dental panoramic X-ray units. Forty hospitals also received automatic dental X-ray developers during the year.

Unprecedented action was taken in the conduct of two administrative workshops for young staff dentists. The workshops were designed to strengthen interaction between the dentist at the chair and the staff of the Assistant Chief Medical Director for Dentistry. The young dentists averaged 29 years of age and had approximately 3 years of VA service. Overall objective of the workshops was to invite the participation of young career-minded professionals into future VA planning with a discussion of the issues effecting the delivery of oral health care for the veteran.

To improve health care delivery and to enable dental staff and trainees to practice modern methods as taught in dental schools today, a continuing effort is being made to update VA dental facilities and equipment. The conversion of dental operatories has begun and the training of professional and ancillary personnel will continue over the coming years as resources permit. Through course offerings at dental schools and the VA Dental Training Center this past year, more than 125 dentists and assistants received training in team dentistry. In FY 1972, 12 VA stations with dental training activities were allocated education funding for new equipment and for the remodeling or relocation of existing operatories. Several other hospitals have used locally allocated funds to replace obsolete dental equipment with new reclining contour-type chairs, functional dental units, mobile instru-

ment cabinets operating lights, and operating stools to implement sit-down team dentistry. This new approach allows the dentist and assistant to operate from a sitting position, which reduces the hazards of occupational postural disease and permits more efficient treatment of the patient. By eliminating obstructive equipment items, the dental assistant can assume a position for close-in full-time assistance with improved direct visualization of the operating field. Team dentistry, functioning with efficient equipment and instrument systems, greatly reduces procedural interruptions, and facilitates a smoother and less time consuming episode of treatment for the patient. This concept is taught in dental schools throughout our country, so the updating of VA's equipment and facilities further strengthens the VA's position in attracting and retaining highly qualified professional staff and ancillary personnel.

## **Nursing**

Efforts in FY 1972 centered on extending the scope of nursing practice and expanding the role of professional nurses. For example, nurse administered patient units and programs have been established; nurses are providing therapy and services to patients in nurse administered satellite clinics; they serve as coordinators for instituting immediate rehabilitation care for neurological patients; they are involved in screening patients for admission or community referral and follow-up, performing history and physical examination including ordering and/or performing diagnostic tests; and nurses assist in the management of the multiple facets of the infection control program.

Continuous examination of professional practices and the relationships of nurses to physicians and other health disciplines led to several plans of action. Foremost among these was the approval of a pilot program for the establishment of nurse clinics. Nurse specialists conducting these clinics will be the primary care providers for selected clinic patients. Nurse management of patient care will be accomplished within a framework of written policies and protocols mutually agreed upon by nurses and physicians.

In another effort, a survey to identify the various clinical positions currently in practice at

VA hospitals was made and will be the basis of another plan for developing model functional statements and policies and/or guidelines concerning qualifications, utilization and expectations of nurses in clinical roles, and to develop guidelines for educational programs designed to expand the role of the professional nurse practitioner in primary, acute and long-term care.

Community relationships continued to show positive results. This past year's annual Clinical Nursing Conference on Nursing Communications attracted 845 participants from 80 hospitals, including 42 community and State hospitals and 21 colleges and universities.

## **Dietetics**

The scope of dietary treatment for the veteran patient has broadened to include increased participation in community care programs such as Community Nursing Homes and Hospital-Based Home Care. Assistance is given in the inspection of nursing homes, in providing follow-up instruction on the diet prescribed for the veteran while hospitalized, and in conducting classes in nutrition and food preparation for nursing home sponsors.

The dietitian is considerably involved in a number of the specialized medical services. As hemodialysis units have extended their program to include home dialysis, nutrition education programs for the husband-wife teams have been intensified. Since home dialysis patients make return visits to the hospital less frequently, the dietitian tries to instill confidence and cooperation in the veteran and his family about following the rather complex and difficult diet at home.

The dietitian works closely with the medical team in preparing the patient and his family to participate in the Hospital-Based Home Care program, to assure adherence to the prescribed diet.

Nutritional care has been extended to the growing number of veterans in alcoholism and drug dependence treatment units. These patients have a variety of dietary and communications problems. The dietitian is involved in group therapy with these veterans to help them to accept the nutritional care they require.

Assistance is given to veterans in the spinal cord injury hospital-based home care program.

The veteran is instructed in his nutritional needs at home, either independently or with the aid of a family member. Home visits are made to follow up the spinal cord injury patient's dietary care in the community.

At Day Treatment Centers, the neuropsychiatric veteran is taught how to purchase foods economically at the market, and how to plan and prepare nourishing meals at home.

During the fiscal year, 106,767,054 meals were served in VA hospitals and domiciliaries, at a raw food cost of \$45.2 million, or 42.4 cents per meal. This was a 6.5 percent increase in raw food cost per meal served, as compared with the previous fiscal year.

## **Social Work**

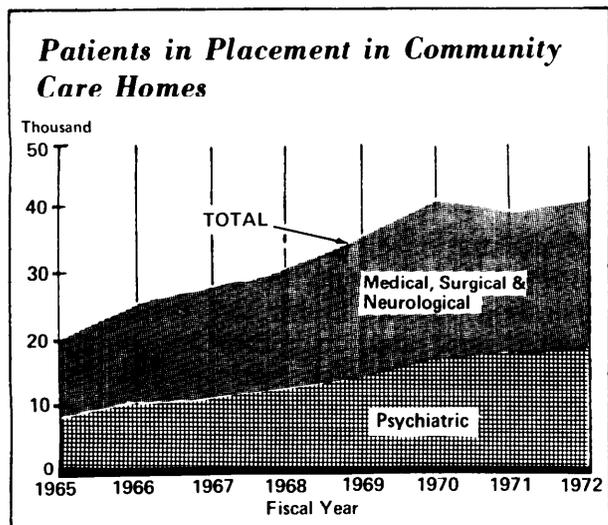
Concentration on patient care programs was continued at all points of treatment, i.e., on applications to the health care system, under hospital care, and on return to community living. The impact of health care delivery systems on family life, and specifically the influence of the special medical programs, was given even greater emphasis.

A program was established to train wives of patients on hemodialysis so they could provide back-up services which would make it possible for patients to receive their treatments at home. Similar home care programs are developing for patients with emphysema and related respiratory disorders, and for the blind, where an "in-house" orientation of goals and objectives of blind rehabilitation is conducted for close relatives.

Social workers are assuming broader roles in patient care, performing administrative as well as direct patient service functions. These workers now serve as program coordinators in drug treatment, alcohol programs, day treatment centers, mental hygiene clinics, and inpatient programs for the more stabilized schizophrenic patient. Emphasis in these social work directed programs is on helping patients develop or re-learn the interpersonal skills and social behaviors which will prepare them to carry adult roles in the community and to function successfully in the larger society.

Social Work Service has continued to expand and refine its alternative resources for care of the discharged patient in the community when

he lacks a suitable home of his own to which to return. A wide range of therapeutically oriented settings were used, such as personal care homes, boarding homes, nursing homes and other supervised living arrangements. During the year, 24,116 patients were helped to leave the hospital and enter such community residences making a total of 40,427 veterans living in such places and under social work program supervision.



An innovation during the year was the establishment of the National Assistance for Veterans Mobile Vans to operate initially in a limited number of States. VA social workers have been designated as team leaders for these vans, responsible for directing and implementing the unit composite program which includes the Department of Labor, HUD, OEO, Office of Education and Department of HEW. These mobile vans are able to reach and serve veterans, in both urban and rural areas, who have not availed themselves of VA services and benefits.

The community-based social worker continues to serve in communities distant from a VA hospital or clinic. Beyond providing follow-up services to veterans and their families, these social workers are beginning to serve as access points to VA benefits and services. Their acceptance as VA representatives by the health and welfare community is an asset in assisting veterans to make use of non-VA resources.

A center was established at the VA Hospital, Hines, Ill., to train social work personnel in the

social and technical aspects of hemodialysis, and workshops have been instituted to familiarize the social work staff with the complex technical aspects of other specialized medical services.

### Voluntary Services

Patients in VA hospitals are served by volunteers of all ages who extend, supplement, and enhance the care and treatment provided by the VA staff.

Volunteers serve in such diverse assignments as social recreation, companion therapy, hostesses in hospital admission areas, escort service, day care center programs, writing letters for and feeding patients, visiting patients in community care placements, and helping patients prepare for their high school equivalency tests.

In FY 1972, a monthly average of 107,526 volunteers gave 9,749,271 hours of service.

Special emphasis was given, during FY 1972, to strengthening the staff leadership in hospital programs, and expanding the range of volunteer assistance. Three VA training conferences enabled all supervisory personnel, assigned to the program, to sharpen their skills.

A 28-minute, color/sound film on the work of high school students as youth volunteers in VA hospitals was completed during FY 1972. In lively sequence, the young people illustrate the value of their work in service to patients, and what a career in one of the many health care disciplines could mean to them. This recruitment film, entitled "TODAY AND TOMORROW," is loaned to VA hospitals, organizations in the VA Voluntary Service (VAVS) program and to other organizations and agencies interested in young people and their futures.

VA Voluntary Service staff has worked closely with non-VA organizations and has contributed to the planning for the utilization of volunteers in such groups as ACTION, the National Center for Voluntary Action, International Association of Rehabilitation Facilities, White House Conference on Aging, the President's Committee on Employment of the Handicapped, and American Association of Voluntary Service Coordinators.

### Canteen

During FY 1972, the Veterans Canteen

Service emphasized improved food service. Overall food sales increased from \$22,108,345 in FY 1971 to \$24,700,791 in FY 1972.

Canteen remodelings were completed for 21 activities in FY 1972, compared with 13 in FY 1971, and an additional 21 projects were in process at the end of the year. The canteen remodeling program involves total renovation of space, fixtures, equipment, and decor for selected activities.

Investment in equipment increased in conjunction with the program to upgrade canteen facilities. Equipment acquisition during FY 1972 amounted to \$1,357,330, representing 29 percent of the net fixed assets on June 30, 1971. Acquisition costs for the preceding fiscal year had been \$889,575.

Space available for canteen activities improved considerably during FY 1972. Such space, which influences the type and extent of services and the efficiency and control over operations, was rated outstanding at 63 canteen outlets, compared with 59 in FY 1971. Space in each canteen is evaluated annually on the basis of location, size, adaptability and type of construction.

### **Other Services**

Development was begun on a standardized Patient Medication Profile Folder for all VA beneficiaries receiving drugs and medical supplies from VA pharmacies. Such a folder will allow pharmacists to review the entire patient medication usage before dispensing. It will also enable them to alert physicians in situations of duplicate prescriptions, potential drug abuses, iatrogenic reactions, adverse reactions, and contraindications. The pharmacy services at two VA hospitals extended their hours of service to 24 hours a day, 7 days a week, to optimize pharmacy resources such as personnel, space and equipment, effect better drug control and conserve physician and nursing manhours. A total of 16,706,385 prescriptions, written by VA and other physicians, were filled for VA patients during the year by VA and other pharmacies.

MEDLINE (Medlars on Line) terminals have been installed in seven VA hospitals and in the Agency's Central Office Library. With access to a computer at the National Library of Medicine in Bethesda, Maryland, these VA hospitals can

now respond immediately to questions concerning the 400,000 citations from 1,000 medical journals published from 1969 to date. Aided by the computer, the search for subjects, authors and dates is reduced to minutes rather than days. This service is in trial use, and is being evaluated for extension to the 37 VA medical districts.

As with other clinical support services, the 935 chaplains find themselves increasingly involved. For example, the Drug Dependence Treatment Units and the Alcohol Treatment Units are being staffed with chaplains skilled in dealing with the problems of drug abuse and alcoholism.

### **EDUCATION AND TRAINING**

The commitment of the VA to provide the best possible medical care for the veteran patient necessitates the conduct of appropriate education and training activities at the optimal level. This has been accomplished through a variety of programs and activities which ensure the effectiveness of those who care for the sick or disabled veteran. In addition, these programs contribute significantly to the national health manpower pool and thus provide a substantial recruitment source of highly qualified physicians and other health personnel for the Veterans Administration.

Through extensive affiliations with medical schools and other educational institutions, VA hospitals provide clinical teaching covering the gamut of health care professions and occupations. These programs, the great majority of which are accredited by the appropriate professional organizations, are under joint VA-school supervision. VA staff members conducting this teaching must, of necessity, constantly maintain their own educational efforts. This, in turn, assures that the most advanced knowledge in every field is brought to the bedside by participating staff members.

Since 1946, when the VA began its program of affiliation with medical schools and other educational institutions, its role in the training of the nation's physicians and other health care personnel has continually increased so that, in FY 1972, VA hospitals and clinics provided training to 56,197 persons, while training was provided to 53,086 persons in FY 1971 and to 49,051 individuals in FY 1970.

In addition to regular training provided by the VA, its facilities were used to give work experience or health service training at novice levels to 12,222 enrollees of the various Federal Economic Opportunity and Educational Assistance programs, an increase of 425 enrollees over FY 1971.

Program	No. of Enrollees
Total	12,222
Neighborhood youth corps	7,661
Work experience program	718
Manpower development and training	
A. Initial training	877
B. Refresher training	27
Job corps	311
College work study	665
Vocational work study	15
Other	1,948

### Assignment

Total	12,222
Clerical-Administrative	2,612
Engineering aid and helper	935
Food service worker	1,326
Housekeeping	1,709
Nursing	3,120
Para-medical aids	1,693
Supply	448
Other	379

Beginning in FY 1972 increases in VA training programs were selectively allocated to:

- Increase enrollments in ongoing programs according to the impact of these programs on specifically identified manpower needs of VA hospitals and of the communities in which they are located.
- Assist individual VA hospitals to make planned, selective use of their current and potential educational resources, to complement rather than duplicate resources already existing in the community.
- Encourage and assist in the development of plans for the fuller, more efficient utilization of all trained health personnel.

### School Affiliations

There was an increase in the number of new

affiliations, of VA hospitals and clinics, with those educational institutions which provide the academic portion of this training in the various health fields. The highly effective affiliations with most of the nation's medical schools has continued, with 99 VA hospitals now linked through Deans Committee relationships with 85 medical schools. Similar cooperative training arrangements exist with 57 dental schools, 310 nursing schools, 78 schools of social work, 94 graduate departments of psychology, 37 schools of physical therapy, 38 schools of occupational therapy, 24 schools of pharmacy, and more than 310 universities, colleges, and junior colleges, and in 100 technical and other types of educational institutions.

In furtherance of the close cooperative arrangements between these institutions and VA hospitals, many VA staff members hold faculty appointments. In mid-FY 1972, 2,166 VA physicians, 212 VA dentists, and 599 other VA staff members held such appointments.

**Full-Time VA Hospital Personnel Serving as Faculty in Medical Schools and Other Academic Institutions**

Academic Title	Number of Individuals Appointed as of December 31, 1971			
	Total	VA Physicians	VA Dentists	Other VA Categories
Total	2,937	2,166	212	559
Professor	230	201	5	24
Clinical Professor	64	50	9	5
Associate Professor	418	344	20	54
Associate Clinical Professor	160	129	18	13
Assistant Professor	797	647	32	118
Assistant Clinical Professor	326	260	28	38
Instructor	352	249	25	78
Clinical Instructor	280	169	27	84
Adjunct Titles	67	13	9	45
Other Titles	243	104	39	100

The increased dependence of nursing and allied health schools on VA facilities for clinical affiliation has affected not only those VA hospitals which have traditionally been integral members of the large medical centers, but virtually all other VA facilities, most of which serve areas distant from major medical centers. These hospitals provide high quality care to large numbers of patients and have experienced staffs in nursing and the allied health professions.

These persons are being recognized as highly qualified to serve as "clinical faculty," which is so greatly needed in the more remote areas.

The new affiliations have provided the VA system, particularly the previously unaffiliated hospitals, with both an unprecedented recruitment opportunity and an atmosphere of renewed enthusiasm and involvement.

### **Coordination of Hospital Programs**

Staff positions have been created for specially qualified health professionals who devote all or the greatest part of their time to the bedside or bench-side supervision of the trainees, and most importantly, to the coordination of the often numerous professional and allied health training programs in a single hospital, with the various affiliated academic institutions and non-VA hospitals. It is through these instructors and coordinators, almost all of whom hold clinical appointments to the faculties of affiliating schools and colleges, that the VA hospitals are becoming an integral part of community manpower planning — whether the community is a neighborhood, a city, a State, or otherwise defined.

This coordination at the local level, along with supportive efforts on the part of VA's Central Office staff at the national level, has made possible considerable progress in intra-governmental cooperation between the VA and the Department of Labor's Manpower and Training programs and with a number of organizational units of the Department of Health, Education, and Welfare.

For example, grants from the Bureau of Health Manpower (NIH-DHEW) frequently support academic programs in nursing and allied health which could not be presented without the clinical training provided by the VA hospital affiliates. More specifically, three demonstrations of the training and utilization of Mental Health Associates are jointly supported by National Institute of Mental Health grants to junior colleges, with clinical experience opportunities presented in large neighboring VA psychiatric hospitals.

Another, perhaps more visible, example is the assumption by eight non-affiliated VA hospitals of community leadership in the establishment of Area Health Education Centers. The center sites were selected on the basis of applications sub-

mitted jointly to the VA Central Office and to the Regional Medical Programs Service. Support of operational activities by these Area Health Education Centers can be provided from either of the involved Federal agencies, or from other Federal, State, or private funding agencies, as appropriate.

### **Graduate Medical and Dental Education**

Paramount among VA's many educational activities is the major contribution made by VA hospitals and staff, over the past quarter century, to the training of medical and dental interns and residents. In the early years, these house staff training programs were approved solely in the name of the responsible VA hospital, which also provided the major portion of the training. More and more in recent years, however, the programs are approved in the name of a medical school and its affiliated hospitals, of which the VA continues to be an active participant.

The continued growth of house staff training in the VA has gone hand-in-hand with the continued growth in VA medical school affiliations. In the past decade, the number of house staff receiving training in VA hospitals during a 12-month period has increased from 3,276 to 11,977.

The close VA medical school relationships, the presence in VA hospitals of large numbers of bright, young, enthusiastic physicians and dentists; and the consequent improved quality of regular staff recruitment, have been of incalculable benefit in the accomplishment of the VA's mission.

In FY 1972, the VA participated in 906 residency programs for physicians and dentists. Of these, 654 were components of residencies approved in the names of groups of hospitals, including, among others, university or medical center hospitals and VA hospitals. There were 150 programs approved in the names of VA hospitals, under which residents were assigned to non-VA hospitals for varying periods of training. Conversely, VA hospitals accepted for training, usually of short duration, residents from 102 programs approved in the names of non-VA hospitals.

Number of VA House Staff

Specialty or Subspecialty	As of December 31				
	1969	1970	1971		
			Total	Career	All Other
House Staff - Total . . . . .	5,120	5,286	5,438	208	5,230
Medical Residents, Total . . . . .	4,375	4,476	4,546	137	4,409
Allergy . . . . .	4	9	6	-	6
Anesthesiology . . . . .	122	120	133	6	127
Cardiology . . . . .	60	63	65	-	65
Colon and Rectal Surgery . . . . .	1	1	1	-	1
Dermatology . . . . .	98	98	93	-	93
Gastroenterology . . . . .	50	45	51	-	51
General Surgery . . . . .	837	854	807	-	807
Internal medicine . . . . .	1,324	1,409	1,402	-	1,402
Neurology . . . . .	107	130	161	9	152
Neurosurgery . . . . .	78	70	78	1	77
Ophthalmology . . . . .	176	178	177	-	177
Orthopedic Surgery . . . . .	209	206	204	2	202
Otolaryngology . . . . .	135	122	127	-	127
Pathology . . . . .	226	199	202	17	185
Physical Medicine . . . . .	55	57	59	21	38
Plastic Surgery . . . . .	38	38	42	-	42
Psychiatry . . . . .	252	268	298	63	235
Pulmonary Diseases . . . . .	42	37	47	-	47
Radiology . . . . .	323	355	368	18	350
Thoracic Surgery . . . . .	49	38	43	-	43
Urology . . . . .	189	179	182	-	182
Dental Residents, Total . . . . .	121	127	136	41	95
Endodontia . . . . .	9	8	9	4	5
Oral pathology . . . . .	3	2	2	1	1
Oral surgery . . . . .	60	67	73	13	60
Periodontia . . . . .	17	20	21	11	10
Prosthodontia . . . . .	32	30	31	12	19
Medical and Dental Interns, Total . . . . .	624	683	756	30	726
Medical . . . . .	531	585	667	-	667
Dental . . . . .	93	98	89	30	59

In FY 1972, VA career residencies were offered in neurology, pathology, psychiatry, physical medicine and rehabilitation and five dental specialties. There is no distinction between the career resident and other residents insofar as training is concerned. The distinction rather is one of compensation and obligation; that is, the career resident, unlike other residents, receives the pay of a regular staff physician, and accepts in turn the obligation to serve for a definite period, on completion of training, at any VA hospital in need of his services.

The accompanying chart gives an indication of the impact of VA residency programs. In

addition, 715 interns were in VA service on an average day; and during the entire year, 2,205 interns received training in VA hospitals.

**Residency Training**

*the VA . . .*

**PARTICIPATES IN . . . 906 . . . RESIDENCY PROGRAMS**  
**OF WHICH . . . 654 . . . ARE GROUP HOSPITAL RESIDENCIES**

**FILLS . . . 4651 . . . RESIDENT POSITIONS ON AN AVERAGE DAY**  
**INCLUDING . . . 142 . . . CAREER RESIDENT POSITIONS**

**TRAINS . . . 9772 . . . RESIDENTS A YEAR**

**THE NATION TRAINS . . . 42,512 . . . RESIDENTS A YEAR**

**VA'S SHARE . . . 11% . . . OF RESIDENCY POSITIONS**  
**. . . 23% . . . OF RESIDENTS TRAINED**

### Career Development Program

The Career Development Program for physicians, dentists, and psychologists consists of five levels of assignments including Senior Medical Investigator, Medical Investigator, Clinical Investigator, Research and Education Associate, and Clinical Associate. The latter position concentrates on advanced sub-specialty training beyond basic residency training, and is educational in substance, while the other four place much greater emphasis on providing research experience. The advanced sub-specialty programs are proposed by the program directors at the station level, and are reviewed by appropriate committees of experts. In FY 1972, there were 117 approved advanced sub-specialty training programs at 48 VA hospitals, in 26 sub-specialties of medicine and surgery.

### Allied Health Training

In FY 1972, VA's Education Service was able, for the first time, to consider requests from the field for approval of increases in both ongoing

programs and new affiliations, on the basis not only of their educational adequacy and professional accreditation, but of their relevance to the manpower requirements of the hospital itself, other hospitals in the VA Medical District, and non-VA health care agencies in the community. By this means, it has been possible, to achieve a significant increase in the output of, for example, nurse anesthetists, still in critically short supply in almost every area of the nation.

In addition to increasing existing training programs, entirely new programs were developed and/or implemented in FY 1972 to begin meeting projected manpower requirements, many of which are related to specialized medical services.

With careful planning and groundwork with the Civil Service Commission completed in FY 1971, the VA took a leading role in the development of standardized quality programs for the training of physician's assistants. By the end of FY 1972, 23 VA hospitals were actively participating in this effort.

Other examples of narrower geographic impact, but of special importance to specific VA activities, are training programs for rehabilitation counsellors for the blind, biomedical equipment technicians and repairmen, and optometrists and optometry technicians.

A new and, in some ways, most difficult VA educational and training objective has been the development of ways to assure full and appropriate utilization of trained health personnel to meet the changing patterns of patient care delivery. An immediate need arises from the increased emphasis on programs of care to patients who, because of new treatment modalities, are no longer confined to beds; and on changing concepts of rehabilitation and restoration of stabilized patients to their homes and communities.

Most such programs require broad understanding and new skills on the part of nurses and other allied health workers, but provide an opportunity for delegation of responsibilities from physicians and other scarce and "expensive" professionals. Demonstrations of the preparation of staff, at all levels, for these new roles have been established in the areas of alcoholism and drug addiction counselling, socio-economic rehabilitation of spinal cord

injury patients, and care of the aging and chronically disabled.

Two years of study and development of a new non-professional supportive position to professional mental health personnel came to fruition in FY 1972, with the approval of the VA mental health associate position.

Incumbents of these positions bring a generalist approach in multidisciplinary mental health settings. The Mental Health Associate serves as an associate member of the multidisciplinary mental health team which furnishes patient care and treatment to a variety of mentally ill veterans, including the treatment of drug dependency and alcoholism. He or she is also available for patient contact on weekends and evenings and assists with recreational and educational activities at those times.

### **Distinguished Physicians**

The Distinguished Physician Program of the Veterans Administration recognizes physicians who have made significant contributions to medical science and have obtained exceptional professional stature over long and distinguished careers. Each Distinguished Physician serves on a VA-wide basis as a consultant, lecturer, or in other teaching capacities, thus providing scientific and educational leadership within the system. In FY 1972, four new Distinguished Physicians were appointed, bringing the total within the program to six. Dr. William B. Castle retired while Dr. Tinsley R. Harrison and Dr. William S. Middleton continued to serve in this capacity. The new appointees were Dr. Brian Blades at VA Hospital, Washington, D.C.; Dr. I. Arthur Mirsky at VA Hospital, Pittsburgh, Pa.; Dr. Charles B. Puestow at VA Research Hospital, Chicago, Ill.; and Dr. Barnes Woodhall at VA Hospital, Durham, N.C.

### **Postgraduate and Inservice Training Program**

The Postgraduate and Inservice Training program of the VA is the nationwide education effort which brings the latest medical, scientific, and administrative knowledge to those regular VA employees who provide treatment to the veteran patient. Through application of the information provided by the activities conducted within this program, the objective of

providing the most effective and up-to-date medical care in VA hospitals and clinics can be achieved. The program is conducted through a variety of educational modes. Approximately 2,905 lectures by experts in most medical and allied disciplines were delivered during FY 1972. There were 89 visits of several days duration made by senior medical and dental teachers to peripherally located and other non-affiliated VA hospitals. Assignments of 6,260 staff were made to selected VA hospitals, for special training, or to conferences held under VA auspices. Two examples of such specialized training activities are a program for career physicians in Spinal Traumatology which was begun in FY 1972 at the VA Hospital, Long Beach, Calif., and two administrative workshops for young staff dentists. The latter were designed to strengthen interaction between the dentist at the chair and the staff of the Assistant Chief Medical Director for Dentistry. About 16,670 employees were detailed at VA expense to non-VA courses, institutes, workshops, seminars, conferences, clinics, and meetings conducted by professional organizations, universities, and medical schools.

### **Exchange of Medical Information**

The Exchange of Medical Information (EMI) Program supported twenty pilot projects in FY 1972. Every VA hospital was involved in at least one of these projects. These innovative activities are designed particularly to strengthen those VA hospitals not affiliated with medical schools or located remote from medical teaching centers, as well as to foster ". . .the widest cooperation and consultation among all members of the medical profession . . ." (38 U.S.C. 5054). The following are typical of the pilot projects conducted under this program.

(1) A closed circuit two way television system, known as the Veterans Administration-Nebraska Television Network, operates between the VA hospitals at Omaha, Lincoln, and Grand Island, Nebr., the Nebraska Psychiatric Institute, and the University of Nebraska Medical Center, the latter two of which are located in Omaha. Creighton University School of Medicine and the University of Nebraska College of Dentistry are also being added to this network. The system,

which is in daily use, enables the facilities and expertise of the professional schools and affiliated institutions on the network to be immediately available to hospitals and practitioners as distant as 120 miles. This system has been particularly beneficial in assisting in the delivery of health services at the VA hospitals in Grand Island and Lincoln, as well as to the non-VA health professionals located in communities located remote from Omaha.

(2) A project called the Cartridged Film-Guest Lecture program has been developed in conjunction with the Medical Media Network of the University of California at Los Angeles. As a pilot program, it has progressed through various stages of development. In FY 1972, it reached 89 VA hospitals throughout the country, each of which received 18 filmed programs, directed primarily to physicians and nurses, and three "live" lectures, over a period of 36 weeks. In addition, the Medical Media Network produced four films, in FY 1972, particularly concerned with, and directed to, the most urgent medical and nursing problems in the VA. The 18 films dealt with medical and nursing subjects of current interest to the professional staffs at each installation, and to surrounding medical and nursing communities. The subjects of the "live" lectures were coordinated with those of the films, thus providing the basis for extended interchange between staff members, guests, and lecturers. This program also established a library of films which are available on call from any of the participating hospitals.

To insure that this program provides opportunities for active and individualized learning experiences, as opposed to passive viewing of films, comprehensive study guides were prepared for the programs. They include bibliographies, self-testing devices, outlines of key program points, and other useful hints for more effective utilization of the material presented. Interest in this program on the part of VA staff, and health professionals in the communities surrounding the participating hospitals, has been extensive. The number of individual film viewings for FY 1972 was approximately 160,000.

(3) In FY 1972, a pilot program to determine the feasibility of utilizing closed-circuit,

color television in the instruction of endoscopic procedures was initiated at the VA Hospital, Lake City, Fla. The primary difficulty with the present methods of teaching endoscopy is that only one physician at a time can view endoscopic findings. This instructional method requires a prolonged patient examination time. The pilot technique will allow two or more physicians, medical students, or paramedical personnel at different locations to see the same endoscopic view simultaneously and also provide for the recording, editing, and storing of video "libraries" of endoscopic and similar examinations.

(4) A diagnostic nuclear medicine network is being developed to provide a solution to the problem of providing expert nuclear medicine services to patients in outlying VA and other hospitals. The VA Hospital, St. Louis, Missouri (Cochran Division) will serve as the "core" facility, and the network will join rural VA and community hospitals, and perhaps other federal medical installations, to the core. Advanced electronic techniques will be utilized to transmit vital patient data from the peripheral facilities to the core hospital. Medical specialists at the core hospital will provide analysis, interpretation, and diagnosis utilizing specialized diagnostic aids and equipment not available at the peripheral institutions. Included will be analysis of data produced by radionuclide imaging devices, such as gamma cameras and rectilinear scanners, as well as other *In Vivo* and *In Vitro* tests.

### Medical Illustration

In FY 1972, Medical Illustration Services were functioning in 90 VA hospitals. They produced large numbers of audiovisual items for use in education and training throughout the VA system, including still materials, motion pictures and video tape recordings, in a wide range of medical and allied subjects.

The successful summer internships offered to qualified students enrolled in photographic courses at Rochester Institute of Technology were continued in FY 1972. Four internships were made available for 75-day periods to provide young trainees with broad experience in medical illustration functions while exposing them to a VA career. The VA hospitals at

Durham, N.C.; Houston, Texas; Syracuse, N.Y.; and Palo Alto, Calif. were the sites, selected on the basis of the scope of their medical illustration programs, the interest of their professional staff, and the potential for meaningful and relevant technical exposure.

In FY 1972, 80 new scientific exhibits were produced, and there were 141 separate exhibit showings.

Medical Illustration Staff continued its inter-agency liaison function on the Federal Agency Council on Medical Training Aids, the Committee on Scientific Exhibit for the Association of Military Surgeons of the U.S., and the Interagency Board of U.S. Civil Service Examiners.

### MEDICAL RESEARCH

VA medical research covers the spectrum of biomedical science from pure laboratory studies of basic biologic processes to practical clinical applications. The extensive, hospital-based system of patient care stimulates VA scientists to pursue work with a clinical orientation, and allows for the progression from discovery of a basic phenomenon to clinical application.

The prime purpose of VA biomedical research is the generation of new knowledge. However, because the VA's Department of Medicine and Surgery is primarily a system for health care delivery, the VA research program serves not only in quest of knowledge but also to insure high quality patient care by providing an intellectual milieu of highly qualified physicians needed to do research and to staff the patient care and education programs.

During FY 1972, medical research programs were conducted in 132 VA hospitals and four outpatient clinics. A total of 5,401 research investigators participated in 5,267 research projects and 36 cooperative studies. They contributed 5,100 reports published in professional and scientific journals and presented 4,523 papers at medical meetings. Following are numbers and types of investigators involved:

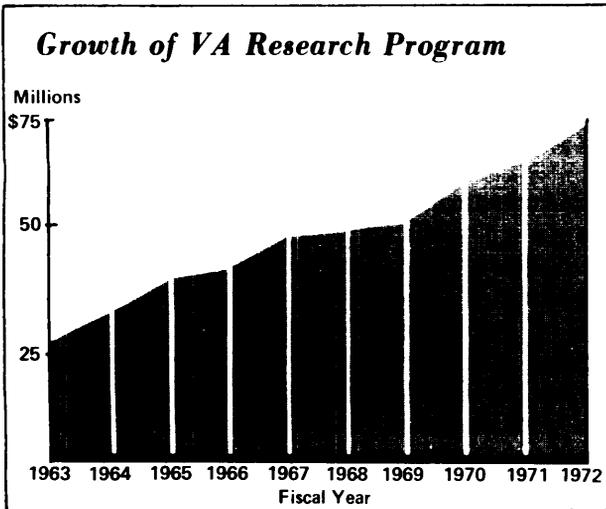
	No. of Investigators
Total . . . . .	5,401
Staff Physicians . . . . .	2,059

TABLE-Continued

	No. of Investigators
Consultants and attending physicians . . . . .	739
Interns and residents . . . . .	220
Dentists . . . . .	112
Research fellows . . . . .	35
Ph.D.'s . . . . .	822
Doctors of veterinary medicine . . .	5
Other scientific personnel . . . . .	509
Without VA compensation . . . . .	900

TABLE-Continued

Research Category	No. of Research Projects
Physical medicine & rehabilitation . . . . .	92
Pathology . . . . .	189
Nuclear medicine . . . . .	206
Laboratory animal medicine, science and technology . . . . .	23
Basic science . . . . .	275
Dental . . . . .	174
Spinal cord injury . . . . .	25



The funded research programs in fiscal year 1972 are identified below by medical specialty and number of projects in each category:

Research Category	No. of Research Projects
Total . . . . .	<u>5,267</u>
Cardiovascular-renal . . . . .	498
Respiratory . . . . .	218
Allergy & infectious diseases . . . . .	245
Hematologic . . . . .	209
Metabolic & endocrine . . . . .	348
Nutritional . . . . .	28
Digestive system . . . . .	239
Musculoskeletal & skin . . . . .	110
Other (not elsewhere classified) . . .	197
Surgery . . . . .	814
Neurology, psychiatry, psychology, social work . . . . .	1,377

A few examples of medical research follow:

**Cooperative Studies**

Cooperative studies began in the early years of the VA medical research programs. In a cooperative study, investigators from a number of different VA stations agree to study a selected problem under uniform guidelines. These studies rapidly amass significant statistics from the largest volume of clinical material available to any single agency in the Western World. The first of these cooperative studies, initiated in 1946 in cooperation with the Armed Forces, on the chemotherapy of tuberculosis, became one of the best known contributions to patient care in providing an orderly and effective introduction of drugs and antibiotics into the treatment of tuberculosis in the VA system. This has contributed to a reduction of more than 85 percent in the tuberculosis patient case load in the past 15 years.

This past year, more than 51,000 VA patients were treated for cancer. Large-scale cooperative studies are being conducted to determine which of the three available treatment programs—drugs, surgery, or X-ray therapy—is the most effective. Other studies look for hormonal influences on malignancy of causation, and various aspects of metabolism and regulation of malignant tissues.

The cancer chemotherapy group, now consisting of 25 hospitals, has screened more than 23,000 patients with cancer of the lung, stomach, and large bowel, for possible inclusion in one of the various protocols. Of these, 10,219 patients have been entered into controlled therapeutic trials to determine the possible benefit of

adding anticancer drugs or radiotherapy to conventional surgical treatment.

The completion of the VA cooperative Study on Antihypertensive Agents, which received the \$10,000 Albert Lasker Clinical Award, provoked national and international action. For example, the National Heart and Lung Institute has initiated a series of contracts in which the effectiveness of drug treatment will be assessed in various types of population groups. The Intersociety Commission on Heart Disease Control is recommending guidelines to the Regional Medical Program for resources, needed to control hypertension, which emphasize the importance of prevention demonstrated by the VA study. The American Heart Association has established a committee to facilitate public and professional education in the importance of treatment of hypertension. The World Health Organization is establishing projects in stroke prevention in hypertensive patients based on the results of the VA trial.

Planning and consultation for cooperative studies in psychiatric care are provided by an executive committee composed of selected investigators from VA hospitals and clinics, central office personnel, and a small staff of academic and industrial consultants. Implementation and monitoring of the studies and data analyses are carried out by the Central Neuropsychiatric Research Laboratory, VA Hospital, Perry Point, Maryland. The program is now in its 17th year of investigations associated with the treatment of psychiatric patients. For the most part, the emphasis has been on the evaluation of chemotherapeutic agents.

### **Recent Contributions**

Investigators at the VA Hospital, Bronx, N.Y. have been recognized by a number of major awards for their work on the development of radioimmunoassay techniques for measuring minute quantities of hormones, drugs, and other substances in the blood—techniques which are revolutionizing clinical chemistry—and for applying these techniques to psychologic problems in a clinical setting. Important accomplishments in the past year were their discoveries of new hormonal forms of gastrin and ACTH and the development of a radioimmunoassay for Australia antigen. This antigen is currently be-

lieved to be associated with the development of transfusion hepatitis. If the technique can be developed as a screening procedure for use in blood banks, a fundamental step in the prevention of transfusion hepatitis will have taken place.

The discovery of the principle of radioimmunoassay by VA investigators has also allowed development of assays for minute quantities of drugs, such as digoxin. Digoxin assays have been important recently in determining the reliability of various pharmaceutical preparations of that drug. Recent improvements in the technique make possible accurate measurements of most known circulating constituents of body fluids.

An investigation at the VA Hospital, New Orleans, La., completed important studies in the isolation, analysis and synthesis of a new hormone during the past year. This hormone (luteinizing hormone releasing hormone—LF-RH) stimulates fertility and promises the development of a contraceptive free of harmful side effects and capable of providing long-term immunity from conception. The availability of a new hormone for research opens up vast areas for exploration which promises significant advances and practical applications in medicine and related fields. Since hormones regulate metabolism, their importance in understanding and controlling disease is virtually unlimited. Some of the broad fields that may benefit from such research are those of birth defects, cancer, growth and development, and derangements affecting any of the major organ systems of the body.

In the surgical research laboratory at VA Hospital, Denver, Colo., major advances have been made in immunosuppressive therapy during the last fiscal year. A new chemical, cyclophosphamide, has been used to replace azathioprine, previously considered the keystone of anti-rejection therapy. Advances have also been made in understanding the phenomenon of hyperacute rejection, the virtues and limitations of histocompatibility typing, the role of hepatitis in causing late morbidity after transplantation, and the transplantation of extra-renal organs, including the liver and heart.

### **Research in Oral Diseases**

In FY 1972, more than 100 investigators in

the VA research program in oral diseases conducted a wide diversity of research projects relating to oral tissue metabolism, oral functions, and oral pathology.

A VA researcher at the Monell Chemical Senses Center, in a joint program with the VA Hospital, Philadelphia, Pa., has isolated a new natural sweetener up to 3,000 times more intense by weight than sugar. It is the first reported protein to elicit a sweet taste in man, and is the sweetest natural product known. Carbohydrate-free, the product named, "Monellin," could have potential as a sugar substitute in dental programs aimed at reducing tooth decay.

Prominent among research studies are those involving the transmission of stress through restorative materials; age comparisons and regional deviations on decayed, missing, or filled teeth; the use and effects of tooth implants; and the potential effects of new antibiotics in preventing and curing oral bacterial infections.

The Oral Psychology Research Laboratory at the VA Hospital, Houston, Texas, continues to develop and test new products to preserve the oral health of veteran patients. The laboratory provides VA dentists with a complete range of therapeutic agents proven effective in the reduction of caries and periodontal disease, including an ingestible dentifrice for severely handicapped patients, stannous fluoride mouth rinses, and prophylaxis paste to reduce the incidence of caries in post-irradiation patients.

### **Hematology-Sickle Cell Disorders**

A most striking step taken in the past year has been the establishment of programs concerned with sickle cell disorders of veterans.

Early in the spring of 1972, studies were activated in 15 VA hospitals on the "Pathogenic Significance of the Sickle Cell Trait." Since roughly 8-10 percent of black veterans are affected with this problem, the hematologists at these hospitals are collecting data on the medical problems diagnosed during the hospitalization of black patients, with and without the sickle cell trait.

It is estimated that 50,000 to 60,000 subjects will be evaluated to learn whether the trait has any bearing on the general health of the affected veteran. The VA hospitals concerned with this program are: Chicago (West Side), Ill.; Brooklyn,

N.Y.; Cleveland, Ohio; Philadelphia, Pa.; Washington, D.C.; Allen Park, Mich.; New Orleans, La.; Jackson, Miss.; Miami, Fla.; Hines, Ill.; Little Rock, Ark.; Memphis, Tenn.; Tuskegee, Ala.; East Orange, N.J. and St. Louis Mo. The study should be completed by 1974.

A second pilot program initiated during the summer of 1972 is the screening of all black veterans admitted to seven VA hospitals. Counseling on the potential health hazard and advice along genetic lines will be given to the affected person. To advise veterans more fully, it will be necessary to examine the blood samples of wives and, in some instances, other members of the family (e.g. parents, children, siblings). All of these examinations will be voluntary, and counselling sessions will be held only with those persons who are willing to participate in the program. The possibility of transmission of the trait, or the more serious form of the disease, will be explained to persons affected for their consideration in family planning.

The VA hospitals involved in this study are: Birmingham, Ala.; Miami, Fla.; Dallas, Texas; Brooklyn, N.Y.; East Orange, N.J.; Buffalo, N.Y.; and San Francisco, Calif. As soon as sufficient experience is developed in these institutions, it is planned to extend this service to all VA hospitals in the United States.

In conjunction with the above program a search will begin for red cell enzyme deficiency, G6PD, which occurs in about 12 percent of all black people. Data will be included in the "Pathogenic Significance" group, and the effect of this red cell deficiency in these patients, and those having both disturbances, will be evaluated. The large number of persons examined will lend statistical significance to the final results.

### **Alcohol and Drug Dependence**

A study of 18 alcoholic patients indicated that thiamine propyl disulfide may correct thiamine depletion syndromes which are resistant to oral thiamine hydrochloride (vitamin B<sub>1</sub>). This is apparently because the intestinal transport of thiamine propyl disulfide, unlike vitamin B<sub>1</sub>, is not rate-limited. This finding has clinical implications, since mal-absorption of thiamine preparations may be responsible for deficiency of this vitamin. Utilization of the VA

research program in oral diseases conducted a wide diversity of research projects relating to oral tissue metabolism, oral functions, and oral pathology.

Investigators at the VA Hospital, Wood, Wisconsin, have been studying newer drugs for abuse potential. Pentazocine, a popularly used analgesic drug was a subject of one important study. Five of six patients, who had received pentazocine regularly, developed varying degrees of withdrawal symptoms when given naloxone, a narcotic antagonist. The frequency and severity of the withdrawals seemed directly related to the dose and length of time the patients had taken pentazocine and to the dose of naloxone. This study was one of the first to highlight the abuse potential of this very popular analgesic drug.

One of the several marijuana studies conducted at the VA Hospital, Palo Alto, Calif., noted a decrease in the excretion of oxidative metabolites of catecholamines after the use of marijuana in man, suggesting a change in the metabolic pathway. An investigator at the VA Hospital, Houston, Texas previously demonstrated that the ingestion of alcohol produces a similar metabolic derangement. Such observations should help in further understanding of the mechanisms of metabolism or marijuana.

## **ADMINISTRATIVE ACTIONS AND IMPROVEMENTS**

### **Regionalization**

The Veterans Administration has moved progressively in the direction of regionalization through affiliations with medical schools, sharing agreements, cross-servicing with other Federal agencies, utilization of consultants and attending physicians, and the establishment of certain specialized medical services on a regional basis. Regionalization, the delivery of health services on an area basis, was first implemented by the VA on July 1, 1970, with the activation of the Southern California Medical District.

During FY 1972, the VA completed the realignment of its patient care delivery system into 37 Medical Districts. Each Medical District is composed of two or more health care facilities which function as a health care system.

The VA embodies an organized system of health facilities distributed across the nation. Ninety percent of all veterans are within 100 miles, or 2 hours reach, of a VA facility or service. Coordinating the operations of this network of hospitals, extended care facilities, clinics, and nursing home facilities in a regionalized effort means that a veteran may enter the system at any convenient location, and thereafter be provided with the full range of medical and health services as he needs them.

Some significant accomplishments reported by activated Medical Districts are:

Hospital admission and inter-hospital transfer of patients have become speedier. Patients are cared for in hospitals best suited to their medical needs.

Medical consultation and education sessions are being arranged on a District-wide basis.

Multidisciplinary "Travelling Outpatient Clinics" are being established, where needed.

Affiliation of all VA hospitals in a Medical District with University Medical Schools is being extended to the maximum extent feasible.

Sharing agreements (contractual arrangements) between VA and community hospitals are resulting in more effective use of expensive equipment, facilities, and scarce category personnel.

Medical Districts are developing and maintaining more active interaction and participation with their designated Comprehensive Health Planning Groups, State Comprehensive Health Planning Advisory Boards, and Regional Medical Planning Advisory Groups.

### **Area Health Education Centers**

With instructions contained in the President's Health Message of 1971, the VA has cooperated with the Department of Health, Education and Welfare in the development of and support for Area Health Education Centers. This concept was first formally elaborated by the Carnegie Commission Report on Higher Education and the Nation's Health in October, 1970. It provides a mechanism whereby health professionals and allied health personnel can be trained at the community level to meet scarcity needs for health manpower, with the expectation that the output will be relevant to the community's needs, that the personnel will elect to practice in

the community, and that these communities and their neighboring institutions of higher education for health can utilize their resources optimally by developing coordinated programs, without duplication and with a new order of priority. Improvements in the methods by which care is delivered is an additional objective which may be attained through a number of mechanisms, the most immediately relevant one being the educational process.

The VA has cooperated with both HEW-Regional Medical Programs and NIH-Bureau of Health Manpower and Education. Eight currently non-affiliated VA hospitals have been provided planning money which has been used to organize the communities' health providers and educators into an educational consortium based on the VA hospital, but with the VA hospital being an equal member in the deliberations and requests of the consortium. This action began during FY 1972 with joint deliberations on selection, program development, guidelines, and mechanisms of support. As fully anticipated, some VA hospitals and their communities have proceeded more rapidly than others. Some problems have emerged such as the expected difficulty of bringing the divergent community institutions together to agree upon a common goal and to accept a share of responsibility. This has been resolved by bringing out the advantages of cooperation to the individual institutions, and by providing a neutral base at the VA hospital upon which discussions and negotiations may proceed. The potential threat of the VA hospital, as a Federal institution, acting as a full participating member, has been recognized in several localities but has not created a significant problem.

As we proceed into FY 1973, the VA sites identified for development of Area Health Education Centers (AHECs) have been reviewed. Continuation-funding for the core programs at the VA hospitals will be supported at the level of \$300,745. In addition, three of the VA AHECs have progressed to the point of requesting funds for operational educational projects. These have been reviewed, negotiated, and funded by the VA at a level of \$742,735 (for a total 1973 commitment of \$1,043,480). No new appropriations were requested for this program, and these funds are being made available from

our currently available health care education monies.

In May 1972, an opportunity was presented to our 8 VA AHECs to submit requests for funding to the RMPs. Six of the eight made application and were reviewed for merit under the RMP guidelines. All six of the group were awarded some funding, which varied in commitment from 1 year to 3 years, for a total sum of \$4,049,653 awarded to the local RMPs of which they are a part. Submission for VA hospital programs that will be included in the AHEC complex to be funded, by route of the medical schools by NIH-BHME is still to be considered, since the deadline for these proposals had not been reached at the time of this report.

The advantages to the VA of this activity are several, but most important among these is discharge of our responsibility to the President's health strategy, the benefits that this will mean to veterans, their families, and the general public in terms of better health for their communities, and finally, the national recognition that this has given, identifying the VA as a potential and cooperative source for the Nation's betterment. Only slightly less significant is the demonstration that two major Federal agencies can act in unison without duplication and with a common objective. Finally, the reorientation of these VA hospitals as educational institutions, with infusion of new people to the staff and programs directly related to patient care, brings a direct benefit of improved health for veterans.

### **Sharing Specialized Medical Resources**

Significant progress was made during FY 1972 in sharing specialized medical resources under the provisions of Public Law 89-785.

Under this law, VA hospitals having highly specialized and costly resources which are not utilized to the maximum for veterans can make such excess capacity available to community hospitals, thereby eliminating the need for the community hospitals to establish a duplicate resource. Conversely, the VA can utilize similar-type resources, in the community, for veterans. Such agreements for the sharing of specialized resources can, of course, be accomplished only when they involve no imposition on the care and treatment of veterans, and provision is made for reciprocal reimbursement. During FY 1972, 60

VA hospitals participated in these programs, involving 94 individual contracts constituting exchange of specialized medical resources evaluated at approximately \$2 million.

Most of the sharing agreements are renewed or renegotiated at the end of each contract year. For example, a sharing agreement originally entered into by the VA Hospital, Denver, Colo., in 1967, wherein organ transplant resources have been shared, has continued, with further work in liver as well as kidney transplants.

Many VA hospitals have shared their renal dialysis facilities with community hospitals; conversely, many VA hospitals have obtained needed specialized services such as cobalt and radiation therapy from community hospitals under sharing, and have thus avoided the necessity of placing these costly items in the VA hospitals. VA beneficiaries at the VA Hospital, Chicago (West Side), Ill., are receiving neurological services from the University of Illinois Hospital as a result of a sharing contract.

### **Evaluation of Medical Care**

To assure the consistent delivery of quality medical care, criteria for the evaluation of management of the various disciplines in hospitals have been developed. This material will be used by medical district evaluation teams in assessing the operating efficiency of VA hospitals.

Further, considerable attention has been devoted to the development of methods for the evaluation of the quality of patient care delivered in VA hospitals and clinics. In a few instances, existing methods and principles have been adapted for VA use, but for the most part, new approaches have been necessary.

This project includes the development of district evaluation teams to provide for evaluation of the quality of medical care in each VA medical station. Forms have been developed, for the use of these teams, which permit the application of consistent standards of measurements between stations, detailed instructions for the procedures involved; and guidelines for the use of both physicians and nonphysician participants in the evaluation process. Included is the development of a questionnaire to elicit the patient's own estimate of the quality of the medical care he has received, an essential cri-

terion in the assessment process. Finally, measures for the processing of the information developed by district evaluation teams, including ADP methods and procedures, have been developed. Field testing is scheduled during FY 1973.

### **Research and Development in Health Services**

This activity provides for the planning and management of a department-wide program of research and development in health services delivery systems, including study conduct. The objectives of this activity are to improve the effectiveness and economy of delivery of health services and to improve the accessibility of services to veterans, through the adoption or invention of new or improved modes of organization and management, operational procedures, technologies, instruments, etc. To achieve these objectives, VA's Health System Research and Development Service sponsors and monitors studies and projects proposed by field stations and Central Office staff, as well as proposing, developing and conducting studies with its own personnel. The approach is to identify, staff, and fund those projects having the highest probability of positive impact on the delivery of health care and also of wide system applicability. The current program includes:

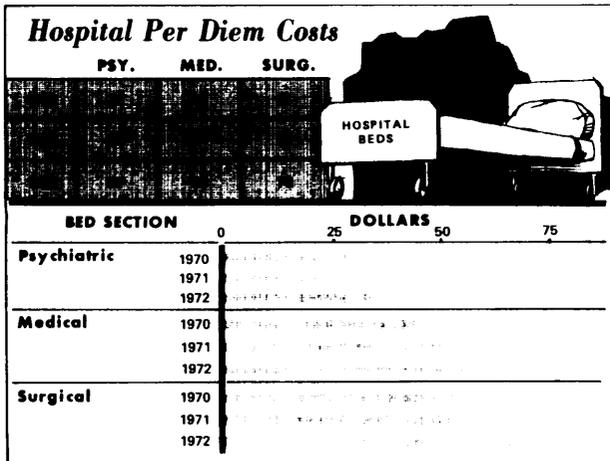
- Test of an automated anesthesia delivery machine
- Pilot project for the development and evaluation of nurse clinics
- Experimental determination of safe levels of current leakage for electromedical devices
- Experimental implementation of an ambulatory care model
- Productivity measurement
- Service elevator requirements study
- Experimental implementation of a regionalized clinical laboratory service
- Study of the application of principles of continuous flow kinetics to increase rates of

analysis and decreased operational costs of autoanalyzers.

## SUPPORT

### Operating Costs

The cost to operate VA's Department of Medicine and Surgery programs during FY 1972 totalled \$2,374,245,000, an increase of \$366,708,000, or 18.3 percent over FY 1971.



Legislated salary increases approximating \$96,896,000, accounted for a major part of the dollar increase. Other areas where increases above the FY 1971 level resulted from rising costs and usage were:

	Increase	
	Amount	Percent
Drugs and Medicines . . . . .	+\$12,509,000	20.4
Blood and Blood Products . . . . .	+ 915,000	21.0
Medical and Dental Supplies . . . . .	+ 9,629,000	24.2
Prosthetics and Prosthetic Repairs . . .	+ 4,591,000	26.4

In addition, outpatient costs continued to rise in FY 1972, increasing 25.0 percent over FY 1971. This rise was due mainly to the continued discharge of Vietnam veterans to the VA, the continued impact of new treatment modalities within the VA hospital system, which decrease the patient's hospital stay and release him for further treatment as an outpatient, and continuing effects of 1971 legislation which liberalized benefits related to outpatient services.

The following table shows the cost of operation of VA's Department of Medicine and Surgery, by major activity during FY 1972.

Activity	Gross Cost (in thousands)
Total . . . . .	\$2,374,245
Medical administration . . . . .	15,630
Medical research . . . . .	66,809
Prosthetic research . . . . .	2,245
Postgraduate and inservice training . . . . .	4,556
Exchange of medical information . . . . .	2,244
Inpatient care: . . . . .	1,744,814
VA hospitals . . . . .	1,569,257
Non-VA hospitals . . . . .	22,816
Hospitals . . . . .	1,592,073
VA nursing care . . . . .	60,589
Non-VA nursing care . . . . .	30,366
Nursing home care . . . . .	90,955
VA domiciliaries . . . . .	49,491
State home domiciliaries . . . . .	7,897
Domiciliary care . . . . .	57,388
VA restoration centers . . . . .	4,398
Outpatient care . . . . .	375,286
Education and Training . . . . .	117,322
Miscellaneous benefits and services . . . . .	40,067
Research and Development in Health Services . . . . .	1,415
Maintenance and operation of Supply depots . . . . .	3,857

As shown in the following table, there were increases in the per diem costs in all VA inpatient facilities. (All per diem costs shown are computed from net budgeted costs.)

Type of Facility	Fiscal Year		Changes	
	1971	1972	Amount	Percent
Medical Bed Sections . . . . .	\$50.62	\$57.83	\$ + 7.21	+14.2
Surgical Bed Sections . . . . .	60.33	73.74	+13.41	+22.2
Psychiatric Bed Sections . . . . .	30.48	37.28	+ 6.80	+22.3
All hospitals . . . . .	43.41	52.87	+ 9.46	+21.8
Domiciliaries . . . . .	9.97	11.90	+ 1.93	+19.4
Restoration centers . . . . .	16.94	19.02	+ 2.08	+12.3
Nursing home care units . . . . .	27.26	30.43	+ 3.17	+11.6

### Supply

The total FY 1972 VA Supply Fund sales were valued at \$173.9 million. This represented an increase of \$32.5 million, or 23 percent over those of the previous year.

The VA not only supports its own medical and benefits programs but also, through purchase, provides other Federal medical programs with a source for drugs, medical supplies and equipment, and non-perishable subsistence items. It is the primary source of supply to 18 civil agencies for such items.

In FY 1972, the issues and sales of Supply Fund stocks in the VA Supply Depots to VA stations and other Government agencies amounted to \$71,101,040. This was \$11,255,355, or 18.6 percent, greater than in FY 1971.

The volume of issues of centrally procured drugs for distribution through the VA Supply Depots has increased annually during the past several years. Such issues have increased from \$14.8 million in FY 1968 to \$33.4 million in FY 1972, or 126 percent.

The VA Marketing Center purchased supplies and equipment for direct delivery to VA stations and other Government agencies, in the amount of \$31,693,346. This was 72.7 percent (\$13,338,589) greater than the FY 1971 acquisitions.

This agency has three main storage and distribution points located at Bell, Calif.; Hines, Ill.; and Somerville, N.J., using approximately 1,000,000 square feet of space for the storage of about 2,000 food, medical, and general supply items. Several commercial warehouses are also used for the storage and distribution of frozen fruits, juices, vegetables and meats. Each year, approximately 44,000 tons are shipped to VA facilities, and another 2,000 tons to facilities of other Government agencies. The 46,000 tons shipped from the three locations in FY 1972 contained about 588,000 line items.

As an example of interagency cooperation, about 39 percent of the VA hospitals purchased part of their perishable food from nearby Defense Supply Agency regional supply points. These purchases are made when they are more economical than purchasing locally. In FY 1972, these purchases amounted to approximately \$3.6 million, or 12 percent of all hospital perishable food purchases.

During FY 1972, VA continued serving the Veterans Memorial Hospital, Republic of the Philippines, under Public Law 88-40 by furnishing medical supplies and equipment procured through the VA Supply Fund, at a value of \$341,566.

The VA has participated in the Small Business Program since its inception and will continue its support. VA's report to the General Services Administration on Procurement by Civilian Executive Agencies for FY 1972 shows that 59.4 percent of the total VA procurement was

from small business, an increase of 15.9 percent over FY 1971. VA's participation in the section 8(a) program of the Small Business Administration has grown each year. There were six contracts for \$981,666 in FY 1970, 122 contracts for \$4,885,938 in FY 1971, and 191 contracts for \$9,510,855 in FY 1972.

The VA has actively participated with the President's Advisor on Consumer Affairs, other agencies, and industrial and professional organizations in matters of consumer interest. All VA field station directors were advised of the Administrator of Veterans Affairs' interest in helping the American consumer; VA stations are making the Consumer Product Information Index (published by the Consumer Product Information Coordinating Center) available to employees, patients, and the public in lobbies and canteens; the VA has provided a number of publications for listing in the Index and dissemination through the coordinating center; the Director of VA's Supply Service is a member of the Interagency Advisory Council on Consumer Product Information; VA also holds memberships in the Consumer Council and Certification Committee of the American National Standards Institute.

The VA continues to lead in the application of performance and safety requirements in medical equipment. Agency representatives, including physicians and equipment specialists, are active members of safety and reliability committees of the American National Standards Institute and the Association for the Advancement of Medical Instrumentation. VA has also established an effective coordination with the other Federal agencies, directly on the technical level and through the Intra-governmental Professional Advisory Council on Drugs and Devices. This relationship between the professional user and the administrative supplier provides a team examination of medical devices for diagnostic accuracy, quality, and dependability. Joint membership in standards setting societies provides the agencies with information on newly developing devices and allows for a two dimensional consideration of highly technical instrumentation.

VA has led in developing the first effective technical specification for modern package-type incinerators, as demonstrated by the number of requests VA has received from other agencies for

copies of its specification, and for guidance. Each VA installation will review its equipment regularly, to ensure that the standards are still being met.

Waste compactors are being used more widely to reduce the volume of hospital waste. (Waste is compacted to approximately one fifth of its original bulk.) Because of the lack of standard equipment specifications, the VA is participating in a National Sanitation Foundation Task Force Committee for the development of a uniform, nationally accepted standard. The standard will be based on research facts and on sound engineering and sanitation practices.

The use of carpeting in hospitals is receiving increased acceptance because of reduction of sound levels, thermal qualities, patient safety and comfort, and other benefits. The VA has defined specific areas in which carpeting may be used in hospitals, and has prepared safety standards on anti-static properties, flame spread, and smoke development ratings for all carpeting and cushioning used by the VA.

Flame resistant patient bathrobes are now being delivered to VA hospitals which, when used with flame resistant pajamas, afford additional protection to disabled patients. Work continues with the textile and chemical industries in developing other acceptable flame resistant linen items for use in high risk areas.

The VA has published Preventive Maintenance Standards for over 800 categories of items, and equipment use standards for over 1,200 categories of items. Stations use preventive maintenance standards as guidelines in performing periodic inspections and maintenance operations on in-use equipment. Use standards are the criteria by which a determination may be made as to when and in what quantity certain types of equipment are authorized for use within the VA to accomplish its mission.

To provide veterans with medical care equal to that available in the better community hospitals, the VA carries out a continuing program for replacement and modernization of equipment. During FY 1972, \$21,417,000 were allocated for equipment replacement.

Efforts were continued to utilize personal property within the Agency. Through redistribution, over \$2.1 million in usable excess property was utilized, 37 percent of all such property at stations. In addition, \$2.1 million of excess

property was acquired from other Government agencies.

A program launched in 1972 to provide two-way radio equipment to each hospital is nearing completion. As scheduled, all stations were surveyed by June 30, 1972, and an all-out effort is being made to complete installation by December 13, 1972. A continuing phase of this program, now in the planning stage, is to provide each VA hospital with equipment to allow direct participation in community networks where these have been established. This will tie in with the planned community Emergency Medical Care program.

A simple, prefabricated patient bedside console combining oxygen, air, vacuum, nurse call, and other utilities, was developed for hospital modernization programs, to lessen cost and expedite installation in these projects. Previously, each of these items was individually installed in the walls, with a great deal of extra labor.

## Facilities

**Total Construction Program**—Operation of a large health care program requires support from a widespread system of hospitals. Distribution of these facilities is allocated to geographic area according to current veteran population and utilization statistics, and to anticipated migration.

New VA hospitals are constructed, as needed, where none exist or to replace obsolete hospitals. The construction program also includes modernization, alteration, and improvement of existing VA facilities.

In FY 1972, construction was completed on 88 projects at a construction cost of about \$134.7 million, including three relocation hospitals of 800 beds at San Diego, Calif., 720 beds at Tampa, Fla., and 470 beds at Columbia, Mo., and a replacement hospital of 476 beds at Northport, NY.

At the end of the fiscal year 135 projects with a construction cost of about \$160.9 million were under construction, including two projects under the replacement and relocation program which provide 1,130 beds at an estimated cost of \$49.6 million. These are located at Lexington, Kentucky, and San Antonio, Texas. Eight additional projects have been authorized for this

Description	Statistical table number	Construction status							
		Total		Completed		Under construction		Authorized but not under construction	
		Number	Estimated construction cost (million dollars)	Number	Estimated construction cost (million dollars)	Number	Estimated construction cost (million dollars)	Number	Estimated construction cost (million dollars)
1	2	3	4	5	6	7	8	9	
Total . . . . .		306	619.9	88	134.7	135	160.9	83	324.3
Replacement and Relocation									
Hospitals . . . . .	42	14	365.4	4	93.2	2	49.6	8	222.6
Modernization . . . . .	43	21	86.5	5	8.8	13	51.6	3	26.1
Domiciliary . . . . .		1	1.4	0		0		1	1.4
Nursing Home Care Units . . . . .	44	21	5.3	13	2.1	2	1.8	6	1.4
Research Facilities . . . . .	45	21	45.8	7	7.9	6	9.7	8	28.2
Other Improvements . . . . .	46	228	115.5	59	22.7	112	48.2	57	44.6
(a) Air Conditioning . . . . .	46-I	19	49.0	7	10.2	3	8.2	9	30.6
(b) Hemodialysis Units <sup>2</sup> . . . . .	46-II	5	.4	3	.2	1	.0	1	.1
(c) Intensive Care Units . . . . .	46-III	53	12.2	14	3.9	29	6.1	10	2.2
(d) Other . . . . .	46-IV	151	53.9	35	8.4	79	33.9	37	11.7

<sup>1</sup>As proposed project for Wood, Wisc., is the only project in this category, a separate table was not prepared.  
<sup>2</sup>One Hemodialysis project combined with Intensive Care Unit project and reported in that category.  
Note—Because of rounding, details do not necessarily add to totals.

program and are under design or development but not yet under construction.

In addition to the replacement, relocation and modernization program, the VA has been constructing nursing home care units, medical research facilities, special care units, and a wide range of other improvement projects such as air conditioning, hemodialysis units, intensive care units and spinal cord injury units. The VA also has been updating electrical systems and boiler plants, and has undertaken projects dealing with safety hazard and pollution elimination, and correction of seismic deficiencies.

Total construction obligations incurred in FY 1972 amounted to \$84.6 million.

The accompanying table provides summary data on construction programs.

Congress appropriated \$3 million in FY 1972 for the State Hospital/Domiciliary Care program. Since the program's start in August 1970, seven States have been given approval to remodel existing hospital/domiciliary facilities. VA's financial participation amounted to about \$631,000, or 50 percent of the \$1,366,000 total construction costs.

Congress appropriated \$5 million in FY 1972 for the State Grant Nursing Home Care program. Since the program's inception, 16 States have been given approval for 24 construction projects involving 2,891 nursing home care beds. Financial participation by the VA approximates \$20.5

million, or 46 percent of the \$45 million total construction costs.

**Earthquake Engineering Program**—Since the occurrence of the San Fernando earthquake on February 9, 1971, the VA has appointed an Earthquake and Wind Force Committee to study existing building codes and develop new criteria, standards, and procedures—(1) for the design of our new hospitals, and—(2) for strengthening existing hospitals. One of the committee's principal recommendations has been to determine seismic risk at a hospital site instead of using generalized seismic risk maps. The latter classify large geographical areas according to seismic activity. In consonance with this recommendation, the VA is employing private consultants to investigate VA hospital sites in areas of moderate to heavy seismic activity. In addition, the National Oceanic and Atmospheric Administration is installing and maintaining instruments to record earthquake motions at each of these sites.

**Construction Research**—As a part of the program to provide the most advanced concepts, materials and techniques in VA hospital design and construction, 12 research and development project studies in building technology were in progress during the year. The majority of these studies are being performed through contracts with private consultants. The reports on these

studies are used as the basis for establishing policy and technical criteria in the form of construction standards for the VA hospital program. In addition, the reports are made available to other Government agencies and the public.

Several of the more significant construction research projects either in progress or initiated during the year were directed to the systems integration approach to hospital design, to air conditioning of VA research facilities, to seismic and wind forces design criteria, to the VA Master Specifications for Construction, and to transport systems for VA hospitals. The systems integration research project was completed during the past year and the principles which were developed are being applied to the design of VAH Loma Linda, Calif., and VAH Bronx, N.Y. The study for air conditioning of research facilities was completed and the principles developed are being applied to projects presently in the design stage. The study to improve the VA Master Specifications is nearing completion. Most of the recommendations were implemented as the study progressed.

A study of transport systems for VA hospitals was initiated at the end of FY 1972. The objective of this study is to satisfy a need for providing new VA hospitals with the most efficient systems for the transportation of people, goods and information.

**Health Care Facilities Planning**—As a result of space planning criteria developed during the fiscal year, VA's Department of Medicine and Surgery now has completed space standards for a total of 48 basic hospital activities. Most recently, interim space criteria were developed for such specialized medical programs as drug dependency treatment centers, alcoholic treatment units, and ambulatory care facilities. Approaching completion are revised space criteria for dietetics, canteen, supply processing and distribution, and warehouse facilities. Criteria are used as a basis for developing space allocations for alteration or new construction of VA health care facilities. Space criteria applications have been computerized so that, within limitations, an input of anticipated workload will produce an approximate projection of required space for specific construction projects. Expansion and alteration of the computerized

Facility Planning and Construction system to improve flexibility is 80 percent complete.

During FY 1972, VA's Department of Medicine and Surgery, in addition to developing master plans for completely new hospitals such as that planned for Loma Linda, Calif., completed requirements for 164 other construction projects estimated to cost \$85,908,000. These included 37 intensive care units, facilities for 30 specialized medical programs, and the correction of electrical deficiencies at 22 hospitals. Other projects provided air conditioning systems, added nursing home facilities, and provided or expanded space for research, education, or outpatient needs. In other construction planning, provision was made for eliminating safety and fire hazards, and for improving such systems as nurses call or centralized oxygen.

VA's Department of Medicine and Surgery personnel conducted inspections of varied construction projects during the fiscal year to assure satisfactory functioning of completed facilities. Prior to activation, local staff are trained in the operation of new and sophisticated equipment. New VA hospitals at Columbia, Mo., and San Diego, Calif. were activated. Action was also taken to prepare for anticipated future activation of major projects at the VA hospitals at Tampa, Fla.; Dallas, Texas; Waco, Texas; Lexington, Ky.; and Northport, L.I., N.Y.

A Management Information System is being used by VA in the programming of construction projects. This system monitors actions taken on a programmed construction project, from the planning concept and requirements development through completion of construction. Delays can be determined, and frequently corrected, so that the schedules for projects programmed for the fiscal year can be met. Initial phases of this system were incorporated into the VA reporting system in the FY 1972 program, and will be used as a means of meeting our commitments in future fiscal year programs.

VA conducted market surveys of potential suppliers of prefabricated or pre-engineered health care facilities which could be contracted for, erected, and occupied over a span of a few months. One such building, which met VA requirements for paramedical classroom-office space, was purchased and erected at the VA Hospital, Durham, N.C., in less than 9 months. This is the first and only such use of this type of

construction in the VA system, and performance reports on this facility have been most favorable. Plans are underway to purchase more and larger buildings of this type to satisfy demands at field stations for additional space for outpatient clinics, teaching classrooms, etc. As FY 1972 closed, a construction contract was awarded to erect a new pre-engineered building, also at VA Hospital, Durham, N.C., the first in the VA system to be used for outpatient medical treatment.

Following a decision to vacate the 1926-era buildings at the VA Hospital, Wadsworth, Los Angeles, Calif., a VA Central Office team was designated to plan for the orderly relocation of patients. An approach was devised to salvage this active teaching hospital through conversion and use of buildings located north of Wilshire Boulevard. Space utilization programs were developed on the spot and influenced the functional planning of the building to be altered. The relocation was accomplished in a relatively short period of time. In the interest of expediting permanent replacement of the Los Angeles hospital, the plan of the recently activated VA Hospital, San Diego, Calif., will be followed. This is expected to advance completion of construction by at least 1 year.

**Pollution Abatement**—The VA has continued a vigorous program of air and water pollution abatement as outlined in the National Environmental Policy Act of 1969 and the Executive Orders which followed the Act.

To reduce pollution, VA is installing 96 new

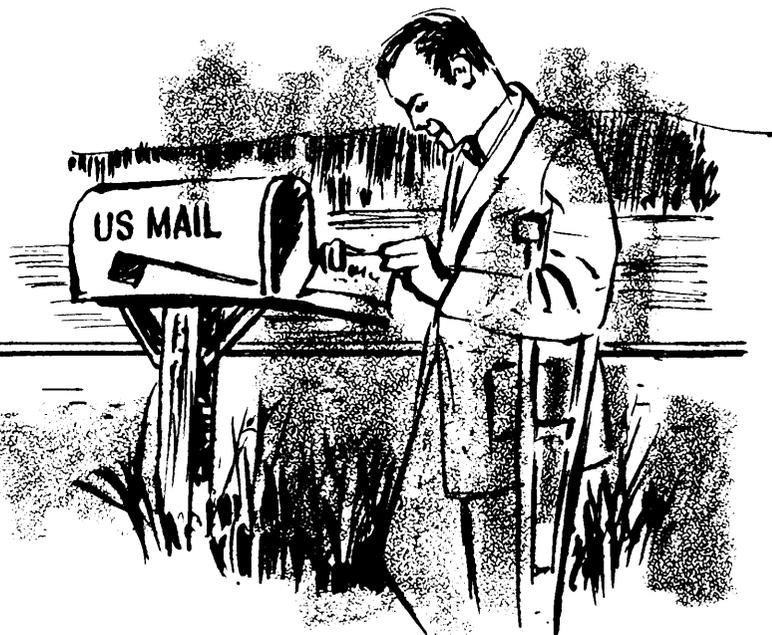
incinerators, at a cost of over \$3 million, with FY 1972 funds. These incinerators meet emission standards more stringent than those of the Environmental Protection Agency. VA is also replacing or converting seven coal-burning boiler plants with gas fired boilers, and replacing one heavy-oil burning plant with gas fired boilers, at a cost of about \$4 million.

Projects to update or replace sewage treatment plants or to negotiate tie-ins with municipal sewerage systems, at eight VA stations, were in the various stages of planning during the fiscal year. These projects will cost approximately \$3 million and will decrease water pollution of receiving streams.

**Hospital Security**—Major improvements in the capability of VA field stations to protect VA beneficiaries, visitors, employees and property were made possible in FY 1972 by the full implementation of a comprehensive protective program. Six hundred new protective officer positions were allocated to field stations, with priority given to those located within high crime areas. Higher protective personnel qualification standards, and mandatory centralized training of hospital police, were implemented. VA Department of Medicine and Surgery security and law enforcement procedural guidance (developed in coordination with the U.S. Department of Justice), an automated crime reporting system, and the positioning of a senior protective specialist in each of VA's medical regions, now enables centralized direction of efforts to reduce the impact of criminal conduct upon medical care programs.



# Compensation Pension . . .



## COMPARATIVE HIGHLIGHTS

	Fiscal Year		Percent Change
	1972	1971	
Cost (billions)	<b>\$6.2</b>	5.8	+ 6.9
Disability cases on rolls (thousands)	<b>3,268</b>	3,222	+ 1.4
Service connected	<b>2,182</b>	2,147	+ 1.6
Non-service connected	<b>1,086</b>	1,075	+ 1.0
Death cases on rolls (thousands)	<b>1,641</b>	1,584	+ 3.6
Service connected	<b>375</b>	373	+ 0.7
Non-service connected	<b>1,266</b>	1,211	+ 4.5
Guardianship cases	<b>730,532</b>	770,972	- 5.2
Incompetent Adults	<b>114,092</b>	114,751	- 0.6
Minors	<b>616,440</b>	656,221	- 6.1

## SUMMARY

The cost of providing compensation and pension benefits to veterans and their dependents exceeded \$6 billion in FY 1972. This amount was an increase of almost 7 percent from a year ago and represents an amount greater than was expended 20 years ago for all VA programs. The ever increasing cost is attributable to two primary factors: the addition of more veterans and

beneficiaries on the rolls, and payment increases granted by legislation.

Disability and death benefit caseloads were both above a year ago; disability by 45,000 and death by over 57,000. The disability caseload was affected primarily by the increase in Vietnam era veterans receiving compensation and World War II veterans receiving pension payments, offset in part by the removal through death of World War I veterans from both the compensation and pension rolls. World War I veterans reached an average age of 77.5 years on June 30, 1972. The rise in death benefit cases is attributable to all periods of service, including World War I. The caseload of benefits for dependents of World War I veterans, based on non-service connection (pension), rose in the past year from 604,500 to 620,300. The largest increase, however, was in World War II cases where a net increase of 30,000 was recorded.

During FY 1972 four statutes were enacted affecting the Compensation and Pension program. They were:

- **Public Law 92-169** (November 24, 1971) – This act provided for payment of Dependency and Indemnity Compensation (DIC) to survivors of servicemen promoted while missing in action – payment to be made on the basis of the highest rank to which promoted regardless whether the serviceman died prior to

the promotion and notice of death was received later.

• **Public Law 92-197** (December 15, 1971) – This law provided:

a. An average 10 percent increase in dependency and indemnity compensation benefits to widows.

b. An average 5 percent increase in benefits to children.

c. A general increase in DIC parents' rates and a \$300 increase in income limits.

d. An additional aid and attendance allowance for parents receiving DIC or death compensation as well as DIC helpless children.

e. Removal of the prohibition for payment of DIC benefits where an "in service insurance waiver" was in effect.

f. Protection against substantial reductions in monthly benefits based on increased Social Security or other retirement annuities.

• **Public Law 92-198** (December 15, 1971) – This legislation provided:

a. A general increased schedule of pension rates for both disability and death pension.

b. Increased income limits for protected pension as well as pension benefits under Public Law 86-211.

c. Provision for adjustment of VA benefits at the end of the year by reason of loss of a dependent.

d. Liberalized eligibility requirements for veterans of the Mexican Border War.

e. Protection against substantial reduction in monthly pension benefits when Social Security or other retirement annuities are increased.

f. Exclusion, from countable income, of amounts paid for unusual medical expenses.

• **Public Law 92-328** (June 30, 1972) – This legislation provided for an average 10 percent increase in disability compensation benefits, including additional amounts payable for dependents. It also provided a \$150 clothing allowance for certain service-connected veterans who wear prosthetic appliances or use wheel chairs.

## **DISABILITY COMPENSATION AND PENSION**

**Age of Beneficiaries**—The average age of all veterans receiving compensation or pension payments was 55.5 years. Those who were drawing disability benefits based on service connection averaged 49 years of age, while those who were receiving pension payments based on non-service connection were slightly over 68 years old. By far the largest single group of veterans in receipt of compensation were those between the ages of 50-54 years. World War II veterans accounted for 92 percent of the recipients in this age-group. The group containing the largest number of pensioners was the 75 to 79 age-group, and here the World War I veteran accounted for 87 percent of the total. At the extreme ends of the groupings were the Vietnam era veterans, average age 28.6, and the Spanish-American War veterans, age 93. One Indian War veteran, age 100, remained on the rolls.

**Degree of Impairment**—Of the 2.2 million veterans receiving disability compensation, almost 900,000 (approximately 40 percent) had been adjudicated as having a 10 percent degree of impairment. The 100 percent impaired group accounted for slightly under 6 percent of the total number. As shown in the accompanying chart, there is surprising uniformity in the degree of impairment granted, by period of service. This is particularly true of the veterans of the Korean and the Vietnam era conflicts.

**Period of Service**—World War II veterans make up 63 percent of the 2.2 million veterans receiving compensation for service-connected disabilities. The Vietnam era veteran has now overtaken the Korean conflict veteran, to become the second largest group. Vietnam era veterans represent 14 percent of the total, compared to 11 percent for those of the Korean

<b>Service-Connected Compensation Cases</b>		<b>Degree of Impairment</b>				
PERIOD OF SERVICE	0%	25%	50%	75%	100%	
WW II	0-30		40-60	70-100		
WW I	0-30			40-60	70-100	
KOREAN CONFLICT	0-30			40-60	70-100	
VIETNAM ERA	0-30			40-60	70-100	

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conflict. The World War I veteran accounts for only 3 percent of the total. The latter veteran does, however, make up the largest group receiving benefits for non-service-connected disabilities. Of the 1.1 million in receipt of pension, those with World War I service make up 52 percent. World War II accounts for 44 percent, with the remaining 4 percent distributed among all the other periods of service. It can be said that the typical veteran receiving compensation is a World War II veteran, 50-54 years of age, with an impairment evaluated at 30 percent or less. The current veteran pensioner would be typified by a World War I veteran, 75-79 years of age.

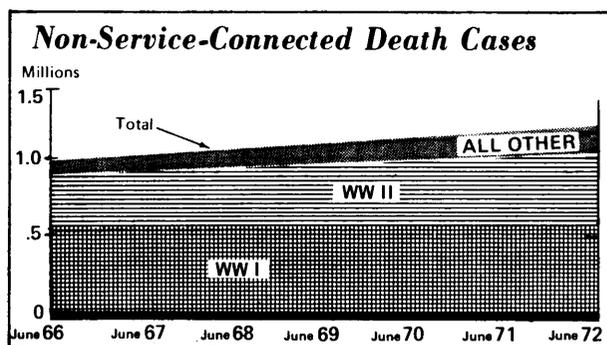
**Trends**—The recent declines in World War I and II veterans receiving compensation for service-connected disabilities has been more than offset by the addition of Vietnam veterans to the rolls. However, the net increase of 64,000 Vietnam era veterans in FY 1972 was the smallest in the past 3 years. At the same time, the loss of World War II veterans was the largest in recent years. A continuation of these two trends should reverse the overall upward trend in compensation cases in the foreseeable future. A contrary picture exists with pension cases. Only the World War I group is declining, primarily by death. More and more veterans of World War II are being added to the rolls as they reach the period of lessened income caused by advancing age and physical infirmities. As time goes on, they will be followed by both the Korean conflict and Vietnam era veterans.

## DEATH COMPENSATION, DIC AND PENSION

**Compensation and DIC**—On June 30, 1972, 375,354 service-connected death cases were on

the rolls, for which 524,500 dependents were in receipt of benefits. The largest group of beneficiaries were widows and children, although 40 percent were dependent parents. Interestingly, there are still over 800 dependent parents of deceased World War I veterans receiving death benefits. And even more surprising, 629 widows and children of deceased Civil War veterans are still on the rolls. As might be expected, the largest group of beneficiaries of death compensation or DIC are the survivors of deceased World War II veterans. This group accounts for 48 percent of the total number of dependents receiving benefits. The next largest group, almost 19 percent of the total, are the survivors of Vietnam era veterans. With continuing entitlement to benefits under the Vietnam era, this group could well become the largest beneficiary group within the next decade.

**Death Pension**—The number of non-service-connected death cases continued to increase. As shown by the chart, World War II cases have risen by over 182,000 or 54 percent in the past 6 years. If World War I experience can be used as a guide, this number will continue to increase for many years to come. In fact, World War I cases increased by over 15,000, or 3 percent, in the past fiscal year (more than 50 years after the end of that War). The “all other” part of the chart includes Korean conflict and Vietnam era non-service-connected death cases, as well as a sprinkling from earlier wars. These two “major” conflicts will also add to the number of cases in future years.



**Special Benefits**—In addition to regular compensation and pension benefits, the VA provides additional special benefits. These benefits take the form of additional allowances for house-bound veterans or those requiring aid and

attendance. The data below gives an indication of the number benefiting from the additional allowances and the changes that have taken place in the past year:

	June 30		Percent Change
	1972	1971	
Aid & Attendance Compensation	12,253	11,993	+ 2
Pension	107,994	101,802	+ 6
Housebound Compensation	7,096	6,969	+ 2
Pension	25,648	23,115	+11

### MINOR AND INCOMPETENT BENEFICIARIES

The protection of the rights of minor and incompetent beneficiaries—through overview of the administration of benefits payable on their behalf—is authorized under existing legislation. This program is administered by Chief Attorney offices located in all 50 States, the District of Columbia, Puerto Rico, and the Philippines. Through the respective American Consular offices and the VA counterparts in the English-speaking countries, supervision and assistance is provided beneficiaries residing in some 90 countries.

**Year of Change**—The problem of the marginally functioning individual has long and increasingly concerned the legal community and the agencies involved with providing services for such people. To reduce to a minimum the intervention and possible constriction of the constitutional right of the adult beneficiary to live as he chooses, a “supervised direct payment” procedure has been designed. The new procedure fills the gap between the “all” or “nothing” approaches—competent to handle all benefits payable without supervision or incompetent to receive any benefits direct from the VA and in need of a fiduciary. The adult beneficiary on the borderline of incompetency

who has not been declared legally disabled by a court, and whose situation is such that his interests may be adequately protected without the intervention of a fiduciary, is paid directly. An active file is maintained, and periodic personal contacts are made to evaluate the beneficiary’s status. If the beneficiary deteriorates to the point where a fiduciary is necessary, one is obtained. On the other hand, if the beneficiary improves to the point where the periodic contacts are unnecessary, payment direct without supervision is recommended.

**Expansion of Use of Federal Fiduciaries**—The VA regulations have been revised to redefine and clarify the authority of Chief Attorneys to designate as legal custodian a suitable person or legal entity who will agree to administer benefits payable and, if requested, account to the VA and furnish adequate estate protection guarantees.

The new procedures will result in considerable expansion of the use of legal custodians. The Chief Attorney may now vest a qualified person or entity having a personalized relationship to the beneficiary with the care of the beneficiary’s estate derived from VA benefits. Such a person will often be able to give more individualized consideration of the beneficiary’s specific needs than a court-appointed fiduciary.

In addition, the Chief Attorney now has all the options necessary to avoid hardship. He may designate a qualified person or entity as legal custodian on a temporary basis until any court-instituted barrier to direct payment is removed or until a court fiduciary, when required, can be appointed and certified.

**Legal Actions for Beneficiaries**—During FY 1972, 120,554 legal actions were completed, compared with 118,356 in the preceding fiscal year. About 50 percent of these were designed to prevent beneficiary hardships in fiduciary appointment and estate administration involving VA benefits or when restoration from legal disability was a condition precedent to direct payment of VA benefits.

# Education Benefits . . .



## COMPARATIVE HIGHLIGHTS

	Fiscal Year		Percent Change
	1972	1971	
Benefit Costs (millions)	\$ 1,954	\$ 1,651	+18.4
Post Korean Trainees (In thousands)	1,864	1,584	+ 17.7
Sons & Daughters	54,996	50,724	+ 8.4
Wives & Widows	9,560	8,796	+ 8.7
Voc. Rehab. Trainees	31,635	30,471	+ 3.8
Trainees Counseled	87,795	89,538	- 2.0

## SUMMARY

Almost 2 million veterans, servicemen and veterans' dependents trained under VA education programs during FY 1972. This number represented an increase of almost 300,000 over the preceding year, and is the largest number of individuals trained during any year under the current program. The cost of these programs reached nearly \$2.0 billion, increasing 19 percent compared with the previous year.

In a move designed to meet the increased workload brought about by these expanding training programs, a separate organizational activity was brought into being. It is similar in structure to that used by the VA to meet the

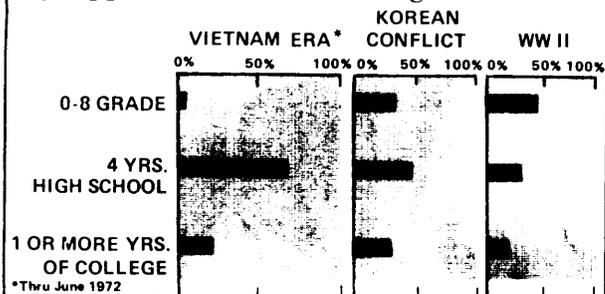
heavy demands of GI bill trainees after World War II and the Korean conflict.

## EDUCATION AND TRAINING

**Veterans Educational Assistance**—From the effective date of the program in June 1966 through June 1972, more than 3.3 million individuals have trained under the current GI bill. In the fiscal year just ended, almost 1.9 million individuals were in training, compared to 1.6 million in FY 1971 and 468,000 in FY 1967, the first year of the program. Approved training includes college or university attendance, business and technical schools, high school, and in some cases even schooling below the high school level. Assistance may also be authorized for on-job training, farm training, and correspondence courses. Servicemen currently serving on active duty over 180 days are also eligible for educational benefits. Of the 1.9 million individuals in training during the year, almost 140,000 were servicemen.

Today's veterans have higher educational qualifications than did their parents or brothers of World War II or the Korean conflict. Under the current GI bill only 7.8 percent of these veterans have not had at least a high school education compared to 39 percent for Korean conflict and 45 percent for World War II veterans.

### Educational Level of Trainees at Time of Application For Training



Over 57 percent of those in training during the year were at the college level, either graduate or undergraduate. Schools categorized as below college level, vocational or technical high schools, and high schools, accounted for 34 percent of the enrollment. The remaining 9 percent were in on-job training programs.

A look at selected trainee characteristics reveals the following (cumulative thru April 1972):

- |   | Percent |
|---|---------|
| • Paid educational assistance allowance for one or more dependent . . . . . | 43      |
| • College trainees attended public schools . . . . .                        | 76      |
| • Below college trainees attended private schools . . . . .                 | 87      |
| • College trainees attended full-time training . . . . .                    | 58      |
| • Below college trainees attended full-time training . . . . .              | 23      |
| • Males . . . . .   | 99      |

Continuing emphasis has been placed on increasing veteran participation in the education program. A year ago the VA began a special drive, as a part of the President's Six Point Program for Veterans, to develop additional opportunities for on-job training. Through June 1972, 100,063 establishments across the nation had been visited by VA representatives. As a consequence, more than 44,000 new training programs were developed with prospective employers. This has opened over 84,000 new on-job training opportunities. For example, nearly 9,000 veterans were in on-job training in the protective services. Three of every four of

these were in law enforcement training as policemen. A total of 1,250 facilities were providing such training in the protective services.

Particular attention has also been given to increasing participation among the educationally disadvantaged veterans and servicemen. Veterans who have not completed 4 years of high school or received credit for high school completion on the basis of a General Educational Development Equivalent Certificate are considered to be educationally disadvantaged. Under the current GI bill, provision is made for veterans and servicemen to receive full benefits while training for high school completion in order to qualify for admission to an appropriate educational institution. This training is not charged to any period of entitlement the veteran may have earned. The results of this increased emphasis is apparent in the participation rate. The rate for disadvantaged Vietnam era veterans and servicemen was estimated to be more than 6 percent higher on June 30, 1972 than on June 30, 1971.

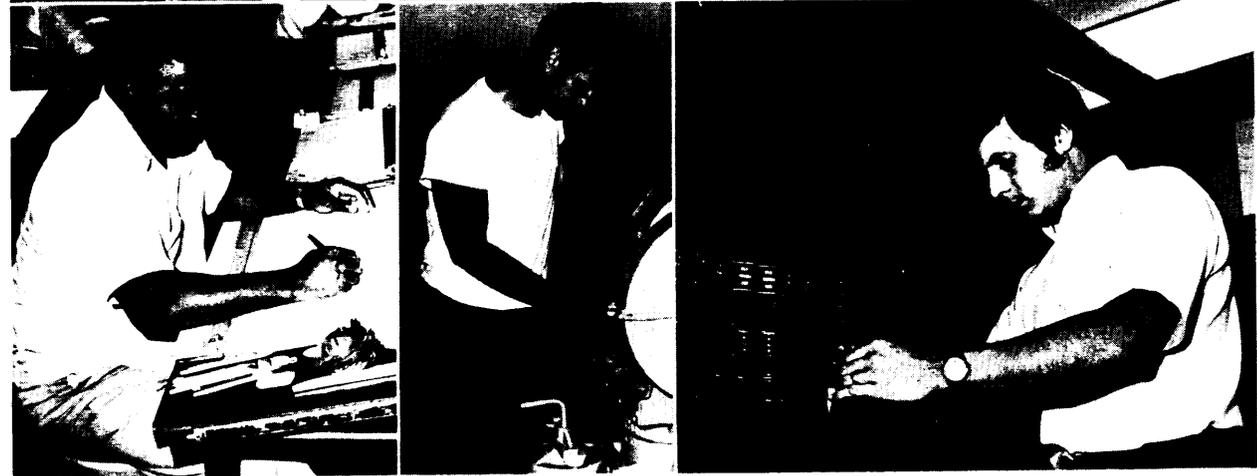
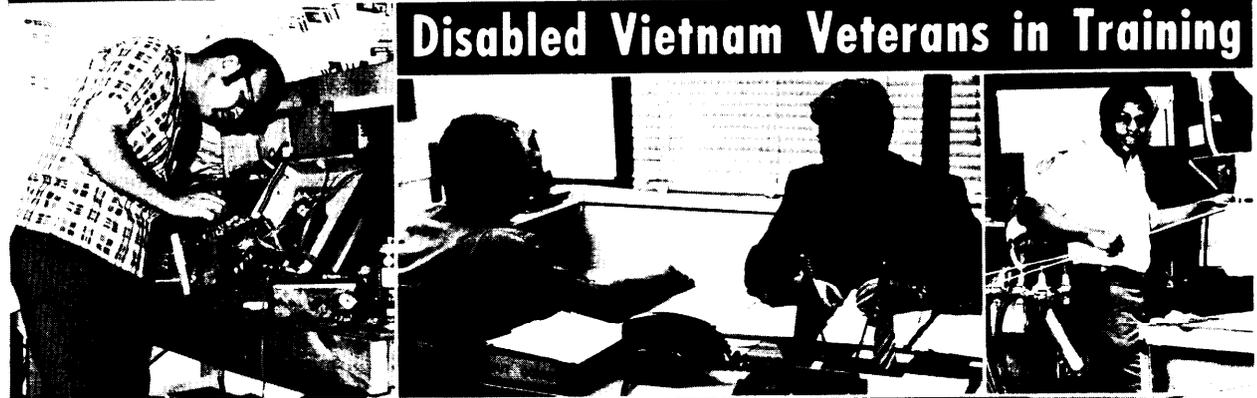
**Dependents' Educational Assistance**—This educational program serves survivors or dependents of those veterans who died from service-connected causes or whose service-connected disability is rated total and permanent. Wives and children of servicemen who are prisoners of war, missing in action, or interned by a hostile foreign government for more than 90 days are also eligible under this program. Up to 36 months of full-time training is provided in approved schools.

Individuals training during the year totaled 64,556, an increase of slightly more than 5,000 over the preceding year. Educational assistance for sons and daughters continues to be the largest segment of this program, 85 percent compared to 15 percent for wives and widows. Wives and children of POWs represented a relatively small number of trainees. Of the total number of dependents in training, college trainees represented the highest percentage (86 percent) compared to below college (14 percent). The percentage was even higher for sons and daughters (90 percent).

**Vocational Rehabilitation**—The Vocational Rehabilitation Program is for veterans who are



## Disabled Vietnam Veterans in Training



in need of vocational rehabilitation to overcome a handicap resulting from service-connected or aggravated disability. The full cost of their training is paid by the VA and, in addition, they receive a subsistence allowance while in training and for 2 months after rehabilitation. These disabled veterans are provided counseling assistance in selecting a suitable objective and planning a program of rehabilitation training. While in training they are provided continuing help by vocational rehabilitation specialists. Necessary employment assistance is provided following completion of training.

Most of the veterans training under this program are young service disabled Vietnam era veterans with a disability rated 30 percent or more. However, about 4 percent of the FY 1972 participants were seriously disabled veterans from either World War II or the Korean conflict. The number trained in 1972 totaled 31,635 an increase of 1,164 over the preceding year. The gain was mainly in college level training, which increased by almost 10 percent.

In the fiscal year just ended, increased emphasis was placed on strengthening the coordination of rehabilitation efforts between the various medical and administrative staffs. VA counseling psychologists continued to provide rehabilitation counseling service in the military hospitals through cooperation with the Department of Defense.

The range of vocational rehabilitation training and the employment objectives, as depicted in the accompanying montage, are extensive.

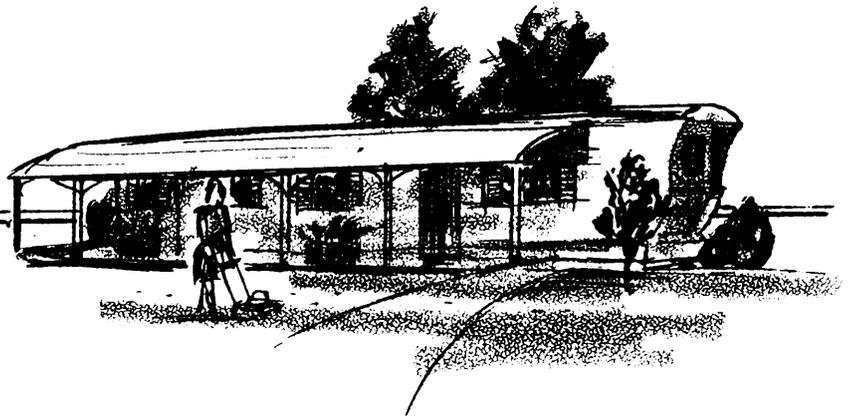
## COUNSELING

Educational and vocational counseling is provided in all three education programs. Its purpose is to assist trainees in making the best use of the educational and training benefits to which they are entitled.

Under the vocational rehabilitation program each disabled veteran is assisted in selecting an occupational goal compatible with his disability and consistent with the pattern of his particular abilities and interest. In FY 1972 counseling was provided to 36,570 disabled veterans and servicemen, a small decrease from the 38,189 beneficiaries receiving rehabilitation counseling the previous year.

In the remaining two education programs, counseling assistance is provided as requested for veterans and wives and widows. The veterans' children eligible for benefits under the education program are required to confer with a counselor about their educational or training plans. A total of 24,994 non-disabled veterans and servicemen and 26,231 dependents were provided such counseling, about the same number as a year ago.

# Housing Assistance



## COMPARATIVE HIGHLIGHTS

	Fiscal Year		Percent Change
	1972	1971	
<b>Loans Closed</b>			
Guaranteed or insured	<b>354,580</b>	197,637	+ 79.4
Mobile homes	<b>4,430</b>	278	+ 1,493.5
Direct	<b>3,245</b>	6,056	- 46.4
<b>Average Loan Amount</b>			
Guaranteed or insured (PPrimary loans for homes)	<b>\$ 22,440</b>	\$ 20,980	+ 7.0
Mobile homes	<b>8,600</b>	7,950	+ 8.2
Direct	<b>15,180</b>	13,650	+ 11.2
<b>Maximum interest rate</b>			
GI	<b>7%</b>	8½%*	- 17.6
Mobile home	<b>10½%</b>	10%	0
<b>GI loans outstanding (thousands)</b>	<b>3,746</b>	3,600	+ 4.0
<b>Loans in default</b>	<b>38,247</b>	36,266	+ 5.5
<b>Defaults as percent of outstanding loans</b>	<b>1.02</b>	1.01	+ 1.0
<b>Properties on hand</b>	<b>10,656</b>	10,129	+ 5.2

\*Subsequently lowered during the year to 8 percent, then to 7½ percent, then to 7 percent.

## SUMMARY

The VA guaranteed or insured more than 359,000 loans to veterans, the highest yearly total since 1957. The direct loan program operated without restriction throughout the year, but the total number of direct loans made declined from 6,056 in FY 1971 to 3,245 this year—due mainly to the general availability of funds for guaranteed loans.

A joint study of settlement costs was conducted with the Department of Housing and Urban Development (HUD) as required by the Emergency Home Finance Act of 1970 (PL 91-351). On February 22, 1972, a report on the study was delivered to the Congress. The agency also cooperated with HUD in setting up a reporting system to monitor interest rates on mortgage loans. This action was in response to a request from the President's Committee on Interest and Dividends.

Instructions were issued to all field stations designed to inhibit the payment of kickbacks by mortgagees in connection with the origination of loans for VA guaranty.

## FIRST YEAR RESULTS UNDER VETERANS' HOUSING ACT OF 1970

The impact of the Veterans Housing Act of 1970, which affected only the last half of FY 1971, was fully felt throughout FY 1972. The salient features of the Act were:

- (1) Removal of delimiting dates applicable to the eligibility of veterans, and the blanket reinstatement of all expired, unused entitlement of WW II and Korean conflict veterans.
- (2) Extension of the guaranteed loan program to include loans for purchase of mobile homes and condominiums, and for refinancing of existing indebtednesses.
- (3) Elimination of the one-half percent funding fee formerly charged to post-Korean veterans.
- (4) Authorization for the VA to make direct loans to veterans qualified for specially adapted housing grants irrespective of the location of the home.

The restoration of VA loan eligibility to millions of veterans whose entitlement had expired, and the other changes made by Public Law 91-506, coupled with favorable economic conditions, resulted in a dramatic upsurge in overall loan activity. In addition, the three new

types of loans (mobile home, refinancing, and condominium) really came into use for the first time, although the totals for these loans have continued to be small when compared to the overall volume of GI loans. The table below shows the cumulative volume of these loans through FY 1971 and 1972 and the monthly activity during FY 1972.

Date	Mobile Home Loans	Refinancing Loans	Condominium Loans
Cumulative thru June 30, 1971	278	80	1
1971 Jul	200	82	0
Aug	250	66	2
Sep	336	129	21
Oct	246	102	27
Nov	393	193	53
Dec	379	158	42
1972 Jan	319	189	51
Feb	490	156	78
Mar	455	241	188
Apr	365	178	112
May	476	216	145
Jun	521	221	180
Cumulative thru June 30, 1972	4,708	2,011	900

The relative importance of these loans should increase further as both veterans and lenders become more familiar with these new benefits of the VA loan program.

## FAIR HOUSING PROGRAM

During FY 1972, progress in providing equal opportunity for minority veterans was made through both ongoing and new VA programs. The counseling program for minority veterans was extended to eleven cities to assist veterans in acquiring homes for their families. Continued emphasis was placed on minority participation in VA appraisal work and in the sale and maintenance of VA-owned properties, with minority businessmen receiving 8 percent of the total amount paid all businessmen for such services in FY 1972. In March 1972, a survey was made to determine the number of minority management brokers and fee appraisers on field station rosters. Field stations not showing adequate progress since the time of the last survey (September 1970) were encouraged to increase the minority participation on their rosters and to increase minority assignments. The requirement for certification for nondiscrimination in

sales or rental of properties purchased with proceeds of VA loans was extended to veteran purchasers during FY 1972. Fee appraisers will soon be required to certify that they have not taken race into account when setting value on a property for the VA.

Beginning in FY 1972, racial data are being collected in all loan guaranty programs. This information will be used to monitor minority participation in VA housing programs and to identify areas where improvements or changes are needed. Data for the last 6 months of FY 1972 show that nearly 14 percent of all GI loan applications recorded by race (96.1 percent) were made by minority veterans as follows: Black - 9.3 percent; Spanish American - 3.6 percent; Oriental - .2 percent; American Indian - .1 percent; and Other Minorities - .4 percent. Racial data for the same period show that 5.5 percent of all direct loan applications recorded by race (93.1 percent) were made by minority veterans, distributed as follows: Black - 3.2 percent; Spanish American - 1.5 percent; American Indian - 0.7 percent; Oriental - 0.1 percent.

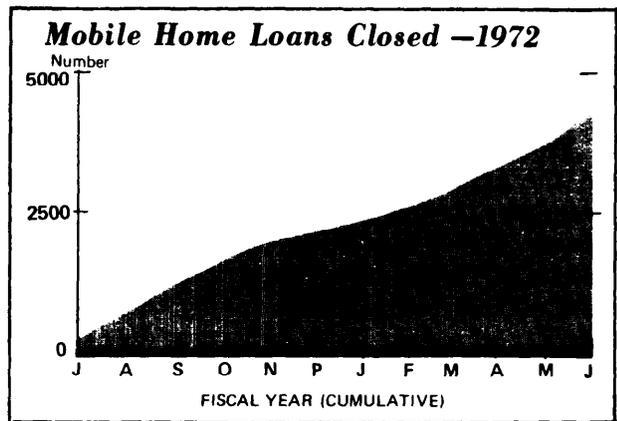
In the phase of the program dealing with the sale of acquired properties, the racial data collection system has been extended to the neighborhoods where the properties are located. These data show that, during the last 6 months of FY 1972, 43.4 percent of all acquired properties sold were located in all-white neighborhoods, 17.1 percent were located in all-minority neighborhoods, and 39.5 percent were located in neighborhoods of mixed racial composition. Minority participation continues to be high and during the last 6 months of the fiscal year sales were made as follows: Black - 29.0 percent; Spanish American - 6.8 percent; Oriental - .2 percent; American Indian - .2 percent; and Other Minority buyers - 1.1 percent. When buyers are correlated with neighborhoods, the following pattern emerges: 91.7 percent of the properties in all-white neighborhoods were purchased by white nonminority buyers; 91.2 percent of properties in all-minority neighborhoods were purchased by minority buyers; and properties in integrated neighborhoods were distributed between white non-minority buyers (51.5 percent), black buyers (33.7 percent), Spanish-American buyers (12.1 percent) and other minorities.

New policies formulated in FY 1972 deal primarily with requirements for affirmative fair housing marketing by developers and VA management and sales brokers. The affirmative marketing requirements, which will take effect in FY 1973, were developed in coordination with the Department of Housing and Urban Development. They evolve from a joint HUD-VA policy of administering housing programs in a manner allowing all individuals of similar income levels in the same market area to have available to them a like range of housing choices. By requiring affirmative marketing by developers and brokers, VA is hoping to counteract the dual housing marketing system whereby minority veterans, regardless of income or personal preference, traditionally have been restricted to a separate housing supply, frequently inferior to that available to the general population. Developers will be required to submit affirmative marketing plans, tied to the location of housing for which they are requesting subdivision approval, or certificates of reasonable value. Brokers will be required to submit nondiscrimination certifications which will pledge them to use an equal opportunity logogram, slogan or statement in all advertising, post a fair housing poster, recruit sales staff on an integrated basis, and utilize the ethnic press in advertising. In addition, the loan guaranty program has strengthened its ethnic press advertising requirement to ensure that minority persons are informed of the availability of VA-owned properties in white non-minority areas. Beginning in FY 1973, for every property located in an all-minority or "racially changing" neighborhood, field stations will advertise an equal number or, whenever possible, two or more properties located in white non-minority neighborhoods.

#### USE OF MOBILE HOME LOAN GUARANTY

Since the inception of the Mobile Home Loan Program in February of 1971, VA has guaranteed 4,708 mobile home loans, thereby assisting lenders in providing \$40,329,141 in loans to veterans who probably would have been unable to afford a home in the conventional market. During FY 1972 6,255 applications were received and 4,430 mobile home loans guaranteed.

Realizing the novelty of the mobile home program to many traditional lenders, VA con-



ducted an active promotion campaign in an attempt to inform lenders of the program details. Field stations were required to inform the lending fraternity about VA's entrance into the mobile home loan business, the investment possibilities of mobile homes and some of the characteristics of the mobile home market.

In addition to such informational efforts, a concerted drive was made to educate lenders regarding the processing of VA mobile home loans. In this connection, all mobile home loans were originally submitted on a prior approval basis, that is, VA had to approve the submission before the lender could make the loan. Unfortunately, prior approval processing requires more time than conventional mobile home loans. Conventional mobile home loan processing is usually very rapid, and, in some cases, such loans are made within 1 day. Therefore, as lenders have become experienced in VA mobile home loan requirements, they have been permitted to process loans on an automatic basis, meaning that such a lender approves the loan and then closes it, with a report thereof being sent to VA for the guaranty. Where this has been done, there has been a dramatic reduction in the time necessary for processing, permitting lenders to compete more actively with conventional mobile home financing.

In another step to provide faster, more efficient mobile home processing, the Agency has provided lenders with simplified forms for mobile home loan origination. Lenders are now equipped with the following: applications designed specifically for mobile homes; a warranty agreement which meets all of VA's specifications; a form designed to assist lenders in the computation of mobile home loan amounts; a

placement certificate for mobile home loans; a special certificate of loan disbursement; and a mobile home borrower's statement of liability.

**Problems Encountered**—The greatest barrier to the expansion of mobile home living is the restrictive zoning practiced by towns and cities. Mobile homes are often confined to the less urbanized areas, away from jobs and services. Due partially to restrictive zoning, there also is a scarcity of mobile home parks providing suitable sites for mobile homes.

Another problem encountered has been the reluctance of some traditional mobile home lenders to accept an interest rate of 10 3/4 percent. Such lenders have been accustomed to a market rate of 12 to 14 percent (for non-guaranteed mobile home loans).

**Plant Inspections**—Mobile home plant inspections by VA staff personnel were started in March 1972, at which time the volume of mobile home loans to veterans using their VA loan benefits began to reach significant volume.

In order to identify, for inspection purposes, plants producing mobile home units to be sold to veterans, VA established a screening process involving each mobile home loan. As mobile home loans are guaranteed, the name of each manufacturing plant is recorded. The VA office in the jurisdictional area of the plant location is notified, and schedules an initial plant inspection. After the initial inspection, each plant is inspected at regular intervals, e.g., quarterly. Through the identification process, VA is assured that every manufacturing plant which produces mobile homes for veteran purchasers is inspected for compliance with the American National Standards Institute A119.1 standards adopted by the VA as its mobile home construction requirements.

In order to prepare staff technicians to inspect mobile home manufacturing plants, two training classes have been held on mobile home plant inspections in Atlanta, Georgia, during March 1972. VA staff inspectors, from the 30 regional offices with the major concentration of mobile home manufacturing plants, were selected to take the 3-day courses. The Mobile Home Manufacturers Association assisted VA in conducting the first training course. The second was conducted exclusively by VA personnel.

A total of 368 mobile home manufacturing plants in 34 States were given initial inspections by VA personnel during FY 1972. The inspections of the manufacturing process included a review of the quality control program in effect at the plants, and observations of materials, storage, handling and assembly operations. Experience to date shows that of the 368 plants inspected, non-compliances were noted in 102 instances. The non-compliances typically did not involve major structural items and were either immediately corrected or satisfactory arrangements were made for correction. The major areas of non-compliances involved plumbing and electrical deficiencies.

No pattern has been perceived regarding types of deficiency, nor has any indication emerged to suggest that deficiencies may be confined to any type or size of manufacturer. The only pattern observed is a typical use of the incentive system in production lines, resulting in sloppy workmanship, plus the use of unskilled labor for plumbing and electrical installations. The constant turnover of plant personnel means that the work in these important fields is generally in the hands of trainees.

In all cases, the mobile home industry has been cooperative and has welcomed VA inspectors. There have been no instances of flagrant, willful violations of the ANSI A119.1 standards, and no instances which would merit suspension for refusal to satisfy the requirements or permit inspections.

**On-Site Inspections**—In addition to the plant inspections, VA also instituted a system of on-site inspections of mobile homes purchased with the proceeds of GI loans. During the 4-month period from March through June 1972, VA personnel made 604 inspections of mobile homes securing GI loans. Each inspection included a detailed examination of the mobile home unit and its site and, where possible, an interview with the veteran mobile home owner or his wife, or both.

Each inspector was provided with a set of guidelines outlining items to be checked. In some cases the inspectors were unable to check some of the items, and therefore, total responses relating to a particular item did not always equal the total number of inspections. The percentage



### *Mobile Home Buyer*

figures given below relate to the total number of responses for a particular item.

The inspectors found that nearly 80 percent of the mobile homes were located in mobile home parks, 20 percent were on individual sites and less than 1 percent were located in subdivisions.

They found that 87 percent of the units were at the location named in the original loan application, and 13 percent had been moved.

The average size of the units inspected was 752 square feet (approximately the area of a 12' x 63' unit). For 99 percent of the units, the inspectors considered the size of the lot to be adequate for a mobile home. Provisions for parking were provided for 96 percent of the mobile homes.

Public water facilities were connected to 82 percent of the homes while 18 percent had private water supply systems. For 77 percent of the homes, sewage was disposed of through public or community disposal systems, while the remaining 23 percent were equipped with individual septic tank systems.

At the time of the inspections, 67 percent of the units had skirting, but only 30 percent had installed tie-downs adequate to withstand hurricane force winds.

Many of the homes had optional items enhancing the utility or appearance of the units. For example 39 percent had fencing, 31 percent had patios, 10 percent had additional storage facilities, and 5 percent had features, such as carports and outside planters.

The inspectors also compared the invoices with the units, where possible, and found discrepancies in only 17 percent of the cases between the optional equipment listed on the invoice and the equipment actually installed in the unit. In 28 percent of the cases, there was a discrepancy between the serial or model number on the unit and the number shown on the invoice.

Inspections of the mobile home parks where the units were located revealed that 13 percent of the parks deviated in some degree from the standards of utility and ecology prescribed by VA.

The general condition of the mobile home units was also ascertained. Only 4 percent were reported as being in poor condition while 10 percent were reported in excellent condition and 86 percent in good condition.

Interviews were conducted with occupants of 488 out of the 604 units inspected. Their units had been occupied, on the average, about 5 1/2

months at the time of the interviews. The average interview lasted 40 minutes. Some of the results of the interviews were:

98 percent were satisfied with the treatment received from VA.

94 percent were satisfied with their lenders.

93 percent were satisfied with their park operators.

77 percent were satisfied with their dealers.

When asked their general opinion of mobile home living, 95 percent rated their living conditions as good, 2 percent rated them excellent and 3 percent rated them poor. As to future housing plans, 64 percent planned to remain in their mobile home, 20 percent wanted to move into conventional housing, 4 percent wanted to move their mobile home to a private site and 12 percent had no definite future housing plans.

**Compliance With Warranty**—All manufacturers desiring VA mobile home financing are required to provide a written warranty to the purchaser, including a specific statement that the mobile home meets the manufacturing standards prescribed by the Administrator.

VA field stations reported receiving 185 separate complaints about mobile home units. Of these, there were 133 (72 percent) complaints covered by the warranty; 12 (6.5 percent) due to faulty set-up operations; one complaint traceable to neither warranty nor set-up; 31 (17 percent) on both warranted items and set-up operations; and 8 (4 percent) complaints on which determinations had not been made by the year's end.

Including the 31 cases which related to both warranty and set-up, there were 164 total warranty complaints. The reviewers of these warranty complaints found 154 (94 percent) justified and only 10 (6 percent) unjustified. Again including cases relating to both warranty and set-up, 43 complaints were reported due to faulty set-up. The reviewers of these complaints found 40 (93 percent) valid and three (7 percent) invalid. One case was determined to be unclassifiable as to warranty or set-up, and the defect was judged to be due to the owner's negligence.

A further classification was made of warranty complaints according to the complaints' sub-

stance. A total of 303 complaint items were distinguished in these narratives. Faulty construction accounted for 107 items, 35 percent of the total; furniture or appliance defects accounted for 109 items, 36 percent of the total; defective utilities caused 64 complaint items, 21 percent of the total; and 23 complaint items, 8 percent of the total, expressed general dissatisfaction or dissatisfaction with items such as carpeting, drapes or other accessories.

Resolution of complaints had been effected in 82 (53 percent) of the 154 justified warranty cases, and in 22 (55 percent) of the 40 justified set-up complaints by the end of the fiscal year.

Field stations have been very prompt in making validity determinations on these complaints. Manufacturers and dealers, however, have been slow in repairing warranted items and correcting problems due to faulty set-up. Complaints have been distributed rather widely among mobile home manufacturers and models, with no single manufacturer receiving more than five complaints.

**Defaults and Foreclosures**—Since the inception of the mobile home loan program VA has guaranteed 4,708 loans. During that time 295 defaults have been reported (6.3 percent of the total loans guaranteed) but, so far, only 40 of these defaults (0.8 percent of the total loans) have resulted in claims paid by VA.

Ten regional offices have reported claims processed to final disposition on mobile home loans. Texas with 16 and Georgia with six reported the largest number of claims.

Claims in the State of Texas were distributed as follows: Harris County, which includes the city of Houston, had five claims; Bell County, containing the Fort Hood military base, had four claims; Dallas had three claims and Bexar, Smith, Taylor and Wichita Counties each had one claim. All of the claims from the State of Georgia were located in Muscogee County, which is immediately adjacent to Fort Benning.

The cost of mobile home claims paid aggregated \$82,854. The liquidation expenses, such as sales commissions, cost to pick up the unit, and cleaning and repair costs, amounted to \$7,883, or 9.5 percent of the total cost. The average liquidation expense for all claims was \$239; excluding six cases for which no expenses were

reported, the average was \$292. The net claims ranged from a low of \$1,350 to a high of \$4,287. Liquidation expenses ranged from \$1 to \$937.

Thirty-three of the 40 claims were subjected to further analysis. Of the 33 claims, nine cases, or 27 percent, were "no down-payment" loans. The 24 down-payment cases have average down-payments of \$79, less than 1 percent of the average purchase price. None of these cases had a down-payment of more than 5 percent.

Thirty of the analyzed 33 loans (91 percent) were secured by mobile homes on rented spaces. The average indebtedness on the date of claim was \$8,809.

Although many of the persons defaulting on their mobile home loans were military personnel, neither the transient nature of military life nor AWOL cases appear to be dominant reasons for defaults. Marital difficulties and the inability to handle financial obligations apparently cause dislocation in military life just as in civilian life.

The liquidation of a mobile home debt after default is a specialized undertaking. Since most States consider a mobile home mortgage a chattel instrument, repossession is the major method for handling a mobile home default. Thirty of the 33 claims cases involved repossessions. Repossession is normally effected by the physical transfer of the security to a dealer's lot. Repair and cleanup operations are then performed, after which the home is resold. VA does not have the facilities required for such an operation, and for this reason does not accept title but prefers to leave mobile home liquidation operations in the hands of dealers and finance companies, which are better equipped to perform the necessary services.

**Profile of Mobile Home Market vs. GI Home Market**—The success of VA's mobile home loan program is evidenced by the fact that the benefits of the program are being used, for the most part, by the younger, lower income veterans and servicemen who cannot afford conventional housing. The average purchase price of VA guaranteed mobile homes for FY 1972 was \$8,815 which was \$14,197 less than the average price of conventional GI loans. More than 50 percent of the veterans who

obtained VA mobile home financing during FY 1972 were 26 years of age or younger. For conventional GI loans only 22 percent were under 27 years old. Vietnam era veterans accounted for 58 percent of VA mobile home purchasers in FY 1972. Over the same period, only 46 percent of the veterans purchasing conventional housing had service in the Vietnam era. The veteran purchasers of mobile homes, because of their youth, are in a much lower income group than veterans purchasing conventional housing. The average monthly income of mobile home purchasers was \$523, compared to a monthly income of \$733 for conventional GI home buyers. The average assets of mobile home purchasers were \$726 at the time of purchase, while buyers of conventionally built homes had average assets of \$2,529.

The average monthly housing expense of mobile home buyers was \$177 while the average expense for a conventional home buyer was \$241. Despite the disparity in cost, the percentage of housing expense to monthly income shows little difference between the two types of homes, viz, 33.8 percent for mobile homes and 32.9 percent for conventional homes.

## DIRECT LOANS

The VA direct loan program was established to provide home loan financing for veterans living in non-urban areas where housing credit is in short supply. To date, the Agency has provided direct loan financing for 314,351 veterans in the amount of \$3,061,618,000. During FY 1972, VA closed 3,245 direct loans in the amount of \$49,251,000.

In March of 1970, VA established a program to refer to private lenders those loans already approved for direct financing. Through this process, VA hoped to assure that direct loans were made only when private financing was not available. This effort resulted in the placement of 30 percent of the direct loan cases in private hands. Because of such success, VA has established a direct loan referral procedure which, while attempting placement of direct loans, avoids some of the delay encountered under earlier procedures. Through this procedure, VA placed 860 loans with private lenders in FY 1972, (16 percent of the total number of loans referred).

Direct loans, because they are restricted to rural areas which lack private financial resources, differ significantly from guaranteed loans in a number of characteristics.

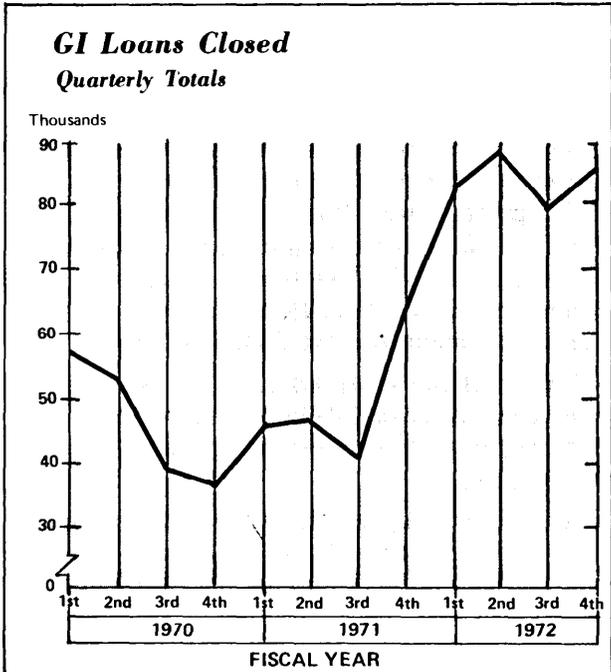
For example, in FY 1972, the average purchase price for a property financed with a direct loan was \$15,186, (\$7,826 lower than the average GI loan price of \$23,012). The average direct loan amount was \$14,383, compared to an average loan amount of \$22,440 for GI loans. Because direct loans are made in areas of relatively low population density, existing and previously occupied properties dominate direct lending much more than GI lending. Eighty-four percent of the direct loans in calendar year 1971 were made on existing construction. Of GI loans guaranteed, 73 percent were for purchase of existing structures. Direct loans also have shorter maturities than GI loans. Direct loans have an average maturity of 300 months, while GI loans average 351 months. Direct loan borrowers were, on the average, slightly older than GI loan borrowers. (33 vs. 31 years old).

**VA GUARANTEED LOAN ACTIVITY**

FY 1972 was a remarkable year for housing and particularly for VA financed housing. Veterans obtained more VA-guaranteed loans to finance home purchases or construction than in any fiscal year since 1957. The surge in lending during the year lifted the cumulative volume of VA guaranteed home loans to 7.8 million, totaling over \$89 billion.

The number of guaranteed or insured loans closed, excluding mobile home loans totaled 354,580 for the fiscal year. In the accompanying chart, a comparison of "GI" loans closed by quarter portrays the tremendous increase that has occurred.

The tremendous volume of VA guaranteed loans during FY 1972 was the result of a significant increase in the number of eligible veterans and favorable housing credit conditions. The Veterans Housing Act of 1970 removed delimiting dates on veterans' loan entitlement and reinstated all expired, unused entitlement to about 14 million World War II and Korean conflict veterans. Of these, over 8 1/2 million had never used their VA loan entitlement and, therefore, regained eligibility for the full



\$12,500 amount of guaranty. The Veterans Housing Act of 1970 also improved the prospects of post-Korean veterans for guaranteed loans by providing for the elimination of the 1/2 percent funding fee previously charged. About 84 percent of the VA home loans went to post-Korean veterans and servicemen during the year.

**IMPACT OF FINANCIAL MARKETS**

The supply of mortgage funds was abundant throughout the year. Interest rates and yields on mortgages, although quite high from an historical stand point, were declining throughout most of the year and were well below the peak rates of 1970. Savings and loan associations and mutual savings banks, the primary institutional investors in mortgages, experienced an unprecedented savings inflow. This enabled record breaking mortgage investment during FY 1972, while reducing obligations and improving the liquidity position of these institutions. Economic activity was expanding, but not fast enough to draw investment funds away from mortgages and thus threaten the housing boom.

The ceiling contract interest rate on VA guaranteed mortgages was 7 percent throughout FY 1972. The yields on the 7 percent no down-payment VA home loans decreased from

7.94 percent in July 1971, to 7.43 percent in March 1972, as a result of gradual reductions in the average discount, required by lenders from 6.8 points to 3.2 points. Early in 1970, the average yield had been as high as 9.30 percent. The sizable increase in the number of VA guaranteed home loans closed during FY 1972, therefore, was due, in large part, to an abundance of private funds and lower finance costs.

## **FUNDING OPERATIONS**

Both the guaranteed and direct loan programs are operated with money drawn from revolving funds set up for this purpose, and operate without the need for appropriations, except for small amounts needed to cover deficiencies in connection with participation certificates sold between 1964 and 1969.

Money required to pay guaranty claims and to conduct property management operations, related to guaranteed or insured loans, is provided from a revolving fund established in 1961. Income for the fund is derived from principal and interest payments on vendee accounts established in connection with the sale of acquired properties, and also from the sale of vendee accounts to private investors. Favorable market conditions facilitated the sale of \$190.6 million of vendee accounts during FY 1972 compared to \$185.8 million sold the previous year.

The direct loan revolving fund was originally funded with borrowings from the Treasury. Income for the fund is derived from principal

and interest payments on direct loans, and from the sale of direct loans to private investors. Sales of direct loans were also facilitated by FY 1972 favorable mortgage market conditions, especially after approval of Public Law 92-66 on August 5, 1971. That Act removed the restriction on selling direct loans at a price lower than 98 percent of par, and authorized the Administrator to sell direct loans at prices determined by him to be reasonable under prevailing mortgage market conditions.

During FY 1972, VA sold \$190.6 million of direct loans (an increase of 226 percent over the \$58.4 million sold the previous year).

## **GRANTS TO DISABLED VETERANS FOR SPECIALLY ADAPTED HOUSING**

During FY 1972, 879 severely disabled veterans were declared eligible for grants to buy, build or modify homes specially adapted for their use. During the year, grants totaling \$6.9 million were made to 564 veterans. Since 1948, when these grants were first authorized, 12,016 veterans have been aided by grants totaling \$120.4 million.

Regardless of where they reside, disabled veterans eligible for grants to help finance specially adapted housing are now eligible for direct loans to supplement the grants, if they have VA loan eligibility. The Veterans' Housing Act of 1970 extended direct loan eligibility to these veterans even when their homes are located outside designated direct loan areas.





# Life Insurance

## FOR SERVICEMEN AND VETERANS

### COMPARATIVE HIGHLIGHTS

	Fiscal Year		Percent Change
	1972	1971	
Policies in Force (millions)			
Number	5.3	5.4	- 1.9
Amount	\$36,618.7	\$37,203.7	- 1.6
Payments (millions)			
Death Benefits	\$321.9	\$308.6	+ 4.3
Other	\$286.9	\$308.3	- 7.0

### SUMMARY

During FY 1972 the seven life insurance programs supervised or administered by the VA provided coverage exceeding \$80 billion—in behalf of more than 9 million insureds. Although the year saw many improvements, and much accomplished in the daily workload activity—the highlights of the year was new legislation resulting in significant changes to enlarge the broad range of insurance benefits.

A wholly new dimension was added to VA insurance operations when Public Law 92-95 was enacted on August 11, 1971. This law established the Veterans Mortgage Life Insurance (VMLI) Program—providing mortgage protection life insurance for any veteran who receives a VA grant for specially adapted housing, unless he declines, fails to furnish information to establish the premium, or does not pay the premium. Coverage is limited to a

maximum of \$30,000, with any unused portion transferable to a subsequent home mortgage after the preceding one is disposed of. Coverage ceases when the mortgage is paid off, the home is sold, the veteran reaches age 70, or he dies. By the end of the fiscal year, more than 4,000 veterans had been insured for nearly \$65 million through this new program, which is supervised by the VA and is administered under the terms of a Group Policy Contract with the Bankers Life Insurance Company of Lincoln, Nebraska. Unlike all of the other insurance programs, VMLI does not operate through a separately established Fund—but rather through the Compensation and Pension Appropriation in accordance with the enabling legislation.

The VA makes continuous efforts to alert term policyholders about the high premium rates which will face them if they retain term insurance to the older ages. Such term policyholders are ultimately confronted with financial burdens because they did not convert to permanent plans at an earlier date. There were, for example, 1,824,199 NSLI (V and H) policies being carried as term insurance on June 30, 1972, which represented 50.2 percent of the corresponding total face value in force. With their average age now 51 years, these NSLI policyholders are fast approaching the critical period. One of the recent efforts to assist them in this important decision-making was accomplished when Public Law 92-193 was signed on December 15, 1971, to become effective July 1, 1972. The law authorized a new permanent plan for all Government administered programs except WW I USGLI. This new Modified Life at Age 70 is similar in all respects to the current Mod-65 policy, except that the 50 percent face value reduction occurs at age 70 rather than 65. Retention of the full face value for an additional

5 years should prove beneficial to many—including those who currently have Mod-65 and wish to exchange for the Mod-70. The exchange involves only a slightly increased premium over the Mod-65 rate. For those who may wish to continue the full face value amount of their insurance, the reduced portion may be replaced with a “Special Ordinary Life Insurance” policy by paying an added premium. Toward the end of the fiscal year, plans and procedures had been completed so that notification to eligible insureds would begin early in the new fiscal year.

### SERVICEMEN’S GROUP LIFE INSURANCE

For the serviceman and veteran of today, life insurance is made available by the Servicemen’s Group Life Insurance (SGLI) program which commenced September 29, 1965. Each uniformed service member is automatically insured for \$15,000 unless he elects, in writing, only \$10,000 or \$5,000 or not to be insured at all. Upon separation the member may convert the amount of SGLI carried while on active duty to an individual commercial policy with any participating company licensed to do business in his state, effective the 121st day following separation,—at standard premium rates, irrespective of his physical condition. If the individual is totally disabled at separation, his post-service SGLI continues without premium payment for 1 year, or until the disability ceases to be total in degree, whichever occurs first. Reserve, National Guard, and ROTC members are also insured under SGLI for authorized periods of duty scheduled in advance by competent authority. These members have no conversion privilege, unless they become uninsurable at standard rates during authorized duty because of an incurred disability or the aggravation of a pre-existing condition—in which case the conversion may be effected on the 91st day following separation.

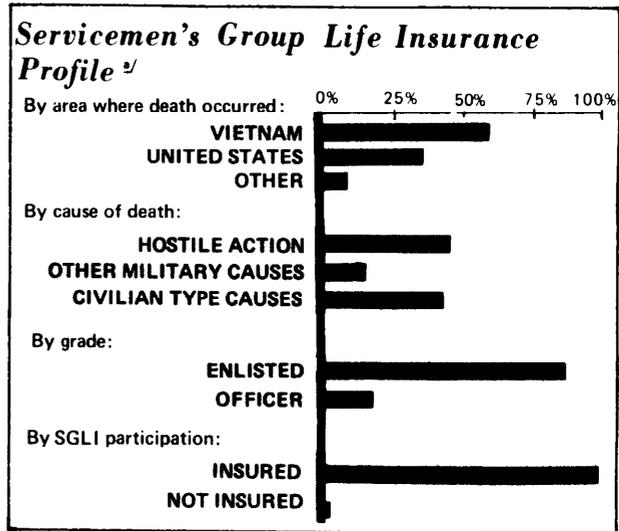
The SGLI program is supervised by the VA, and is administered by the Prudential Insurance Company, Newark, New Jersey, as Primary Insurer, through contractual agreement with the Administrator. During FY 1972, 608 other commercial companies also participated in the SGLI Program on a reinsurer/convertor or converter only basis.

The highlight of the program for this fiscal year was the sharply reduced number of death

claims—which amounted to 5,970—a figure contrasting greatly with the FY 1968 high, which totaled approximately 22,000. This substantial reduction is directly related to the wind-down of the activity in Vietnam.

From the early days of the SGLI Program, the VA has compiled a profile of in-service deaths. Through random selection of casualty reports, data are structured to provide separate distributions for cause of death, branch of service, grade, monthly pay, length of service, age, and other aspects such as the amount of coverage and settlement features. For example, for the quarter ending June 30, 1968, 81 percent of the deaths occurred in Vietnam, as contrasted to 19 percent for the corresponding quarter in 1972. Similarly 71 percent were attributable to hostile action for the 1968 quarter, but only 9 percent for the 1972 quarter.

For the entire period of conflict through June 30, 1972, 59 percent of the deaths occurred in Vietnam. Hostile action accounted for 45 percent of all deaths and enlisted personnel made up 84 percent of the number dying.



<sup>a/</sup>Based on random sampling of In-Service deaths.

Recognizing the favorable experience of the last 2½ years, and with the contingency reserve built up to an adequate level, the Administrator made a determination during FY 1972 that effective July 1, 1972, there should be a 15 percent reduction in the premium rate charged to members. For those on active duty, this meant a \$2.55 per month premium for \$15,000 coverage; \$1.70 for \$10,000 or 85¢ for

\$5,000—as contrasted to the former \$3.00, \$2.00 and \$1.00 monthly rates. The reserve coverage rate was similarly reduced, making it \$1.50 instead of \$1.80 per year for \$15,000.

Several other desirable changes in the SGLI program took place during FY 1972. Shortly before the close of the fiscal year, Public Law 92-315 was enacted, extending SGLI coverage to 12,500 cadets and midshipmen of the four service schools (U.S. Military Academy, West Point, New York; U.S. Naval Academy, Annapolis, Maryland; U.S. Air Force Academy, Colorado Springs, Colorado; and U.S. Coast Guard Academy, New London, Connecticut). These new members automatically became insured for \$15,000 as of midnight June 19/20 1972, unless they elect, in writing, only \$10,000, \$5,000 or not to be insured at all. Normally, these cadets and midshipmen are not considered to be members of the uniformed services until they are commissioned and enter into active duty—hence the necessity of legislation to include them under SGLI.

On December 15, 1971 Public Law 92-185 was signed, giving explicit meaning to the terms “widow, widower, child and parent” for SGLI settlement purposes. Heretofore, the Primary Insurer was required to make such settlement in accordance with the State law where the individual beneficiary resided, since the company was subject to being sued in disputed cases. Consequently, settlement for any one of these types of beneficiaries could vary greatly among the several States. The new law unifies the process so that each beneficiary will be treated comparably, regardless of residence.

The settlement options available under SGLI include 36 monthly installments, with interest earnings on unpaid installment amounts. Since January 1970, the monthly payment had been \$447 for a \$15,000 settlement. During FY 1972, however the Administrator approved a higher interest rate to be used in computing installment payments (from 5% to 5 3/4%)—which resulted in beneficiaries receiving \$451.50 monthly, effective January 1, 1972.

## GOVERNMENT ADMINISTERED PROGRAMS

Turning from Government supervised to

Government administered programs, the latter are represented by five separately established programs:

Program	Abbreviated reference	Policy prefix letter	Program beginning	Ending Date for new issues
Veterans Reopened Insurance	VRI	J, JR, JS	5- 1-65	5- 2-66
Service-Disabled Veterans Insurance	SDVI	RH	4-25-51	OPEN
Veterans Special Life Insurance	VSLI	RS, W	4-25-51	12-31-56
National Service Life Insurance	NSLI	V, H	10- 8-40	4-24-51
U.S. Government Life Insurance	USGLI	K	1- 1-19	4-24-51

Highlight data concerning each of these programs show the following status on June 30, 1972:

Program	No. policies in force	Total face value (millions)	Average per policy	Average attained age of policyholders
VRI	190,155	\$ 1,326	\$6,974	50.1
SDVI	129,262	1,162	\$8,987	34.3
VSLI	609,478	5,340	\$8,762	40.7
NSLI	4,260,682	28,068	\$6,588	51.0
USGLI	175,601	751	\$4,277	72.3

Each of these life insurance programs is structured and operated on the same basis as though it were an independent insurance company.

**Service-Disabled Veterans Insurance (RH)**—This program is the only one remaining open to new issues. The program was designed to assure that service-disabled veterans could obtain life insurance at standard rates, without regard to their physical impairments. Every veteran separated from service on or after April 25, 1951, who receives a service-connected rating for which compensation would be payable if 10 percent or more in degree, and who is otherwise insurable, has up to 1 year from date of notice of the VA rating to apply for RH coverage. This means that a disabled veteran may obtain up to \$25,000 life insurance at standard premium rates (\$15,000 SGLI conversion, and \$10,000 Government policy)—which in the more severe cases, means coverage not otherwise obtainable at any price. Since the RH Program insures substandard risks at standard premium rates, it is not self-supporting.

Financial needs above the premium and investment income are met by periodic appropriations. Considerable effort is made to assure that all eligible veterans are made aware of their eligibility for RH coverage. Each receives a notice of eligibility at the time he is granted a VA service-connected rating. About 6 months later, a reminder notice is sent to each. In addition, the RH Program is emphasized through meetings with veterans service organizations at both the national and state levels, as well as through periodic information releases to the press, radio and television stations.

**Veterans Reopened Insurance (VRI)**—This program came into being when it was apparent that many disabled veterans from WW II and the Korean conflict had passed all delimiting dates for Government life insurance—and were either unable to obtain commercial insurance or could not obtain it at reasonable cost. The 1-year reopening permitted about 210,000 veterans to buy the insurance. Unlike all other Government administered programs VRI premium rates include the cost of administration—and the Administrator is authorized to adjust premiums either up or down, as required to keep the program totally self-supporting. Since the program's outset only one premium adjustment downward (for the J segment policyholders) has been made.

**Veterans Special Life Insurance (VSLI)**—This program was begun to permit veterans of the Korean conflict to have Government life insurance in civilian life—as had been true for their World War II and World War I predecessors. The Korean serviceman was in a different circumstance, since he carried no premium-paying insurance during service—rather the Government covered his insurance requirements with a \$10,000 Servicemen's Indemnity. The VSLI was the first regular Government administered program to be written on a non-participating basis (no dividends). This program is self-supporting except that the cost of administration is borne by the Government.

**National Service Life Insurance (NSLI)**—This World War II program remains the largest of all the Government administered programs. At one time in its 32-year history, it had more ordinary

life insurance in force than does the largest commercial company today (some 28 years after the comparative date). NSLI is a self-sustaining program except for the costs of administration and for death claims attributable to the extra hazards of military service, which are paid by the Government. Based on determinations by the Administrator, dividends are paid to NSLI policyholders from excess earnings of the Trust Fund. During the fiscal year, the highest regular dividend in the history of the program was authorized and paid covering calendar year 1972. Payment was accelerated so as to be completed by the end of March 1972—the sixth time this payment technique has been employed. The \$265 million dividend was made possible by higher yields on new Treasury Department investments, increased earnings from the recent commencement of semi-annual interest credits, and favorable mortality experience. Individual dividends averaged about \$68, for more than 3.9 million insured veterans.

Legislation during the fiscal year created new milestones for the NSLI policyholder. For the first time, he could use his dividends to purchase paid-up additions of life insurance—and for the first time this permitted him to have more than \$10,000 Government life insurance in force. These significant changes to the program were brought about when Public Law 92-188 was signed on December 15, 1971, to become effective July 1, 1972. Dividends held on deposit/credit, the 1972 dividend payment (even though already completed by the acceleration), and future dividends were all authorized for use to purchase paid-up increments. Applications to use the deposit/credit or to return the 1972 payment, could be submitted no later than December 31, 1972. Elections as to use of future dividends however, may be made any time by the insured, and may be changed to any other available option whenever he chooses.

**United States Government Life Insurance (USGLI)**—The oldest Government administered program was begun in 1919 as the first permanent program, and designed for conversion from the World War I yearly renewable term coverage. USGLI was available for new issues through April 24, 1951 except that those entering service on or after October 8, 1940 could buy only NSLI, unless they had World War I service, in

which case they could have either or both up to a maximum total of \$10,000. The USGLI program is self-supporting except for the costs of administration and death claims attributable to the extra hazards of military service, which are paid by the Government. Based on determinations by the Administrator dividends are paid to USGLI policyholders from excess earnings of the Trust Fund. The 1972 accelerated USGLI dividend amounted to \$21 million—for an average of more than \$135 per insured.

**Total Disability Income Provision**—Starting with the World War I USGLI and modified for each of the other Government administered programs except Service-Disabled Veterans Insurance (RH), the various Government life insurance programs have offered a total disability income provision (TDIP). By paying an extra premium, the person insured may obtain an optional rider to receive a specified monthly income in case of total disability. The rider available to USGLI policyholders was for \$5.75 monthly per \$1,000 face value coverage, for total disability commencing before age 65. Other program policyholders may purchase a rider to pay \$10 per \$1,000 (initially, this was limited to \$5.00 and age 60—but later amendments raised these limits to \$10 and age 65). As

of June 30, 1972 there were 751,417 policies with the TDIP rider, on more than \$5.8 billion worth of life insurance.

**Interest Charges**—Commensurate with interest earnings in other aspects of the Insurance Funds, policyholders in the two participating programs (World War I USGLI and World War II NSLI) benefited in another way. For dividends left on deposit or credit, the interest earning rate was raised from 4 percent to 4¼ percent on USGLI, and from 4¼ to 4½ percent for NSLI.

**Civil Relief**—Persons on active duty with the armed forces may suspend certain premium payments on commercial life insurance, under the provisions of Article IV, Soldiers' and Sailors' Civil Relief Act. The VA administers the portion of the Act which guarantees protection while in service and for 2 years after separation. Any unpaid premium becomes a loan against the policy, and may be liquidated by the insured. If it is not, the guaranteed amount is paid by the Government, and this then becomes a debt of the insured to the United States. On June 30, 1972, only 164 policies were protected by the no longer widely used Act, compared with 244 policies protected as of the previous June 30th.



# Veterans Assistance ..



## COMPARATIVE HIGHLIGHTS

	Fiscal Year		Percent Change
	1972	1971	
Personal Interviews	3,050,292	3,137,158	-2.8
Telephone Actions	11,456,390	10,395,523	+10.2
Jobs Obtained	26,916	14,736	+82.7
Initial Interviews With Disabled Servicemen in Military Hospitals	27,324	41,438	-34.1

## SUMMARY

The past year has seen the further expansion of special VA telephone service, called Wide Area Telephone Service (WATS), and Foreign Exchange (FX). WATS now provides State-wide, toll-free telephone service to seven States. FX is in operation in 62 communities where veterans and their dependents can call the VA regional office toll free. The VA is also providing more complete telephone service, which reduces the need for personal visits. Reflecting these developments, telephone calls during FY 1972 numbered nearly 11.5 million, an increase of 10.2 percent over the previous year. Accompanying the increase in telephone calls were small decreases in correspondence (-1.9%) to 577,000 letters, and in personal interviews (-2.8%), which remained well over three million.

During the past year, the overseas outreach program was also greatly expanded. In addition to VA representatives stationed in Vietnam since

early 1967, the VA now has representatives serving the military forces in Japan, Okinawa, Korea, Thailand and Europe. Representatives of the VA are also flown to U.S. naval vessels to provide group orientations and personal interviews to those on board.

In a variety of ways the VA has helped veterans find meaningful employment.

Job interviewing classes are now offered to veterans who need to learn how to "sell" themselves during the job interview.

In response to the President's six-point veterans' program, announced in June 1971, the VA contacts every Vietnam era veteran who has been unemployed three months or more, and offers complete assistance. A telephone call or personal letter encourages these veterans to reexamine those benefits which can increase their employment potentials.

The Agency has continued to co-sponsor and participate in job fairs and other activities in connection with the President's Jobs for Veterans program. Over 200 job fairs attended by 150,000 veterans, as well as by 10,000 employers and Government representatives were conducted in FY 1972.

Several other new programs initiated during the fiscal year extend VA's outreach efforts. For example, a VA administered mobile van program now brings representatives of several agencies to rural and isolated areas, offering one-stop service to veterans and their dependents. In another program which has shown initial success, the VA

sends each veteran a follow-up letter 6 months after his release from service, as well as the one he receives shortly after his release. The follow-up letter is designed to remind the veteran of his education and training benefits, at a time when his plans are presumed to have stabilized.

## RECOMMENDATIONS FOR IMPROVEMENT OF OUTREACH DURING FY 1973\*

Recommendations have been approved in two major areas for improvement of outreach during FY 1973, i.e., extension of a mobile van program and expansion of Foreign Exchange (FX) and Wide Area Telephone Service (WATS).

A test of the first recommendation was initiated in June 1972 when the VA established an experimental assistance program featuring mobile vans. These vans are staffed with two Veterans Benefits Counselors, a Community Service Specialist, a VA receptionist, and representatives of the State employment service and the Office of Education. They offer one-stop service to rural areas and small cities where VA and other agency assistance for veterans is not readily available. This first van project was initiated in Texas.

Expansion of toll-free telephone service in FY 1972 was designed to provide more service to more veterans. The expansion of this service will continue in FY 1973.

## OUTREACH

The VA receives a copy of the separation document on each serviceman released from active duty. From the address on that document, the Agency communicates with each veteran, reminding him of benefits and suggesting that he get in touch with the nearest VA installation. With the letter to the veteran goes a post card which he can use to request additional information on any benefit, or to request a telephone call from a VA representative. During FY 1972, 764,321 of these letters, which are tailored to veterans educational backgrounds, were dispatched. Of these letters, 103,174 were to educationally disadvantaged veterans.

\*This information is included in compliance with Section 244, Title 38, USC

Beginning in April 1972, the VA began a new program which provides for an additional letter to be sent to each veteran 6 months after his separation from service. This letter supplements the one issued shortly after separation; it reminds the veteran of his benefits at a time when his employment and education plans should be relatively stable.

An additional U.S. Veterans Assistance Center (USVAC) was created in a Spanish-speaking area of Los Angeles, bringing to 72 the total number of Centers established since 1968. These Centers have continued their efforts to facilitate the readjustment to civilian life of Vietnam era veterans. There were 268,212 initial interviews conducted during the fiscal year, 37,376 of which were with educationally disadvantaged veterans. USVAC activities resulted in the placement of 26,916 veterans in gainful employment, an 82.7 percent increase over the preceding year.

The Community Service program (formerly Social Work program) is an integral part of USVAC activities, and functions in three major areas:

(1) It provides outreach and services to those Vietnam era veterans who lack high school diplomas or equivalent. This includes participation in the National Assistance for Veterans (NAV) mobile van project, involving the VA, Department of Labor, Department of Health, Education and Welfare, Office of Economic Opportunity and Department of Housing and Urban Development. The NAV project provides services to veterans in rural and inner city areas who have not been reached through existing channels.

(2) It participates in the post-hospital rehabilitation phase of the VA drug program, to facilitate the reentry into the community, and resumption of productive living, by drug dependent veterans.

(3) It facilitates community organization and development to coordinate and expand needed community social/health services as related to the needs of veterans served by USVAC's.

For FY 1972, the 26 Community Service Specialists on duty opened a total of 10,613

new cases. Of the beneficiaries concerned, 6,415 (60 percent) did not possess a high school diploma. The remaining 4,198 (40 percent) had a high school diploma, its equivalent, or a college degree. The total workload for Community Service Specialists was 25,849 cases for the 12-month period. Year by year comparison of the problems handled by the Community Service Specialists, based on a multiple count, revealed the following ranking of problems in descending order.

	FY 1972	FY 1971
Education and Training	1	2
Individual and Personal	2	4
Motivation	3	1
Financial	4	3
Veteran Health	5	5
Interpersonal and Marital	6	6
Other	7	8
Housing	8	7
Transportation	9	9
Dependent Health	10	10

At approximately 300 points of military separation in the United States Veterans Assistance personnel have provided 665,549 servicemen with orientation on benefits at the time they leave active duty. With this knowledge of their VA benefits, veterans can plan their futures more wisely, taking full advantage of the assistance available, especially in undertaking programs of education and training.

Also, in cooperation with the Defense Department, VA personnel were available at over 180 military hospitals in the continental United States to provide personal, bedside assistance to servicemen scheduled for separation for reasons of disability. During FY 1972, 40,294 initial and follow-up interviews were conducted with these military patients prior to their leaving service. There were 62,521 such interviews conducted in FY 1971. The marked decrease in this workload reflects diminished military involvement in Vietnam.

Veterans of all ages are benefiting from the extension of the special telephone service called Foreign Exchange (FX) and Wide Area Telephone Service (WATS). The first of these enables veterans in a particular location to call toll free to the regional office some distance away. At the end of FY 1972 there were 86 FX lines in operation from 62 communities.

WATS, on the other hand, enables veterans in any part of a given State to call the regional office toll free. At the end of the fiscal year, seven States had this service: Georgia, Iowa, Kentucky, Oklahoma, Tennessee, Vermont and Wyoming.

There has been a growing emphasis on attempting to provide complete service via the telephone, eliminating the need to visit VA offices. Address changes, changes in dependency status, and changes in program or place of training, are now accepted over the telephone. An important development in the expansion of service by telephone has been the installation of Automatic Call Distributors (ACD's), during 1972, in two large VA regional offices. ACD's not only promote greater efficiency in handling incoming calls but also result in less fatigue, increased productivity, and higher morale among VA employees assigned to the telephone units. A recommendation has been made for installation of ACD's at several other high volume offices where up to 1,000 calls per day are received.

In addition to its established locations, the VA provides itinerant or part-time service to 66 other communities. The frequency of this service ranges from 5 days a week to once a month.

Over three million personal interviews were conducted by Veterans Assistance personnel during the year. As would be expected with the expansion of toll-free telephone service, there was a 10.2 percent increase in the number of telephone calls, which totaled nearly 11.5 million. For the second year, correspondence with the veteran public showed a decrease, as more veterans and their dependents were able to telephone VA offices toll free. In 1972, 577,000 letters were received, a decrease of 1.9 percent from the previous year.

## OVERSEAS PROGRAM

The overseas "Early Word" program, in effect in Vietnam since 1967, was greatly expanded in the fall of 1971. Joining the eight VA representatives who had been stationed in the Vietnam war zone were volunteers serving military personnel in Japan, Okinawa, Thailand and Korea. Six additional representatives were sent to several locations in Europe. These VA em-

ployees have been providing group orientations on veterans' benefits, and conducting personal interviews, for servicemen and women in all branches of the Armed Forces. In Vietnam, representatives are explaining benefits to arriving servicemen during "in-processing," as well as to those men departing for subsequent separation. VA representatives are also visiting military hospitals in Vietnam and are assisting at the drug detoxification centers.

The 1971 expansion of the VA overseas program was part of a joint effort by the VA, Department of Labor, and Office of Education to provide coordinated pre-separation counseling and assistance to overseas service personnel with 90-120 days remaining on their tours. These interagency teams are highly mobile and have traveled from their assigned countries to give briefings and group orientations to military units in Greece, Turkey, Ethiopia, Italy, Spain, Portugal, United Kingdom, Benelux nations, Thailand and Taipei.

A very unique expansion of overseas outreach efforts was accomplished early in 1972, when VA representatives were flown to U.S. naval vessels to provide pre-separation counseling to naval personnel. From home bases in Da Nang, South Vietnam, and Athens, Greece, VA representatives traveled from ship to ship within offshore fleets to conduct group orientations and personal interviews.

Since the inception of the overseas program, a total of 1,976,426 servicemen and women have benefited from group orientations; 269,065 personal interviews have been conducted by VA representatives, and 116,177 applications for benefits have been completed.

## EMPLOYMENT ASSISTANCE

Regional offices have been major participants or co-sponsors of job marts or fairs and Veterans Assistance Days organized to provide job-finding assistance as well as veterans' benefits counseling.

Where local conditions have not favored holding job fairs or similar activities, the VA has helped to organize employer seminars which have focused on educating employers to the benefits of on-the-job training and other Govern-



*Transfer at Sea*

ment programs. In related areas, VA leadership has helped stimulate other types of community projects for linking employers with veteran applicants.

The Agency has played a vital role in stimulating community involvement by initiating the VETS-CAP (Veterans Community Assistance Program) concept. Beginning in July 1971, the VA regional office in Florida sponsored a series of VETS-CAP's which were held each month in National Guard Armories throughout the State. Every effort was made to involve the resources of the entire community to provide employment and many other types of assistance to veterans and their families. Publicity preceding the events

urged employers to register their job openings at the VETS-CAP so that veterans might compete for these jobs. Participants included Federal, State and local government agencies, universities and other schools and community service groups.

The program was so successful in the first eight cities where the VA acted as sponsor that, beginning in the spring of 1972, other Florida cities began organizing and sponsoring their own VETS-CAP's. Thousands of veterans in Florida alone have benefited from this program, not only in finding employment, but in taking advantage of benefits administered by the VA and other agencies. The concept has also been picked up in other States, which have modified the idea to fit local conditions.

The success of veteran job fairs in the United States led to a unique experiment in job counseling for servicemen stationed overseas. A series of job information fairs was conducted in Germany in March and April 1972. Twenty representatives of top business firms and major industries joined representatives of the VA, Department of Labor, and Office of Education to personally counsel nearly 6,000 servicemen. The response from both servicemen and industry representatives was so enthusiastic that another series is planned in September 1972 for Asia, followed by a second European series in October 1972.

Many veterans who are seeking their first civilian job or who are experiencing difficulty in securing employment need special help in job-finding techniques. For these veterans the VA now schedules job interviewing classes in every State. Veterans assistance personnel have also helped many veterans to find career-oriented jobs developed as a result of the VA's on-the-job training outreach program.

Since the President's announcement of the Jobs for Veterans (JFV) Campaign late in 1970, the VA has given its fullest support at all levels to the program. It provides staff support at national headquarters. VA regional office personnel are serving on State- and city-wide JFV task forces at the request of governors and mayors. The emphasis of these efforts has been on improving the utilization of existing programs and on better coordination between the many groups concerned with the welfare of veterans. Regional offices are continuing to work closely with local news media in connection with JFV, and are reporting excellent cooperation in most areas. A growing number of TV and radio stations are highlighting a local "veteran of the day" who is seeking employment. Similarly, local newspapers are offering free "job wanted" classified ads to Vietnam era veterans seeking work.

In response to the President's six-point veterans' program, announced in June 1971, the Agency began contacting every veteran who has been unemployed 3 months or longer. A personal contact by telephone is made if a telephone number is available; otherwise a letter is sent to the veteran. He is urged to reexamine the possibility of entering a program of education or training, and is encouraged to visit the nearest VA office. A recent sampling of over 100,000 unemployed veterans indicates initial success. Applications for VA benefits had already been filed by 37 percent of the veterans; over one-half of these applications were for education or training benefits. Of the unemployed veterans who had never filed for any veterans' benefits, over 11,000 (17 percent) filed an application after being contacted by Veterans Assistance personnel. Of these applications, nearly three-fourths were for programs of education and training.





# Administration and Management

## COMPARATIVE HIGHLIGHTS

	Fiscal Year		Percent Change
	1972	1971	
Total Appropriations (millions)	\$ 10,936	\$ 9,909	+ 10.4
Compensation & pension (millions)	6,248	5,890	+ 6.0
Medical care (millions)	2,308	1,942	+ 18.8
Readj. benefits (millions)	1,889	1,657	+ 14.0
All other (millions)	491	420	+ 16.9
Total Employment	187,988	182,546	+ 3.0
Minority Group emp.	47,764	44,592	+ 7.1
Women	89,735	87,096	+ 3.0
Veterans preference	84,812	82,338	+ 3.0
Vietnam era veterans	15,014	7,806	+ 92.3
Employees under 35	46,371	41,293	+ 12.3
Records holdings (thous. cu. ft.)	1,224.2	1,184.6	+ 3.3
Forms and form letters	10,962	10,570	+ 3.7
Cost reduction savings (millions)	\$ 37	\$ 32	+ 15.6
Appeals filed (with Board of Veterans Appeals)	54,189	49,311	+ 9.9
Appeals disposed of allowed	54,053	47,813	+ 13.1
Tort Claims Workload	13,597	11,828	+ 14.9
Minority Business Contracts	532	433	+ 22.8
Number	45,360	18,488	+145.8
Amount (millions)	\$ 16.8	\$ 10.4	+ 61.5

## AGENCY EXPENDITURES

The total amount appropriated by the Congress for the VA FY 1972 activities was approximately \$1 billion more than the preceding year's appropriation. The largest increases, percentagewise, occurred in the medical care and readjustment benefits appropriations.

FY 1972 appropriations for medical care provided for an increase in the hospital staffing ratio and in the number of outpatient medical visits; for activation of additional specialized medical units; and for the opening of two newly constructed hospitals at Columbia, Missouri, and San Diego, California.

Most of the increase in readjustment benefits went for educational assistance allowance payments. However, some of it was for the additional expenditures authorized by Public Law 91-666, which increased the allowance for the purchase of automobiles and other conveyances for disabled veterans from \$1,600 to \$2,800, and provided additional allowances for necessary adaptive equipment.

Seventy-five cents of each appropriated dollar continued to be used for direct benefit programs, such as compensation, pension and educational assistance. Medical programs accounted for another 22 cents, leaving the remaining 3 cents for construction programs and general operating expenses.

## PERSONNEL MANAGEMENT

The Agency's heightened activity and growing programs resulted in an expansion of demand for skilled and productive workers.

The VA hired nearly 38,000 full-time and about 20,000 part-time and intermittent employees during the year. Among the employees hired to fill full-time positions were over 800 physicians, 4,300 nurses, 1,300 LPNs and 4,900

nursing assistants. Other skilled employees hired in substantial numbers included Radiology and other Medical Machine Technicians (600), Medical Technicians (450), Health Technicians (450), Medical Technologists (330), Veterans Claims Examiners (330), Therapists (250) and Social Workers (250).

**Employment Opportunities** - In recruiting the larger workforce the VA secured a blend of those fully qualified to perform at once, at the journeyman or expert level, and those in entrance levels with potential which can be developed.

Since this program began in April 1970 the VA has appointed 9,171 Vietnam era veterans under this special authority.

In March 1972, the Civil Service Commission gave special temporary authority for hiring Vietnam veterans without regard to competitive lists of eligibles. In the first 4 months VA made nearly 700 such appointments.

In all 15,014 Vietnam era veterans were employed in the VA as of June 30, 1972. These Vietnam era veterans represent 17.7 percent of all VA veteran employees and 8.0 percent of



*Vietnam Veterans at Houston VA Hospital*

The VA has made intensive efforts to provide employment opportunities to returning veterans. As a result, the VA led the Federal Government in the number of Vietnam era veterans appointed under the Veterans Readjustment Appointment (VRA) authority—placing more than one-third of the total number appointed throughout the Federal service. The VRA authority, established by Executive Order, provides for immediate employment, coupled with on-the-job training or education, of returning veterans who need assistance in making the transition to civilian employment.

VA's total employment. As an example of the hiring efforts in this area, during June 1970, 1,950 veterans were appointed. Of these, 1,465 were Vietnam veterans. VA usually appoints Vietnam veterans at the rate of slightly over a 1,000 a month. According to the latest figures available, this represents about one of every five Vietnam era veterans hired by the Federal Government.

About 31 percent of the Agency's Vietnam era employees belong to minority groups. More than 40 percent of those serving under VRA appointments are minority employees.

Vietnam veteran employees hold increasing numbers of positions dealing directly with veterans, patients or beneficiaries. In regional offices, more than one-fourth of the veterans benefits counselor positions and nearly 14 percent of adjudicator positions are held by Vietnam veterans. In VA hospitals more than 14 percent of the inhalation therapy technicians and kidney machine technicians, better than 12 percent of the x-ray technicians, 11 percent of the medical technicians and more than 10 percent of the nursing assistants are Vietnam era veterans.

During the year, VA continued the efforts that have made it one of the leading Federal employers of minority group members and women. Total minority group employment increased by 3,172, and now stands at 47,764 or approximately 30 percent of total Agency employment. The employment of women also increased—by 2,639. Women occupied approximately 48 percent of all VA positions by the end of the year.

Substantial increases of minorities and women at the higher job levels were achieved. For example, more than 4,600 minority group employees hold jobs at GS-9 and above—11.2 percent of VA's positions in those grades. Last year such employees held 10.5 percent of these positions. Employment of women also increased by 1,218 at Grade GS-5 thru 8 and by 657 at grades GS-9 and above.

Affirmative efforts to increase the representation of minority groups and females in the Agency's important line management and policy making positions continued. By the end of the year, the number of minority group members and women in the key field positions of Director, Assistant Director, and Hospital Chief of Staff was 30. Others were receiving formal training for these assignments. Still others were serving as field station Division Chiefs in a variety of program areas—positions which are the feeder group from which future selections for top field management positions typically are made. In the Central Office a total of 21 minority employees and women in grades GS-15 and higher were serving in such key policy making and program management positions as Assistant Administrator for Personnel;

Regional Medical Director, and Director, Contract Compliance Service.

Other activities emphasized during the year included:

- Upward mobility training designed to facilitate the movement of high potential employees in limited career occupations into new fields offering better opportunities for career advancement.
- Special attention to employment of Spanish-speaking people, especially in connection with the staffing of new hospitals.
- Forceful action at the top policy levels to stimulate the upward movement of women into traditionally male jobs.
- Increased use of part-time employment to make it possible for women to bridge the gulf between their family and business careers. By the end of the year, 6,389 women were employed on a part-time basis—approximately 100 more than a year ago.
- Making most effective use of special appointing authorities to increase minority group employment. For example, about 40 percent of the 5,549 Veterans Readjustment Authority appointments made during the year were of minorities. Most of the 188 Public Service Career appointees were minority group members.

Participation by the VA in the special economic and work experience programs designed to enhance the employability of the disadvantaged ranks among the highest by Federal agencies. During the year, the Agency served as "host" in enrollee programs, such as the Neighborhood Youth Corps, at about the level of 2,500 enrollees at any given time. Three-hundred-ninety former enrollees were placed as regular employees during the year, bringing the total to about 1,300 since the inception of these programs.

This year, the Agency has made better than 5,000 temporary appointments of young people for summer jobs. About 80 percent of these are

considered needy youths—a large proportion of them belonging to minority groups.

At the end of the fiscal year, there were 11,630 handicapped full-time employees on the rolls, or 7.1 percent of the total workforce. Many of these handicapped employees are disabled veterans.

Handicapped employees continued to demonstrate their performance capabilities with over 1,197 receiving grade promotions and an additional 295 receiving other special salary advancements. Handicapped employees also earned 191 awards for employee suggestions, 776 other awards, and 89 citations and commendations.

Thomas F. Linde, Ph.D., represented the VA as one of the 10 finalists in the program for selection of the Outstanding Handicapped Federal Employee of the Year for Calendar Year 1971. Dr. Linde, who suffers from athetoid cerebral palsy, is a Clinical Psychologist at the VA Hospital in Knoxville, Iowa.

**Staffing**—The scope and diversity of VA's programs complicates the overall staffing activity. The Agency has about 335 different occupations. The following table lists selected ones with significant numbers of full-time and part-time employees.

Occupation	Approx.No. <sup>1</sup> June 30, 1972
Nursing Assistant	25,950
Nurse and Nurse Anesthetist	19,500
Food Service Worker	11,860
Clerk-Typist	8,950
Physician	8,650
Medical Technologist, Lab & Machine Technician, Miscellaneous	7,055
Licensed Practical and Vocational Nurse	5,290
Secretary	4,570
Mail and File Clerk	3,090
Therapist: Occupational, Physical, etc.	2,925
Clerk-Dictating Machine Transcriber	2,925
Veterans Claims Examiner	2,550
Clerk-Stenographer	2,550
Laundry Worker, Miscellaneous	2,250
Social Worker	2,150
Cook	2,025
Claims Clerk	1,590
Plant Operator, Sewage, Steam, Water	1,300
Psychologist	1,250
Supply Clerk	1,190
Dental Assistant or Technician	1,190
Contact Representative	1,175
Loan and Realty Specialist	1,090
Laborer	1,050
Warehouseman	1,050

TABLE—Continued

Occupation	Approx.No. <sup>1</sup> June 30, 1972
Dietitian	925
Pharmacist	925
Dentist	750
Telephone Operator	750
Attorney	730

<sup>1</sup> Excludes intermittent employees, medical and dental residents and interns, and consultants and attendings.

In FY 1972 the national labor market was favorable but more competitive than FY 1971. The staffing of additional authorized positions, complicated by continuing national shortages in several VA occupational areas, required more positive efforts. Recruitment for college level professionals involved visits to over 900 of the nation's major colleges and universities. Emphasis was placed on the overall quality of new recruits selected, and on special efforts to attract and retain youthful personnel. Full-time VA employees under age 35 number more than 46,000. This is nearly 28 percent of all VA full-time employees and is 5,000 higher than a year ago. These employees received over 45 percent of the promotions.

The VA has on its rolls the largest number of professional nurses in its history, but increasing medical services demand still more. Recruitment efforts were concentrated on those 50 to 60 locations with more critical shortages of nurse applicants, and a coordinated effort was made to attract prospects on a nationwide basis for these jobs. Recruitment efforts were expanded to attract more high school students into nurse training, and to publicize VA opportunities earlier by means of more contacts at the undergraduate level and at State Student Nurse Association meetings. Physician recruitment also was given more emphasis by greater utilization of State and national physician placement services.

Statutory provisions which permit special pay considerations were used to acquire the services of highly skilled employees of superior standing, for medical and medical support activities. The services of four physicians, each highly qualified in a scarce specialty, were acquired upon their retirement from military careers, by obtaining authorizations for exceptions to the limitations

of the dual compensation statutes. In addition, 31 appointments of highly skilled employees were accomplished through obtaining authorization to recognize their superior qualifications in setting their initial pay. Of these, 25 were in professional medical support positions: psychologists, social workers, an audiologist, and a research health physicist.

**Training and Development**—For several years VA has had an effective executive development program. In support of Administration objectives for improving executive development in the Federal service, the Agency has reviewed this program, has made revisions in policy, and has established an Executive Manpower Resources Board to promote, coordinate, and monitor VA's executive development efforts.

Training programs were continued for the positions of assistant hospital director, chief of staff, and regional office assistant director. Opportunities were announced under a new training program for the position of assistant director, Data Processing Center. Under an executive development agreement negotiated with the U.S. Civil Service Commission, selected candidates can move from their various specialties into a graduate program in health care administration and, upon completion, be assigned to various types of administrative positions in the hospital system.

The Graduate Program in Public Administration continued this year. Some 18 employees, grades GS-12 and above, were enrolled. This program provides for a high-level educational experience, tailored to the VA needs and requirements, for employees selected by the Departments and Staff Offices on the basis of current performance and future potential.

Consistent with the Agency's overall demands, some 56,459 employees received training of 8 hours or more during FY 1972. This represents an increase over the preceding fiscal year of almost 12 percent. Almost 70 percent of these employees were trained in medical, scientific, technical, legal, and related professional and scientific fields. Of the group receiving 8 hours or more of training, one-half were women.

The VA participated for a second year in the Public Service Careers Program, training lower

grade level employees in a variety of career fields. During FY 1972, over 400 employees in this program received training for positions as clerk-typist, nursing assistant, secretary-stenographer, pharmacy assistant, office machine operator, and file clerk. During FY 1971 some 240 PSC employees received similar training.

A 3-day conference was held for personnel officers in the field who are assigned personnel responsibilities for Department of Veterans Benefits stations. The conference was planned to provide needed orientation and training in new personnel programs and amplification of on-going programs for the 58 participants.

An apprentice program for orthotists, prosthetists, and restoration technicians operating currently at New York Prosthetic Center, was approved by the Department of Labor toward the end of FY 1972.

Special training courses were given top agency officials and supervisory personnel in Central Office to assure that they fully understood their responsibilities for effective utilization of personnel and for position management.

**VA Labor Relations Program**—Approximately 116,500 VA employees are represented exclusively in 296 local bargaining units. Agreements have been negotiated, for 244 of these units, dealing with a wide variety of local personnel policies, practices, and working conditions. Central Office guidance on the full range of labor relations matters is provided to field station management through periodic conferences, training sessions, on-site visits, and written issuances. In addition, four national labor organizations have obtained the right to be consulted regarding policies which are of VA-wide application.

During the year extensive hearings were held on petitions for national exclusive recognition filed by the AFGE and the ANA.

**Employee Recognition and Incentives**—VA employees, through participation in the Incentive Awards Program, contributed to the common task of improving governmental efficiency and economy with suggestions that resulted in tangible benefits amounting to

\$779,419 during the year. Of the 6,265 suggestions submitted, 2,413 were adopted.

Two employees won highly prized national honors:

- Miss Irene Parsons, Assistant Administrator for Personnel, received the 17th National Civil Service League's Career Service Award.
- Mr. Ferdinand J. Bartilucci, Assistant Deputy Director for Projects, Compensation and Pension Service, Department of Veterans Benefits, received the seventh annual Federal Paperwork Management Award.

In support of special programs emphasized by the President, 476 employees were honored for achievements in the areas of improving communications and service to the public; supervisory excellence, youth employment programs, and equal employment opportunity. Commendations were also given to 464 private citizens or organizations for outstanding service to veterans and to the VA.

Fifteen agency employees received the Vietnam Service decoration for voluntarily providing guidance and counsel to United States military personnel in Vietnam.

During the year, quality increases were awarded to 3,798 VA employees in recognition of their high level performance. In addition, 4,321 employees were recognized for special achievements.

**California Staffing Adjustment**—As part of a plan to upgrade VA medical facilities structurally to conform to the highest standards of seismic design, some of the patients were relocated from the VA hospitals in Los Angeles (Wadsworth and Extended Care) and Livermore, California. This resulted in reduced workloads, which in turn led to a commensurate reduction in staffing of more than 900 positions at these hospitals.

Each career employee whose job was affected adversely was given an opportunity to transfer to another VA location and received priority consideration for openings throughout the hospital system. Transfers to other VA locations were arranged for 685 employees.

Additionally, 139 employees elected to retire and 56 resigned. Eight employees transferred to other Federal agencies. Finally, 49 employees declined offers of continued VA employment and were separated. Of these, only 15 had been employed on a full-time basis. Extensive efforts were made to assist the separating employees in finding jobs outside the Agency.

This sizable and complex staffing adjustment was successfully accomplished in 3 months.

## **AUTOMATIC DATA PROCESSING**

The nation's veterans (now numbering nearly 29 million) and their families obtain prompt and accurate service from the VA through the extensive use of computers and other automated devices and techniques. The VA data processing centers are presently equipped with 40 computer systems to assist them in processing the ever increasing workloads related to veterans benefits and health care. VA hospitals are equipped with 47 smaller computers supporting medical research projects designed to help the hospitalized veteran in various ways.

Although VA's larger automated systems have been operating on a 24-hour per day schedule for a number of years, intensive study is continually directed toward improving operation of the existing systems, and developing new systems all aimed at enhancing agency service. A few of the major automated systems are discussed briefly below.

**Beneficiary Identification and Records Locator System**—This large and complex automated system became fully operational at all VA stations during FY 1972. It replaced a master index file system, maintained by VA's Central Office, consisting of over 50 million cards. The new system automatically indexes, stores and retrieves identifying information for about 33 million veterans and their families, and also indicates the locations of their records. This direct access operation, employing a fast data transmission system, services more than 200 VA field stations, and will expedite the processing of claims, the transfer of records and related actions. The new system has sharply reduced the time formerly required to obtain information, and has eliminated the annual movement of an

estimated four million pieces of mail and other material between field stations. As a result, service to veterans and their dependents will be greatly expedited and enhanced.

**Veterans Assistance Discharge System**—The automated system, developed to inform newly discharged veterans of their entitlement to federal benefits, with special emphasis on governmentally sponsored educational opportunities available, also produces lists of recently discharged veterans for the use of veterans organizations in making more personal contacts with the veterans urging them to avail themselves of the benefits authorized by the Congress.

Plans are underway for an expansion of the services provided by the system, to include generation of notices of eligibility for educational benefits.

**Government Life Insurance ADP System Modifications**—Public Law 92-193, effective July 1, 1972, authorized the conversion or exchange of a National Service Life Insurance (NSLI) policy to a new type of insurance—the modified life plan with reduction at age 70. Details of the plan are provided in the Insurance Chapter of this report. A series of program modifications accomplished during FY 1972 has permitted the Insurance ADP system to notify policyholders and process applications automatically.

Public Law 92-188 authorized participating policyholders of National Service Life Insurance to use current dividends and dividend accumulations to purchase paid-up insurance in addition to any other NSLI held. The current insurance limit of \$10,000 may, therefore, be exceeded. Various modifications to the Insurance ADP system were necessary to accommodate the processing required to carry out the provisions of this legislation, including the preparation and mailing of notices to 4.4 million policyholders.

Dividends for 1972, amounting to nearly \$285 million, were paid on an advance basis to over four million National Service Life Insurance and United States Government Life Insurance policyholders. A series of system modifications, accomplished during FY 1972, facilitated the accelerated processing of the payments.

**Loan Guaranty**—The conversion of VA home loan accounts to computer processing was completed during the year. The Agency now maintains a portfolio of about 260,000 accounts which require a full range of accounting and loan servicing, including monthly billing to borrowers, the annual statements of taxes and interest paid, outstanding principal and escrow balances, collections, deposits, and similar information. The computer system developed and installed to service these accounts combines the joint advantages of centralized processing with decentralized servicing and is providing faster and more efficient service to the veterans for whom these accounts are maintained.

**Compensation and Pension ADP System Modifications**.—Legislation enacted during FY 1972 had a heavy impact on the Compensation and Pension programs. Public Law 92-197 authorized an increase in dependency and indemnity compensation (DIC) rates, and Public Law 92-198 made provision for pension increases. Various program modifications to the compensation and pension ADP system permitted the automatic adjustment of the accounts maintained for about 284,000 beneficiaries of dependency indemnity compensation. Similar adjustments in rates were made automatically, affecting the accounts of over two million pension recipients.

**Veterans Mortgage Life Insurance**—The 92nd Congress authorized, by Public Law 92-95, mortgage life insurance protection up to \$30,000 for certain severely disabled veterans who receive VA grants for specially adapted housing. Over 4,000 veterans are insured through this program. The law provides for the Government to pay approximately 90 percent of the premium.

An ADP method was developed and installed during FY 1972 to deduct automatically the veteran's portion of the monthly premium from his disability compensation award payments. The deducted premium payments are delivered to the insurance company for application to the policyholder's account.

**Critical Path Method for Medical Construction Projects**—A sophisticated ADP system for processing of hospital construction

projects--the In-House Critical Path Method (CPM) -was developed and installed during FY 1972 to assist the Office of Construction in laying out, scheduling, and monitoring construction progress. The computer system plots the activities, encompassing the total effort in a logical step sequence, with a time frame and cost estimate for each activity. The system also generates reports in varying degrees of detail for the benefit of the field and Central Office staffs and re-programs individual activities as required and adjusts affected time schedules.

## TELECOMMUNICATIONS

Several unique telecommunications systems were designed and installed during FY 1972 in support of Agency efforts to improve service to veterans and their families.

**Data Transmission**--An installed experimental system which provides for electrocardiogram (EKG) transmissions between VA hospitals, using remote telephone line facilities, was studied and evaluated. This system transmits the heart tracings of a veteran patient from one VA hospital to another for computer analysis. The results are quickly obtained and transmitted back to the originating hospital where the interpretation is printed out by machine in a format readable by a VA cardiologist. The evaluation study concluded that such a system, using local and long distance telephone lines, is feasible for future use by VA hospitals.

A similar system, currently in use, transmits electrocardiograms by telephone lines from VA hospital coronary care units to other hospitals or, during off duty hours, to the homes of staff cardiologists for immediate interpretation. The findings are quickly returned to the hospital by voice transmission.

**Special Telephone Services for Veterans**--During the past year, special telephone services for the exclusive use of veterans and their families have been extended to 62 cities. These telephone systems permit veterans and immediate family members to make free toll calls from localities without VA Veterans Assistance services to the nearest VA regional office, thereby obtaining fast responses to their inquiries.

Intensive efforts are also being made to improve the telephone answering services in regional offices. Automatic call distributing telephone systems have been installed at certain locations with high volume calling activities, which will assure better service on incoming calls from veterans. Studies of the feasibility of installing these automatic call distributing systems in additional locations are in progress. Where large automatic systems are not justified, efforts are being made to improve manual call distribution systems.

A unique telephone and intercommunications system has been developed to support an inter-agency program designed to assist veterans from specially built mobile vans. The vans, traveling in pairs, are designed to offer help to veterans in their own communities, and are staffed with a clerk-receptionist and five counselors. Each unit is equipped with telephones for communication with local, State and Federal offices. Intercom systems connect the vans, enabling counselors to consult with, and advise each other. This program will eventually serve veterans and their families in many parts of the country.

**Closed Circuit Television**--The use of closed circuit television (CCTV) was widely expanded during FY 1972 when 66 systems were designed and installed to assist VA hospitals in caring for patients and to support extensive medical education and research programs. Certain systems are used to monitor coronary, surgical, and psychiatric patients. Other systems are designed to aid in the diagnosis of patients through tele-consultation, a service which permits medical and surgical specialists to observe and talk with patients and doctors at remote locations, and to offer diagnostic advice without traveling long distances.

**Two-Way Radio Communication**--An intensive program is under way to establish two-way radio communication systems in all VA hospitals. These systems will provide for communications during emergency conditions and on a daily basis as well. All systems have been designed to be self-contained, mobile and capable of operating for long periods of time without commercial power. Certain of these

systems have been designed as city-wide or county-wide community type radio networks for use in the event of local disaster. In many locations, these systems have been coordinated with police, fire and civil defense systems to enable a station to contact the local authorities should emergency situations require it.

Upon completion of this program, the Agency will have two-way radio communication system enabling hospital authorities to coordinate efforts from command posts operated and powered from either VA stations or mobile units.

## MANAGEMENT AND ORGANIZATION

**Paperwork Management**—During the year, a large volume of records was created (168,100 cubic feet) largely because of benefits for Vietnam veterans. Total record holdings rose, therefore, to a 16-year high of 1,224,200 cubic feet—an increase of 3.3 percent for the year—despite the fact that the volume of records disposed of during the same period (128,500 cubic feet) exceeded the average for the past 16 years.

Major records management accomplishments included the following:

(1) Destruction of 98,000 cubic feet of World War II term insurance (N) folders that had exhausted their reference values. This relieved critical space shortages in the Federal Records Centers in Philadelphia and Denver. The destruction of 26,200 cubic feet of obsolete military entrance and separation X-rays provided additional space in the Federal Records Centers in New York City and made possible the transfer of monies from reclaimed silver to the VA Supply Fund. These actions reduced VA record holdings by 18 percent in Federal Records Centers.

(2) Computer output microfilm equipment has been installed at the Data Processing Center in Hines, Illinois, to create microfilm directly from computer operations, by-passing the voluminous paper printouts previously required.

(3) The automated index of veterans and

veteran beneficiaries, and the locator file for their benefit records, became operational. The prospective creation of 15 cubic feet of microfilm as a backup to the automated system will end the need for 5,000 cubic feet of original index and locator card records. This file contains 33 million index records with 900,000 annual inter-files, and 27.5 million locator records with one million annual inter-files.

(4) A total of 24,500 cubic feet of VA hospital X-rays were disposed of during this year.

On June 30, 1972, 10,962 different VA forms and form letters were in use, of which 39 percent were standardized VA-wide. During the year, 189 standardized forms and form letters were eliminated as no longer necessary, 260 were created to meet new requirements, and 569 were updated and improved.

The Department of Veterans Benefits has established centralized transcription activities at 44 field stations, and is modernizing these to provide total stationwide transcription capability for all dictation from both on-station and off-station sources. Centralized transcription activities were authorized for four additional field stations during the past year. A manpower saving of 25 percent and a productivity increase of 10 percent are anticipated for each activity established. To further expand the capability of these transcription activities, utilization of automatic typewriters has also been increased. Sixty machines are now in use for automated preparation of repetitive and prestige-type correspondence. An average of one position is saved for each machine installed.

VA adopted the policy—although not required to do so by the Administrative Procedures Act—of giving the public general notice (37 F.R. 7157) of the development of proposed regulations. All written comments received are made available for public inspection.

**Audit Responsibility**—The practice of combining fiscal and management audits has improved the depth of audit coverage and eliminated duplication of effort. Representatives from other departments have participated more frequently in audits of programs. These joint efforts have proven highly effective. During the

year our internal audits resulted in savings of approximately \$2 million and substantial improvement in the management of VA programs serving veteran beneficiaries.

The conduct of regular audits has been modified to provide greater emphasis on newly established programs and potential problems. Regular management audits, for instance, now commence with a problem identification and scheduling phase. Regular fiscal audits utilize information extracted from data processing systems to determine the basis for payments. For example, audit samples of payroll data, education payments, and Loan Guaranty records are obtained from computer operations for use by the auditors.

The scope of VA audits of operating ADP systems is being broadened. During the fiscal year, action was taken to establish an independent audit program at the Austin, Texas, data processing center. The function of the resident internal auditors at the two other major VA data processing centers, (Hines, Illinois, and Philadelphia, Pennsylvania) have been redefined and expanded.

The Office of the Administrator, department heads, and members of Congress continue to request special audits. These provide management with evaluations and recommendations to improve major programs and assist in resolving sensitive management problems.

**Management Improvement**—Cost reduction actions taken during the past fiscal year resulted in savings of more than \$37 million. These savings exceeded the initial goal by almost \$10 million. Actions taken in hospitals and clinics throughout the 50 States account for \$2.6 million of these savings, demonstrating cost awareness of the field station employees.

An increase in productivity in the Department of Veterans Benefits resulted in cost avoidance savings exceeding \$10 million.

A nationwide portfolio loan system installed on computers enabled savings of almost \$200,000 and 25 man-years to be achieved.

The installation of an optical character recognition system for handling insurance accounts has eliminated key punching and other

card-to-type actions on over 1.6 million forms annually.

The continued consolidation of VA laundries and introduction of labor saving devices resulted in savings of over \$200,000 and 32 man-years.

A sum of \$528,000 was realized on the silver reclamation program in processing old X-ray films.

**Hospital Security**—Major improvements in the capability of VA field stations to protect VA beneficiaries, visitors, employees and property were provided in FY 1972 through the full implementation of a comprehensive protective program. A total of 600 new protective officer positions were allocated to field stations, with priority given to those located within high crime areas. Higher protective personnel qualification standards and mandatory centralized training of hospital police were implemented. Department of Medicine and Surgery security and law enforcement procedural guidance developed in coordination with the U.S. Department of Justice, an automated crime reporting system, and the positioning of a senior protective specialist in each of the geographic regions, now enables centralized direction of efforts to reduce crime and adequately protect VA hospitals.

**Presidential Memorial Certificate Program**—At the request of the President, the VA conducts a program to honor the memory of deceased veterans, discharged under honorable conditions, by preparing and sending to the next of kin a certificate bearing the President's signature and expressing the Country's grateful recognition of the veteran's service in the Armed Forces. The certificate is issued under Section 112, Title 38, U.S. Code, to the next of kin immediately following notification of the veteran's death. Certificates may also be issued, upon request, to other relatives and friends of the deceased. During FY 1972, 131,400 certificates were issued to eligible next of kin.

## LAW AND LEGISLATION

**Legal Actions**—Legal actions include written opinions, as well as briefs, reports and other pleadings prepared for use in connection with

litigated cases. Some of the opinions rendered during FY 1972 involved interpretations of Federal laws and VA regulations relating to compensation, pension, insurance, vocational rehabilitation and education and the various other benefits administered by this Agency. Other opinions dealt with questions of appropriations, personnel, supply and construction contracts, and related problems. Many opinions were concerned with the applicability of both foreign, State, and local law and ordinances, in matters of domestic relations, personal status, inheritance, title to real and personal property, taxation, and diverse other areas. A similar variety arose in the field of litigation, although tort claims were among the most active and important. Legal actions for FY 1972 reached a total of 3,976.

In addition, the chief attorneys in the regional offices, under the professional guidance of the General Counsel, rendered 16,946 written legal opinions. More than one-half of these were on questions involving title to real property.

On June 30, 1971, there were pending 975 civil litigation suits of all types. During the year, 754 new cases were received and 786 were finally disposed of, leaving a balance of 943 as of June 30, 1972.

An increase in tort claims resulted in a total work load of 532 cases. Of these, 271 were closed resulting in a year end remaining balance of 261 cases.

Eighty-one insurance cases were terminated during the year, leaving a balance pending of 119.

As a part of its administrative responsibilities, the VA performs numerous investigations mainly for the purpose of determining the validity of claims and payments. In the course of these investigations, violations of penal provisions in Federal statutes are brought to our attention. Evidence of such criminal violations, possibly requiring prosecution, is submitted to the Department of Justice or to the United States Attorney having jurisdiction. Final responsibility as to the sufficiency of the evidence and the decision as to instituting a criminal prosecution is within the jurisdiction of the Department of Justice. Twenty-four such

cases were disposed of during the year, leaving a balance of 45 requiring further action.

The work in the various field offices of the VA is coordinated to insure that each office is kept abreast of statutory changes, precedential opinions, and development in other areas. Close collaboration is maintained with the officials of the Department of Justice in order that the instructions issued and advice given to the various United States Attorneys and the Chief Attorneys of the VA are wholly consistent. As necessary, the Agency confers with officials of the Department of Justice in the preparation of cases for trial and upon request makes VA records and witnesses available. The VA also assists in trials when requested.

An up-to-date law library is maintained with adequate facilities for research in Federal and State statutory and case law. The library is also the repository of the legal opinions rendered by the chief legal officers of the VA and its predecessor agencies. Precedential material is fully indexed and digested.

**Legislative Functions**—The type of activity classified as legislative functions includes the preparation of draft bills, participation in hearings before congressional committees, and analyses of legislation for the use of the committees or as requested by either the President or the Office of Management and Budget. As a necessary preparatory step, all of the 9,477 bills and resolutions introduced in Congress during FY 1972 were reviewed to determine their relevancy to veterans' programs.

During the fiscal year, legislative functions totalled 867, including 605 reports on pending legislation. These figures reflect a substantial gain in workload, but an accompanying increase in productivity has forestalled the accumulation of any significant backlogs.

A legislative reference and research service provides information and background material to our professional staff as well as to officials of departments and staff offices. This service also supplies information as to the current status of pending legislation to the Central Office and to the field stations.

**Congressional Liaison Service**—Congressional liaison activities were maintained through a

special staff with offices in the Senate and House Office Buildings. This service advises and assists the members of Congress and their staffs concerning claims for benefits by veterans and their dependents, and related matters under laws administered by the VA.

## APPELLATE REVIEW

All questions on claims for benefits under laws administered by the VA are subject to review on appeal. In each case the appeal is filed with the field office which took the action in question. If this office cannot resolve the issue to the satisfaction of the claimant, the case must be certified to the Board of Veterans Appeals for "de novo review" and final decision.

FY 1972 was a year of accomplishment in the VA appellate program. The benefits sought on appeal were granted to 13,597 claimants, representing more than one-fourth of the appeals filed. Processing time from receipt of an appeal in a field office until the final appellate decision by the Board was reduced from a high of almost 9 months last year to less than 8 months.

Aside from the vast in-house medical and legal expertise available and utilized for appellate purposes, 252 independent advisory medical opinions were requested from leading medical schools under the authority of 38 U.S.C. 4009.

Traveling sections of the Board conducted 327 formal hearings, in visits to 29 field offices, bringing our services closer to the veteran.

Vigorous and competent representation by veterans service organizations, who held power of attorney in 75 percent of the cases decided by the Board, greatly assisted the claimants in perfecting their appeals, and were helpful to the Board in making equitable decisions.

Through these endeavors, high quality appellate decisions were promulgated, reflecting both sympathetic understanding and the generous intent of the law.

In FY 1972, 54,189 appeals were initiated, an increase of 10 percent over the preceding year. This upward trend reflects the impact of the growing veteran population, which had climbed to 28.8 million at the end of the fiscal

year, including almost six million veterans of the Vietnam era. The variety of benefits sought on appeal was almost infinite. Major issues involved compensation and pension, education and training, loans, waivers of overpayment and indebtedness, specially adapted housing and automobiles, medical expenses, and numerous others.

Final dispositions of 54,053 appeals were entered during FY 1972. Of these, 25 percent were allowed, 30 percent were closed for failure to respond to the statement of case, 7 percent were withdrawn by the claimant, and 38 percent were denied. The following table shows appellate processing during FY 1972. This table includes certain interim processes, such as remands, which are subject to further consideration and determination.

Pending beginning of year .....	26,291
Undocketed, field office development not completed .....	20,694
Docketed, pending in BVA .....	5,597
Filed during year .....	54,189
Settled in field offices .....	28,659
Allowed on review of appealed action .....	9,860
Closed, failure to respond to statement of case .....	15,741
Withdrawn by appellant .....	3,058
Submitted to BVA .....	29,326
Decided by BVA .....	29,692
Allowed .....	3,737
Remanded for further action .....	4,328
Withdrawn .....	268
Denied or dismissed .....	21,359
Pending end of year .....	27,360
Undocketed, in field offices .....	22,129
Docketed, in BVA .....	5,231

At the close of FY 1972, 27,360 appeals were pending: 5,231 on the Board's docket and 22,129 in field offices in various stages of development.

## CIVIL RIGHTS

**Progress in Minority Business Enterprise**—The minority business enterprise (MBE) program of the VA is an integral part of all VA operations, nationwide, whether directly related to contracting activities, such as construction and supply, or indirectly related as in the case of programs for veterans counseling, and others which encourage or assist minority businessmen

or potential minority businessmen. The VA program is coordinated by the VA Committee for Minority Business Enterprise, composed of key officials of major departments and staff offices and chaired by the Director of the Contract Compliance Service.

In FY 1971 the VA exceeded its goal of \$3,500,000 for contracting under SBA's Section 8(a) program by 20.4 percent. FY 1971 contracting with minority owned firms was as follows:

	<u>Number</u>	<u>Amount</u>
SBA 8(a) contracts	116	\$ 4,215,000
Negotiated contracts	88	498,000
Competitive contracts	18,244	5,692,000
Total	<u>18,448</u>	<u>\$10,405,000</u>

In FY 1972, through still greater emphasis on the program, the Agency's SBA 8(a) program goal of \$5 million was exceeded by 90.2 percent. Total contracting with minority owned firms was \$16,800,000 an increase of \$6,395,000 over FY 1971. Even more significantly 26,912 more minority businesses gained contracts in 1972 than in 1971.

	<u>Number</u>	<u>Amount</u>
SBA 8(a) contracts	191	\$ 9,510,000
Negotiated contracts	274	158,000
Competitive contracts	44,895	7,132,000
Total	<u>45,360</u>	<u>\$16,800,000</u>

Even higher goals have been set for FY 1973. The VA looks upon this program as one which will be of continuing significance in the years to come. Every effort is being made to develop innovations in contracting procedures and informational programs to refine the MBE program and increase its scope and effectiveness.

**Construction Compliance**—The basic mission of Construction Compliance is to ensure that equal employment opportunity applies to the work forces on site at all VA construction projects.

The requirements under which this mission is carried out are found primarily in two sources: (1) Executive Order 11246, "Equal Employment Opportunity;" and (2) the 50-odd city plans implemented by the Office of

Federal Contract Compliance, U.S. Department of Labor.

Executive Order 11246 provides, inter alia, that equal employment opportunity should be attained by means of ". . .conference, conciliation, mediation, and persuasion."

All city plans place mandatory requirements upon all Federal contractors on construction projects within the geographical areas of such plans, calling for "goals and timetables" expressed in percentages and dates on minority group manpower utilization.

The VA has complied with all requirements placed on Federal agencies by these two sources, and has met with signal success, as evidenced by two basic facts: (1) No disciplinary action for non-compliance by a contractor has been found necessary on any of our construction projects, whether under a city plan or in areas not covered by city plans, and (2) An overall average of approximately 25 percent minority group representation has been maintained on all construction projects of major size, approaching costs of approximately \$500,000 or more. This average is believed to be unequalled by any other Federal agency.

The VA has attained these results only by a most vigorous effort, as exemplified by the following sample of construction compliance activities during FY 1972:

(1) Twenty-two Pre-Bid/Pre-Construction Conferences were conducted, to make contractors cognizant of what they would be expected to do to meet requirements.

(2) Approximately 600 Pre-Award Reviews were performed on low bidders, to assess the probable ability of each to comply with requirements.

(3) Approximately 3,900 Desk Reviews were conducted of VA contractors on the job, to evaluate day-to-day performance and to identify need for improvement.

(4) Site Surveys were performed with 328 VA contractors at work at VA construction sites, to evaluate their performance first-hand, and to obtain commitments for corrective action on weaknesses and shortcomings.

**Industrial Compliance**—The basic responsibility is to monitor and enforce compliance legislation within the Pharmaceutical, Drug, Soap and Detergent and Cosmetic industries to the extent that they contract with the Federal Government. The VA seeks to insure that these contractors are providing equal employment opportunity to all persons regardless of race, creed, color, national origin, religion or sex, as required by Executive Order.

The current workload consists of approximately 2,900 contractor facilities, 376 of which were surveyed on-site during FY 1972. Although deficiencies of minority and female representation were identified in nearly every instance, contractors were generally found to be acting affirmatively to correct inequities. However, on five occasions “show-cause notices” were issued when first negotiations did not resolve differences. All of these cases were later amicably settled before reaching the formal hearing stage.

Another area of major responsibility is the processing of requests by VA contracting officers for pre-award EEO clearance of all contracts of \$10,000 or more. Determinations of contractors’ abilities to comply with the EEO Clause of a Federal contract were made in the following manner:

(1) Evaluation of VA file data combined with telephone progress reports . . . . .	307
(2) Referral to other compliance agencies . . . . .	1,748
(3) On-site reviews (contracts of \$1 million or more) . . . . .	48
Total	<u>2,103</u>

Significantly, those clearances requiring an on-site review rose from 30 in FY 1971 to 48 in FY 1972.

Nearly 2 months in manhours were given by VA personnel to an interagency task force which has completely revised and standardized the compliance review format. Two principal results are foreseen from the in-depth investigation called for by the new procedures:

(1) Each compliance review is expected to require from 40 to 80 manhours.

(2) It is expected that even the most subtle forms of discrimination in employment practices will be discovered.

Already noticeable is a better control of compliance data, and most importantly, employment losses or gains for minorities and females may now be more accurately measured.

**Review of Actions under Title VI**—Title VI of the Civil Rights Act of 1964 provides that no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity receiving Federal financial assistance.

Statutory provisions pertinent to the VA, to which Title VI applies, are as follows:

(1) Payments to State homes (38 U.S.C. 641).

(2) State home facilities for furnishing nursing home care (38 U.S.C. 5031-5037).

(3) Space and office facilities for representatives of recognized national organizations (38 U.S.C. 3402 (a) (2)).

(4) Vocational Rehabilitation, Veterans Educational Assistance, and Administration of Educational Assistance (38 U.S.C. chs. 31, 34, 35, and 36, respectively).

(5) Exchange of medical information (38 U.S.C. 5055).

(6) Grants for assistance in remodeling, modification or alteration of existing State home hospital and domiciliary facilities (38 U.S.C. 644).

With regard to proprietary educational institutions the VA Contract Compliance Service during FY 1972 completed 128 on-site compliance reviews; requested and received 5,167 compliance reports by mail; and investigated and successfully conciliated seven complaints.

# Statistical Tables

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TABLE 1

## VETERAN POPULATION

Estimated Number, State, Period of Service—June 30, 1972

(In thousands)

State	Total Veterans	War veterans						Service between Korean conflict and Vietnam era only <sup>5</sup>	
		Total <sup>1</sup>	Vietnam era <sup>2</sup>		Korean conflict		World War II <sup>4</sup>		World War I
			Total <sup>3</sup>	No service in Korean conflict	Total <sup>3,4</sup>	No service in World War II			
Total.....	28,804	25,691	5,976	5,626	5,908	4,649	14,122	1,291	3,113
State total.....	28,591	25,514	5,908	5,561	5,855	4,605	14,068	1,277	3,077
Alabama.....	425	376	93	87	93	72	200	17	49
Alaska.....	32	28	8	8	7	5	14	1	4
Arizona.....	251	225	51	48	55	42	124	11	26
Arkansas.....	225	201	43	41	40	30	115	15	24
California.....	3,149	2,822	649	601	735	530	1,566	125	327
Colorado.....	307	272	66	62	66	50	147	13	35
Connecticut.....	453	408	88	82	97	77	231	18	45
Delaware.....	78	69	17	16	16	13	38	2	9
District of Columbia.....	125	113	25	23	31	22	61	7	12
Florida.....	1,044	941	202	188	219	157	531	65	103
Georgia.....	498	444	105	99	105	81	245	19	54
Hawaii.....	72	61	21	20	16	12	27	2	11
Idaho.....	103	90	25	24	18	14	47	5	13
Illinois.....	1,629	1,461	324	306	324	268	813	74	168
Indiana.....	733	649	162	154	147	122	340	33	84
Iowa.....	390	436	83	79	75	63	180	24	44
Kansas.....	305	274	60	56	61	48	153	17	31
Kentucky.....	401	353	87	83	77	62	189	19	48
Louisiana.....	448	397	97	92	88	69	218	18	51
Maine.....	144	126	32	31	26	21	66	8	18
Maryland.....	547	491	111	104	122	93	275	19	56
Massachusetts.....	851	767	163	152	175	137	436	42	84
Michigan.....	1,217	1,076	269	256	238	201	570	49	141
Minnesota.....	548	482	126	120	108	89	244	29	66
Mississippi.....	223	200	42	39	44	33	116	12	23
Missouri.....	674	602	139	131	137	109	325	37	72
Montana.....	100	89	21	20	19	15	49	5	11
Nebraska.....	188	167	40	38	39	32	87	10	21
Nevada.....	69	62	14	13	17	11	36	2	7
New Hampshire.....	111	98	24	23	22	17	53	5	13
New Jersey.....	1,103	995	210	197	225	183	570	45	108
New Mexico.....	144	127	32	30	32	24	68	5	17
New York.....	2,619	2,365	486	458	516	431	1,358	118	254
North Carolina.....	557	496	115	109	116	94	272	21	61
North Dakota.....	74	63	20	19	13	11	30	3	11
Ohio.....	1,593	1,417	341	323	309	255	777	62	176
Oklahoma.....	352	313	74	69	71	52	172	20	39
Oregon.....	330	292	73	69	60	45	160	18	38
Pennsylvania.....	1,841	1,643	373	353	347	280	933	77	198
Rhode Island.....	131	119	23	21	28	21	71	6	12
South Carolina.....	273	242	58	54	58	45	132	11	31
South Dakota.....	85	75	18	17	18	15	38	5	10
Tennessee.....	506	449	108	102	102	82	243	22	57
Texas.....	1,430	1,277	293	275	294	225	718	59	153
Utah.....	137	121	32	30	30	24	62	5	16
Vermont.....	61	53	15	14	12	9	27	3	8
Virginia.....	567	507	114	106	128	93	287	21	60
Washington.....	500	443	111	104	104	76	238	25	57
West Virginia.....	275	237	68	65	47	38	121	13	38
Wisconsin.....	615	538	146	140	117	98	268	32	77
Wyoming.....	55	49	11	10	11	9	27	3	6
Outside U.S.—total <sup>7</sup> .....	213	177	68	65	53	44	54	14	26

Note. These estimates are based on State "benchmark" veteran population statistics as of June 30, 1960, developed from 1960 Census of Population data on veterans' place of residence, extended to June 30, 1972 on the basis of (1) 1955-60 veteran interstate migration statistics from the 1960 census; (2) Bureau of the Census estimates of 1960-71 (provisional for 1970-71) net civilian migration of the states; "Current Population Reports," series P-25, No. 468, Oct. 5, 1971; and (3) special unpublished Bureau of the Census data on mobility of the male veteran population, 1966-67, and mobility of the U.S. population 1970-71, "Current Population Reports," series P-20, No. 236, April 1972.

These State veteran population estimates are consistent with the benchmark statistics for June 30, 1960 and all dates since June 30, 1964. They are independent of, and therefore not directly comparable with estimates for Dec. 31, 1960 through Dec. 31, 1963. (War veteran benchmark estimates for each State have been published in Research Monograph 7, "COUNTY VETERAN POPULATION—JUNE 30, 1960," Research Statistics Service, Office of Controller, Veterans' Administration.)

See footnotes at end of table 3.

VETERAN POPULATION

TABLE 2

Estimated Number, Regional Office, Period of Service—June 30, 1972

(In thousands)

Regional office	Total veterans	War veterans						Service between Korean conflict and Vietnam era only <sup>1</sup>	
		Total <sup>1</sup>	Vietnam era <sup>2</sup>		Korean conflict		World War II <sup>4</sup>		World War I
			Total <sup>3</sup>	No service in Korean conflict	Total <sup>3,4</sup>	No service in World War II			
Total.....	28,804	25,091	5,976	5,626	5,908	4,649	14,122	1,291	3,113
Alabama: Montgomery.....	425	376	93	87	93	72	200	17	49
Alaska: Juneau.....	32	28	8	8	7	5	14	1	4
Arizona: Phoenix.....	261	225	51	45	55	42	124	11	26
Arkansas: Little Rock.....	229	205	44	42	41	31	117	13	24
California:									
Los Angeles.....	1,963	1,784	395	366	471	338	984	76	199
San Francisco.....	1,217	1,086	261	241	272	197	598	50	131
Colorado: Denver.....	307	272	66	62	66	50	147	13	35
Connecticut: Hartford.....	453	408	88	82	97	77	231	18	45
Delaware: Wilmington.....	78	69	17	16	16	13	38	2	9
District of Columbia: Washington.....	412	371	82	76	100	68	212	14	41
Florida: St. Petersburg.....	1,044	941	202	188	219	157	531	65	103
Georgia: Atlanta.....	498	444	105	99	105	81	245	19	54
Hawaii: Honolulu.....	72	61	21	20	16	12	27	2	11
Idaho: Boise.....	103	90	25	24	18	14	47	5	13
Illinois: Chicago.....	1,738	1,558	347	328	346	286	866	78	180
Indiana: Indianapolis.....	624	552	139	132	125	104	287	29	72
Iowa: Des Moines.....	390	346	83	79	75	63	180	24	44
Kansas: Wichita.....	305	274	60	56	61	48	153	17	31
Kentucky: Louisville.....	401	353	87	83	77	62	189	19	48
Louisiana: New Orleans.....	448	397	97	92	88	69	218	18	51
Maine: Togus.....	144	126	32	31	26	21	66	8	18
Maryland: Baltimore.....	371	333	75	70	82	65	183	15	38
Massachusetts: Boston.....	771	695	148	138	159	125	394	38	76
Michigan: Detroit.....	1,217	1,076	269	256	238	201	570	49	141
Minnesota: St. Paul.....	513	452	117	112	102	84	229	27	61
Mississippi: Jackson.....	223	200	42	39	44	33	116	12	23
Missouri: St. Louis.....	674	602	139	131	137	109	325	37	72
Montana: Fort Harrison.....	100	89	21	20	19	15	47	1	11
Nebraska: Lincoln.....	188	167	40	38	39	32	87	10	21
Nevada: Reno.....	38	34	7	7	9	6	20	1	4
New Hampshire: Manchester.....	111	98	24	23	22	17	53	5	13
New Jersey: Newark.....	1,103	995	210	197	225	183	570	45	108
New Mexico: Albuquerque.....	144	127	32	30	32	24	68	5	17
New York:									
Buffalo.....	662	596	127	119	136	112	335	30	66
New York.....	1,957	1,769	359	339	380	319	1,023	88	188
North Carolina: Winston-Salem.....	557	496	115	109	116	94	272	21	61
North Dakota: Fargo.....	109	93	29	27	19	16	45	5	16
Ohio: Cleveland.....	1,593	1,417	341	323	309	255	777	62	176
Oklahoma: Muskogee.....	352	313	74	69	71	52	172	20	39
Oregon: Portland.....	330	292	73	69	60	45	160	18	38
Pennsylvania:									
Philadelphia.....	1,174	1,046	242	229	224	179	588	50	128
Pittsburgh.....	698	624	139	131	129	106	359	28	74
Puerto Rico: San Juan.....	174	142	62	59	48	42	36	5	32
Rhode Island: Providence.....	211	191	38	35	44	33	113	10	20
South Carolina: Columbia.....	273	242	58	54	58	45	132	11	31
South Dakota: Sioux Falls.....	85	75	18	17	18	15	38	5	10
Tennessee: Nashville.....	506	449	108	102	102	82	243	22	57
Texas:									
Houston.....	630	563	129	121	133	102	315	25	67
Waco.....	796	710	163	153	160	122	401	34	86
Utah: Salt Lake City.....	137	121	32	30	30	24	62	5	16
Vermont: White River Jct.....	61	53	15	14	12	9	27	3	8
Virginia: Roanoke.....	456	407	93	86	99	75	228	18	49
Washington: Seattle.....	500	443	111	104	104	76	238	25	57
West Virginia: Huntington.....	244	210	60	58	41	33	107	12	34
Wisconsin: Milwaukee.....	615	538	146	140	117	98	268	32	77
Wyoming: Cheyenne.....	55	49	11	10	11	9	27	3	6
Philippines: Manila.....	17	16	(*)	(*)	2	1	12	3	1
All other.....	22	19	6	6	3	1	6	6	3

Note. For all regional offices whose jurisdiction includes only part of a State or extends into another State, the estimates of veterans are computed by applying the most recent veteran population ratio factors for the counties or urban places involved, as reported in *Research Monograph 10*, "COUNTY See footnotes at end of table 3.

VETERAN POPULATION—DECEMBER 31, 1969", Reports and Statistics Service, Office of Controller, Veterans' Administration. Refer to general note below table "Estimated Number of Veterans in Civil Life, by State".

TABLE 3

## VETERAN POPULATION

Estimated Age, Period of Service—June 30, 1972

(In thousands)

Age	Total veterans	War veterans							Service between Korean conflict and Vietnam era only <sup>5</sup>
		Total <sup>1</sup>	Vietnam era <sup>2</sup>		Korean conflict		World War II <sup>4</sup>	World War I	
			Total <sup>3</sup>	No service in Korean conflict	Total <sup>3,4</sup>	No service in World War II			
All ages.....	28,804	25,691	5,976	5,626	5,908	4,649	14,122	1,291	3,113
Under 20 years.....	36	36	36	36					
20 to 24 years.....	1,725	1,725	1,725	1,725					
25 to 29 years.....	3,175	2,888	2,888	2,888					287
30 to 34 years.....	2,519	892	884	884					1,627
35 to 39 years.....	2,588	1,495	106	76	1,419	1,419	(*)		1,093
40 to 44 years.....	3,639	3,544	139	11	3,042	2,876	657		95
45 to 49 years.....	4,719	4,710	95	4	774	299	4,407		9
50 to 54 years.....	4,622	4,620	63	2	388	31	4,587		2
55 to 59 years.....	2,519	2,519	30	(*)	173	14	2,505		
60 to 64 years.....	1,237	1,237	9	(*)	68	2	1,235		
65 to 69 years.....	522	522	1		25	(*)	522	(*)	
70 to 74 years.....	362	362			9	(*)	173	189	
75 to 79 years.....	818	818			2		30	788	
80 to 84 years.....	285	285			(*)		5	280	
85 years and over.....	38	38			(*)		1	34	
Average age <sup>6</sup> .....	44.7 yrs.	46.0 yrs.	27.6 yrs.	26.4 yrs.	43.0 yrs.	40.9 yrs.	52.6 yrs.	77.5 yrs.	33.7 yrs.

<sup>1</sup> Veterans who served in both World War II and the Korean conflict, and in both the Korean conflict and the Vietnam era are counted once. Includes 1 Indian Wars veteran who was 100 years old on his last birthday.

<sup>2</sup> Service after Aug. 4, 1964.

<sup>3</sup> Includes 350,000 veterans who served in both the Korean conflict and the Vietnam era.

<sup>4</sup> Includes 1,259,000 veterans who served in both World War II and the Korean conflict.

<sup>5</sup> Former members of the Armed Forces whose only service was on active duty between Jan. 31, 1955 and Aug. 5, 1964.

<sup>6</sup> Includes 3,000 Spanish-American War veterans, average age 92.8 years.

<sup>7</sup> Includes Commonwealth of Puerto Rico, U.S. possessions and outlying areas, and foreign countries.

<sup>8</sup> Computed from data by single year of age.

\*Less than 0.5 (thousands).

TABLE 4

## HEALTH CARE

Inpatient and Extended Care: Average Daily Census, Average Operating Beds—Fiscal Years 1968-72

Fiscal year	Average daily patient and member census <sup>1</sup>							
	Total hospital patients, members, restorees, and nursing bed care patients	Patients				Members		
		Total	VA hospitals	Non-VA hospitals	State homes	Total	VA domiciliaries	State homes
1972.....	113,905	83,185	80,971	1,154	1,060	17,324	11,355	5,969
1971.....	115,758	86,319	84,002	1,251	1,066	17,888	12,008	5,880
1970.....	116,580	87,460	85,547	1,495	418	18,680	11,998	6,682
1969.....	122,771	93,547	91,878	1,669		19,552	12,412	7,140
1968.....	128,185	99,450	97,425	2,025		20,058	12,592	7,466

Fiscal year	Average daily restoree and nursing bed care census <sup>1</sup>					Average operating beds <sup>2</sup>			
	Restorees	Nursing bed care				VA hospitals		VA domiciliaries	VA restoration centers
		VA restoration centers	Total	VA hospitals	State homes	Community nursing homes	Patient beds		
1972.....	631	12,765	5,440	3,335	3,990	96,352	5,819	12,338	759
1971.....	677	10,874	4,699	2,898	3,377	98,956	5,052	12,873	759
1970.....	667	9,773	3,760	2,432	3,581	102,633	4,002	13,200	759
1969.....	642	9,030	3,700	2,153	3,177	107,013	4,000	13,523	759
1968.....	610	8,067	3,468	1,795	2,804	112,394	4,000	13,528	759

<sup>1</sup> Based on total patient, member, restoree, and nursing bed days of care during year divided by the number of days in the year.

<sup>2</sup> Based on the number of operating beds at the end of each month for 13

consecutive months beginning with June of the prior fiscal year and ending with June of the indicated fiscal year.

HEALTH CARE

TABLE 5

*Inpatient and Extended Care: Applications for Care—Fiscal Year 1972*

Applications	Hospitalization	Domiciliary care			State home nursing care
		Total	VA	State home	
Pending beginning of year.....	3,977	338	268	40	30
Total received during year.....	1,443,706	26,128	17,260	8,868	2,159
From veteran or his representative <sup>1</sup> .....	1,440,858	23,280	14,412	8,868	2,159
By transfer.....	2,848	2,848	2,848	.....	.....
Total dispositions.....	1,474,426	26,282	17,408	8,874	2,136
Canceled or withdrawn—prior to eligibility determination.....	64,421	689	663	26	14
By transfer—prior to eligibility determination.....	31,187	2,162	2,134	28	.....
Eligible and in need of care.....	872,644	20,703	12,076	8,627	2,122
Not eligible or not in need of care.....	506,174	2,728	2,535	193	.....
Pending end of year.....	4,246	154	120	34	53

<sup>1</sup> Includes applications reinstated after cancellation.

INPATIENT CARE

TABLE 6

*VA, Non-VA and State Home Hospitals; Admissions, Discharges, Remaining—Fiscal Years 1968–72*

Fiscal year	Admissions				Discharges			
	Total	Hospitals			Total	Hospitals		
		VA <sup>1</sup>	Non-VA <sup>2</sup>	State home <sup>3</sup>		VA <sup>1,4</sup>	Non-VA <sup>2,4</sup>	State home <sup>3</sup>
1972.....	793,538	765,786	21,578	6,174	794,785	766,892	21,682	6,211
1971.....	760,546	723,907	20,982	5,687	765,268	733,594	21,022	5,652
1970.....	711,289	687,037	20,524	3,728	717,022	698,496	20,840	2,686
1969.....	689,459	667,353	22,076	.....	698,926	676,773	22,158	.....
1968.....	670,600	647,241	23,359	.....	678,506	654,683	23,823	.....
Remaining June 30								
Total	VA hospitals			Non-VA hospitals			State home hospitals <sup>3</sup>	
	VA	Bed occupants	ABO <sup>5</sup>	VA	Bed occupants	ABO <sup>5</sup>	Bed occupants	
1972.....	81,489	79,406	77,344	2,062	1,053	820	233	1,030
1971.....	82,207	79,985	78,453	1,532	1,146	952	194	1,076
1970.....	96,040	93,805	81,976	11,829	1,202	1,034	168	1,033
1969.....	101,541	99,541	85,909	13,632	1,545	1,402	143	.....
1968.....	109,365	107,743	91,735	16,008	1,622	1,459	153	.....

<sup>1</sup> Interhospital transfer data are excluded.

<sup>2</sup> Includes transfers.

<sup>3</sup> Program initiated Dec. 30, 1969.

<sup>4</sup> Includes regular discharges, irregular discharges and deaths.

<sup>5</sup> Denotes absent bed occupants on the hospital rolls who were on leave, trial visit, etc. for fiscal years 1968–70; for fiscal years 1971 and 1972, trial visit data were not available for VA hospitals due to change in reporting procedure.

TABLE 7

## INPATIENT CARE

VA, Non-VA and State Home Hospitals; Admissions, Discharges, Remaining; Type of Hospital and Bed Section—Fiscal Year 1972

Hospital group	All hospitals	Patients by type of bed section				State home hospitals
		Total	Psychiatry	Surgery	Medical	
<b>ADMISSIONS <sup>1</sup></b>						
All hospitals <sup>1</sup> .....	793, 538	787, 364	134, 711	280, 692	371, 961	6, 174
Total VA hospitals <sup>1</sup> .....	765, 786	765, 786	128, 580	276, 873	360, 333	
Psychiatric hospitals.....	61, 662	61, 662	49, 289	2, 502	9, 871	
General hospitals.....	704, 124	704, 124	79, 291	274, 371	350, 462	
Total non-VA hospitals.....	21, 578	21, 578	6, 131	3, 819	11, 628	
Federal Government hospitals.....	6, 977	6, 977	205	2, 454	4, 318	
U.S. Army.....	2, 420	2, 420	72	891	1, 457	
U.S. Air Force.....	951	951	86	329	536	
U.S. Navy.....	3, 394	3, 394	8	1, 204	2, 182	
U.S. Public Health Service.....	179	179	31	23	125	
Other.....	33	33	8	7	18	
Non-Federal hospitals (Veterans Memorial Hospital, Manila).....	1, 357	1, 357	132	384	841	
State and local government hospitals <sup>2</sup> .....	4, 571	4, 751	3, 378	147	1, 226	
Nonpublic hospitals.....	8, 493	8, 493	2, 416	834	5, 243	
State home hospitals.....	6, 174					6, 174
<b>DISCHARGES <sup>1</sup></b>						
All hospitals <sup>1</sup> .....	794, 785	788, 574	139, 055	291, 478	358, 041	6, 211
Total VA hospitals <sup>1</sup> .....	766, 892	766, 892	132, 869	287, 554	346, 469	
Psychiatric hospitals.....	64, 931	64, 931	52, 862	2, 587	9, 482	
General hospitals.....	701, 961	701, 961	80, 007	284, 967	336, 987	
Total non-VA hospitals.....	21, 682	21, 682	6, 186	3, 924	11, 572	
Federal Government hospitals.....	7, 082	7, 082	203	2, 573	4, 306	
U.S. Army.....	2, 467	2, 467	78	950	1, 439	
U.S. Air Force.....	951	951	82	326	543	
U.S. Navy.....	3, 451	3, 451	8	1, 266	2, 177	
U.S. Public Health Service.....	181	181	27	25	129	
Other.....	32	32	8	6	18	
Non-Federal hospitals (VMH Manila).....	1, 342	1, 342	125	376	841	
State and local government hospitals <sup>2</sup> .....	4, 683	4, 683	3, 315	154	1, 214	
Nonpublic hospitals.....	8, 575	8, 575	2, 643	821	5, 211	
State home hospitals.....	6, 211					6, 211
<b>REMAINING</b>						
Bed occupants in hospital June 30, 1972:						
All hospitals.....	79, 194	78, 164	28, 195	13, 764	36, 205	1, 030
Total VA hospitals.....	77, 344	77, 344	27, 852	13, 639	35, 853	
Psychiatric hospitals.....	24, 268	24, 268	15, 800	295	8, 173	
General hospitals.....	53, 076	53, 076	12, 052	13, 344	27, 680	
Total non-VA hospitals.....	820	820	343	125	352	
Federal Government hospitals.....	242	242	19	60	163	
U.S. Army.....	107	107	3	33	71	
U.S. Air Force.....	34	34	5	9	20	
U.S. Navy.....	81	81		15	66	
U.S. Public Health Service.....	9	9	3	2	4	
Other.....	11	11	8	1	2	
Non-Federal hospitals (VMH Manila).....	144	144	25	34	85	
State and local government hospitals <sup>2</sup> .....	148	148	144		4	
Nonpublic hospitals.....	286	286	155	31	100	
State home hospitals.....	1, 030					1, 030
<b>REMAINING</b>						
Absent bed occupants June 30, 1972:						
All hospitals.....	2, 295	2, 295	1, 657	273	265	
Total non-VA hospitals.....	233	233	230	1	2	
Total VA hospitals.....	2, 062	2, 062	1, 427	272	363	
Psychiatric hospitals.....	932	932	870	3	59	
General hospitals.....	1, 130	1, 130	557	669	304	

<sup>1</sup> Excludes interhospital transfers for VA hospitals; includes transfers for non-VA hospitals. Discharges include deaths.

<sup>2</sup> Includes hospitals operated by State, County and Municipal governments.

INPATIENT CARE

TABLE 8

VA Hospitals: Average Operating Beds, Average Daily Census, Patients Treated—During Fiscal Year 1972

Hospital	Average operating beds <sup>1</sup>				Average daily patient census <sup>2</sup>				Total number of patients treated
	Total	Bed section <sup>3</sup>			Total	Bed section <sup>3</sup>			
		Psychiatry <sup>4</sup>	Surgery	Medical <sup>4</sup>		Psychiatry <sup>4</sup>	Surgery	Medical <sup>4</sup>	
All hospitals.....	96,352	37,137	19,212	40,003	80,971	31,422	15,340	34,208	<sup>5</sup> 846,298
Psychiatric hospitals <sup>6</sup> .....	28,180	22,218	442	5,520	24,620	19,084	333	5,208	<sup>5</sup> 90,131
General hospitals <sup>6</sup> .....	68,172	14,919	18,770	34,483	56,352	12,339	15,008	29,006	<sup>5</sup> 756,167
PSYCHIATRIC HOSPITALS <sup>6</sup>									
Alabama: Tuscaloosa.....	777	664		113	649	552		97	4,164
California: Los Angeles (Brentwood).....	514	482		32	408	384		24	4,067
Colorado: Fort Lyon.....	600	562		38	545	507		38	2,148
Illinois: Downey.....	2,068	1,603	37	515	1,845	1,357	24	463	5,707
Indiana: Marion.....	1,335	909		426	1,160	738		422	3,365
Iowa: Knoxville.....	821	513		308	712	396		315	1,780
Kansas: Topeka.....	876	495	53	327	743	406	42	295	4,861
Maryland: Perry Point.....	1,079	880	15	184	909	717	14	178	3,699
Massachusetts:									
Bedford.....	899	694	19	186	810	602	17	192	3,786
Brockton.....	931	859	21	52	849	792	14	43	2,982
Northampton.....	749	650	28	71	661	577	22	62	2,156
Michigan: Battle Creek.....	1,250	1,078		172	1,101	924		177	4,696
Minnesota: St. Cloud.....	1,020	610	14	396	881	473	11	397	2,710
New Jersey: Lyons.....	1,623	1,367	30	236	1,461	1,207	22	232	3,728
New York:									
Canandaigua.....	1,096	951	21	123	968	837	17	115	2,849
Montrose.....	1,543	1,368	32	143	1,376	1,232	19	124	3,588
North Carolina: Salisbury.....	904	674	51	179	810	592	40	178	3,663
Ohio:									
Brecksville.....	903	718	18	167	808	632	13	164	4,746
Chillicothe.....	1,609	1,095	25	489	1,392	858	16	519	3,822
Oregon: Roseburg.....	436	370	20	46	362	302	16	44	2,502
Pennsylvania:									
Coatesville.....	1,504	1,213	25	266	1,345	1,118	18	209	3,966
Pittsburgh.....	951	722	14	215	839	626	7	206	2,675
South Dakota: Fort Meade.....	420	342	16	63	379	310	21	48	2,267
Tennessee: Murfreesboro.....	1,066	773		293	903	663		240	3,006
Texas: Waco.....	1,301	1,153		147	1,048	920		128	4,306
Washington: American Lake.....	716	662		54	612	569		43	2,193
Wisconsin: Tomah.....	503	574	3	226	767	497	1	210	2,554
Wyoming: Sheridan.....	395	344		51	337	296		41	1,938
GENERAL HOSPITALS <sup>6</sup>									
Alabama:									
Birmingham.....	483	41	225	217	411	36	198	177	8,716
Montgomery.....	253		90	163	184		55	129	3,673
Tuskegee.....	1,111	762	107	242	973	692	82	199	5,093
Arizona:									
Phoenix.....	215	34	81	100	207	33	75	99	4,100
Prescott.....	240		40	200	175		34	141	3,561
Tucson.....	319	31	114	174	230	27	81	122	5,100
Arkansas:									
Fayetteville.....	230		78	152	190		65	125	4,459
Little Rock <sup>6</sup> .....	1,598	821	231	546	1,398	716	194	488	14,630
California:									
Fresno.....	264	35	108	121	227	31	90	106	4,910
Livermore.....	279		89	190	226		65	161	2,925
Long Beach.....	1,668	148	350	1,169	1,493	137	301	1,056	18,552
Los Angeles (Wadsworth).....	879	7	244	628	720	6	185	529	9,442
Martinez.....	487	70	174	243	409	55	151	205	7,155
Palo Alto <sup>6</sup> .....	1,442	1,122	144	176	1,132	896	115	121	9,993
San Diego <sup>6</sup> .....	131	15	58	58	66	4	28	34	1,180
San Francisco.....	352		187	165	277		153	124	5,720
Sepulveda.....	872	394	181	297	738	356	127	254	7,534
Colorado:									
Denver.....	395	71	177	147	335	62	151	122	7,282
Grand Junction.....	103		39	64	88		29	59	1,449
Connecticut:									
Newington.....	194	24	91	79	155	17	71	57	3,197
West Haven.....	711	111	178	423	521	82	107	332	6,127
Delaware: Wilmington.....	338		142	196	252		103	150	4,585
District of Columbia: Washington.....	694	180	201	313	606	168	169	269	8,857
Florida:									
Bay Pines.....	660	96	162	402	621	102	136	383	7,631
Gainesville.....	471	81	197	193	372	69	169	184	8,902
Lake City.....	435		104	331	318		71	247	4,699
Miami.....	781	164	231	387	641	153	183	304	12,269
Georgia:									
Atlanta.....	493	46	224	223	419	50	178	190	8,361
Augusta <sup>6</sup> .....	1,318	732	151	435	1,101	600	116	385	8,288
Dublin.....	483		99	384	373		70	303	3,766

See footnotes at end of table.

TABLE 8—CONTINUED

INPATIENT CARE

VA Hospitals: Average Operating Beds, Average Daily Census, Patients Treated—During Fiscal Year 1972

Hospital	Average operating beds <sup>1</sup>				Average daily patient census <sup>2</sup>				Total number of patients treated
	Total	Bed section <sup>3</sup>			Total	Bed section <sup>3</sup>			
		Psychiatry <sup>4</sup>	Surgery	Medical <sup>4</sup>		Psychiatry <sup>4</sup>	Surgery	Medical <sup>4</sup>	
Idaho: Boise.....	172		77	95	148		67	81	2,487
Illinois:									
Chicago (Research).....	523	28	232	263	447	27	193	277	7,946
Chicago (West Side).....	545	84	192	269	517	83	177	257	8,735
Danville.....	1,439	896	70	472	1,127	667	60	400	4,277
Hines.....	1,398	120	473	805	1,254	101	426	728	15,562
Marion.....	180		31	99	113		26	88	2,730
Indiana:									
Fort Wayne.....	178		67	111	154		59	95	2,789
Indianapolis <sup>5</sup> .....	638	78	195	365	537	72	160	304	9,442
Iowa:									
Des Moines.....	362		159	203	302		114	188	5,594
Iowa City.....	405	50	169	186	298	44	126	128	6,019
Kansas:									
Leavenworth <sup>10</sup> .....	627	206	126	295	495	151	91	254	5,666
Wichita.....	200		98	102	163		73	91	3,099
Kentucky:									
Lexington.....	819	541	91	187	694	450	71	173	6,757
Louisville.....	451	43	212	196	347	38	149	160	6,050
Louisiana:									
Alexandria.....	428			285	327		89	237	4,568
New Orleans.....	564	55	216	293	499	48	186	265	8,889
Shreveport.....	452	62	138	252	385	58	109	218	7,525
Maine: Togus.....	822	519	99	203	755	497	79	179	4,803
Maryland:									
Baltimore.....	283	9	101	174	221	6	76	139	5,297
Fort Howard.....	242		12	230	223		8	215	1,699
Massachusetts:									
Boston.....	840	109	260	472	708	105	213	390	11,184
West Roxbury.....	292		73	219	211		44	168	2,631
Michigan:									
Allen Park.....	698	7	206	485	573	5	166	401	7,774
Ann Arbor.....	389	74	166	159	301	61	116	124	6,132
Iron Mountain.....	229		92	137	184		67	117	2,646
Saginaw.....	217		88	129	177		75	103	2,533
Minnesota: Minneapolis.....	920	104	373	443	704	93	290	321	13,204
Mississippi:									
Biloxi <sup>6</sup> .....	885	561	84	240	737	435	75	227	5,070
Jackson.....	498	70	188	240	427	49	160	218	8,036
Missouri:									
Columbia <sup>11</sup> .....	25	7	9	9	19	3	8	8	466
Kansas City.....	503	63	206	234	402	58	170	173	8,768
Poplar Bluff.....	179		79	100	140		57	83	3,118
St. Louis <sup>8</sup> .....	1,137	473	246	418	895	296	221	378	11,253
Montana:									
Fort Harrison.....	160		62	98	139		48	91	2,459
Miles City.....	96		46	50	75		32	43	1,605
Nebraska:									
Grand Island.....	172		30	142	133		31	102	1,766
Lincoln.....	200	41	84	75	164	39	66	50	2,638
Omaha.....	458	86	134	238	371	78	114	179	6,559
Nevada: Reno.....	173		86	87	157		78	79	3,224
New Hampshire: Manchester.....	150		56	94	134		44	90	2,699
New Jersey: East Orange.....	942	110	243	589	782	90	201	491	8,220
New Mexico: Albuquerque.....	430	71	145	214	346	60	123	163	7,089
New York:									
Albany.....	872	140	238	493	697	105	180	412	7,309
Batavia.....	233		40	193	197		25	171	1,823
Bath.....	208	11	31	166	197	12	29	156	1,376
Bronx.....	974	107	316	550	789	93	249	447	9,349
Brooklyn.....	1,000	120	313	507	799	100	201	498	10,386
Buffalo.....	879	122	245	512	728	96	187	445	8,057
Castle Point.....	258		48	210	195		44	151	1,593
New York.....	1,082	173	397	512	894	167	292	436	12,057
Northport <sup>12</sup> .....	961	678	22	260	756	477	22	257	3,687
Syracuse.....	407	89	179	139	318	70	142	106	4,852
North Carolina:									
Durham.....	489	81	216	192	389	58	187	145	8,211
Fayetteville.....	390	39	102	240	335	36	80	220	5,248
Oteen.....	562	30	147	384	487	28	133	327	6,484
North Dakota: Fargo.....	224		72	152	176		56	119	3,090
Ohio:									
Cincinnati.....	450	78	199	173	358	61	169	128	6,241
Cleveland.....	780	40	295	445	648	34	233	382	8,171
Dayton.....	718	60	197	461	616	56	163	397	6,510
Oklahoma:									
Muskogee.....	262		101	161	197		76	122	3,725
Oklahoma City.....	468	95	168	205	374	85	142	148	7,937
Oregon: Portland.....	517	21	197	299	445	9	173	263	8,291

See footnotes at end of table.

VA Hospitals Average Operating Beds, Average Daily Census, Patients Treated—During Fiscal Year 1972

Hospital	Average operating beds <sup>1</sup>			Average daily patient census <sup>2</sup>			Total number of patients treated	
	Total	Bed section <sup>3</sup>		Total	Bed section <sup>3</sup>			
		Psychiatry <sup>4</sup>	Surgery		Medical <sup>4</sup>	Psychiatry <sup>4</sup>		Surgery
<b>Pennsylvania:</b>								
Altoona.....	170		45	125	145	41	105	1,612
Butler.....	382			382	295		295	2,879
Erie.....	134		42	92	123		87	2,188
Lebanon.....	936	686	31	218	796	613	26	2,809
Philadelphia.....	492	38	185	269	429	33	168	7,780
Pittsburgh <sup>11</sup> .....	737	26	350	406	582	18	267	7,818
Wilkes-Barre.....	600	112	121	267	407	105	99	4,363
Puerto Rico: San Juan.....	688	240	156	292	640	287	147	8,798
Rhode Island: Providence.....	336	39	98	199	299	36	81	3,849
<b>South Carolina:</b>								
Charleston.....	376	40	178	158	270	39	117	5,555
Columbia.....	418	34	179	205	370	30	148	5,679
<b>South Dakota:</b>								
Hot Springs.....	285	12	42	181	198	14	31	2,171
Sioux Falls.....	250	29	88	133	210	24	66	4,064
<b>Tennessee:</b>								
Memphis.....	923	168	208	547	774	145	162	12,748
Mountain Home.....	491	68	188	295	430	47	119	6,324
Nashville.....	479	36	209	234	412	33	183	8,452
<b>Texas:</b>								
Amarillo.....	141		71	70	103		48	2,455
Big Spring.....	225		77	148	182		48	3,499
Bonham.....	56		26	30	53		24	1,121
Dallas.....	688	81	320	288	605	82	267	11,628
Houston.....	1,242	373	272	697	1,123	362	232	16,878
Kerrville.....	310		84	226	287		76	3,695
Marlin.....	222			222	191		111	1,665
Temple.....	700	133	192	375	598	111	172	3,276
Utah: Salt Lake City.....	561	247	145	169	426	180	109	5,769
Vermont: White River Jct.....	192	15	97	80	151	13	68	3,299
<b>Virginia:</b>								
Hampton.....	588	98	113	327	457	64	93	4,612
Richmond.....	968		210	658	723		169	9,588
Salem.....	1,272	635	80	357	929	530	58	6,773
<b>Washington:</b>								
Seattle.....	302	66	116	120	281	62	98	6,784
Spokane.....	206		92	114	178		78	2,594
Vancouver.....	368	36	117	216	262	30	94	4,378
Walla Walla.....	212		49	163	167		33	2,108
<b>West Virginia:</b>								
Beckley.....	172		50	122	129		37	2,944
Clarksburg.....	200	25	88	89	171	26	60	3,406
Huntington.....	172		70	102	146		51	4,133
Martinsburg.....	687	40	142	505	536	37	96	5,244
<b>Wisconsin:</b>								
Madison.....	420	22	152	246	320	16	125	6,267
Wood.....	819	90	266	463	606	53	197	9,128
<b>Wyoming: Cheyenne.....</b>	127		49	78	112		42	1,783

<sup>1</sup> Based on the number of operating beds at the end of each month of 13 consecutive months (June 1971-June 1972). In some instances, the operating beds by type of bed do not add to total because of rounding of figures in computations.

<sup>2</sup> Based on total patient-days during fiscal year divided by the number of days in year.

<sup>3</sup> Beds are classified according to their intended use and patients occupying them are classified accordingly rather than on a diagnostic basis.

<sup>4</sup> "Psychiatry" includes data for psychiatric medically infirm. "Medical" includes data for neurological, intermediate, spinal cord injury, physical medical and rehabilitation, blind rehabilitation and medicine (consisting of NP-TB, TB, non-TB pulmonary disease, intermediate and other medical). Separate data are available for these subcategories.

<sup>5</sup> Transfers are excluded in overall total; included in total for individual stations.

<sup>6</sup> Effective fiscal year 1972, data for the psychiatric hospitals, Augusta, Ga.,

Gulfport, Miss., Jefferson Bks. Mo., North Little Rock, Ark., and Palo Alto, Calif., have been consolidated respectively with the VA general hospitals, Augusta, Biloxi, St. Louis, Little Rock, and Palo Alto.

<sup>7</sup> Data are a consolidation of the VAH Los Angeles Wadsworth and the Los Angeles extended care.

<sup>8</sup> The new VA hospital, San Diego, Calif. opened February 1972.

<sup>9</sup> Includes data for the 2 VA general hospitals at Indianapolis, Ind.

<sup>10</sup> Effective July 1, 1971 the VAH Wadsworth, Kans. was changed to VA Leavenworth, Kans.

<sup>11</sup> The new VA hospital, Columbia, Mo. opened Apr. 5, 1972.

<sup>12</sup> Effective July 1, 1971 the VAH Northport, N.Y. was redesignated from a psychiatric hospital to a general hospital.

<sup>13</sup> Includes data for the VA hospital, Aspinwall, Pa.

NOTE.—The VAH San Fernando, Calif. was officially abolished Aug. 20, 1971.

TABLE 9

## INPATIENT CARE

## VA, Non-VA Hospitals: Patient Turnover, Type of Hospital—Fiscal Year 1972

Item	All hospitals	VA hospitals			Non-VA hospitals					State home hospitals
		Total	Type of hospital <sup>1</sup>		Total	Federal <sup>4</sup>	Type of hospital			
			Psychiatric <sup>2,3</sup>	General <sup>2,3</sup>			Non-Federal (VMH, Manila) <sup>5</sup>	State and local government <sup>6</sup>	Nonpublic	
Average daily patient census, fiscal year 1971	86,319	84,002	29,851	54,151	1,251	335	140	232	544	1,066
Bed occupants and absent bed occupants as of June 30, 1971	82,218	79,985	25,356	54,629	1,157	7347	139	7297	7374	1,076
Total bed occupant and absent bed occupant gains during fiscal year 1972	968,226	939,848	99,245	840,603	21,864	7,155	1,429	4,772	8,508	6,514
Readmissions within 6 months	201,679	201,679	17,616	184,063	(8)	(8)	(8)	(8)	(8)	(8)
Other admissions <sup>7</sup>	591,859	564,107	44,046	520,061	21,578	6,977	1,357	4,751	8,493	6,174
Transfers from other hospitals <sup>8,10</sup>	26,433	26,433	6,894	19,539	(9)	(9)	(9)	(9)	(9)	(9)
From leave of absence	340									340
Changes in bed section	147,915	147,629	30,689	116,940	286	178	72	21	15	
Total bed occupant and absent bed occupant losses during fiscal year 1972	968,955	940,427	99,401	841,026	21,968	7,260	1,414	4,704	8,590	6,560
Deaths-bed occupants	44,378	43,042	2,438	40,604	794	406	56	64	268	542
Deaths-absent bed occupants	257	257	52	205	(8)	(8)	(8)	(8)	(8)	(8)
Discharges to post hospital care	381,238	381,238	18,279	362,959	(8)	(8)	(8)	(8)	(8)	(8)
Other discharges <sup>9</sup>	368,912	342,355	44,162	298,193	20,888	6,676	1,286	4,619	8,307	5,669
Transfers to other hospitals <sup>8,10</sup>	25,906	25,906	3,781	22,125	(9)	(9)	(9)	(9)	(9)	(9)
To leave of absence	349									349
Changes in bed section	147,915	147,629	30,689	116,940	286	178	72	21	15	
Bed occupants and absent bed occupants as of June 30, 1972	81,489	79,406	25,200	54,206	1,053	242	154	365	292	1,030
Bed occupants remaining in hospital June 30, 1972	79,194	77,344	24,268	53,076	820	242	144	148	286	1,030
Average daily patient census, fiscal year 1972	83,185	80,971	24,620	56,532	1,154	334	137	275	408	1,060
Patients treated	876,274	846,298	90,131	756,167	22,735	7,324	1,496	5,048	8,867	7,241
Total patients in extramural status June 30, 1972	298,732	238,499	16,355	281,604	233		10	217	6	
Absent bed occupants	2,295	2,062	932	1,130	233		10	217	6	
Post-hospital-care status	293,169	293,169	15,398	277,231						
Research followup status	3,268	3,268	25	3,243						

<sup>1</sup> Since the end of fiscal year 1969, VA does not have any tuberculosis hospitals.

<sup>2</sup> Effective fiscal year 1972, data for the VA psychiatric hospitals, Augusta, Ga., Gulfport, Miss., Jefferson Bks., North Little Rock, Ark., and Palo Alto, Calif., have been consolidated respectively with the VA general hospitals, Augusta, Biloxi, St. Louis, Little Rock, and Palo Alto.

<sup>3</sup> Effective July 1, 1971, the VAH Northport was redesignated from a psychiatric hospital to a general hospital.

<sup>4</sup> Includes U.S. Army, Navy, Air Force, and Public Health Service hospitals; hospitals located in Canal Zone area; and St. Elizabeths Hospital, Washington, DC.

<sup>5</sup> Veterans Memorial Hospital, Manila.

<sup>6</sup> Includes hospitals operated by State, county, and municipal governments.

<sup>7</sup> Data adjusted.

<sup>8</sup> Data for non-VA hospitals are not available.

<sup>9</sup> Transfers for non-VA hospitals are included with other admissions and other discharges; such data are not available separately.

<sup>10</sup> Includes only patients transferred as VA beneficiaries.

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## TABLE 10

VA, Non-VA and State Home Hospitals: Patient Turnover, type of bed section—Fiscal Year 1972

Item	Type of bed section <sup>1</sup>								State home hospitals
	VA hospitals				Non-VA hospitals				
	Total	Psychiatry	Surgery	Medical	Total	Psychiatry	Surgery	Medical	
Average daily patient census fiscal year 1971.....	84,002	37,677	15,755	30,571	1,251	585	179	487	1,066
Bed occupants and absent bed occupants as of June 30, 1971.....	79,985	36,898	14,499	28,618	<sup>2</sup> 1,157	623	<sup>2</sup> 177	<sup>2</sup> 357	1,078
Total bed-occupant and absent bed-occupant gains during fiscal year 1972.....	939,848	158,421	335,301	446,126	21,864	6,159	3,975	11,730	6,514
Readmissions within 6 months.....	201,679	33,110	75,683	92,886	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	.....
Other admissions <sup>4</sup> .....	564,107	95,470	201,190	267,447	21,578	6,131	3,819	11,628	6,174
Transfer from other hospitals <sup>4</sup> .....	28,433	7,853	9,306	9,274	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )	.....
From leave of absence.....	.....	.....	.....	.....	.....	.....	.....	.....	340
Change in bed section.....	147,629	21,988	49,122	76,519	286	28	156	102	.....
Total bed-occupant and absent bed-occupant losses during fiscal year 1972.....	940,427	166,040	335,859	438,528	21,968	6,209	4,026	11,733	6,560
Deaths—bed occupants.....	43,042	647	10,450	31,945	794	30	137	627	542
Deaths—absent bed occupants.....	257	64	25	168	( <sup>5</sup> )	( <sup>5</sup> )	( <sup>5</sup> )	( <sup>5</sup> )	.....
Discharges to post hospital care.....	381,238	39,420	204,654	137,164	( <sup>5</sup> )	( <sup>5</sup> )	( <sup>5</sup> )	( <sup>5</sup> )	.....
Other discharges <sup>4</sup> .....	342,355	92,738	72,425	177,192	20,888	6,156	3,787	10,945	5,669
Transfers to other hospitals <sup>4</sup> .....	25,906	5,556	8,276	12,074	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )	.....
To leave of absence.....	.....	.....	.....	.....	.....	.....	.....	.....	349
Changes in bed section.....	147,629	27,615	40,029	79,985	286	23	102	161	.....
Bed occupants and absent bed occupants as of June 30, 1972.....	79,406	29,279	13,911	36,216	1,053	573	126	354	1,030
Bed occupants remaining in hospital June 30, 1972.....	77,344	27,852	13,639	35,853	820	343	125	352	1,030
Average daily patient census fiscal year 1972.....	80,971	31,422	15,340	34,208	1,154	482	189	482	1,060
Patients treated.....	848,298	162,148	301,485	382,685	22,735	6,759	4,050	11,926	7,341
Patients in extramural status: June 30, 1972, total.....	298,499	35,486	148,887	114,126	233	230	1	2	.....
Absent bed occupants.....	2,062	1,427	272	363	233	230	1	2	.....
Post hospital care status.....	293,169	34,041	146,979	112,149	.....	.....	.....	.....	.....
Research followup status.....	3,268	18	1,636	1,614	.....	.....	.....	.....	.....

<sup>1</sup> Beds are classified according to their intended use and patients occupying them are classed accordingly, rather than on a diagnostic basis. "Medical" bed sections include data for tuberculosis, neurological etc. patients.

<sup>2</sup> Data adjusted.

<sup>3</sup> Data for non-VA hospitals are not available separately; they are included with admissions and discharges to and from non-VA hospitals.

<sup>4</sup> Non-VA hospital transfers are included with other admissions and other discharges.

<sup>5</sup> Includes only patients transferred as VA beneficiaries.

<sup>6</sup> Included with deaths of bed-occupants.

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TABLE 11

VA and Non-VA Hospitals: Patients Remaining, Chronicity, Compensation and Pension Status, Diagnostic Grouping—October 20, 1971<sup>1</sup>

Diagnostic composition of patients	All patients	Treated for service-connected disabilities	Veterans with compensable service-connected disabilities but treated for nonservice-connected disabilities only	Treated for "chronic" nonservice-connected disabilities <sup>3</sup>	Treated for presumed "nonchronic" <sup>4</sup> nonservice-connected disabilities, and—			Nonveterans
					In receipt of or filed for VA pension <sup>5</sup>	Filed claim for VA compensation <sup>5</sup>	Filed no claim for VA compensation <sup>5</sup>	
All patients.....	82,700	17,946	9,868	20,602	13,208	446	20,149	473
Tuberculosis.....	2,213	178	254	849	265	29	627	11
Pulmonary tuberculosis.....	2,052	163	228	821	244	24	561	11
Other tuberculosis.....	161	15	26	28	21	5	66	
Psychoses.....	26,541	11,315	1,439	10,454	1,352	84	1,807	90
Functional.....	20,901	10,538	903	6,811	1,015	79	1,470	85
Organic.....	5,640	777	536	3,643	337	5	337	5
Other psychiatric.....	13,094	2,224	1,756	3,810	1,177	94	3,953	80
Neurological.....	6,978	997	824	2,289	1,201	17	1,555	95
Vascular lesions affecting central nervous system.....	2,291	93	277	780	631		500	10
Other neurological.....	4,661	898	537	1,509	560	17	1,055	85
Neurological diseases of the sense organs.....	26	6	10		10			
General medical and surgical.....	33,866	3,232	5,595	3,200	9,213	222	12,207	197
Infective and parasitic diseases.....	558	53	53	42	90	3	302	15
Malignant neoplasms.....	4,742	182	864	484	1,498	12	1,702	
Benign and unspecified neoplasms.....	341	20	51	14	92		159	5
Allergic and endocrine system.....	1,754	194	345	204	445	9	547	10
Heart diseases.....	3,682	282	537	315	1,322	23	1,193	10
Vascular diseases.....	2,795	234	445	381	781	11	933	10
Acute respiratory diseases <sup>6</sup> .....	788	69	126	23	243		321	6
Other respiratory diseases with asthma <sup>6</sup> .....	2,768	180	532	410	797	15	829	5
Digestive diseases <sup>6</sup> .....	5,256	459	955	173	1,204	48	2,378	39
Genitourinary diseases <sup>6</sup> .....	2,233	163	314	178	827	16	721	14
Diseases of skin and cellular tissue.....	1,318	222	187	157	273	16	463	
Diseases of bones and organs of movement <sup>6</sup> .....	2,548	541	344	292	462	36	847	16
Accidents, poisonings and violence <sup>7</sup> .....	2,768	330	472	335	551	10	1,017	53
All other.....	2,315	303	370	192	628	23	785	14

<sup>1</sup> Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining on Oct. 20, 1971. The figures shown in the column for "All patients" do not necessarily equal the sum of the component parts due to machine rounding of sample data.

<sup>2</sup> All groups are mutually exclusive and patients who possess the characteristic of more than 1 group are included only in that group having the highest priority for admission.

<sup>3</sup> This group of "chronic" patients includes veterans hospitalized for non-service-connected psychoses or tuberculosis, and those hospitalized for the treatment of other non-service-connected disabilities for 90 or more days as of the census date.

<sup>4</sup> This group of presumed "nonchronic" patients includes veterans hospitalized for non-service-connected, other psychiatric, neurological, and general medical and surgical disabilities for less than 90 days as of the census date.

<sup>5</sup> For a total estimate of these subgroups regardless of chronicity, see table 16.

<sup>6</sup> Includes ill-defined conditions of the specified disease group which are classified separately in table 16 in class XVI-a.

<sup>7</sup> Excludes accidents resulting in neurological conditions.

## INPATIENT CARE

TABLE 12

*VA and Non-VA Hospitals: Patients Remaining, Compensation and Pension Status, Type of Patient—October 20, 1971*<sup>1</sup>

Hospital group and compensation and pension status	All patients	Type of patient				
		Tuberculous	Psychoses	Other psychiatric	Neurological	General medical and surgical
VA and non-VA hospitals.....	82,700	2,215	26,543	13,096	6,977	33,870
Received care for a service-connected disability.....	17,945	178	11,315	2,224	997	3,231
Received care for a non-service connected disability only:						
And having a service-connected compensable disability, which did not require medical care.....	9,870	255	1,439	1,756	824	5,566
And having a claim for VA compensation pending.....	641	74	161	126	53	228
And on VA pension rolls.....	25,408	472	8,546	3,368	2,351	10,671
And having a claim for VA pension pending.....	1,139	75	235	185	168	476
And having no claim filed.....	27,222	1,150	4,756	5,357	2,490	13,469
Nonveterans.....	475	11	91	80	94	199
VA hospitals.....	81,150	1,687	26,228	13,051	6,926	33,261
Received care for a service connected disability.....	17,661	166	11,138	2,200	987	3,171
Received care for a non-service connected disability only:						
And having a service connected compensable disability, which did not require medical care.....	9,691	196	1,429	1,751	824	5,491
And having a claim for VA compensation pending.....	522	21	150	121	53	177
And on VA pension rolls.....	25,191	439	8,503	3,362	2,322	10,565
And having a claim for VA pension pending.....	1,125	68	235	185	168	469
And having no claim filed.....	26,487	786	4,682	5,352	2,478	13,189
Nonveterans.....	475	11	91	80	94	199

<sup>1</sup> Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining on Oct. 20, 1971. The figures shown in the column for "All patients"

do not necessarily equal the sum of the component parts due to machine rounding of sample data.

## INPATIENT CARE

TABLE 13

*VA and Non-VA Hospitals: Patients Remaining, Type of Patient, Percent Hospitalized in Reported State of Residence—October 20, 1971*<sup>1</sup>

Reported state of residence	All patients			Type of patient									
	Total	Hospitalized in Same State		Total	Percent hospitalized in same State	Tuberculous		Psychotic		Other psychiatric		Neurological	
		Number	Percent			Total	Percent hospitalized in same State	Total	Percent hospitalized in same State	Total	Percent hospitalized in same State	Total	Percent hospitalized in same State
Total.....	82,700	67,896	82.1	33,867	86.0	2,213	62.6	26,540	78.4	13,095	82.3	6,979	83.3
United States.....	80,903	67,038	82.9	33,174	86.6	1,681	81.7	26,095	78.3	13,016	82.4	6,937	83.5
Alabama.....	1,898	1,563	82.3	767	77.2	69	84.1	629	83.8	347	94.5	86	67.4
Alaska.....	28	0	0.0	14	0.0	0	0.0	5	0.0	5	0.0	4	0.0
Arizona.....	711	532	74.8	419	86.9	20	75.0	125	33.6	92	66.3	55	90.9
Arkansas.....	1,368	1,192	87.1	582	81.8	22	77.3	415	91.6	265	95.1	84	79.8

California.....	5,897	5,686	96.4	3,056	98.1	122	95.9	1,087	90.6	1,058	95.7	574	100.0
Colorado.....	672	577	85.9	321	87.9	-----	0.0	229	85.6	101	77.2	21	100.0
Connecticut.....	1,077	666	61.8	458	98.9	25	100.0	380	16.6	104	43.3	110	72.7
Delaware.....	219	134	61.2	107	95.3	-----	0.0	70	0.0	16	68.8	26	80.8
District of Columbia.....	597	326	54.6	244	71.3	5	100.0	134	23.9	129	62.8	85	40.0
Florida.....	2,649	1,891	71.4	1,322	91.5	67	76.1	641	25.4	372	66.1	247	89.9
Georgia.....	1,582	1,161	73.4	791	80.3	43	72.1	382	69.9	308	60.7	58	70.7
Hawaii.....	99	94	94.9	43	100.0	-----	0.0	51	100.0	-----	0.0	5	0.0
Idaho.....	310	131	42.3	183	52.5	-----	0.0	30	0.0	53	22.6	44	52.3
Illinois.....	5,002	4,494	89.8	1,848	86.6	47	89.4	1,895	92.0	754	93.5	458	87.8
Indiana.....	2,216	1,625	73.3	671	70.6	45	77.8	847	77.0	556	74.6	97	50.5
Iowa.....	1,091	903	82.8	495	71.9	20	50.0	441	94.6	92	94.6	43	76.7
Kansas.....	1,101	848	77.0	483	74.7	5	0.0	312	72.4	209	89.0	92	81.5
Kentucky.....	1,228	916	74.6	427	71.2	20	75.0	377	73.5	301	83.1	103	68.0
Louisiana.....	1,362	1,045	76.7	807	94.9	37	78.4	229	13.5	164	66.5	125	88.0
Maine.....	723	671	92.8	198	91.9	-----	0.0	222	95.5	242	97.5	61	67.2
Maryland.....	1,240	851	68.6	556	59.0	50	70.0	262	81.7	197	77.2	175	69.7
Massachusetts.....	2,767	2,530	91.4	683	84.2	20	30.0	1,157	95.2	616	94.8	291	90.7
Michigan.....	2,482	2,249	90.6	958	94.6	61	100.0	988	89.3	369	89.4	106	66.0
Minnesota.....	1,427	1,236	86.6	518	79.2	10	100.0	615	94.8	201	81.6	83	83.1
Mississippi.....	988	694	70.2	563	77.4	20	70.0	220	50.5	116	69.8	69	75.4
Missouri.....	1,805	1,123	62.2	764	74.1	44	77.3	514	43.6	313	56.5	170	71.8
Montana.....	386	173	44.8	204	79.9	-----	0.0	76	0.0	93	5.4	13	38.5
Nebraska.....	807	528	65.4	363	84.6	11	100.0	196	21.9	158	61.4	79	88.6
Nevada.....	225	121	53.8	128	66.4	9	0.0	11	0.0	30	0.0	47	76.6
New Hampshire.....	289	79	27.3	102	59.8	5	0.0	123	7.3	27	0.0	32	28.1
New Jersey.....	2,527	2,089	82.7	733	76.1	72	93.1	1,116	90.1	376	80.9	230	67.4
New Mexico.....	420	307	73.1	257	92.6	11	45.5	73	11.0	51	78.4	28	57.1
New York.....	7,870	7,571	96.2	3,004	98.1	132	96.2	2,945	94.2	960	95.3	829	97.6
North Carolina.....	2,012	1,709	84.9	819	86.6	52	90.4	551	83.1	316	89.6	274	77.4
North Dakota.....	302	119	39.4	89	82.0	-----	0.0	118	4.2	72	25.0	23	100.0
Ohio.....	3,698	3,253	88.0	1,185	86.2	99	94.9	1,547	89.1	583	88.7	284	85.2
Oklahoma.....	817	532	65.1	367	92.6	22	100.0	220	9.1	126	69.0	82	76.8
Oregon.....	931	698	75.0	505	74.3	21	100.0	185	78.4	163	70.6	57	73.7
Pennsylvania.....	4,964	4,445	89.5	1,458	91.8	135	71.1	2,284	87.2	694	96.3	393	89.3
Rhode Island.....	367	217	59.1	167	97.0	5	100.0	108	17.6	56	30.4	31	45.2
South Carolina.....	1,104	668	51.4	571	70.8	42	42.9	214	13.1	185	32.4	92	63.0
South Dakota.....	500	428	85.6	203	92.6	8	37.5	148	78.4	99	89.9	42	76.2
Tennessee.....	1,915	1,767	92.3	723	94.6	49	91.8	680	88.8	337	94.1	126	92.9
Texas.....	4,429	4,000	90.3	2,071	92.5	163	89.0	1,217	88.2	634	89.6	344	86.6
Utah.....	330	321	97.3	143	100.0	-----	0.0	88	89.8	61	100.0	38	100.0
Vermont.....	187	113	60.4	104	84.6	5	100.0	53	0.0	10	100.0	15	66.7
Virginia.....	2,091	1,648	78.8	881	77.8	47	68.1	515	71.7	377	88.3	271	84.5
Washington.....	1,226	1,138	92.8	509	91.7	-----	0.0	433	93.8	208	93.3	76	93.4
West Virginia.....	1,104	552	50.0	462	84.0	31	35.5	309	7.4	210	27.6	92	78.3
Wisconsin.....	1,685	1,388	82.4	754	83.2	10	100.0	583	77.4	182	86.8	156	91.0
Wyoming.....	178	136	76.4	94	67.0	-----	0.0	45	100.0	28	78.6	11	54.6
Outside United States.....	1,791	857	47.9	693	59.3	532	2.1	445	82.2	79	59.5	42	52.4
Canal Zone.....	18	-----	0.0	5	0.0	-----	0.0	13	0.0	-----	0.0	-----	0.0
Philippines, Republic of.....	874	-----	0.0	267	0.0	521	0.0	51	0.0	15	0.0	20	0.0
Puerto Rico.....	874	857	98.1	411	100.0	11	100.0	377	97.1	53	88.7	22	100.0
Others.....	25	-----	0.0	10	0.0	-----	0.0	4	0.0	11	0.0	-----	0.0

<sup>1</sup> Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining Oct. 20, 1971. The figures shown in the column for "All patients," do not necessarily equal the sum of the component parts due to machine rounding of sample data.

VA Hospitals: Patients Remaining, Chronicity, Compensation and Pension Status, Diagnostic Grouping—  
October 30, 1971<sup>1</sup>

Diagnostic composition of patients	All patients <sup>2</sup>	Treated for service-connected disabilities	Veterans with compensable service-connected disabilities but treated for non-service-connected disabilities only	Treated for "chronic" non-service-connected disabilities <sup>3</sup>	Treated for presumed "non-chronic" <sup>4</sup> non-service-connected disabilities and—			Non-veterans
					In receipt of or filed for VA pension <sup>5</sup>	Filed claim for VA compensation <sup>6</sup>	Filed no claim for VA compensation <sup>7</sup>	
All patients.....	81,150	17,063	9,690	20,266	13,045	368	10,655	473
Tuberculosis.....	1,687	166	196	621	282	16	445	11
Pulmonary tuberculosis.....	1,526	151	170	598	211	11	379	11
Other tuberculosis.....	161	15	26	23	21	5	66	
Psychoses.....	26,226	11,137	1,429	10,378	1,362	74	1,766	90
Functional.....	20,608	10,265	868	6,742	1,015	69	1,424	85
Organic.....	5,628	772	536	3,636	337	5	332	5
Other psychiatric.....	13,060	2,200	1,751	3,310	1,172	89	3,948	80
Neurological.....	6,927	967	824	2,277	1,184	17	1,543	95
Vascular lesions affecting central nervous system.....	2,261	67	277	766	625		404	10
Other neurological.....	4,640	894	537	1,509	549	17	1,049	85
Neurological diseases of the sense organs.....	26	6	10		10			
General medical and surgical.....	33,260	3,173	5,490	3,170	9,106	172	11,963	197
Infective and parasitic diseases.....	558	53	53	42	90	3	302	15
Malignant neoplasms.....	4,696	182	644	484	1,492	12	1,682	
Benign and unspecified neoplasms.....	341	20	51	14	92		150	5
Allergic and endocrine system.....	1,683	184	330	199	434	9	606	10
Heart diseases.....	3,583	272	826	315	1,295	10	1,155	10
Vascular diseases.....	2,766	234	439	381	776	11	915	10
Acute respiratory diseases <sup>8</sup> .....	777	64	126	23	243		315	6
Other respiratory diseases with asthma <sup>8</sup> .....	2,743	175	326	408	797	15	322	5
Digestive diseases <sup>8</sup> .....	5,122	450	926	173	1,174	29	2,322	39
Genitourinary diseases <sup>8</sup> .....	2,192	157	297	173	827	11	714	14
Diseases of skin and cellular tissue.....	1,276	216	187	161	273	10	430	
Diseases of bones and organs of movement <sup>8</sup> .....	2,531	541	344	292	445	36	357	16
Accidents, poisonings and violence <sup>7</sup> .....	2,721	326	462	339	545	10	997	53
All other.....	2,271	201	370	192	622	16	766	14

<sup>1</sup> Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining on Oct. 30, 1971. The figures shown in the column for "All patients" do not necessarily equal the sum of the component parts due to machine rounding of sample data.

<sup>2</sup> All groups are mutually exclusive and patients who possess the characteristics of more than 1 group are included only in that group having the highest priority for admission.

<sup>3</sup> This group of "chronic" patients includes veterans hospitalized for non-service-connected psychoses or tuberculosis, and those hospitalized for the treatment of other non-service-connected disabilities for 90 or more days as of the census date.

<sup>4</sup> This group of presumed "nonchronic" patients includes veterans hospitalized for non-service-connected, other psychiatric, neurological and general medical and surgical disabilities for less than 90 days as of the census date.

<sup>5</sup> For a total estimate of these subgroups regardless of chronicity, see table 16.

<sup>6</sup> Includes ill-defined conditions of the specified disease group which are classified separately in table 16 in class XVI-a.

<sup>7</sup> Excludes accidents resulting in neurological conditions.

TABLE 15

## INPATIENT CARE

VA Hospitals: Patients Remaining, Compensation and Pension Status, Type of Patient, Age—  
October 20, 1971<sup>1</sup>

Type of patient and age group	Total all patients	Service connected veterans				Non-service connected			Non-veterans
		Total	More than 10 percent	Less than 10 percent	NSC with SC <sup>2</sup>	Total	Pension	Other	
All patients	81,160	27,348	16,779	880	9,689	53,315	25,189	28,126	472
Under 25	3,479	1,591	1,197	102	292	1,629	35	1,594	256
25 to 34	5,339	2,394	1,969	66	359	2,890	178	2,712	53
35 to 44	10,498	3,829	2,775	155	899	6,611	2,295	4,316	53
45 to 54	24,801	9,296	5,705	316	3,275	15,414	6,244	9,170	86
55 to 64	16,831	5,881	2,977	169	2,735	10,934	5,021	5,913	15
65 and over	20,202	4,357	2,156	72	2,129	15,837	11,416	4,421	9
Tuberculous	1,689	361	150	16	195	1,315	440	875	11
Under 25	22	11	11			5		5	6
25 to 34	47	10	10			37		37	
35 to 44	171	24	19		5	141	18	123	5
45 to 54	710	158	91	11	96	552	165	387	
55 to 64	441	71	18		53	369	127	242	
65 and over	298	87	41	5	41	211	130	81	
Psychotic	26,228	12,565	10,546	590	1,429	13,570	8,503	5,067	91
Under 25	1,064	692	598	68	26	310	5	305	62
25 to 34	2,384	1,459	1,348	45	66	900	76	824	25
35 to 44	4,444	2,152	1,840	150	162	2,288	1,357	931	4
45 to 54	8,421	4,218	3,512	191	515	4,202	2,578	1,324	
55 to 64	4,272	2,072	1,645	107	320	2,200	1,425	775	
65 and over	5,643	1,972	1,603	29	340	3,670	2,762	908	
Other psychiatric	13,049	3,950	2,118	82	1,750	9,018	3,364	5,654	80
Under 25	847	281	185	10	86	513		513	52
25 to 34	1,113	287	166	5	116	821	27	794	5
35 to 44	1,946	562	303		259	1,380	251	1,129	5
45 to 54	4,101	1,603	917	41	645	2,488	765	1,723	9
55 to 64	2,301	816	418	21	377	1,485	625	860	
65 and over	2,741	401	129	5	267	2,331	1,696	635	9
Neurological	6,926	1,813	967	21	825	5,021	2,321	2,700	94
Under 25	338	168	141	6	21	106	5	101	65
25 to 34	432	148	127		21	275	28	247	9
35 to 44	900	270	192		78	625	223	402	5
45 to 54	1,941	552	267	5	280	1,379	555	824	10
55 to 64	1,470	403	148	10	245	1,061	443	618	5
65 and over	1,845	272	92		180	1,575	1,067	508	
General medical and surgical	33,258	8,659	2,998	171	5,490	24,391	10,561	13,830	196
Under 25	1,208	439	262	18	159	695	25	670	71
25 to 34	1,363	490	318	16	156	857	47	810	14
35 to 44	3,037	821	421	5	395	2,177	446	1,731	34
45 to 54	9,628	2,765	958	68	1,739	6,793	1,881	4,912	67
55 to 64	8,347	2,519	748	31	1,740	5,819	2,401	3,418	10
65 and over	9,675	1,625	291	33	1,301	8,050	5,761	2,289	

<sup>1</sup> Figures shown are based on tabulations of a 20 percent systematic random sample of records for patients remaining on Oct. 20, 1971. The figures shown in the column for "All patients" do not necessarily equal the sum of the component parts due to machine rounding of sample data.

<sup>2</sup> Veterans with compensable SC disabilities but treated for non-service connected disabilities only.



Quadriplegia, cerebral or spinal (344.3, 349.4)	341	47	168	9	84	33	44.0	95	69	104	54	10	9
Other diseases of central nervous system, including hereditary and familial disease of nervous system (330-333, 340-344.1, 344.9, 346-347, 348.1-349.2, 349.5-349.9)	1,636	262	968	206	62	138	55.1	71	267	544	360	198	196
Diseases of nerves and peripheral ganglia (350-358)	322	52	207	15	27	21	50.8	27	56	137	72	11	20
Inflammatory diseases of the eye and other diseases and conditions of the eye, except blindness (360-369, 370-378)	530	16	276	189	24	25	62.3	24	16	129	117	94	149
Blindness (379)	30	10	10				(*)	5	15	5	5		
Disease of ear and mastoid process (380-389)	156	10	111	5	15	15	51.9	26	6	61	34	25	5
<b>VII. Diseases of the circulatory system</b>	<b>8,608</b>	<b>509</b>	<b>4,962</b>	<b>2,531</b>	<b>248</b>	<b>358</b>	<b>62.1</b>	<b>169</b>	<b>400</b>	<b>2,258</b>	<b>2,312</b>	<b>1,168</b>	<b>2,308</b>
Chronic rheumatic heart disease (393-398)	166	11	130	9	11	5	54.3	11	5	76	51	10	13
Hypertensive heart disease, exclusive of ischemic heart disease (400.1, 402, 404)	42	5	32	5			(*)		5	5	16	16	
Hypertensive disease without heart involvement (400.0, 400.2, 400.3, 400.9, 401, 403)	483	59	351	37	10	26	53.4		84	216	124	28	31
Acute myocardial infarction (410)	496	56	313	81	15	31	58.5		48	169	154	5.2	75
Chronic ischemic heart disease (412)	2,064	101	1,096	748	30	89	65.0	15	56	444	552	26.2	736
Other ischemic heart disease, with or without hypertensive disease (411, 413, 414)	93	10	72		5	6	(*)		10	53	14	17	
Other forms of heart disease (391, 392.0, 420-429)	716	40	479	167	10	20	61.4	10	11	234	197	11.2	153
Cerebral hemorrhage (431)	95	5	65	15	5	5	(*)	5	11	30	30	5	15
Cerebral thrombosis (433)	660	20	352	253	11	24	66.7		5	109	194	109	243
Cerebral embolism (434)	11		11				(*)		5	5	6		
Generalized ischemic cerebrovascular disease (437)	333	6	119	187	6	15	69.2	6	12	44	25	8.1	165
All other cerebrovascular disease (430, 432, 435, 436, 438)	1,161	74	667	379	10	31	63.9	9	38	214	384	204	312
Arteriosclerosis (440)	674	15	293	341	10	15	68.4			114	149	11.1	300
All other diseases of arteries, arterioles and capillaries (441-448)	629	14	306	153	26	40	60.4	27	20	177	197	6.2	147
Varicose veins lower extremities (454)	283	35	182	45	11	10	55.8	16	16	122	65	3.3	32
Hemorrhoids (455)	185	10	89	21	54	11	48.5	37	27	69	31		21
All other diseases of veins and lymphatics, and other diseases of circulatory system (390, 392.9, 450-453, 456-458)	517	48	315	90	34	30	55.8	33	52	177	123	6.6	66
<b>VIII. Diseases of the respiratory system</b>	<b>3,304</b>	<b>257</b>	<b>2,052</b>	<b>703</b>	<b>133</b>	<b>159</b>	<b>59.6</b>	<b>138</b>	<b>184</b>	<b>853</b>	<b>1,037</b>	<b>466</b>	<b>624</b>
Acute respiratory infections including influenza (460-466, 470-474)	123	10	57	21	14	21	52.4	25	10	29	22	2.2	14
Pneumonia (480-486)	595	27	346	171	21	30	61.8	32	19	118	193	6.8	165
Bronchitis, unqualified and chronic (490-491)	448	57	299	87		5	60.5		36	101	161	8.3	67
Emphysema (492)	1,023	45	586	337	14	41	64.8	5	14	215	293	194	302
Asthma (493)	199	19	151	9	15	5	52.9	11	23	73	78	5	9
All other diseases of upper respiratory tract and respiratory system (500-508, 510-519)	916	99	613	78	69	57	54.3	65	82	317	290	94	67
<b>IX. Diseases of the digestive system</b>	<b>4,843</b>	<b>511</b>	<b>3,100</b>	<b>588</b>	<b>407</b>	<b>237</b>	<b>53.9</b>	<b>392</b>	<b>571</b>	<b>1,723</b>	<b>1,251</b>	<b>363</b>	<b>540</b>
Diseases of oral cavity, salivary glands, and jaws (520-529)	114	21	64	19	10		54.5	10	10	48	23	10	14
Ulcers digestive system (stomach, duodenum, peptic, gastrojejunal) (531-534)	852	63	558	110	81	40	54.3	77	60	338	200	77	99
All other diseases esophagus, stomach and duodenum (except ulcers) (530, 535-537)	361	40	227	49	20	25	54.8	15	55	125	100	17	49
Hernia of abdominal cavity (550-553)	872	83	536	159	64	30	56.6	75	83	228	249	9.3	145
Other diseases of intestine and peritoneum (540-543, 560-569)	921	89	504	143	116	69	53.5	135	101	226	262	6.1	135
Cirrhosis of liver (571)	1,007	148	756	24	41	38	51.9	8	177	492	246	64	20
Other diseases of liver, gall bladder and pancreas (570, 572-577)	716	67	455	84	75	35	52.6	72	85	266	171	41	78
<b>X. Diseases of the genitourinary system</b>	<b>2,054</b>	<b>158</b>	<b>1,045</b>	<b>579</b>	<b>161</b>	<b>111</b>	<b>59.5</b>	<b>152</b>	<b>195</b>	<b>516</b>	<b>364</b>	<b>279</b>	<b>559</b>
Nephritis and nephrosis (580-584)	233	31	133	31	20	18	51.8	24	41	107	11	20	31
Other diseases of urinary system (590-599)	937	102	510	198	72	55	56.4	77	116	289	167	90	198
Diseases of the prostate (600-602)	710	10	301	329	37	33	67.9	25	12	70	150	14.6	309
Other diseases of male genital organs (603-607)	134	10	76	21	22	5	54.3	16	21	31	31	14	21
Diseases of breast, gynecological conditions (610-616, 620-629)	40	5	25		10		(*)	10	5	19	5		
<b>XII. Diseases of skin and subcutaneous tissue</b>	<b>1,276</b>	<b>179</b>	<b>709</b>	<b>164</b>	<b>143</b>	<b>81</b>	<b>52.0</b>	<b>165</b>	<b>190</b>	<b>383</b>	<b>307</b>	<b>105</b>	<b>124</b>
Infections of skin and subcutaneous tissue (680-686, 694-698)	523	50	326	54	66	27	51.3	71	79	148	153	2.6	45
All other diseases of skin and subcutaneous tissue (690-693, 700-709)	753	129	383	110	77	54	52.5	94	111	235	154	80	79
<b>XIII. Diseases of the musculoskeletal system and connective tissue</b>	<b>2,647</b>	<b>365</b>	<b>1,455</b>	<b>280</b>	<b>312</b>	<b>235</b>	<b>51.4</b>	<b>336</b>	<b>412</b>	<b>880</b>	<b>595</b>	<b>173</b>	<b>245</b>
Arthritis and rheumatism, except rheumatic fever (710-718)	1,152	159	675	199	46	73	56.3	59	137	345	334	94	181
Displacement of intervertebral disc (725)	322	57	170		43	52	44.9	53	84	132	47	6	
Osteomyelitis and other diseases of bone and joint (720, 724, 726-729)	747	113	371	46	126	91	47.7	133	136	291	123	20	46
Other diseases of musculoskeletal system (730-738)	426	36	239	35	97	19	49.3	91	55	112	91	58	18

See footnotes at end of table.

## INPATIENT CARE

## TABLE 16—CONTINUED

VA Patients Remaining in VA Hospitals, By Diagnostic Category, Period of Service, Average Age, and Age Group—October 20, 1971<sup>1</sup>

Diagnostic category and ICDA codes <sup>2</sup>	All patients	Period of service					Average age <sup>3</sup>	Age group					
		Korean conflict <sup>3</sup>	World War II	World War I	Vietnam era	All others		Under 35	35 to 44	45 to 54	55 to 64	65 to 74	75 and over
XIV. Congenital deformities (743-759)	180	35	74	5	45	21	42.5	55	46	41	27	5	5
XVI.a Symptoms and ill-defined conditions	1,394	146	804	207	117	120	54.1	135	206	437	285	118	212
Senility without mention of psychosis (794)	29			29			(4)						29
Symptoms and all other ill-defined conditions (780-792, 795-796)	1,365	146	804	178	117	120	53.5	135	206	437	285	118	183
XVI.b Observation and examination cases, followup and special admissions	747	83	386	163	68	47	57.2	62	100	173	164	107	143
Tuberculosis (Y03.01, Y10.61-Y10.63)	31	5	21	5			(4)		5	10		11	5
Mental (793.0, Y00.1, Y03.4), (316, 318, APA Code)	44	4	18	13	4	5	(4)	9	4	18			13
Malignancy (793.1, Y03.3)	151	5	93	48	5		64.7		5	30	46	22	48
All other admissions (793.8, 793.9, Y00.0, Y00.2-Y01, Y03.9, Y04-Y06, Y10.64-Y10.69, Y11, Y12, Y20-Y29)	516	69	249	97	59	42	55.2	53	86	115	113	74	77
Diagnosis deferred, mental observation (319.0:APA Code)	5		5				(4)				5		
XVII. Accidents, poisonings, and nature of injury	3,608	354	1,669	412	809	364	47.9	954	511	987	552	208	393
Fracture of skull and facial bones (800-804)	167	10	89		53	15	42.6	53	30	53	26	5	
Fracture of skull and facial bones, late effects (800-804)													
Fracture of spine and trunk (805-809)	322	27	144	32	77	42	46.0	104	42	88	41	15	32
Fracture of spine and trunk, late effects (805-809)	291	55	128		65	43	42.7	85	68	83	45	10	
Fracture of upper limb (810-819)	147	16	81	26	24		52.9	24	14	52	21	10	26
Fracture of upper limb, late effects (810-819)													
Fracture of lower limb (820-829)	872	53	431	204	127	57	56.0	134	75	202	176	84	201
Fracture of lower limb, late effects (820-829)													
Dislocation without fracture (830-839, 840-848)	283	40	129	19	71	24	44.8	72	53	110	30	5	14
Dislocation without fracture, late effects (830-839, 840-848)													
Intracranial injury—without skull fracture (850-854)	284	20	126	5	89	44	41.5	114	39	77	38	5	10
Intracranial injury—without skull fracture, late effects (850-854)	45	5	14		21	5	(4)	26	5	9		5	
Internal injury of chest, abdomen and pelvis (860-869)	48	4	18		10	16	(4)	15	15		18		
Internal injury of chest, abdomen and pelvis, late effects (860-869)													
Traumatic amputation of arm and hand—complete/partial (887)													
Traumatic amputation of arm and hand—complete/partial, late effects (887)													
Traumatic amputation of foot and leg(s)—complete/partial (896-897)	21		5	5	11		(4)	11		5			5
Traumatic amputation of foot and leg(s)—complete/partial, late effects (896-897)	16		16				(4)			6	9		
Burns (940-949)	142	31	64	16	15	16	48.8	27	26	48	16	21	5
Burns, late effects (940-949)													
Injury to nerves and spinal cord (950-959)	145	16	51	5	53	20	38.9	58	31	40	15		
Injury to nerves and spinal cord, late effects (950-959)	6				6		(4)	6					
Adverse effect of medicinal agents and other complications of surgical and medical care (960-979, 997-999)	497	40	236	70	108	43	49.2	125	65	134	71	31	70
All other accidents, poisonings and violence (870-879, 880-886, 890-895, 900-907, 910-918, 920-939, 980-996)	317	37	132	30	79	39	45.9	100	48	75	46	17	30
All other accidents, poisonings and violence, late effects (870-879, 880-886, 890-895, 900-907, 910-918, 920-939, 980-996)	5		5				(4)			5			

<sup>1</sup> Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining on Oct. 20, 1971. The figures shown in the column for "All patients" do not necessarily equal the sum of the component parts due to machine rounding of sample data.

<sup>2</sup> The diagnostic categories and selected diagnoses included in this table are based on the "International Classification of Diseases Adapted for Indexing of Hospital Records," USPHS Pub. 1693.

The numbers following the diagnoses are the identifying code numbers of this diagnostic classification. Category XI, "Deliveries and complications of pregnancy, childbirth and puerperium," in which no cases occurred, are not included in this table.

<sup>3</sup> Service between June 27, 1950 and Jan. 31, 1955.

<sup>4</sup> Average age not calculated for totals less than 100 cases.

TABLE 17

## INPATIENT CARE

VA Hospitals: Patients Remaining, Percent by Attained Stay, Diagnostic Grouping—October 20, 1971<sup>1</sup>

Diagnostic composition of patients	Number of patients	Percent in each diagnostic category for specified length of stay						
		Less than 90 days	90 days or more	Inpatient stay more than (years)				
				1	2	5	10	20
All patients.....	81,150	60.0	40.0	25.3	19.6	13.1	9.1	5.0
Tuberculosis.....	1,686	54.3	45.7	7.0	3.9	1.8	0.6	0.3
Pulmonary tuberculosis.....	1,526	52.4	47.6	7.1	3.6	1.6	0.7	0.3
Other tuberculosis.....	160	73.2	26.8	6.3	6.3	3.1	0.0	0.0
Psychoses.....	26,227	26.0	74.0	55.9	46.4	34.2	25.2	14.5
Functional.....	20,604	28.0	72.0	54.1	46.3	36.6	28.1	16.6
Organic.....	5,623	16.2	83.8	62.2	46.7	25.6	14.5	6.7
Other psychiatric.....	13,050	61.0	39.0	22.2	14.7	6.2	2.9	0.9
Neurological.....	6,927	54.8	45.2	25.2	16.7	9.2	4.3	0.9
Vascular lesions affecting central nervous system.....	2,261	60.4	39.6	16.3	9.1	3.1	0.9	0.2
Other neurological.....	4,640	51.9	48.1	29.7	20.5	12.2	5.9	1.3
Neurological diseases of the sense organs.....	26	100.0	0.0	0.0	0.0	0.0	0.0	0.0
General medical and surgical.....	33,261	88.0	12.0	3.3	1.9	0.6	0.3	0.1
Infective and parasitic diseases.....	557	88.3	11.7	3.6	2.7	0.7	0.0	0.0
Malignant neoplasms.....	4,695	86.5	13.5	2.0	1.2	0.5	0.3	0.2
Benign and unspecified neoplasms.....	342	95.8	4.2	0.0	0.0	0.0	0.0	0.0
Allergic and endocrine system.....	1,684	82.9	17.1	5.9	3.9	1.3	1.0	0.4
Heart diseases.....	3,584	89.6	10.4	4.7	3.0	0.5	0.1	0.0
Vascular diseases.....	2,766	83.6	16.4	6.8	4.3	1.7	0.6	0.4
Acute respiratory diseases <sup>2</sup> .....	776	97.0	3.0	0.5	0.5	0.0	0.0	0.0
Other respiratory diseases with asthma <sup>2</sup> .....	2,744	82.5	17.5	4.5	2.3	0.8	0.4	0.0
Digestive diseases <sup>2</sup> .....	5,121	95.5	4.5	0.8	0.5	0.2	0.2	0.0
Genitourinary diseases <sup>2</sup> .....	2,192	91.5	8.5	1.2	0.7	0.2	0.2	0.2
Diseases of skin and cellular tissue.....	1,276	82.7	17.3	3.0	0.4	0.0	0.0	0.0
Diseases of bones and organs of movement <sup>2</sup> .....	2,532	85.4	14.6	5.3	3.2	1.6	0.6	0.4
Accidents, poisonings and violence <sup>3</sup> .....	2,720	85.3	14.7	3.7	2.0	0.7	0.4	0.0
All other.....	2,272	89.4	10.6	2.2	1.0	0.2	0.2	0.2

<sup>1</sup> Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining on Oct. 20, 1971.

<sup>2</sup> Includes ill-defined conditions of the specified disease group which are

classified separately in table 16 in class XVI-a.

<sup>3</sup> Excludes accidents resulting in neurological conditions.

VA Hospitals: Patients Remaining, Age, Diagnostic Grouping—October 20, 1971<sup>1</sup>

Diagnostic composition of patients	All patients		Age distribution							
			Under 55		55 to 64		65 to 74		75 and over	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
All patients.....	81,150	100.0	44,118	54.5	16,832	20.7	7,343	9.0	12,859	15.8
Tuberculosis.....	1,690	100.0	951	56.2	441	26.1	145	8.6	153	9.1
Pulmonary tuberculosis.....	1,527	100.0	883	57.8	389	25.5	123	8.1	132	8.6
Other tuberculosis.....	163	100.0	68	41.7	52	31.9	22	13.5	21	12.9
Psychoses.....	26,228	100.0	16,313	62.1	4,272	16.3	2,089	8.0	3,554	13.6
Functional.....	20,605	100.0	14,677	71.3	2,894	14.0	1,255	6.1	1,779	8.6
Organic.....	5,623	100.0	1,636	29.1	1,378	24.5	834	14.8	1,775	31.6
Other psychiatric.....	13,050	100.0	8,007	61.4	2,302	17.6	819	6.3	1,922	14.7
Neurological.....	6,925	100.0	3,610	52.1	1,470	21.2	745	10.8	1,100	15.9
Vascular lesions affecting central nervous system.....	2,260	100.0	487	21.5	639	28.3	399	17.7	735	32.5
Other neurological.....	4,639	100.0	3,112	67.0	821	17.7	346	7.5	360	7.8
Neurological diseases of the sense organs.....	26	100.0	11	42.3	10	38.5	-----	0.0	5	19.2
General medical and surgical.....	33,259	100.0	15,237	45.8	8,347	25.1	3,545	10.7	6,130	18.4
Infective and parasitic diseases.....	558	100.0	416	74.6	83	14.9	17	3.0	42	7.5
Malignant neoplasms.....	4,697	100.0	1,515	32.2	1,367	29.1	671	14.3	1,144	24.4
Benign and unspecified neoplasms.....	343	100.0	142	41.4	100	29.2	42	12.2	59	17.2
Allergic and endocrine system.....	1,683	100.0	788	46.8	441	26.2	153	9.1	301	17.9
Heart diseases.....	3,583	100.0	1,150	32.1	988	27.6	469	13.1	976	27.2
Vascular diseases.....	2,764	100.0	1,186	42.9	683	24.7	300	10.9	595	21.5
Acute respiratory diseases <sup>2</sup> .....	776	100.0	253	32.6	236	30.4	101	13.0	186	24.0
Other respiratory diseases with asthma <sup>2</sup> .....	2,742	100.0	1,067	38.9	857	31.3	370	13.5	448	16.3
Digestive diseases <sup>2</sup> .....	5,121	100.0	2,823	55.1	1,347	26.3	378	7.4	573	11.2
Genitourinary diseases <sup>2</sup> .....	2,192	100.0	899	40.6	393	17.9	300	13.7	610	27.8
Diseases of skin and cellular tissue.....	1,276	100.0	739	57.9	307	24.1	106	8.3	124	9.7
Diseases of bones and organs of movement <sup>2</sup> .....	2,532	100.0	1,533	60.5	571	22.6	177	7.0	251	9.9
Accidents, poisonings and violence <sup>3</sup> .....	2,721	100.0	1,705	62.7	456	16.8	189	6.9	371	13.6
All other.....	2,271	100.0	1,031	45.4	518	22.8	272	12.0	450	19.8

<sup>1</sup> Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining on Oct. 20, 1971. The figures shown in the column for "All patients" do not necessarily equal the sum of the component parts due to machine rounding of sample data.

<sup>2</sup> Includes ill-defined conditions of the specified disease group which are classified separately on table 16 in class XVI-a.

<sup>3</sup> Excludes accidents resulting in neurological conditions.

TABLE 19

## INPATIENT CARE

VA Hospitals: Patients Remaining, Age Groups by Regions and Type of Hospital—October 29, 1971<sup>1</sup>

Region and type of hospital	Total all patients	Age group					
		Under 25	25 to 34	35 to 44	45 to 54	55 to 64	65 and over
Region I.....	23,592	993	1,371	3,066	7,108	4,981	6,073
Psychiatric hospitals:							
Bedford, Mass.....	811	27	21	69	302	153	239
Brockton, Mass.....	853	5	70	187	326	114	141
Canandaigua, N.Y.....	980	16	67	201	254	169	273
Coatesville, Pa.....	1,343	61	96	216	471	261	238
Lyons, N.J.....	1,440	36	64	248	489	255	348
Montrose, N.Y.....	1,326	25	70	282	511	250	188
Northampton, Mass.....	659	12	30	102	295	94	126
Perry Point, Md.....	853	15	39	147	244	149	259
Pittsburgh, Pa.....	829	35	61	118	303	193	119
Total.....	9,094	232	518	1,570	3,205	1,638	1,931
General hospitals:							
Albany, N.Y.....	694	20	24	49	134	148	319
Altoona, Pa.....	135			5	25	55	50
Baltimore, Md.....	241	12	6	17	67	64	75
Batavia, N.Y.....	193			23	34	23	113
Bath, N.Y.....	184				6	40	138
Beckley, W.Va.....	116	4	8	8	32	32	32
Boston, Mass.....	745	43	68	101	220	126	187
Bronx, N.Y.....	799	75	53	104	233	210	124
Brooklyn, N.Y.....	833	83	54	90	197	243	166
Buffalo, N.Y.....	725	28	20	66	132	109	370
Butler, Pa.....	281	16	11	5	85	69	95
Castle Point, N.Y.....	193	6	17	17	45	40	68
Clarksburg, W.Va.....	161	5	10	22	43	29	52
East Orange, N.J.....	813	34	67	71	273	218	150
Erie, Pa.....	127	12			17	23	75
Ft. Howard, Md.....	211		5	23	73	41	69
Huntington, W.Va.....	128			7	46	21	48
Lebanon, Pa.....	776	30	93	85	298	155	175
Manchester, N.H.....	121			17	52	35	17
Martinsburg, W.Va.....	552	5	25	15	123	118	246
Newington, Conn.....	154	19	9	23	37	33	33
New York, N.Y.....	945	72	55	120	237	247	214
Northport, N.Y.....	780	8	46	87	294	131	244
Philadelphia, Pa.....	401	21	29	74	92	104	81
Pittsburgh, Pa.....	584	64	26	36	124	153	181
Providence, R.I.....	308	10	10	38	90	64	96
Syracuse, N.Y.....	329	23	23	57	94	65	72
Togus, Maine.....	750	18	32	103	234	215	148
Washington, D.C.....	638	80	68	72	182	126	109
West Haven, Conn.....	558	22	34	72	168	147	115
West Roxbury, Mass.....	215	25	10	25	75	55	25
White River Junction, Vt.....	165	9	19	42	36	42	62
Wilkes-Barre, Pa.....	401	9	19	42	94	108	129
Wilmington, Del.....	262	5	21	16	102	54	64
Total.....	14,498	761	853	1,496	3,903	3,343	4,142
Region II.....	23,118	940	1,462	3,026	7,569	4,965	5,156
Psychiatric hospitals:							
Murfreesboro, Tenn.....	875	5	24	109	233	183	321
Salisbury, N.C.....	767	26	53	107	361	152	68
Tuscaloosa, Ala.....	655	14	53	116	231	116	125
Waco, Tex.....	1,049	25	66	183	369	229	177
Total.....	3,346	70	196	515	1,194	680	691
General hospitals:							
Alexandria, La.....	338	14	14	52	52	75	131
Amarillo, Tex.....	118			24	18	41	35
Atlanta, Ga.....	436	21	44	72	145	98	56
Augusta, Ga.....	1,094	46	64	289	366	182	147
Bay Pines, Fla.....	617	16	32	48	149	156	216
Big Springs, Tex.....	142	9	4		71	27	31
Biloxi, Miss.....	710	28	59	108	281	168	66
Birmingham, Ala.....	421	21	34	65	116	112	73
Bonham, Tex.....	58			10	10	19	19
Charleston, S.C.....	253	27	8	35	79	60	44
Columbia, S.C.....	385	20	10	31	136	94	94
Dallas, Tex.....	617	43	21	77	233	124	119
Dublin, Ga.....	362	13	13	13	96	96	131
Durham, N.C.....	395	14	28	41	154	72	86
Fayetteville, Ark.....	216	11	11	40	57	34	63
Fayetteville, N.C.....	336		21	51	124	56	84
Gainesville, Fla.....	393	27	49	27	155	68	67
Hampton, Va.....	467	6	13	29	90	81	248
Houston, Tex.....	1,092	66	118	205	338	238	127
Jackson, Miss.....	418	29	39	43	146	101	60
Kerrville, Tex.....	297	5	10	30	64	84	104
Lake City, Fla.....	342	6	6	12	126	120	72
Lexington, Ky.....	731	29	59	138	225	128	161
Little Rock, Ark.....	1,351	30	88	134	529	302	268
Louisville, Ky.....	359	10	18	43	107	65	116
Marlin, Tex.....	174		5		37	37	95

See footnotes at end of table.

INPATIENT CARE

TABLE 19—CONTINUED

VA Hospitals: Patients Remaining, Age Groups by Regions and Type of Hospital—October 20, 1971<sup>1</sup>

Region and type of hospital	Total all patients	Age group					
		Under 25	25 to 34	35 to 44	45 to 54	55 to 64	65 and over
Memphis, Tenn.....	788	41	56	79	277	173	162
Miami, Fla.....	641	49	77	73	170	151	121
Montgomery, Ala.....	195			16	65	60	54
Mountain Home, Tenn.....	397			31	127	61	178
Nashville, Tenn.....	412	27	39	54	130	103	59
New Orleans, La.....	506	45	47	55	158	114	87
Oteen, N. C.....	495	10	24	32	140	103	186
Richmond, Va.....	714	23	32	74	295	189	101
Salem, Va.....	926	51	72	155	275	168	205
San Juan, P. Rico.....	639	99	90	135	194	22	99
Shreveport, La.....	390	12	21	35	121	104	97
Temple, Tex.....	576			44	135	210	187
Tuskegee, Ala.....	971	31	40	111	384	189	216
Total.....	19,772	870	1,266	2,511	6,375	4,285	4,465
Region III.....	22,959	957	1,525	3,016	6,634	4,506	6,321
Psychiatric hospitals:							
Battle Creek, Mich.....	1,116	66	116	188	371	237	138
Brecksville, Ohio.....	815	47	117	193	277	102	79
Chillicothe, Ohio.....	1,370	10	41	137	464	328	390
Downey, Ill.....	1,815	51	174	302	615	354	319
Ft. Meade, S. Dak.....	374	17	23	59	108	60	107
Knoxville, Iowa.....	714	4	35	93	187	95	300
Marion, Ind.....	1,159	24	34	182	272	168	479
St. Cloud, Minn.....	852	24	68	138	141	130	351
Tomah, Wis.....	676	5	30	102	197	125	217
Topeka, Kans.....	717	25	60	114	207	100	211
Total.....	9,608	273	698	1,508	2,839	1,699	2,591
General hospitals:							
Allen Park, Mich.....	573	40	10	43	164	164	152
Ann Arbor, Mich.....	355	34	20	29	146	63	63
Chicago, Ill. (West Side).....	539	72	41	61	198	76	91
Chicago, Ill. (Research).....	439	20	20	40	130	134	95
Cincinnati, Ohio.....	356	20	35	56	76	66	103
Cleveland, Ohio.....	659	66	49	81	239	121	103
Danville, Ill.....	1,118	21	42	154	346	214	341
Dayton, Ohio.....	600	6	22	33	132	146	261
Des Moines, Iowa.....	297	5	14	37	84	60	97
Fargo, N. Dak.....	201	5	18	23	55	27	73
Fort Wayne, Ind.....	147		5	24	33	28	57
Grand Island, Nebr.....	119			4	22	22	71
Hines, Ill.....	1,302	81	153	175	394	199	300
Hot Springs, S. Dak.....	188		9	19	21	24	115
Indianapolis, Ind.....	570	48	28	37	179	138	140
Iowa City, Iowa.....	307	20	54	30	86	71	46
Iron Mountain, Mich.....	195	4		22	39	26	104
Kansas City, Mo.....	439	12	23	33	152	121	98
Lincoln, Nebr.....	140	5	11	33	48	11	32
Madison, Wis.....	355	14	34	42	84	79	102
Marion, Ill.....	112	4	4	9	26	26	43
Minneapolis, Minn.....	716	54	39	59	213	127	224
Muskogee, Okla.....	191		9	14	56	42	70
Oklahoma City, Okla.....	376	28	33	55	144	83	33
Omaha, Nebr.....	392	16	27	44	114	87	104
Poplar Bluff, Mo.....	112	5		10	39	29	29
Saginaw, Mich.....	173		4	13	39	35	82
Sioux Falls, S. Dak.....	204	5			52	79	68
St. Louis, Mo.....	882	47	91	152	219	224	149
Wichita, Kans.....	163			22	22	52	67
Wood, Wis.....	627	52	27	89	122	132	205
Wadsworth, Kans.....	504		5	65	121	101	212
Total.....	13,351	684	827	1,508	3,795	2,807	3,730

See footnotes at end of table.

TABLE 19—CONTINUED

## INPATIENT CARE

VA Hospitals: Patients Remaining, Age Groups by Regions and Type of Hospital—October 20, 1971<sup>1</sup>

Region and type of hospital	Total all patients	Age group					
		Under 25	25 to 34	35 to 44	45 to 54	55 to 64	65 and over
Region IV	11,478	586	979	1,394	3,491	2,382	2,646
Psychiatric hospitals:							
American Lake, Wash.	610	26	68	100	226	100	90
Brentwood, Calif.	358	59	80	64	91	59	5
Fort Lyon, Colo.	507	33	49	98	158	82	87
Roseburg, Oreg.	357	17	56	79	73	46	86
Sheridan, Wyo.	361	9	9	72	54	49	168
Total	2,193	144	262	413	602	336	436
General hospitals:							
Albuquerque, N. Mex.	363	10	14	44	165	66	64
Boise, Idaho	147	8	12	12	54	23	38
Cheyenne, Wyo.	107	12			18	24	53
Denver, Colo.	331	56	35	18	97	49	76
Fort Harrison, Mont.	122		20	5	39	29	29
Fresno, Calif.	228	10	19	16	48	75	60
Grand Junction, Colo.	93	6	6	6	6	25	44
Livermore, Calif.	275		15	25	75	65	95
Long Beach, Calif.	1,467	78	153	182	470	358	226
Los Angeles, Calif. (ext. care)	358		13	13	53	60	219
Martinez, Calif.	400	9		44	109	82	147
Miles City, Mont.	63				7	26	20
Palo Alto, Calif.	1,137	65	160	215	356	163	178
Phoenix, Ariz.	195	21	17	21	55	51	30
Portland, Oreg.	463	8	33	59	121	146	96
Prescott, Ariz.	173			15	59	25	74
Reno, Nev.	159	6			61	43	49
Salt Lake City, Utah	429	15	22	28	150	120	94
San Francisco, Calif.	305	33	27	22	71	92	60
Seattle, Wash.	284	34	12	43	117	30	48
Sepulveda, Calif.	740	39	75	89	257	135	145
Spokane, Wash.	187	4		4	58	81	40
Tucson, Ariz.	223		15	31	86	30	61
Vancouver, Wash.	257	7	7	15	74	54	100
Wadsworth, Los Angeles, Calif.	640	21	43	64	240	165	107
Walla Walla, Wash.	149		10	10	43	29	57
Total	9,285	442	717	981	2,889	2,046	2,210
All patients	81,150	3,476	5,337	10,502	24,802	16,834	20,196
Psychiatric hospitals	24,241	719	1,674	4,006	7,840	4,353	5,649
General hospitals	56,906	2,757	3,663	6,496	16,962	12,481	14,547

<sup>1</sup> Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining Oct. 20, 1971. The

figures shown in the column for "All patients," do not necessarily equal the sum of the component parts due to machine rounding of sample data.

INPATIENT CARE

TABLE 20

VA Hospitals: Patients Remaining, Age Distribution of Spinal Cord Injury Patients in VA Hospitals and S.C.I. Centers—October 20, 1971<sup>1</sup>

Spinal cord injury center	Total patients	Age groups					
		Under 35	35 to 44	45 to 54	55 to 64	65 to 74	75 and over
Total VAH SCI patients.....	2,646	582	541	815	474	118	116
Traumatic—Total.....	1,766	540	378	529	248	35	36
Paraplegia.....	923	278	181	286	137	15	26
Quadriplegia.....	843	262	197	243	111	20	10
Non-traumatic—Total.....	880	42	163	286	226	83	80
Paraplegia.....	580	5	101	193	150	74	57
Quadriplegia.....	300	37	62	93	76	9	23
Total SCI Center patients.....	1,312	398	266	394	198	26	30
Traumatic—Total.....	1,064	383	207	302	131	21	20
Paraplegia.....	501	203	82	139	61	6	10
Quadriplegia.....	563	180	125	163	70	15	10
Non-traumatic—Total.....	248	15	59	92	67	5	10
Paraplegia.....	141	5	38	46	42	5	5
Quadriplegia.....	107	10	21	46	25	5	5
Bronx, N. Y.—Total.....	113	25	25	48	15	-----	-----
Traumatic—Total.....	88	25	20	38	5	-----	-----
Paraplegia.....	43	15	10	18	-----	-----	-----
Quadriplegia.....	45	10	10	20	5	-----	-----
Non-traumatic—Total.....	25	-----	5	10	10	-----	-----
Paraplegia.....	20	-----	5	5	10	-----	-----
Quadriplegia.....	5	-----	-----	5	-----	-----	-----
Castle Point, N. Y.—Total.....	46	22	12	6	6	-----	-----
Traumatic—Total.....	34	22	6	6	-----	-----	-----
Paraplegia.....	11	11	-----	-----	-----	-----	-----
Quadriplegia.....	23	11	6	6	-----	-----	-----
Non-traumatic—Total.....	12	-----	6	-----	6	-----	-----
Paraplegia.....	12	-----	6	-----	6	-----	-----
Cleveland, Ohio—Total.....	101	59	27	10	5	-----	-----
Traumatic—Total.....	80	59	16	5	-----	-----	-----
Paraplegia.....	48	43	5	-----	-----	-----	-----
Quadriplegia.....	32	16	11	5	-----	-----	-----
Non-traumatic—Total.....	21	-----	11	5	5	-----	-----
Paraplegia.....	11	-----	11	-----	-----	-----	-----
Quadriplegia.....	10	-----	-----	5	5	-----	-----
East Orange, N. J.—Total.....	29	6	12	11	-----	-----	-----
Traumatic—Total.....	17	6	-----	11	-----	-----	-----
Paraplegia.....	17	6	-----	11	-----	-----	-----
Non-traumatic—Total.....	12	-----	12	-----	-----	-----	-----
Paraplegia.....	6	-----	6	-----	-----	-----	-----
Quadriplegia.....	6	-----	6	-----	-----	-----	-----
Hampton, Va.—Total.....	31	-----	6	19	6	-----	-----
Traumatic—Total.....	31	-----	6	19	6	-----	-----
Paraplegia.....	13	-----	-----	13	-----	-----	-----
Quadriplegia.....	18	-----	6	6	6	-----	-----
Hines, Ill.—Total.....	209	75	43	49	27	10	5
Traumatic—Total.....	167	70	38	33	16	5	5
Paraplegia.....	54	27	11	11	5	-----	-----
Quadriplegia.....	113	43	27	22	11	5	5
Non-traumatic—Total.....	42	5	5	16	11	5	-----
Paraplegia.....	21	-----	-----	5	11	5	-----
Quadriplegia.....	21	5	5	11	-----	-----	-----

See footnotes at end of table.

TABLE 20—CONTINUED

## INPATIENT CARE

VA Hospitals; Patients Remaining, Age Distribution of Spinal Cord Injury Patients in VA Hospitals and S.C.I. Center—October 20, 1971<sup>1</sup>

Spinal cord injury center	Total patients	Age groups					
		Under 35	35 to 44	45 to 54	55 to 64	65 to 74	75 and over
Houston, Tex.—Total.....	41	17	8	12			4
Traumatic—Total.....	37	17	8	8			4
Paraplegia.....	29	13	4	8			4
Quadriplegia.....	8	4	4				
Non-traumatic—Total.....	4			4			
Quadriplegia.....	4			4			
Long Beach, Calif.—Total.....	212	85	42	48	37		
Traumatic—Total.....	192	80	37	48	27		
Paraplegia.....	112	48	16	37	11		
Quadriplegia.....	80	32	21	11	16		
Non-traumatic—Total.....	20	5	5		10		
Paraplegia.....	15	5	5		5		
Quadriplegia.....	5				5		
Memphis, Tenn.—Total.....	141	41	29	35	24	6	6
Traumatic—Total.....	135	41	29	29	24	6	6
Paraplegia.....	53	12	17		12	6	6
Quadriplegia.....	82	29	12	29	12		
Non-traumatic—Total.....	6			6			
Paraplegia.....	6			6			
Miami, Fla.—Total.....	21		5	11	5		
Traumatic—Total.....	5		5				
Paraplegia.....	5		5				
Non-traumatic—Total.....	16			11	5		
Paraplegia.....	16			11	5		
Richmond, Va.—Total.....	177	28	27	74	33	5	10
Traumatic—Total.....	148	28	27	60	28	5	
Paraplegia.....	78	14	9	32	23		
Quadriplegia.....	70	14	18	28	5	5	
Non-traumatic—Total.....	29			14	5		10
Paraplegia.....	19			14			5
Quadriplegia.....	10				5		5
San Juan, Puerto Rico—Total.....	15	5		10			
Traumatic—Total.....	10	5		5			
Paraplegia.....	10	5		5			
Non-traumatic—Total.....	5			5			
Quadriplegia.....	5			5			
West Roxbury, Mass.—Total.....	135	30	20	40	35	5	5
Traumatic—Total.....	115	25	15	40	25	5	5
Paraplegia.....	40	10	5	15	10		
Quadriplegia.....	75	15	10	25	15	5	5
Non-traumatic—Total.....	20	5	5		10		
Paraplegia.....	5				5		
Quadriplegia.....	15	5	5		5		
Wood, Wis.—Total.....	41	5	10	21	5		
Traumatic—Total.....	5	5					
Paraplegia.....	5	5					
Non-traumatic—Total.....	36		10	21	5		
Paraplegia.....	10		5	5			
Quadriplegia.....	26		5	16	5		

<sup>1</sup> Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining on Oct. 20, 1971. Being based on a sample, the data are subject to error due to sampling variability and do not agree with other data on counts of SCI patients. The intent of this

table is to present a relative distribution of the ages of SCI patients. The figures shown in the column for "All patients" do not necessarily equal the sum of the component parts due to machine rounding of sample data.  
Source: Patient treatment file.

## INPATIENT CARE

## TABLE 21

VA and Non-VA Hospitals: Patients Discharged, Age, Marital Status, Diagnostic Grouping—Fiscal Year 1972<sup>1</sup>

Diagnostic composition of patients	Total patients <sup>2</sup>	Age group					Marital status					
		Under 45	45 to 54	55 to 64	65 to 74	75 plus	Never married	Married	Separated	Widowed	Divorced	Unknown
All patients.....	796,896	236,408	246,302	163,630	58,968	91,588	145,458	443,073	46,233	47,730	111,609	2,793
Tuberculosis.....	8,981	1,600	3,855	2,141	700	685	1,463	4,677	700	585	1,533	23
Pulmonary tuberculosis.....	6,695	1,165	2,986	1,598	526	420	1,043	3,518	550	438	1,131	15
Other tuberculosis.....	2,286	435	869	543	174	265	420	1,159	150	147	402	8
Psychoses.....	68,253	36,478	19,866	7,260	1,876	2,773	28,291	22,361	5,005	1,903	10,079	614
Functional.....	57,901	34,131	16,570	5,124	1,004	1,072	26,258	17,844	4,201	1,075	7,944	579
Organic.....	10,352	2,347	3,296	2,136	872	1,701	2,033	4,517	804	828	2,135	35
Other psychiatric.....	115,616	51,707	40,843	15,834	3,199	4,033	24,128	52,927	9,568	4,669	24,047	277
Neurological.....	47,454	13,046	14,481	10,069	3,924	5,934	7,185	29,065	2,360	2,855	5,828	171
Vascular lesions affecting central nervous system.....	14,005	669	3,098	4,027	2,261	3,950	1,441	9,077	566	1,424	1,433	64
Other neurological.....	32,649	12,148	11,109	5,852	1,617	1,923	5,638	19,411	1,775	1,392	4,326	107
Neurological diseases of the sense organs.....	800	229	274	190	46	61	106	567	19	39	69	-----
General medical and surgical.....	556,592	133,577	167,257	128,326	49,269	78,163	84,391	334,053	28,600	37,718	70,122	1,708
Infective and parasitic diseases.....	11,846	7,189	2,064	1,313	489	791	4,171	5,530	557	428	1,114	46
Malignant neoplasms.....	54,363	4,898	13,417	16,341	7,512	12,195	6,378	34,696	2,157	4,858	6,190	84
Benign and unspecified neoplasms.....	6,590	1,608	2,054	1,481	616	831	981	4,161	287	395	759	7
Allergic and endocrine system.....	23,929	4,746	8,805	6,006	1,988	2,404	3,136	14,863	1,410	1,540	2,905	75
Heart diseases.....	66,033	5,735	21,285	18,250	7,337	13,426	5,997	44,137	2,748	5,755	7,013	383
Vascular diseases.....	37,070	6,937	12,522	9,178	3,287	5,146	4,881	22,414	2,168	2,652	4,883	72
Acute respiratory diseases <sup>3</sup> .....	18,472	3,884	4,926	3,898	1,884	3,880	3,061	9,891	1,155	1,747	2,549	69
Other respiratory diseases with asthma <sup>3</sup> .....	43,387	7,829	12,733	12,254	4,796	5,775	5,731	25,986	2,205	3,239	6,039	187
Digestive diseases <sup>3</sup> .....	86,540	23,276	29,617	19,318	5,944	8,365	12,959	50,907	5,170	4,968	12,325	211
Genitourinary diseases <sup>3</sup> .....	43,749	9,945	10,980	9,307	4,726	8,791	6,608	27,577	1,856	3,275	4,283	150
Diseases of skin and cellular tissue.....	22,499	9,280	6,456	3,766	1,196	1,801	5,253	11,453	1,413	1,061	3,272	47
Diseases of bones and organs of movement <sup>3</sup> .....	38,219	12,323	13,248	8,107	2,085	2,456	5,224	26,117	1,778	1,574	4,450	76
Accidents, poisonings and violence <sup>4</sup> .....	50,614	22,735	14,046	7,691	2,445	3,697	12,198	24,347	3,282	2,556	8,019	212
All other.....	53,281	13,192	15,104	11,416	4,984	8,585	7,813	32,974	2,414	3,670	6,321	89

<sup>1</sup> Patient treatment file.<sup>2</sup> This figure is based on completed records. In addition, there were 14,403 incomplete discharge records in file at the time the table was prepared.<sup>3</sup> Includes ill-defined conditions of the specified disease group.<sup>4</sup> Excludes accidents resulting in neurological conditions.

INPATIENT CARE

TABLE 22

VA Hospitals: Patients Discharged, Age, Diagnostic Category—Fiscal Year 1972<sup>1</sup>

Diagnostic category and ICDA codes <sup>2</sup>	Total diagnoses <sup>3</sup>	Principal diagnosis <sup>4</sup>	Associated diagnosis <sup>5</sup>	Average age	Age group of principal diagnosis					
					Under 35	35 to 44	45 to 54	55 to 64	65 to 74	75 and over
All diseases and conditions	1,950,964	776,227	1,174,737	51.4	128,048	102,502	239,231	159,205	57,306	89,935
I. Infective and parasitic diseases	40,235	17,766	22,469	44.9	6,266	2,153	4,514	2,636	911	1,286
Pulmonary tuberculosis (011)	7,272	5,147	2,125	52.1	296	834	2,194	1,144	340	339
Tuberculosis, late effects (019)	832	153	679	55.1	6	23	62	40	14	18
Tuberculosis, other (010, 012-018)	2,198	770	1,428	53.3	95	101	243	161	56	114
Cardiovascular syphilis (093)	292	97	195	70.4	1	1	8	18	24	46
Syphilis of central nervous system (094)	486	121	365	61.6	1	14	29	24	20	33
Other forms of late syphilis, latent, or unspecified (095, 096, 097)	3,359	123	3,236	53.2	19	17	29	29	10	19
All other venereal diseases (090-092, 098-099)	2,579	1,166	1,413	32.4	865	104	131	41	14	11
Infectious hepatitis (070)	2,456	2,136	320	29.6	1,832	126	122	40	6	10
Malaria (084)	980	877	103	27.1	860	5	4	3		5
All other infective and parasitic diseases (000-009, 020-027, 030-039, 040-046, 050-057, 060-068, 071-079, 080-083, 085-089, 100-104, 110-117, 120-129, 130-136)	19,781	7,176	12,605	46.5	2,292	928	1,702	1,136	427	691
II. Neoplasms	110,699	61,400	49,299	59.6	2,991	3,783	15,716	17,896	8,060	12,954
Malignancy of buccal cavity and pharynx (140-149)	5,724	4,346	1,378	58.7	50	216	1,417	1,560	551	552
Malignancy of digestive organs and peritoneum (150-159)	10,165	8,114	2,051	62.4	83	323	1,904	2,596	1,215	1,993
Malignancy of respiratory system (160, 162-163)	15,943	13,015	2,328	59.7	69	583	3,879	4,814	1,746	1,924
Malignancy of larynx (161)	2,216	1,792	424	59.0	4	61	583	708	236	200
Malignancy of lymphatic and hematopoietic tissue (200-209)	9,429	6,871	2,558	53.4	1,036	809	1,782	1,595	654	995
Malignancy of genito-urinary organs (180-189)	14,279	9,788	4,491	67.6	233	240	1,083	2,199	1,764	4,269
Malignancies of all other systems (170-174, 190-199)	36,694	10,293	26,401	59.2	474	753	2,798	2,832	1,264	2,172
Neoplasms, benign (210-228)	14,259	5,938	8,321	51.8	933	695	1,885	1,290	493	642
Neoplasms, of unspecified nature (230-239)	2,590	1,243	1,347	56.3	109	103	385	302	137	207
III. Endocrine, nutritional, and metabolic diseases	111,118	23,580	87,538	53.9	1,512	3,169	8,668	5,918	1,941	2,372
Diabetes mellitus (250)	61,171	15,877	45,294	54.6	786	2,050	5,854	4,112	1,384	1,691
Diseases of thyroid and other endocrine glands (240-246, 251-258)	7,325	2,631	4,694	50.5	375	394	892	615	171	184
Vitaminosis and other nutritional deficiency (260-269)	6,832	895	5,937	58.2	30	100	286	195	100	184
Obesity not specified as of endocrine origin (277)	19,098	1,471	17,627	50.0	127	266	629	316	78	55
Other metabolic diseases (270-276, 278-279)	16,692	2,706	13,986	53.4	194	359	1,007	680	208	258
IV. Diseases of blood and blood-forming organs	29,117	3,993	25,124	55.7	510	391	1,087	783	398	824
Anemia, iron deficiency (280)	7,867	992	6,875	59.7	29	93	278	245	113	234
Pernicious anemia (281.0)	778	263	515	66.7	2	9	51	50	36	115
Anemia, other (281.1-285)	15,050	1,796	13,254	55.2	265	189	462	308	201	371
All other diseases of blood and blood-forming organs (286-289)	5,422	942	4,480	49.5	214	100	296	180	48	104
V. Mental disorders	289,563	178,654	110,909	44.1	48,719	36,404	59,189	22,596	5,009	6,737
Psychoses not attributed to physical conditions (295-299)	63,793	54,565	9,228	40.8	19,435	12,555	15,669	4,881	975	1,050
Alcoholic psychosis (291)	8,420	5,713	2,702	49.8	362	1,138	2,481	1,358	264	75
Psychoses with organic brain syndrome, except syphilitic (290, 292.2-294)	6,731	4,303	2,428	61.1	471	316	744	689	566	1,517
Psychoses associated with syphilis (292.0, 292.1)	242	197	45	69.4	2	2	32	28	39	96
Alcoholism (303)	89,554	48,772	40,782	47.5	4,130	12,127	22,553	8,444	1,164	354
Mental disorders, not specified as psychotic, associated with physical conditions (309.0, 309.13-309.8)	21,228	9,999	11,229	60.5	650	960	2,291	1,816	1,195	3,087
Psychoneurotic, personality and behavioral disorders (excluding alcoholism) (300-302, 304-306.9, 307.3, 307.4)	98,874	54,961	43,913	39.5	23,637	9,281	15,374	5,311	805	553
Mental retardation (310-315)	721	139	582	45.4	34	25	45	29	1	5

See footnotes at end of table.

## INPATIENT CARE

## TABLE 22—CONTINUED

VA Hospitals: Patients Discharged, Age, Diagnostic Category—Fiscal Year 1972<sup>1</sup>

Diagnostic category and ICDA codes <sup>2</sup>	Total diagnoses <sup>3</sup>	Principal diagnosis <sup>4</sup>	Associated diagnosis <sup>5</sup>	Average age	Age group of principal diagnosis					
					Under 35	35 to 44	45 to 54	55 to 64	65 to 74	75 and over
<b>VI. Diseases of nervous system and sense organs.....</b>	<b>110,266</b>	<b>37,269</b>	<b>72,997</b>	<b>53.4</b>	<b>4,739</b>	<b>4,782</b>	<b>11,305</b>	<b>7,992</b>	<b>3,293</b>	<b>5,158</b>
Inflammatory diseases of central nervous system (320-324).....	1,156	524	632	46.6	106	93	196	96	12	21
Epilepsy (345).....	9,140	3,127	6,013	44.5	736	722	1,075	429	73	92
Amyotrophic lateral sclerosis (348.0).....	518	401	117	55.1	8	29	168	144	30	22
Paraplegia, cerebral or spinal (344.2, 349.3).....	3,379	1,029	2,350	43.1	294	235	317	132	30	21
Quadriplegia, cerebral or spinal (344.3, 349.4).....	1,873	606	1,267	41.2	222	117	186	50	16	15
Other diseases of central nervous system, including hereditary and familial disease of nervous system (330-333, 340-344.1, 344.9, 346-347, 348.1-349.2, 349.5-349.9).....	22,974	7,692	15,282	52.2	818	1,226	2,583	1,680	628	757
Diseases of nerves and peripheral ganglia (350-358).....	13,741	4,274	9,467	49.9	569	659	1,638	916	246	246
Inflammatory diseases of the eye and other diseases and conditions of the eye, except blindness (360-369, 370-378).....	40,673	14,958	25,715	60.0	989	986	3,547	3,672	2,014	3,750
Blindness (379).....	2,716	381	2,335	52.4	59	46	122	66	38	50
Disease of ear and mastoid process (380-389).....	14,096	4,277	9,819	47.0	938	669	1,473	807	206	184
<b>VII. Diseases of the circulatory system.....</b>	<b>329,281</b>	<b>113,232</b>	<b>216,049</b>	<b>58.6</b>	<b>3,596</b>	<b>9,370</b>	<b>35,658</b>	<b>30,290</b>	<b>12,400</b>	<b>21,918</b>
Chronic rheumatic heart disease (393-398).....	8,643	3,893	4,750	52.2	184	609	1,682	984	212	222
Hypertensive heart disease, exclusive of ischemic heart disease (400.1, 402, 404).....	2,871	1,602	1,269	55.5	29	167	664	449	132	161
Hypertensive disease without heart involvement (400.0, 400.2, 400.3, 400.9, 401, 403).....	30,189	8,392	21,797	51.3	531	1,390	3,651	1,953	460	407
Acute myocardial infarction (410).....	10,831	7,994	2,837	58.5	46	602	2,789	2,477	824	1,256
Chronic ischemic heart disease (412).....	89,445	36,919	52,536	61.3	148	2,092	11,112	10,102	4,449	9,016
Other ischemic heart disease, with or without hypertensive disease (411, 413, 414).....	11,916	2,232	9,714	56.1	22	233	1,035	663	172	207
Other forms of heart disease (391, 392.0, 420-429).....	64,561	10,713	53,848	58.8	472	831	3,103	2,872	1,259	2,176
Cerebral hemorrhage (431).....	1,194	736	458	58.2	15	55	239	233	86	108
Cerebral thrombosis (433).....	6,352	3,684	2,668	63.2	17	130	813	1,083	661	980
Cerebral embolism (434).....	404	277	127	59.7	-----	18	32	35	14	28
Generalized ischemic cerebrovascular disease (437).....	9,010	2,254	6,756	69.1	1	27	283	482	422	1,039
All other cerebrovascular disease (430, 432, 435, 436, 438).....	14,544	6,884	7,660	62.3	88	303	1,638	2,097	1,026	1,732
Arteriosclerosis (440).....	21,959	5,496	16,463	65.4	4	148	1,090	1,520	830	1,604
All other diseases of arteries, arterioles and capillaries (441-448).....	16,156	6,073	10,083	59.3	230	441	1,637	1,807	733	1,225
Varicose veins lower extremities (454).....	8,243	3,479	4,764	54.2	223	400	1,288	941	264	363
Hemorrhoids (455).....	12,126	5,691	6,435	47.4	1,008	1,089	2,069	994	257	244
All other diseases of veins and lymphatics, and other diseases of circulatory system (390, 392.9, 450-453, 456-458).....	20,797	7,063	13,734	54.1	578	835	2,503	1,698	599	850
<b>VIII. Diseases of the respiratory system.....</b>	<b>155,505</b>	<b>55,022</b>	<b>100,483</b>	<b>56.1</b>	<b>5,835</b>	<b>4,304</b>	<b>15,067</b>	<b>14,545</b>	<b>6,199</b>	<b>9,072</b>
Acute respiratory infections including influenza (460-466, 470-474).....	12,888	5,654	7,234	49.5	1,467	600	1,438	1,024	409	716
Pneumonia (480-486).....	28,543	11,780	16,763	59.6	674	943	3,133	2,636	1,379	3,015
Bronchitis, unqualified and chronic (490-491).....	26,243	7,961	18,282	59.5	185	406	2,326	2,606	1,152	1,286
Emphysema (492).....	39,012	11,013	27,999	62.3	45	337	2,579	3,896	1,866	2,290
Asthma (493).....	5,712	2,779	2,933	49.8	345	453	1,045	662	154	120
All other diseases of upper respiratory tract and respiratory system (500-508, 510-519).....	43,107	15,835	27,272	51.0	3,119	1,565	4,546	3,721	1,239	1,645
<b>IX. Diseases of the digestive system.....</b>	<b>255,229</b>	<b>78,684</b>	<b>176,545</b>	<b>51.8</b>	<b>9,909</b>	<b>10,886</b>	<b>27,107</b>	<b>17,765</b>	<b>5,431</b>	<b>7,586</b>
Diseases of oral cavity, salivary glands, and jaws (520-529).....	95,198	3,929	91,269	48.0	994	441	1,197	760	246	291
Ulcers digestive system (stomach, duodenum, peptic, gastrojejunal) (531-534).....	24,259	13,743	10,516	51.4	1,548	2,037	5,016	3,191	878	1,073
All other diseases esophagus, stomach, and duodenum (except ulcers) (530, 535-537).....	16,398	6,295	10,103	52.0	720	879	2,244	1,423	428	601
Hernia of abdominal cavity (550-554).....	35,943	18,791	17,152	54.2	2,115	1,862	5,843	4,833	1,695	2,443
Other diseases of intestine and peritoneum (540-543, 560-560).....	36,047	16,241	19,806	51.3	3,005	2,126	4,568	3,205	1,182	2,155
Cirrhosis of liver (571).....	26,924	10,001	16,923	50.7	389	1,738	4,826	2,418	459	171
Other diseases of liver, gall bladder and pancreas (570, 572-577).....	20,460	9,684	10,776	50.7	1,138	1,803	3,413	1,935	543	852
<b>X. Diseases of the genitourinary system.....</b>	<b>111,079</b>	<b>39,449</b>	<b>71,630</b>	<b>55.9</b>	<b>5,268</b>	<b>3,634</b>	<b>9,871</b>	<b>8,426</b>	<b>4,287</b>	<b>7,933</b>
Nephritis and nephrosis (580-584).....	7,523	4,419	3,109	47.8	624	769	1,971	798	117	140
Other diseases of urinary system (590-599).....	58,629	16,646	41,983	54.6	2,252	1,836	4,608	3,333	1,605	3,012

Diseases of the prostate (600-602)	29,991	11,575	18,416	65.7	349	315	1,517	3,050	2,158	4,186
Other diseases of male genital organs (603-607)	12,300	5,847	6,753	47.4	1,709	548	1,351	1,071	342	526
Diseases of breast, gynecological conditions (610-616, 620-629)	2,631	1,262	1,369	46.9	334	166	424	174	65	99
XI. Deliveries and complications of pregnancy, childbirth and the puerperium (630-678)	31	18	13	( <sup>1</sup> )	17	1				
XII. Diseases of skin and subcutaneous tissue	55,139	22,113	33,026	46.9	6,047	3,112	6,320	3,699	1,164	1,771
Infections of skin and subcutaneous tissue (680-686, 694-698)	22,418	10,763	11,655	45.0	3,423	1,536	3,017	1,688	466	633
All other diseases of skin and subcutaneous tissue (690-693, 700-709)	32,721	11,350	21,371	48.8	2,624	1,576	3,303	2,011	698	1,138
XIII. Diseases of the musculoskeletal system and connective tissue	91,532	38,287	53,245	49.0	6,779	5,668	13,376	8,089	1,997	2,378
Arthritis and rheumatism, except rheumatic fever (710-718)	45,025	15,803	29,222	54.6	940	1,684	5,861	4,427	1,255	1,636
Displacement of intervertebral disc (725)	6,018	4,411	1,607	45.5	728	1,081	1,793	697	63	49
Osteomyelitis and other diseases of bone and joint (720-724, 726-729)	22,466	10,885	11,581	43.9	3,245	1,961	3,414	1,549	335	381
Other diseases of musculoskeletal system (730-738)	18,023	7,188	10,835	46.4	1,866	942	2,308	1,416	344	312
XIV. Congenital deformities (743-759)	9,175	3,326	5,849	46.2	789	541	1,157	558	140	141
XVI.a Symptoms and ill-defined conditions	80,168	27,476	52,692	51.1	4,470	3,871	8,752	5,334	1,836	3,213
Senility without mention of psychosis (794)	1,064	128	936	76.9			2	5	17	104
Symptoms and all other ill-defined conditions (780-792, 795-796)	79,104	27,348	51,756	51.0	4,470	3,871	8,750	5,329	1,819	3,109
XVI.b Observation and examination cases, follow-up and special admissions	58,479	20,912	37,567	52.6	3,215	2,401	6,290	4,549	1,709	2,748
Tuberculosis (Y03.01, Y10.61-Y10.63)	6,544	1,354	5,190	54.5	46	161	569	343	105	130
Mental (793.0, Y00.1, Y03.4), (316, 318, APA Code)	702	554	148	36.9	299	90	107	46	4	8
Malignancy (793.1, Y03.3)	12,206	5,537	6,759	62.5	120	264	1,280	1,549	807	1,517
All other admissions (793.8, 793.9, Y00.0, Y00.2-Y01, Y03.9, Y04-Y06, Y10.64-Y10.69, Y11, Y12, Y20-Y29)	38,615	13,158	25,457	49.3	2,573	1,841	4,269	2,592	792	1,091
Diagnosis deferred, mental observation (319.0 APA Code)	322	309	13	35.7	177	45	65	19	1	2
XVII. Accidents, poisonings, and nature of injury	114,348	55,046	59,302	45.3	17,386	8,032	15,154	8,129	2,531	3,814
Fracture of skull and facial bones (800-804)	4,351	2,859	1,492	40.5	1,153	537	750	290	69	60
Fracture of skull and facial bones, late effects (800-804)	602	8	594	( <sup>2</sup> )	4	2	1	1		
Fracture of spine and trunk (805-809)	5,928	2,986	2,942	50.3	618	371	867	573	207	350
Fracture of spine and trunk, late effects (805-809)	3,755	1,293	2,462	39.8	528	286	314	113	22	30
Fracture of upper limb (810-819)	6,977	4,550	2,427	45.9	1,445	549	1,177	809	269	301
Fracture of upper limb, late effects (810-819)	1	1	824	( <sup>2</sup> )						1
Fracture of lower limb (820-829)	12,610	9,612	2,998	49.9	2,244	1,175	2,632	1,660	606	1,295
Fracture of lower limb, late effects (820-829)	1,724	5	1,719	( <sup>2</sup> )	2	1		2		
Dislocation without fracture (830-839, 840-843)	8,879	5,952	2,927	41.8	2,211	1,039	1,677	692	165	165
Dislocation without fracture, late effects (830-839, 840-854)	238	17	221	( <sup>2</sup> )	5	5	3	3	1	
Intracranial injury—without skull fracture (850-854)	3,377	2,349	1,028	43.9	798	391	612	325	90	133
Intracranial injury—without skull fracture, late effects (850-854)	1,741	388	1,353	38.1	180	73	102	23	7	3
Internal injury of chest, abdomen and pelvis (860-869)	1,602	748	854	42.5	274	119	199	110	25	21
Internal injury of chest, abdomen and pelvis, late effects (860-869)	163	8	155	( <sup>2</sup> )	4	2	2	2		
Traumatic amputation of arm and hand—complete/partial, late effects (887)	43	9	14	( <sup>2</sup> )	2	3	3	1		
Traumatic amputation of arm and hand—complete/partial, late effects (887)	112	54	58	( <sup>2</sup> )	28	7	8	3	5	3
Traumatic amputation of foot and leg(s) complete/partial (896-897)	195	92	103	( <sup>2</sup> )	61	9	9	5	4	4
Traumatic amputation of foot and leg(s) complete/partial, late effects (896-897)	2,706	1,750	956	46.7	413	292	576	291	78	100
Burns (940-949)	268	8	258	( <sup>2</sup> )	2	1	3	2		
Burns, late effects (940-949)	1,499	935	564	39.8	398	166	253	80	19	19
Injury to nerves and spinal cord (950-959)	976	126	850	40.2	56	19	30	16	1	4
Injury to nerves and spinal cord, late effects (950-959)										
Adverse effect of medicinal agents and other complications of surgical and medical care (960-979, 997-999)	30,346	9,753	20,593	46.8	2,817	1,208	2,818	1,572	570	768
All other accidents, poisonings and violence (870-873, 880-886, 890-895, 900-907, 910-918, 920-939, 980-996)	23,669	11,482	12,187	43.2	4,117	1,775	3,096	1,553	389	552
All other accidents, poisonings and violence, late effects (870-879, 880-886, 890-895, 900-907, 910-918, 920-939, 980-996)	1,741	51	1,690	( <sup>2</sup> )	21	4	17	3	1	5

<sup>1</sup> Patient treatment file.

<sup>2</sup> The diagnostic categories and selected diagnoses included in this table are based on the "International Classification of Diseases Adapted for Indexing of Hospital Records," USPHS publication No. 1693. The numbers following the diagnosis are the identifying code numbers of this diagnostic classification. Category XV, "Certain Causes of Perinatal Morbidity and Mortality," in which no cases occurred, is not included in this table.

<sup>3</sup> This figure is based on completed records. In addition, there were 14,403 incomplete discharge records in the file at the time the table was prepared.

<sup>4</sup> Principal diagnosis is that diagnosis designated by the treating physician as responsible for the major portion of the patient's length of stay.

<sup>5</sup> Associated diagnoses are established diagnoses for which treatment was given, other than the principal diagnosis.

<sup>6</sup> Average age not calculated for totals of less than 100 cases.

## INPATIENT CARE

TABLE 23

VA Hospitals: Patients Discharged, Marital Status, Manner of Disposition, Diagnostic Grouping—Fiscal Year 1972<sup>1</sup>

Type of patient	Total all discharges <sup>2</sup>	Marital status			Discharge status						
		Single	Married	All other	Regular <sup>3</sup>	Nonbed care <sup>4</sup>	Irregular	Deaths			Transfers to further VA inpatient care, at VA or non-VA hospital
								Total	With autopsy	Without autopsy	
All patients.....	776,227	142,455	430,102	203,670	666,115	5,847	37,134	42,375	20,647	21,728	24,756
Tuberculosis.....	7,400	1,424	3,248	2,728	5,719	8	671	331	164	167	671
Pulmonary tuberculosis.....	5,147	1,008	2,111	2,028	3,669	6	593	281	137	144	596
Other tuberculosis.....	2,253	416	1,137	700	2,050	2	78	50	27	23	75
Psychoses.....	64,799	26,993	21,175	16,631	45,343	4,512	8,376	1,598	735	863	4,970
Functional.....	54,565	24,994	16,704	12,867	38,072	4,131	7,604	655	335	320	4,103
Organic.....	10,234	1,999	4,471	3,764	7,271	381	772	943	400	543	867
Other psychiatric.....	114,425	23,918	52,313	38,194	92,899	980	15,935	1,537	703	834	3,074
Neurological.....	46,397	7,057	28,364	10,976	38,577	87	1,009	4,091	1,872	2,219	2,633
Vascular lesions affecting central nervous system.....	13,685	1,425	8,837	3,423	10,220	45	155	2,666	1,103	1,563	589
Other neurological.....	31,926	5,526	18,973	7,427	27,606	42	839	1,422	767	655	2,018
Neurological diseases of the sense organs.....	786	106	554	126	742	-----	15	3	2	1	26
General medical and surgical.....	543,206	83,063	325,002	135,141	483,577	260	11,143	34,818	17,173	17,645	13,408
Infective and parasitic diseases.....	11,430	4,072	5,293	2,065	10,504	6	417	401	195	206	102
Malignant neoplasms.....	53,546	6,308	34,103	13,135	37,599	16	530	12,707	5,932	6,775	2,694
Benign and unspecified neoplasms.....	6,450	970	4,053	1,427	5,981	3	91	86	35	51	289
Allergic and endocrine system.....	23,205	3,067	14,376	5,762	21,508	18	493	788	370	418	398
Heart diseases.....	63,588	5,863	42,457	15,262	53,319	28	1,278	7,077	3,374	3,703	1,886
Vascular diseases.....	36,108	4,816	21,687	9,605	32,406	17	649	2,103	1,154	949	933
Acute respiratory diseases <sup>5</sup> .....	18,051	3,018	9,625	5,408	14,665	19	345	2,865	1,445	1,420	157
Other respiratory diseases with asthma <sup>5</sup> .....	42,141	5,638	26,159	11,344	38,256	13	956	2,185	1,142	1,043	781
Digestive diseases <sup>5</sup> .....	84,227	12,689	49,370	22,168	77,285	23	2,342	3,483	1,924	1,559	1,094
Genitourinary diseases <sup>5</sup> .....	42,673	6,492	26,835	9,346	40,249	9	479	869	453	416	1,067
Diseases of skin and cellular tissue.....	22,113	5,197	11,201	5,715	21,243	18	450	130	73	57	272
Diseases of bones and organs of movement <sup>5</sup> .....	37,616	5,171	24,665	7,760	35,882	10	606	232	131	101	886
Accidents, poisonings and violence <sup>6</sup> .....	49,785	12,046	23,912	13,827	46,170	49	1,336	745	377	368	1,485
All other.....	52,273	7,716	32,246	12,311	48,510	31	1,171	1,147	568	579	1,414

<sup>1</sup> Patient treatment file.<sup>2</sup> This figure is based on completed records. In addition, there were 14,403 incomplete discharge records in file at the time the table was prepared.<sup>3</sup> Includes discharges to VA outpatient programs.<sup>4</sup> Committed patients and institutional award patients who were released for the purpose of determining the patient's ability to make a satisfactory adjustment outside the hospital.<sup>5</sup> Includes ill-defined conditions of the specified disease group.<sup>6</sup> Excludes accidents resulting in neurological conditions.

INPATIENT CARE

TABLE 24

VA Hospitals: Patients Discharged, Age, Selected Period of Service, Diagnostic Grouping—Fiscal Year 1972<sup>1</sup>

Diagnostic composition of patients	World War II					Korean conflict					Vietnam era							
	Total patients <sup>2</sup>	Age distribution				Total patients <sup>2</sup>	Age distribution				Total patients <sup>2</sup>	Age distribution						
		Under 45	45 to 54	55 to 64	65 plus		Under 35	35 to 44	45 to 54	55 to 64		65 plus	Under 25	25 to 34	35 to 44	45 to 54	55 to 64	65 plus
All patients.....	412,883	12,959	209,913	148,555	41,456	82,575	955	59,332	16,631	4,438	1,219	115,104	54,603	46,815	7,199	4,735	1,413	339
Tuberculosis.....	4,844	187	2,710	1,578	369	951	9	657	226	44	15	415	127	170	72	35	10	1
Pulmonary tuberculosis.....	3,414	142	1,947	1,076	249	689	7	479	163	29	11	280	75	118	59	23	5	1
Other tuberculosis.....	1,430	45	763	502	120	262	2	178	63	15	4	135	52	52	13	12	5	1
Psychoses.....	25,510	1,364	16,481	6,423	1,242	10,385	153	8,451	1,543	211	27	16,455	7,704	7,721	712	220	43	55
Functional.....	19,823	1,137	13,605	4,471	610	9,176	138	7,584	1,303	142	9	15,723	7,427	7,424	619	173	28	52
Organic.....	5,687	227	2,876	1,952	632	1,209	15	867	240	69	18	732	277	297	93	47	15	3
Other psychiatric.....	54,771	2,939	34,811	14,527	2,494	17,009	215	12,908	3,283	519	84	23,546	11,499	9,409	1,615	805	162	56
Neurological.....	25,197	797	12,487	9,195	2,748	4,909	73	3,570	896	266	104	5,787	2,330	2,572	488	291	86	20
Vascular lesions affecting central nervous system.....	8,053	97	2,711	3,683	1,562	617	5	302	151	88	71	215	37	43	35	61	34	5
Other neurological.....	16,700	681	9,547	5,337	1,155	4,206	67	3,206	727	173	33	5,470	2,249	2,496	436	224	51	14
Neurological diseases of the sense organs.....	444	9	229	175	31	86	1	62	18	5	1	102	44	33	17	6	1	1
General medical and surgical.....	302,561	7,702	143,424	116,832	34,603	49,321	505	33,746	10,683	3,398	989	68,901	32,943	26,943	4,312	3,384	1,112	207
Infective and parasitic diseases.....	3,309	98	1,703	1,157	351	886	9	696	139	36	6	5,420	3,557	1,717	88	40	8	10
Malignant neoplasms.....	32,820	435	11,868	15,226	5,291	2,850	13	1,586	703	390	158	2,134	627	859	257	254	117	20
Benign and unspecified neoplasms.....	3,568	57	1,738	1,342	431	652	5	445	148	42	11	909	404	380	50	22	2	2
Allergic and endocrine system.....	14,854	441	7,539	5,399	1,475	2,677	23	1,855	580	186	33	1,448	412	675	175	138	46	2
Heart diseases.....	40,094	797	17,988	16,225	5,084	4,425	18	2,526	1,258	496	127	1,750	235	408	409	489	191	18
Vascular diseases.....	22,027	583	10,807	8,309	2,328	3,617	44	2,498	759	257	59	2,640	869	1,115	294	267	91	4
Acute respiratory diseases <sup>3</sup> .....	9,301	228	4,229	3,575	1,269	1,427	12	919	328	114	54	2,022	1,101	716	87	91	19	8
Other respiratory diseases with asthma <sup>3</sup> .....	25,776	498	10,900	11,179	3,199	3,240	23	2,059	770	275	113	4,083	1,976	1,497	278	213	100	19
Digestive diseases <sup>3</sup> .....	48,656	1,514	25,290	17,586	4,266	9,527	96	6,836	1,948	516	131	10,755	4,619	4,463	837	655	155	26
Genitourinary diseases <sup>3</sup> .....	21,522	421	9,394	8,469	3,238	3,264	35	2,243	674	225	87	5,366	2,430	2,268	333	232	84	19
Diseases of skin and cellular tissue.....	10,238	395	5,512	3,464	867	2,511	41	1,860	482	100	28	5,673	3,041	2,285	186	104	42	15
Diseases of bones and organs of movement <sup>3</sup> .....	21,189	681	11,511	7,453	1,544	4,298	47	3,105	884	229	33	6,400	3,039	2,606	394	282	69	10
Accidents, poisonings, and violence <sup>4</sup> .....	21,538	832	11,938	7,009	1,759	5,438	93	4,016	1,040	235	54	13,445	7,494	5,102	502	268	59	20
All other.....	27,669	722	13,007	10,439	3,501	4,509	45	3,102	970	297	95	6,856	3,139	2,852	422	300	109	34

<sup>1</sup> Patient treatment file.

<sup>2</sup> This figure is based on completed records. In addition, there were 14,403 incomplete discharge records in file at the time the table was prepared.

<sup>3</sup> Includes ill-defined conditions of the specified disease group.

<sup>4</sup> Excludes accidents resulting in neurological conditions.

NOTE: If a veteran served in 2 or more war periods, he was coded to the latest war for a service connected condition incurred in a prior war period.

INPATIENT CARE

TABLE 25

VA and Non-VA Hospitals: Patients Discharged, Compensation and Pension Status, Type of Patient—  
Fiscal Year 1972<sup>1</sup>

Hospital group and compensation and pension status	Total discharges <sup>1</sup>	Type of patient				
		Tuberculous	Psychotic	Other psychiatric	Neurological	General medical and surgical
VA and non-VA hospitals.....	796,896	8,981	68,253	115,616	47,454	556,592
Received care for a service connected disability.....	114,940	988	31,664	16,874	6,988	58,426
Received care for a non-service connected disability only:						
And having a service connected compensable disability, which did not require medical care.....	123,461	1,094	4,760	16,167	6,782	94,668
And having a claim for VA compensation pending.....	7,657	245	737	1,256	487	4,832
And on VA pension rolls.....	194,102	2,239	11,491	15,908	13,183	151,286
And having a claim for VA pension pending.....	15,259	346	998	2,410	1,207	10,398
And having no claim filed.....	330,601	4,004	17,833	59,771	18,245	220,748
Nonveterans.....	10,776	85	780	3,135	562	6,234
VA hospitals.....	776,227	7,400	64,799	114,425	46,397	543,206
Received care for a service connected disability.....	106,757	810	28,757	16,036	6,560	54,594
Received care for a non-service connected disability only:						
And having a service connected compensable disability, which did not require medical care.....	121,256	943	4,673	16,090	6,666	92,884
And having a claim for VA compensation pending.....	6,921	65	714	1,243	464	4,335
And on VA pension rolls.....	192,056	2,112	11,440	15,868	13,051	149,585
And having a claim for VA pension pending.....	15,170	337	993	2,404	1,199	10,237
And having no claim filed.....	323,318	3,068	17,452	59,553	17,896	225,349
Nonveterans.....	10,749	65	770	3,131	561	6,222

<sup>1</sup> Patient treatment file.

<sup>2</sup> This figure is based on completed records. In addition, there were 14,408 incomplete discharge records in the file at the time the table was prepared.

VA Hospitals: Patients Discharged, Compensation and Pension Status, Type of Patient, Age—  
Fiscal Year 1972<sup>1</sup>

Type of patients and age group	Total all patients <sup>2</sup>	Service connected veterans				Non-service connected			Non-veterans
		Total	10 percent or more	Less than 10 percent	NSC with SC <sup>3</sup>	Total	Pension	Other	
All patients.....	776, 227	228, 013	102, 874	3, 883	121, 256	537, 465	192, 056	345, 409	10, 749
Under 25.....	61, 990	20, 317	13, 806	1, 284	5, 227	35, 899	657	35, 242	5, 774
25 to 34.....	66, 058	22, 914	15, 798	598	6, 518	41, 819	1, 396	40, 423	1, 325
35 to 44.....	102, 502	30, 040	16, 917	480	12, 643	71, 228	12, 998	58, 230	1, 134
45 to 64.....	239, 231	78, 730	33, 281	892	44, 557	159, 245	43, 975	115, 270	1, 256
65 to 64.....	169, 205	60, 504	16, 664	470	33, 370	107, 868	42, 492	65, 376	833
65 and over.....	147, 241	25, 508	6, 408	189	18, 941	121, 306	90, 538	30, 768	427
Tuberculous.....	7, 400	1, 753	785	25	943	5, 682	2, 112	3, 470	65
Under 25.....	172	64	50	2	12	85		85	23
25 to 34.....	270	63	41		22	198	15	183	9
35 to 44.....	1, 115	201	105	2	94	905	194	711	9
45 to 64.....	3, 053	765	317	13	435	2, 275	706	1, 569	13
65 to 64.....	1, 679	437	153	7	277	1, 236	539	697	6
65 and over.....	1, 111	223	119	1	103	883	668	225	5
Psychotic.....	64, 799	33, 430	27, 862	895	4, 673	30, 599	11, 440	19, 159	770
Under 25.....	8, 672	5, 422	4, 795	316	311	2, 676	112	2, 564	574
25 to 34.....	11, 596	6, 747	6, 123	147	477	4, 727	325	4, 402	122
35 to 44.....	14, 012	6, 686	5, 686	184	816	7, 292	2, 782	4, 510	34
45 to 64.....	18, 929	9, 781	7, 822	160	1, 779	9, 150	4, 220	4, 930	18
65 to 64.....	7, 003	3, 414	2, 499	68	847	3, 675	1, 724	1, 951	14
65 and over.....	4, 587	1, 400	937	20	443	3, 179	2, 277	902	8
Other psychiatric.....	114, 425	32, 126	15, 397	639	16, 090	79, 168	15, 868	63, 300	3, 131
Under 25.....	14, 746	2, 977	1, 512	258	1, 207	9, 166	127	9, 039	2, 603
25 to 34.....	14, 004	2, 981	1, 610	81	1, 290	10, 789	180	10, 609	284
35 to 44.....	22, 483	5, 231	2, 374	83	2, 774	17, 114	2, 003	15, 111	136
45 to 64.....	40, 370	13, 936	6, 873	144	6, 919	26, 741	5, 653	20, 688	93
65 to 64.....	15, 646	5, 613	2, 525	61	3, 027	9, 994	3, 741	6, 253	39
65 and over.....	7, 176	1, 388	503	12	873	5, 764	4, 164	1, 600	24
Neurological.....	46, 597	13, 226	6, 435	125	6, 666	32, 610	13, 051	19, 559	561
Under 25.....	2, 691	1, 181	955	21	205	1, 303	79	1, 224	207
25 to 34.....	3, 803	1, 544	1, 180	21	343	2, 185	193	1, 992	74
35 to 44.....	6, 260	1, 948	1, 207	21	720	4, 222	1, 085	3, 137	90
45 to 64.....	14, 117	4, 286	1, 854	31	2, 401	9, 740	3, 172	6, 568	91
65 to 64.....	9, 853	2, 783	885	24	1, 874	7, 018	2, 760	4, 258	52
65 and over.....	9, 673	1, 484	364	7	1, 123	8, 142	5, 762	2, 380	47
General medical and surgical.....	543, 206	147, 478	52, 095	2, 199	92, 884	389, 506	149, 585	239, 921	6, 222
Under 25.....	35, 709	10, 673	6, 494	687	3, 492	22, 669	339	22, 330	2, 367
25 to 34.....	36, 385	11, 579	6, 844	349	4, 386	23, 920	683	23, 237	886
35 to 44.....	58, 632	15, 974	7, 545	190	8, 239	41, 795	6, 934	34, 861	863
45 to 64.....	162, 762	49, 982	16, 415	544	33, 023	111, 739	30, 224	81, 515	1, 041
65 to 64.....	125, 024	38, 257	10, 602	310	27, 345	86, 045	33, 728	52, 317	722
65 and over.....	124, 694	21, 013	4, 495	119	16, 399	103, 338	77, 677	25, 661	343

<sup>1</sup> Patient treatment file.

<sup>2</sup> This figure is based on completed records. In addition, there were 14,403 incomplete records in file at the time the table was prepared.

<sup>3</sup> Veterans with compensable service connected disabilities but treated for non-service connected disabilities only.

INPATIENT CARE

TABLE 27

VA Hospitals: Patients Discharged, Type of Patient, Age, Length of Stay—Fiscal Year 1972<sup>1</sup>

Type of patient and age group	Total patients <sup>2</sup>	Average days	Length of stay distribution (days)													Total days
			1 day	2 to 3	4 to 7	8 to 14	15 to 21	22 to 30	31 to 60	61 to 90	91 to 180	181 to 270	271 to 365	366 to 730	731 plus	
All patients	776, 227	50.4	60, 734	69, 074	103, 057	162, 792	104, 381	84, 924	108, 111	35, 174	28, 524	7, 159	3, 227	3, 942	5, 128	39, 109, 405
Under 20	2, 873	17.4	501	429	572	578	251	179	228	70	58	6	1	1	1	50, 090
20 to 24	59, 117	20.7	8, 617	8, 077	11, 605	11, 585	5, 177	4, 023	5, 413	2, 135	1, 826	399	140	94	26	1, 225, 552
25 to 29	43, 183	26.0	5, 618	5, 267	7, 555	8, 677	4, 132	3, 177	4, 511	1, 764	1, 690	401	153	151	67	1, 123, 848
30 to 34	22, 875	34.7	2, 298	2, 402	3, 559	4, 558	2, 642	2, 113	2, 851	1, 057	959	225	99	116	96	793, 241
35 to 39	37, 861	41.6	3, 471	3, 662	5, 436	7, 559	4, 566	3, 750	5, 058	1, 756	1, 519	395	182	209	238	1, 673, 336
40 to 44	64, 641	44.9	5, 127	6, 155	8, 900	13, 328	8, 379	6, 794	8, 720	3, 013	2, 537	659	269	363	399	2, 904, 361
45 to 49	110, 787	48.6	8, 093	9, 733	14, 600	23, 237	14, 942	12, 224	15, 828	5, 119	4, 257	1, 056	482	506	710	5, 389, 628
50 to 54	128, 444	47.4	8, 752	10, 724	16, 132	27, 578	18, 191	14, 936	18, 703	5, 933	4, 559	1, 113	496	585	742	6, 084, 101
55 to 59	92, 700	47.6	5, 854	7, 150	10, 951	20, 035	13, 799	11, 375	13, 759	4, 310	3, 277	863	336	446	545	4, 415, 914
60 to 64	66, 505	47.1	3, 985	4, 828	7, 623	14, 535	10, 030	8, 300	10, 225	3, 064	2, 347	584	267	317	400	3, 129, 759
65 to 69	29, 148	53.9	1, 761	2, 151	3, 283	6, 063	4, 384	3, 605	4, 541	1, 432	1, 105	282	148	201	232	1, 671, 276
70 to 74	28, 158	84.5	1, 543	2, 007	3, 111	6, 051	4, 267	3, 552	4, 285	1, 316	1, 031	255	158	198	354	2, 378, 587
75 to 79	60, 335	91.9	3, 421	4, 305	6, 410	12, 954	9, 330	7, 379	9, 358	2, 796	2, 186	591	316	488	801	5, 544, 601
80 to 84	24, 288	95.4	1, 364	1, 772	2, 630	5, 007	3, 659	2, 922	3, 829	1, 145	934	260	145	208	413	2, 316, 232
85 and over	5, 312	114.6	329	392	650	1, 051	732	595	802	264	239	60	35	59	104	608, 899
Tuberculous	7, 400	93.8	467	296	404	690	646	543	1, 055	790	1, 442	678	211	132	36	694, 372
Under 20	4	18.0	1	1	1	1	1	1	1	1	1	1	1	1	1	72
20 to 24	168	43.5	18	11	12	17	19	21	26	18	22	4	4	4	4	7, 303
25 to 29	145	62.7	12	7	9	17	14	10	20	16	30	8	1	1	9, 094	
30 to 34	125	75.6	2	8	6	15	14	9	20	13	22	12	4	4	9, 456	
35 to 39	325	79.3	16	16	17	35	23	23	46	43	60	33	7	6	26, 770	
40 to 44	790	85.9	43	30	39	61	61	62	118	88	174	83	15	15	67, 826	
45 to 49	1, 502	85.8	114	50	84	115	125	115	210	180	299	142	40	22	5	1, 28, 941
50 to 54	1, 551	94.5	98	58	88	143	127	87	191	158	353	156	60	27	5	1, 46, 586
55 to 59	1, 072	92.9	82	35	58	93	107	81	137	97	213	103	35	24	7	99, 587
60 to 64	607	97.4	26	30	21	68	58	34	100	73	106	60	17	10	4	59, 119
65 to 69	299	98.4	13	9	19	30	17	15	55	28	63	26	13	10	1	29, 428
70 to 74	214	97.1	8	9	19	19	18	27	38	24	24	13	7	3	2	20, 784
75 to 79	416	179.4	18	26	19	57	48	40	68	29	52	27	10	14	8	74, 637
80 to 84	155	82.9	15	5	11	17	12	18	29	20	16	9	1	1	2	12, 853
85 and over	27	108.7	1	2	1	1	3	1	6	3	5	2	1	1	1	2, 936
Psychotic	64, 799	284.0	2, 734	3, 024	4, 188	6, 829	5, 487	6, 283	13, 050	6, 667	7, 393	2, 387	1, 296	1, 354	3, 617	18, 402, 550
Under 20	362	51.1	29	22	32	64	47	37	66	31	29	2	2	2	1	18, 492
20 to 24	8, 310	50.6	532	426	697	965	727	850	1, 765	1, 045	958	217	74	47	7	420, 780
25 to 29	7, 222	65.3	408	328	578	817	632	695	1, 542	810	920	252	99	96	45	471, 279
30 to 34	4, 374	93.3	196	199	340	509	379	461	906	491	514	145	65	81	85	408, 189
35 to 39	5, 994	125.9	300	260	398	616	560	646	1, 304	598	653	199	121	133	206	814, 378
40 to 44	8, 018	183.6	330	416	535	915	735	811	1, 595	779	892	289	158	226	337	1, 472, 307
45 to 49	10, 200	266.6	329	486	616	1, 100	848	1, 000	2, 137	1, 018	1, 163	394	221	291	597	2, 719, 079
50 to 54	8, 729	319.1	311	419	496	899	726	853	1, 804	876	944	337	181	296	586	2, 785, 679
55 to 59	4, 650	353.4	134	219	225	453	387	431	906	481	536	192	103	197	387	1, 782, 669
60 to 64	2, 353	488.0	65	89	115	203	174	186	404	216	307	116	79	131	268	1, 148, 283
65 to 69	972	582.1	31	42	32	60	61	77	171	96	112	54	35	70	131	535, 819

70 to 74.....	872	1,507.5	21	32	25	52	44	57	118	59	94	51	34	61	223	1,314,565
75 to 79.....	1,797	1,670.4	29	47	58	121	112	119	214	112	163	95	89	151	487	3,001,770
80 to 84.....	726	1,631.1	8	28	25	45	40	43	82	35	72	34	31	61	222	1,184,148
85 and over.....	220	1,341.9	11	11	14	10	15	17	31	20	27	10	6	13	35	295,215
Other psychiatric.....	114,425	44.3	9,954	9,838	15,064	19,262	12,380	11,970	19,213	7,682	5,843	1,248	584	708	679	5,069,391
Under 20.....	1,037	13.6	250	136	182	206	80	59	87	22	13	1	1	1	1	14,088
20 to 24.....	13,709	21.4	2,667	1,360	2,198	2,489	1,184	1,015	1,671	585	448	61	18	11	2	203,359
25 to 29.....	8,759	26.9	1,267	802	1,267	1,535	876	722	1,281	510	392	68	17	16	6	235,627
30 to 34.....	5,245	27.9	602	476	774	919	541	526	814	319	215	30	13	11	5	146,200
35 to 39.....	8,755	30.6	801	839	1,267	1,468	910	876	1,481	581	398	75	22	27	10	267,650
40 to 44.....	13,728	32.8	1,017	1,306	1,890	2,342	1,455	1,482	2,295	954	650	131	41	55	20	450,473
45 to 49.....	20,822	37.3	1,283	1,813	2,695	3,447	2,368	2,354	3,802	1,511	1,091	208	107	89	54	777,534
50 to 54.....	19,548	42.4	1,009	1,604	2,368	3,213	2,169	2,312	3,716	1,537	1,122	216	102	135	75	827,921
55 to 59.....	10,481	54.2	534	771	1,253	1,694	1,260	1,271	1,918	802	603	159	64	69	83	567,579
60 to 64.....	5,165	64.2	250	398	537	843	604	624	967	365	319	85	40	75	58	331,411
65 to 69.....	1,904	92.1	93	121	204	310	262	206	306	123	125	32	27	46	49	175,382
70 to 74.....	1,265	153.0	39	70	120	226	141	124	200	83	99	37	30	35	61	193,555
75 to 79.....	2,534	171.9	86	93	206	392	282	259	408	170	233	96	61	109	139	435,719
80 to 84.....	1,117	222.0	29	32	64	139	124	114	206	98	108	41	32	45	85	214,008
85 and over.....	356	294.4	27	17	39	39	34	26	61	22	27	8	9	15	32	104,795
Neurological.....	46,397	50.2	2,679	3,371	4,943	8,930	6,553	5,638	7,397	2,553	2,513	722	350	431	317	2,327,948
Under 20.....	110	18.0	18	18	24	19	8	11	6	5	1	1	1	1	1	1,980
20 to 24.....	2,581	41.1	231	294	403	504	283	215	256	119	145	61	32	25	13	106,113
25 to 29.....	2,358	40.1	197	275	335	459	269	227	268	94	125	38	23	25	13	94,572
30 to 34.....	1,445	33.7	121	161	186	311	200	159	158	51	59	10	11	12	6	48,747
35 to 39.....	2,325	43.8	184	213	265	476	354	247	294	93	106	31	19	28	15	101,861
40 to 44.....	3,935	44.4	217	360	462	832	586	480	531	167	166	51	21	37	25	174,750
45 to 49.....	6,627	41.9	431	505	738	1,302	970	826	1,043	319	297	80	40	42	34	277,938
50 to 54.....	7,490	46.1	402	514	800	1,556	1,099	909	1,203	388	369	105	46	60	39	345,355
55 to 59.....	5,653	51.2	286	344	508	1,063	853	749	960	350	324	99	34	50	33	289,241
60 to 64.....	4,200	54.0	193	201	364	781	608	551	782	276	274	76	41	28	25	226,806
65 to 69.....	1,967	72.4	81	90	151	305	265	248	429	172	136	31	16	23	20	142,509
70 to 74.....	1,857	60.1	66	89	155	331	282	240	332	142	125	27	20	25	23	111,596
75 to 79.....	4,039	68.4	173	211	353	670	530	522	816	270	287	80	32	53	42	276,240
80 to 84.....	1,501	72.6	68	75	163	261	204	208	272	94	77	24	11	20	24	108,955
85 and over.....	309	68.9	11	21	36	50	42	46	47	18	18	8	4	3	5	21,285
General medical and surgical.....	543,206	23.2	44,900	52,545	78,458	127,081	79,315	60,490	67,386	17,482	11,343	2,124	786	817	479	12,615,144
Under 20.....	1,360	11.4	203	253	333	286	116	72	66	17	11	2	1	1	1	15,458
20 to 24.....	34,349	11.6	5,169	5,986	8,295	7,610	2,964	1,922	1,695	368	253	56	16	11	4	397,997
25 to 29.....	24,699	12.7	3,734	3,875	5,366	5,839	2,341	1,523	1,400	334	223	35	13	13	3	313,276
30 to 34.....	11,686	15.5	1,377	1,558	2,253	2,804	1,408	958	950	183	149	28	6	12	6	180,559
35 to 39.....	20,462	17.8	2,170	2,334	3,549	4,964	2,719	1,958	1,933	441	302	57	13	15	7	363,677
40 to 44.....	38,170	19.4	3,520	4,043	5,974	9,176	5,452	3,959	4,181	1,025	655	105	34	30	16	739,005
45 to 49.....	71,636	20.7	5,936	6,879	10,467	17,272	10,631	7,929	8,636	2,091	1,407	232	74	92	20	1,486,136
50 to 54.....	91,126	21.7	6,932	8,129	12,379	21,767	14,070	10,775	11,789	2,974	1,771	299	107	67	37	1,978,680
55 to 59.....	70,844	23.7	4,818	5,781	8,907	16,732	11,192	8,843	9,838	2,580	1,602	310	100	106	35	1,676,838
60 to 64.....	64,180	25.2	3,451	4,110	6,586	12,640	8,586	6,905	7,972	2,134	1,341	247	90	73	45	1,364,140
65 to 69.....	24,006	27.4	1,543	1,889	2,857	5,358	3,779	3,059	3,580	1,013	669	119	57	52	31	658,138
70 to 74.....	23,950	30.8	1,409	1,807	2,791	5,423	3,782	3,104	3,597	1,008	686	157	67	74	45	738,067
75 to 79.....	51,549	34.1	3,115	3,928	5,774	11,714	8,358	6,439	7,852	2,215	1,451	293	124	161	125	1,756,235
80 to 84.....	20,789	36.7	1,244	1,632	2,367	4,545	3,279	2,539	3,240	898	661	152	70	82	80	762,268
85 and over.....	4,400	42.0	279	341	560	951	658	505	657	201	162	32	15	28	31	184,670

<sup>1</sup> Patient treatment file.

<sup>2</sup> This figure is based on completed records. In addition, there were 14,403 incomplete records in file at the time the table was prepared.

## INPATIENT CARE

## TABLE 28

*VA and Non-VA Hospitals: Patients Discharged, Type of Patient, Percent Hospitalized in Reported State of Residence—Fiscal Year 1972<sup>1</sup>*

Reported state of residence	All patients						Type of patient							
	Total <sup>2</sup>	Discharge rate per 1,000 living veterans	Hospitalized in same State		General medical and surgical		Tuberculous		Psychotic		Other psychiatric		Neurological	
			Number	Percent	Total	Percent hospitalized in same State	Total	Percent hospitalized in same State	Total	Percent hospitalized in same State	Total	Percent hospitalized in same State	Total	Percent hospitalized in same State
Total.....	796,896	27.7	694,322	87.1	556,592	88.0	8,981	88.2	68,253	84.3	115,616	84.9	47,454	85.7
United States.....	780,389	27.3	678,094	86.9	545,726	87.0	7,368	85.7	65,491	83.8	114,973	84.8	46,831	85.5
Alabama.....	18,413	43.3	16,626	90.3	11,514	91.4	229	82.5	2,002	88.1	3,665	89.1	1,003	87.5
Alaska.....	208	6.5	0	0.0	136	0.0	0	0.0	25	0.0	28	0.0	19	0.0
Arizona.....	12,064	48.1	11,310	93.8	9,237	95.4	109	94.5	806	82.3	1,231	89.5	681	92.5
Arkansas.....	17,668	78.5	14,883	84.2	13,029	82.7	149	79.2	893	90.6	2,656	91.5	941	79.7
California.....	67,266	21.4	65,278	97.0	47,087	97.4	524	96.8	5,692	95.2	9,792	96.3	4,171	97.8
Colorado.....	8,691	28.3	7,971	91.7	6,192	93.8	30	93.3	727	89.3	1,238	83.4	504	89.3
Connecticut.....	8,971	19.8	8,298	92.5	6,275	97.4	71	98.6	716	61.7	1,200	83.7	709	94.9
Delaware.....	2,149	32.7	2,350	92.2	1,880	97.3	12	91.7	149	57.7	338	78.1	170	93.5
District of Columbia.....	5,250	42.0	4,265	81.2	3,502	84.2	94	86.2	393	59.5	859	78.5	402	81.1
Florida.....	33,966	32.4	31,375	92.6	24,830	95.3	283	91.5	2,891	79.6	3,866	85.0	1,996	92.8
Georgia.....	18,512	37.2	14,870	80.3	13,136	82.7	203	82.3	1,267	68.4	2,735	74.3	1,171	80.8
Hawaii.....	118	1.6	81	68.6	75	77.3	1	100.0	14	64.3	19	31.6	9	77.8
Idaho.....	3,672	35.7	2,182	59.4	2,777	63.1	13	46.2	182	28.0	467	48.8	233	62.2
Illinois.....	41,363	25.4	35,656	86.2	27,992	84.6	451	84.7	4,424	89.4	5,986	91.1	2,510	86.5
Indiana.....	16,901	23.1	12,514	74.0	11,011	73.1	409	91.0	1,378	73.2	3,182	77.4	921	68.0
Iowa.....	12,148	31.7	9,686	78.4	9,521	78.3	71	76.1	790	81.6	1,131	80.5	835	74.7
Kansas.....	11,026	36.2	8,602	78.0	7,449	76.4	50	46.0	655	76.8	2,191	88.1	681	67.3
Kentucky.....	14,011	34.9	9,907	70.7	9,074	66.6	123	57.7	1,263	82.3	2,701	81.5	850	64.8
Louisiana.....	17,700	39.5	13,143	91.2	13,610	94.8	191	97.4	962	56.3	1,828	81.8	1,109	92.0
Maine.....	4,322	30.0	3,986	92.2	2,582	91.5	14	92.9	376	91.8	1,105	97.1	245	78.4
Maryland.....	11,165	20.4	7,024	62.9	7,852	62.7	132	66.7	725	70.1	1,657	63.0	799	57.3

Massachusetts.....	18,018	21.2	16,058	89.1	10,526	85.9	85	51.8	2,174	95.2	4,078	94.6	1,155	90.6
Michigan.....	20,635	17.0	19,533	94.7	13,166	95.6	206	96.6	2,690	92.3	3,370	94.2	1,203	90.8
Minnesota.....	14,306	26.1	12,220	85.4	10,081	84.5	64	90.6	1,191	90.6	2,012	87.0	958	85.4
Mississippi.....	12,888	57.8	9,793	76.0	9,447	77.4	145	73.8	759	69.7	1,695	71.0	842	76.4
Missouri.....	22,327	33.1	17,051	76.4	16,155	81.2	182	85.7	1,466	69.0	3,149	52.5	1,375	81.1
Montana.....	4,926	49.3	3,649	74.1	3,536	83.8	17	82.4	265	20.8	782	49.2	326	71.2
Nebraska.....	9,619	51.2	8,241	85.7	6,905	88.6	70	91.4	518	60.0	1,585	80.9	541	86.7
Nevada.....	3,360	48.7	2,253	67.1	2,638	71.9	15	26.7	127	22.8	400	51.3	180	66.1
New Hampshire.....	3,954	35.6	2,119	53.6	2,903	59.2	16	43.8	213	16.9	554	42.2	268	46.3
New Jersey.....	12,807	11.6	9,316	72.7	7,618	67.2	233	90.6	2,000	82.7	2,275	83.0	681	65.2
New Mexico.....	6,871	47.7	6,073	88.4	4,974	90.2	45	93.3	464	73.9	877	83.1	511	92.4
New York.....	53,486	20.4	52,461	98.1	37,475	98.7	489	95.5	6,154	95.7	6,592	97.3	2,776	96.8
North Carolina.....	21,044	37.8	18,883	89.7	15,228	91.0	236	83.5	1,410	87.3	2,885	86.5	1,285	86.2
North Dakota.....	2,644	35.7	1,924	72.8	1,834	85.3	12	33.3	169	20.1	459	44.4	170	68.8
Ohio.....	26,269	16.5	22,488	85.6	16,793	84.3	278	80.6	3,192	90.7	4,371	87.9	1,635	84.1
Oklahoma.....	11,972	34.0	10,232	85.5	9,018	90.5	152	92.8	582	45.4	1,429	67.2	791	89.5
Oregon.....	11,664	35.3	8,319	75.6	8,619	77.7	90	93.3	673	78.8	1,611	61.5	671	76.9
Pennsylvania.....	28,394	15.4	26,057	91.8	18,330	91.9	377	79.8	3,049	90.7	4,451	93.5	1,587	90.0
Rhode Island.....	3,296	25.2	2,692	81.7	2,286	91.2	33	93.9	315	37.1	481	69.2	181	70.2
South Carolina.....	13,860	50.8	9,732	70.2	10,548	75.8	148	70.9	781	43.9	1,649	46.5	734	71.0
South Dakota.....	5,900	69.4	5,213	88.4	3,884	87.8	17	76.5	424	89.4	1,197	92.9	378	79.4
Tennessee.....	20,939	41.4	20,020	95.6	15,178	96.5	163	81.0	1,340	91.7	2,994	93.5	1,264	96.3
Texas.....	51,804	36.2	47,681	92.0	37,530	92.9	622	94.4	3,922	89.6	6,892	89.1	2,838	90.2
Utah.....	4,280	31.2	4,121	96.3	2,900	96.7	15	93.3	257	93.4	837	95.9	271	95.9
Vermont.....	2,086	34.2	1,863	89.3	1,581	94.3	17	76.5	104	39.4	284	82.4	100	84.0
Virginia.....	20,365	35.9	16,650	81.8	13,871	81.0	212	83.0	1,443	84.9	3,592	84.2	1,247	78.9
Washington.....	14,140	28.3	13,216	93.5	10,105	93.5	65	49.2	1,132	94.1	2,069	94.3	769	93.2
West Virginia.....	12,810	46.6	10,068	78.6	9,270	84.8	117	73.5	713	33.1	1,983	66.7	727	77.0
Wisconsin.....	17,173	27.9	14,838	86.4	12,360	85.5	83	86.7	1,433	87.1	2,030	90.0	1,267	88.4
Wyoming.....	2,468	44.9	1,823	73.9	1,606	68.8	5	40.0	201	85.6	515	86.4	141	70.2
Outside United States.....	16,507	77.5	16,228	98.3	10,866	98.6	1,613	99.6	2,762	98.0	643	93.0	623	96.0
Canal Zone.....	25	-----	25	100.0	21	100.0	0	0.0	3	100.0	1	100.0	0	0.0
Guam.....	4	-----	1	25.0	1	100.0	0	0.0	2	0.0	1	0.0	0	0.0
Philippines, Republic of.....	6,223	-----	6,217	99.9	4,144	99.9	1,533	100.0	226	99.6	87	100.0	233	99.1
Puerto Rico.....	10,041	-----	9,985	99.4	6,570	99.8	73	100.0	2,500	99.2	526	97.0	372	98.7
Others.....	214	-----	0	0.0	130	0.0	7	0.0	31	0.0	28	0.0	18	0.0

<sup>1</sup> Patient treatment file.

<sup>2</sup> This figure is based on completed records. In addition, there were 14,403 incomplete discharge records in the file at the time the table was prepared.

## INPATIENT CARE

## TABLE 29

VA Hospitals: Patients Discharged, Compensation and Pension Status, Type of Hospital, Type of Patient, Sex—Fiscal Year 1972<sup>1</sup>

Compensation and pension status	Total <sup>2</sup>	All patients					Female					Male						
		Tuber- culosis	Psy- choses	Other psychi- atric	Neuro- logical	GM&S	Total	Tuber- culosis	Psy- choses	Other psychi- atric	Neuro- logical	GM&S	Total	Tuber- culosis	Psy- choses	Other psychi- atric	Neuro- logical	GM&S
VA hospitals—total.....	776,227	7,400	64,799	114,425	46,397	543,206	10,988	30	1,438	1,442	623	7,455	765,239	7,370	63,361	112,983	45,774	535,751
Service connected.....	106,757	810	28,757	16,036	6,560	54,594	1,500	3	485	215	114	683	105,257	807	28,272	15,821	6,446	53,911
10 percent or more.....	102,874	785	27,862	15,397	6,435	52,395	1,445	3	469	199	113	661	101,429	782	27,393	15,198	6,322	51,734
Less than 10 percent.....	3,883	25	895	639	125	2,199	55	-----	16	16	1	22	3,828	25	879	623	124	2,177
Non-service connected with SC.....	121,256	943	4,673	16,090	6,666	92,884	1,479	1	71	151	76	1,180	119,777	942	4,602	15,939	6,590	91,704
NSC with compensation pending.....	6,921	65	714	1,343	464	4,335	127	1	19	27	9	71	6,794	64	695	1,316	455	4,264
NSC with pension.....	192,056	2,112	11,440	15,868	13,051	149,585	2,243	3	393	255	129	1,473	189,813	2,109	11,067	15,613	12,922	148,112
NSC with pension pending.....	15,170	337	993	2,404	1,199	10,237	170	-----	25	23	20	102	15,000	337	968	2,381	1,179	10,135
NSC no claim pending.....	323,318	3,068	17,452	59,553	17,896	225,349	4,652	12	444	740	212	3,244	318,666	3,056	17,008	58,813	17,684	222,105
Nonveterans.....	10,749	65	770	3,131	561	6,222	817	10	11	31	63	702	9,932	55	759	3,100	498	5,520
Psychiatric hospitals—total.....	66,998	143	27,308	29,712	1,258	8,577	1,493	2	846	437	24	184	65,505	141	26,482	29,275	1,234	8,393
Service connected.....	20,282	20	13,146	5,525	286	1,305	400	-----	297	73	8	22	19,882	20	12,849	5,452	278	1,283
10 percent or more.....	19,311	20	12,592	5,200	276	1,223	374	-----	284	62	7	21	18,937	20	12,308	5,138	269	1,202
Less than 10 percent.....	971	-----	554	325	10	82	26	-----	13	11	1	1	945	-----	541	314	9	81
Non-service connected with SC.....	6,881	13	1,446	3,908	133	1,381	89	-----	32	29	1	27	6,792	13	1,414	3,879	132	1,354
NSC with compensation pending.....	873	-----	267	392	39	175	24	-----	13	10	1	-----	849	-----	254	382	33	175
NSC with pension.....	11,823	38	5,675	3,256	351	2,503	366	1	245	78	5	37	11,457	37	5,430	3,178	346	2,466
NSC with pension pending.....	1,305	1	438	762	21	83	29	-----	16	11	1	1	1,276	1	422	751	20	82
NSC no claim pending.....	24,545	71	6,155	14,883	414	3,022	543	1	237	233	5	67	24,002	70	5,918	14,660	409	2,955
Nonveterans.....	1,289	-----	181	986	14	108	42	-----	6	3	3	30	1,247	-----	175	983	11	78
General hospitals—total.....	709,229	7,257	37,491	84,713	45,139	534,629	9,495	28	592	1,005	599	7,271	699,734	7,229	36,909	83,708	44,540	527,358
Service connected.....	86,475	790	15,611	10,511	6,274	53,289	1,100	3	188	142	106	661	85,375	787	15,423	10,369	6,168	52,628
10 percent or more.....	83,563	785	15,270	10,197	6,159	51,172	1,071	3	185	137	106	640	82,492	762	15,085	10,060	6,053	50,532
Less than 10 percent.....	2,912	25	341	314	115	2,117	29	-----	3	5	-----	21	2,883	25	338	309	115	2,096
Non-service connected with SC.....	114,375	930	3,227	12,182	6,533	91,503	1,390	1	39	122	75	1,153	112,985	929	3,188	12,060	6,458	90,350
NSC with compensation pending.....	6,048	65	447	951	425	4,160	103	1	6	17	8	71	5,945	64	441	934	417	4,089
NSC with pension.....	180,233	2,074	5,785	12,612	12,700	147,082	1,877	2	138	177	124	1,436	178,356	2,072	5,627	12,435	12,576	145,646
NSC with pension pending.....	13,865	336	555	1,642	1,178	10,154	141	-----	9	12	19	101	13,724	336	546	1,630	1,159	10,053
NSC no claim pending.....	298,773	2,997	11,297	44,670	17,482	222,327	4,109	11	207	507	207	3,177	294,664	2,986	11,090	44,163	17,275	219,150
Nonveterans.....	9,460	65	589	2,145	547	6,114	775	10	5	28	60	672	8,685	55	584	2,117	487	5,442

<sup>1</sup> Patient treatment file.<sup>2</sup> This figure is based on completed records. In addition, there were 14,403 incomplete records in the file at the time the table was prepared.

TABLE 30

## INPATIENT CARE

## Cost of Operation of Medical Inpatient Facilities—Fiscal Year 1972

(Dollars in thousands)

Activity	VA hospital care				VA nursing care	VA domiciliaries	VA restoration centers
	Total	Medical bed section	Surgical bed section	Psychology bed section			
Total costs <sup>1</sup> .....	\$1,569,257	\$725,109	\$414,721	\$429,427	\$60,589	\$49,491	\$4,398
Professional and ancillary:							
Medical services <sup>2</sup> .....	363,038	173,817	106,175	83,046	6,836	7,428	1,021
Nursing service.....	469,737	218,667	125,476	125,594	21,289	1,594	332
Chaplain service.....	8,128	3,518	1,704	2,906	493	776	46
Dietetic service.....	146,163	65,495	30,845	49,823	9,437	14,457	928
Dental service.....	18,296	7,970	4,238	6,008	421	1,394	104
Audiology and speech pathology service.....	1,365	1,020	253	92	94	64	12
Direct care, total.....	1,006,729	470,487	268,692	267,550	38,570	25,713	2,443
Administrative support.....	200,893	91,468	55,676	53,749	6,591	7,870	846
Engineering support.....	165,437	69,207	38,354	57,876	8,789	10,892	760
Building management <sup>3</sup> .....	88,328	38,600	21,344	28,384	4,238	2,651	203
Research support.....	25,931	14,984	7,135	3,812	48	46	15
Asset acquisitions.....	81,939	40,363	23,519	18,057	2,353	2,319	141
Support, total.....	562,528	254,622	146,028	161,878	22,019	23,778	1,955

<sup>1</sup> Components may not add to totals due to rounding.<sup>2</sup> Professional medical services include laboratory, pharmacy, blind rehabilitation, clinical nuclear medicine, physical medicine and rehabilitation, social service, clinical psychology, radiology, medical illustration and library.<sup>3</sup> Includes operation of laundry.

TABLE 31

## EXTENDED CARE

## VA Domiciliaries and Restoration Centers, State Domiciliaries: Turnover During Fiscal Year 1972

Item <sup>1</sup>	VA facilities			State domiciliaries (homes)
	Total	Domiciliaries	Restoration centers	
Average daily member census fiscal year 1971.....	12,685	12,008	677	5,880
Members remaining June 30, 1971.....	12,675	11,977	698	5,731
Total gains during fiscal year 1972.....	27,276	24,794	2,482	16,762
Admissions from hospitals, domiciliaries, nursing and restoration care.....	5,671	4,268	1,403	1,546
Other admissions.....	6,432	6,217	215	6,063
Transfers from other VA domiciliaries.....	645	642	3	
From extramural status.....	14,528	13,667	861	10,153
Total losses during fiscal year 1972.....	29,215	26,546	2,669	16,621
Deaths-bed occupants.....	161	155	6	361
Discharges to hospitals, domiciliaries, nursing and restoration care.....	1,197	775	422	1,757
Other regular discharges.....	4,192	3,580	612	3,896
Irregular discharges.....	3,566	3,223	343	(?)
Transfers to other VA domiciliaries.....	805	804	1	
To extramural status.....	19,294	18,009	1,285	10,607
Members remaining June 30, 1972.....	10,736	10,225	511	5,872
Average daily member census, fiscal year 1972.....	11,986	11,355	631	5,969
Discharges while in extramural status.....	4,791	4,343	448	(?)
Deaths while in extramural status.....	294	284	10	(?)
Members in extramural status June 30, 1972.....	1,499	1,407	92	(?)
Absent (in hospital status).....	356	343	13	(?)
Absent (other).....	1,143	1,064	79	(?)
Members treated.....	26,436	23,992	2,444	11,886

<sup>1</sup> In addition to member care, restoree care is also implied in each line item.<sup>2</sup> Data not reported.

EXTENDED CARE

TABLE 32

VA and State Domiciliaries and VA Restoration Centers: Average daily Census, Average Operating Beds—  
Fiscal Year 1972

VA and state domiciliaries and VA restoration centers	Domiciliary		Restoration Center	
	Average daily member census <sup>1</sup>	Average operating beds <sup>2</sup>	Average daily restoree census <sup>1</sup>	Average operating beds <sup>2</sup>
Total—VA and state domiciliaries.....	17,324			
Total—VA restoration centers.....			633	769
Arizona: Prescott <sup>3</sup> .....			13	13
California: Los Angeles <sup>4</sup> .....			86	108
Florida: Bay Pines.....			21	25
Illinois: Hines.....			89	120
New Jersey: East Orange.....			167	199
Ohio: Dayton.....			118	140
Texas:				
Bonham <sup>5</sup> .....			9	17
Temple <sup>6</sup> .....			33	37
Wisconsin: Wood.....			97	100
Total—VA domiciliaries.....	11,355	12,338		
Arizona:				
Prescott.....	224	229		
Tucson <sup>4</sup> .....	30	37		
California: Los Angeles.....	1,338	1,461		
Florida: Bay Pines.....	343	375		
Georgia: Dublin.....	441	460		
Kansas: Leavenworth.....	788	975		
Mississippi: Biloxi.....	662	723		
New York: Bath.....	759	800		
Ohio: Dayton.....	1,248	1,325		
Oregon: White City.....	1,095	1,136		
South Dakota: Hot Springs.....	521	550		
Tennessee: Mountain Home.....	1,186	1,280		
Texas:				
Bonham.....	264	276		
Temple.....	378	432		
Virginia: Hampton.....	719	787		
Washington: Vancouver <sup>4</sup> .....	39	52		
West Virginia: Martinsburg.....	510	530		
Wisconsin: Wood.....	809	910		
Total—State homes (domiciliaries).....	5,969			
California: Napa County.....	484			
Colorado: Homelake.....	80			
Connecticut: Rocky Hill.....	566			
District of Columbia: Washington.....	204			
Georgia: Milledgeville.....	545			
Idaho: Boise.....	109			
Illinois: Quincy.....	244			
Indiana: Lafayette.....	100			
Iowa: Marshalltown.....	172			
Kansas: Fort Dodge.....	78			
Louisiana: Jackson.....	119			
Massachusetts:				
Chelsea.....	237			
Holyoke.....	56			
Michigan: Grand Rapids.....	218			
Minnesota: Minneapolis.....	321			
Missouri: St. James.....	52			
Montana: Columbia Falls.....	55			
Nebraska: Grand Island.....	201			
New Hampshire: Tilton.....	21			
New Jersey:				
Menlo Park.....	114			
Vineland.....	72			
New York: Oxford.....	28			
North Dakota: Lisbon.....	101			
Ohio: Erie County.....	655			
Oklahoma:				
Ardmore.....	133			
Clinton <sup>5</sup> .....	1			
Norman.....	227			
Sulphur.....	34			
Pennsylvania: Erie.....	109			
Rhode Island: Bristol.....	114			
South Dakota: Hot Springs.....	89			
Vermont: Bennington.....	13			
Washington:				
Orting.....	88			
Retsil.....	160			
Wisconsin: King.....	131			
Wyoming: Buffalo.....	39			

<sup>1</sup> Based on total member days during year divided by number of days in year.

<sup>2</sup> Based on the number of operating beds at the end of each month for 13 consecutive months (June 1971-June 1972).

<sup>3</sup> Program activated at station during July 1971.

<sup>4</sup> Program discontinued at station during February 1972.

<sup>5</sup> Program activated at station during January 1972.

<sup>6</sup> Program activated May 1972.

TABLE 33

## EXTENDED CARE

VA, State and Community Nursing Homes: Average Operating Beds, Average Daily Census—Fiscal Year 1972

Location	Fiscal year 1972		Location	Fiscal year 1972	
	Average operating beds	Average daily nursing census		Average operating beds	Average daily nursing census
Total, all.....		12,765			
Total—VA nursing care stations.....	5,819	5,440			
Alabama: Tuskegee.....	115	101	Texas—Continued		
Arizona: Tucson.....	38		Bonham.....	51	47
Arkansas: Little Rock.....	146	137	Houston.....	73	74
California:			Kerrville.....	36	35
Livermore 1.....	22	20	Waco.....	84	78
Los Angeles 1.....	156	135	Utah: Salt Lake City.....	46	42
Palo Alto.....	146	147	Virginia:		
San Diego 2.....	23	16	Hampton.....	41	40
Sepulveda.....	80	75	Salem.....	100	95
Colorado:			Washington: American Lake.....	76	72
Fort Lyon.....	37	35	West Virginia: Beckley.....	42	39
Grand Junction.....	42	42	Wisconsin:		
Connecticut: West Haven.....	45	44	Tomah.....	96	96
Florida: Miami.....	104	90	Wood.....	132	129
Georgia:			Wyoming: Cheyenne.....	47	46
Augusta.....	40	38			
Dublin.....	56	52	Total, State homes nursing care.....		3,335
Illinois:			California: Napa County.....		375
Danville.....	115	107	Colorado: Homelake.....		10
Downey.....	169	151	Georgia: Augusta.....		165
Indiana:			Illinois: Quincy.....		295
Fort Wayne.....	40	32	Indiana: Lafayette.....		123
Indianapolis.....	46	45	Iowa: Marshalltown.....		69
Marion.....	69	67	Kansas: Fort Dodge.....		30
Iowa: Knoxville.....	194	175	Massachusetts:		
Kansas:			Chelsea.....		53
Topeka.....	79	65	Holyoke.....		92
Leavenworth.....	45	44	Michigan: Grand Rapids.....		437
Kentucky: Lexington.....	97	94	Missouri: St. James.....		58
Louisiana: Alexandria.....	95	90	Nebraska: Grand Island.....		117
Maine: Togus.....	60	59	New Hampshire: Tilton.....		39
Maryland:			New Jersey:		
Fort Howard.....	47	45	Menlo Park.....		129
Perry Point 2.....	46	44	Vineland.....		130
Massachusetts:			New York: Oxford.....		12
Bedford.....	162	157	Oklahoma:		
Brookton.....	89	84	Ardmore.....		77
Michigan:			Clinton 2.....		6
Allen Park.....	72	69	Norman.....		48
Battle Creek.....	171	173	Sulphur.....		123
Minnesota: St. Cloud.....	44	43	Pennsylvania: Erie.....		65
Mississippi: Biloxi.....	71	67	Rhode Island: Bristol.....		164
Missouri:			South Carolina: Columbia.....		138
Poplar Bluff.....	49	47	South Dakota: Hot Springs.....		32
St. Louis 3.....	91	70	Vermont: Bennington.....		69
Nebraska: Grand Island.....	41	26	Washington:		
Nevada: Reno.....	24	22	Orting.....		76
New Hampshire: Manchester.....	38	38	Retsil.....		76
New Jersey: Lyons.....	50	43	Wisconsin: King.....		328
New Mexico: Albuquerque 2.....	13	35			
New York:			Total, community nursing home care by VA hospital 4.....		3,990
Albany.....	61	58	Alabama:		
Bath.....	40	39	Birmingham.....		16
Bronx.....	5		Montgomery.....		5
Buffalo.....	36	35	Tuscaloosa.....		6
Canandaigua.....	96	87	Tuskegee.....		8
Castle Point.....	96	89	Alaska: Juneau (RO).....		5
Montrose.....	64	49	Arizona:		
North Carolina:			Phoenix.....		53
Fayetteville.....	39	38	Prescott.....		10
Oteen.....	47	46	Tucson.....		33
Salisbury.....	93	89	Arkansas:		
North Dakota: Fargo.....	50	48	Fayetteville.....		8
Ohio:			Little Rock.....		58
Brecksville.....	96	97	California:		
Chillicothe.....	99	97	Fresno.....		9
Cincinnati.....	205	193	Livermore.....		20
Dayton.....	84	82	Long Beach.....		140
Oregon: Roseburg.....	45	45	Los Angeles (Wadsworth).....		152
Pennsylvania:			Los Angeles (Brentwood).....		37
Butler.....	64	61	Martinez.....		11
Coatesville.....	50	49	Paio Aito.....		17
Erie.....	40	36	San Diego.....		8
Lebanon.....	92	85	San Francisco.....		24
Pittsburgh (Gen.).....	208	197	Sepulveda.....		62
South Carolina: Columbia.....	72	68	Colorado:		
South Dakota: Sioux Falls.....	75	69	Denver.....		39
Tennessee:			Fort Lyon.....		16
Mountain Home.....	58	56	Grand Junction.....		7
Murfreesboro.....	48	47	Connecticut:		
Texas:			Newington.....		28
Big Spring.....	25	24	West Haven.....		16
			Delaware: Wilmington.....		46
			District of Columbia: Washington.....		66

See footnotes at end of table.

EXTENDED CARE

TABLE 33—CONTINUED

VA, State and Community Nursing Homes: Average Operating Beds, Average Daily Census—Fiscal Year 1972—Continued

Location	Fiscal year 1972		Location	Fiscal year 1972	
	Average operating beds	Average daily nursing census		Average operating beds	Average daily nursing census
<b>Florida:</b>			<b>New York—Continued</b>		
Bay Pines.....		153	Castle Point.....		4
Gainesville.....		29	Montrose.....		1
Lake City.....		12	New York.....		2
Miami.....		54	Northport.....		3
<b>Georgia:</b>			Syracuse.....		4
Atlanta.....		34	<b>North Carolina:</b>		
Augusta.....		66	Durham.....		18
Dublin.....		6	Fayetteville.....		5
<b>Hawaii: Honolulu (RO)</b>		4	Oteen.....		17
<b>Idaho: Boise.....</b>		9	Salisbury.....		15
<b>Illinois:</b>			North Dakota: Fargo.....		18
Chicago (Research).....		41	<b>Ohio:</b>		
Chicago (West Side).....		53	Brecksville.....		4
Danville.....		16	Chillicothe.....		59
Downey.....		35	Cincinnati.....		42
Hines.....		85	Cleveland.....		62
Marion.....		50	Dayton.....		24
<b>Indiana:</b>			<b>Oklahoma:</b>		
Fort Wayne.....		11	Muskogee.....		22
Indianapolis.....		29	Oklahoma City.....		38
Marion.....		1	<b>Oregon:</b>		
<b>Iowa:</b>			Portland.....		42
Des Moines.....		24	Roseburg.....		7
Iowa City.....		34	<b>Pennsylvania:</b>		
Knoxville.....		3	Altoona.....		5
<b>Kansas:</b>			Butler.....		4
Leavenworth.....		29	Coatesville.....		95
Topeka.....		24	Erie.....		3
Wichita.....		7	Lebanon.....		23
<b>Kentucky:</b>			Philadelphia.....		72
Lexington.....		31	Pittsburgh (general).....		14
Louisville.....		29	Pittsburgh (psychiatric).....		10
<b>Louisiana:</b>			Wilkes-Barre.....		23
Alexandria.....		2	<b>Puerto Rico: San Juan.....</b>		20
New Orleans.....		28	<b>Rhode Island: Providence.....</b>		28
Shreveport.....		25	<b>South Carolina:</b>		
<b>Maine: Togus.....</b>		20	Charleston.....		13
<b>Maryland:</b>			Columbia.....		11
Baltimore.....		13	<b>South Dakota:</b>		
Fort Howard.....		5	Fort Meade.....		6
Perry Point.....		17	Hot Springs.....		3
<b>Massachusetts:</b>			Sioux Falls.....		7
Bedford.....		37	<b>Tennessee:</b>		
Boston.....		65	Memphis.....		19
Brockton.....		9	Mountain Home.....		80
Northampton.....		47	Murfreesboro.....		2
West Roxbury.....		7	Nashville.....		42
<b>Michigan:</b>			<b>Texas:</b>		
Allen Park.....		17	Amarillo.....		7
Ann Arbor.....		7	Big Spring.....		7
Battle Creek.....		2	Bonham.....		11
Iron Mountain.....		5	Dallas.....		62
Saginaw.....		2	Houston.....		75
<b>Minnesota:</b>			Kerrville.....		25
Minneapolis.....		87	Marlin.....		7
St. Cloud.....		14	Temple.....		52
<b>Mississippi:</b>			Waco.....		35
Biloxi.....		15	<b>Utah: Salt Lake City.....</b>		8
Jackson.....		16	<b>Vermont: White River Jct.....</b>		1
<b>Missouri:</b>			<b>Virginia:</b>		
Kansas City.....		36	Hampton.....		8
Poplar Bluff.....		13	Richmond.....		12
St. Louis <sup>1</sup> .....		41	Salem.....		62
<b>Montana:</b>			<b>Washington:</b>		
Fort Harrison.....		12	American Lake.....		5
Miles City.....		3	Seattle.....		53
<b>Nebraska:</b>			Spokane.....		15
Grand Island.....		1	Vancouver.....		20
Lincoln.....		7	Walla Walla.....		8
Omaha.....		23	<b>West Virginia:</b>		
<b>Nevada: Reno.....</b>		1	Beckley.....		3
<b>New Hampshire: Manchester.....</b>		12	Clarksburg.....		4
<b>New Jersey:</b>			Huntington.....		17
East Orange.....		45	Martinsburg.....		17
Lyons.....		3	<b>Wisconsin:</b>		
<b>New Mexico: Albuquerque.....</b>		41	Madison.....		20
<b>New York:</b>			Tomah.....		3
Albany.....		4	Wood.....		79
Bronx.....		7	<b>Wyoming:</b>		
Brooklyn.....		5	Cheyenne.....		1
Buffalo.....		4	Sheridan.....		24

<sup>1</sup> Program discontinued at station during February 1972.  
<sup>2</sup> Program activated at station during fiscal year 1972.  
<sup>3</sup> Includes data for VAH Jefferson Barracks, Mo.

<sup>4</sup> VA hospitals (RO Honolulu and RO Juneau are the only exception) individually authorize care.

TABLE 34

## EXTENDED CARE

Community Nursing Homes: Patients Placed by VA Hospitals, Average Daily Nursing Census, Remaining During Fiscal Year 1972

Hospital	Patients placed	Average daily nursing census <sup>1</sup>	Remaining in nursing home June 30, 1972	Hospital	Patients placed	Average daily nursing census <sup>1</sup>	Remaining in nursing home June 30, 1972
Total	11,118	3,990	4,656	Massachusetts:			
Alabama:				Bedford <sup>2</sup>	49	37	46
Birmingham	62	16	15	Boston	166	65	75
Montgomery	12	5	4	Brockton <sup>1</sup>	14	9	12
Tuscaloosa	11	6	8	Northampton	86	47	64
Tuskegee <sup>2</sup>	22	8	5	West Roxbury	22	7	8
Alaska: Juneau (RO)	18	5	6	Michigan:			
Arizona:				Allen Park <sup>2</sup>	50	17	21
Phoenix	152	53	56	Ann Arbor	20	7	6
Prescott	30	10	10	Battle Creek <sup>2</sup>	1	2	2
Tucson <sup>2</sup>	110	33	37	Iron Mountain	6	5	4
Arkansas:				Saginaw	9	2	3
Fayetteville	31	8	8	Minnesota:			
Little Rock <sup>2</sup>	133	58	89	Minneapolis	290	87	119
California:				St. Cloud <sup>2</sup>	24	14	18
Fresno	23	9	12	Mississippi:			
Livermore <sup>2</sup>	58	20	36	Biloxi <sup>2</sup>	63	15	20
Long Beach	476	140	173	Jackson	58	16	24
Los Angeles (general)	409	152	223	Missouri:			
Los Angeles (psychiatric)	87	37	66	Columbia	1		
Martinez	39	11	14	Kansas City	126	36	36
Palo Alto (general) <sup>2</sup>	23	17	19	Poplar Bluff <sup>2</sup>	37	13	14
San Diego <sup>2</sup>	82	8	74	St. Louis <sup>2</sup>	113	41	49
San Francisco	90	24	29	Montana:			
Sepulveda <sup>2</sup>	185	62	97	Fort Harrison	34	12	17
Colorado:				Miles City	12	3	6
Denver	135	30	55	Nebraska:			
Fort Lyon <sup>2</sup>	16	16	11	Grand Island <sup>2</sup>	5	1	2
Grand Junction <sup>2</sup>	34	7	11	Lincoln	11	7	6
Connecticut:				Omaha	103	23	31
Newington	77	28	24	Nevada: Reno <sup>2</sup>	2	1	
West Haven <sup>2</sup>	45	16	17	New Hampshire: Manchester <sup>2</sup>	56	12	18
Delaware: Wilmington	136	46	52	New Jersey:			
District of Columbia: Wash- ington	160	66	69	East Orange	52	45	28
Florida:				Lyons <sup>2</sup>	5	3	4
Bay Pines	350	153	150	New Mexico: Albuquerque <sup>2</sup>	117	41	49
Gainesville	83	29	45	New York:			
Lake City	18	12	5	Albany <sup>2</sup>	12	4	3
Miami <sup>2</sup>	167	54	47	Bronx	29	7	7
Georgia:				Brooklyn	11	5	3
Atlanta	123	34	42	Buffalo <sup>2</sup>	27	4	15
Augusta <sup>2</sup>	94	66	79	Canandaigua <sup>2</sup>	1		1
Dublin <sup>2</sup>	15	6	5	Castle Point <sup>2</sup>	9	4	4
Hawaii: Honolulu (RO)	14	4	5	Montrose <sup>2</sup>	4	1	4
Idaho: Boise	30	9	9	New York	4	2	2
Illinois:				Northport	3	3	3
Chicago (West Side)	182	53	52	Syracuse	10	4	3
Chicago (Research)	153	41	52	North Carolina:			
Danville <sup>2</sup>	36	16	19	Durham	72	18	24
Downey <sup>2</sup>	56	35	47	Fayetteville <sup>2</sup>	14	5	8
Hines	244	85	73	Oteen <sup>2</sup>	40	17	19
Marion	171	60	52	Salisbury <sup>2</sup>	24	15	13
Indiana:				North Dakota: Fargo <sup>2</sup>	47	18	21
Fort Wayne <sup>2</sup>	26	11	15	Ohio:			
Indianapolis <sup>2</sup>	81	29	27	Brecksville <sup>2</sup>	12	4	5
Marion <sup>1</sup>	7	1	6	Chillicothe <sup>2</sup>	137	59	93
Iowa:				Cincinnati <sup>2</sup>	153	42	43
Des Moines	70	24	24	Cleveland	165	62	67
Iowa City	102	34	34	Dayton <sup>2</sup>	53	24	29
Knoxville <sup>2</sup>	1	3	2	Oklahoma:			
Kansas:				Muskogee	104	32	31
Topeka <sup>2</sup>	19	24	31	Oklahoma City	184	38	38
Leavenworth <sup>2</sup>	67	29	27	Oregon:			
Wichita	13	7	8	Portland	119	42	40
Kentucky:				Roseburg <sup>2</sup>	18	7	8
Lexington <sup>2</sup>	77	31	40	Pennsylvania:			
Louisville	103	29	32	Altoona	7	5	2
Louisiana:				Butler <sup>2</sup>	9	4	4
Alexandria <sup>2</sup>	7	2	1	Coatesville <sup>2</sup>	91	95	114
New Orleans	91	27	27	Erle <sup>2</sup>	8	3	4
Shreveport	83	25	15	Lebanon <sup>2</sup>	48	23	26
Maine: Togus <sup>2</sup>	49	20	20	Philadelphia	257	72	68
Maryland:				Pittsburgh (general) <sup>2</sup>	33	14	16
Baltimore	50	13	17	Pittsburgh (psychiatric)	8	10	11
Fort Howard <sup>2</sup>	15	5	7	Wilkes-Barre	48	23	24
Perry Point <sup>2</sup>	13	17	21	Puerto Rico: San Juan	67	20	20
				Rhode Island: Providence	87	28	35

See footnotes at end of table.

**EXTENDED CARE**

**TABLE 34—CONTINUED**

*Community Nursing Homes: Patients Placed by VA Hospitals, Average Daily Nursing Census, Remaining During Fiscal Year 1972—Continued*

Hospital	Patients placed	Average daily nursing census <sup>1</sup>	Remaining in nursing home June 30, 1972	Hospital	Patients placed	Average daily nursing census <sup>1</sup>	Remaining in nursing home June 30, 1972
South Carolina:				Vermont: White River Junction..	11	1	2
Charleston.....	46	13	12	Virginia:			
Columbia <sup>2</sup> .....	20	11	10	Hampton <sup>2</sup> .....	40	8	23
South Dakota:				Richmond.....	27	12	15
Fort Meade.....	16	6	8	Salem <sup>2</sup> .....	137	62	68
Hot Springs.....	10	3	4	Washington:			
Sioux Falls <sup>2</sup> .....	33	7	10	American Lake <sup>2</sup> .....	2	5	6
Tennessee:				Seattle.....	234	53	55
Memphis.....	53	19	15	Spokane.....	94	15	21
Mountain Home <sup>2</sup> .....	182	80	87	Vancouver.....	44	20	21
Murfreesboro <sup>2</sup> .....	3	2	1	Walla Walla.....	31	8	8
Nashville.....	150	42	38	West Virginia:			
Texas:				Beckley <sup>2</sup> .....	13	3	5
Amarillo.....	31	7	8	Clarksburg.....	26	4	8
Big Springs <sup>2</sup> .....	8	7	6	Huntington.....	67	17	18
Bonham <sup>2</sup> .....	35	11	6	Martinsburg.....	46	17	14
Dallas.....	211	62	1	Wisconsin:			
Houston <sup>2</sup> .....	228	75	83	Madison.....	49	20	21
Kerrville <sup>2</sup> .....	56	25	28	Tomah <sup>2</sup> .....		3	2
Marlin.....	17	7	10	Wood <sup>2</sup> .....	212	79	82
Temple.....	119	52	49	Wyoming:			
Waco <sup>2</sup> .....	78	35	47	Cheyenne <sup>2</sup> .....	11	1	4
Utah: Salt Lake City <sup>2</sup> .....	14	8	6	Sheridan.....	51	24	41

<sup>1</sup> Based on total patient days of care during fiscal year divided by number of days in year.

<sup>2</sup> Indicates hospitals having a VA nursing bed unit in operation.

**EXTENDED CARE**

**TABLE 35**

*VA Nursing Home Care Units: Patient Turnover—During Fiscal Year 1972*

Item	Total
Patients remaining, June 30, 1971.....	4,775
Total gains during fiscal year 1972.....	6,571
Direct admission.....	3,785
From VA hospitals and other.....	3,668
From VA domicillaries.....	117
From extramural status.....	2,658
Transfers in.....	128
Total losses during fiscal year 1972.....	5,961
Deaths, bed occupants.....	393
Maximum benefit discharges.....	1,354
To VA domicillaries and restoration centers.....	30
Irregular discharges.....	80
To extramural status.....	3,938
Transfers out.....	166
Patients remaining, June 30, 1972.....	5,385
Average daily nursing census, fiscal year 1972.....	5,440
Discharges while on extramural status.....	730
Deaths while in extramural status.....	372
Patients in extramural status June 30, 1972.....	242
Absent (in hospital status).....	114
Absent (other).....	128
Patients treated.....	8,586

**EXTENDED CARE**

**TABLE 36**

*State Nursing Homes: Patient Turnover—During Fiscal Year 1972*

Item	Total
Patients remaining, June 30, 1971.....	3,147
Total gains during fiscal year 1972.....	5,805
Direct admissions.....	1,569
Admissions from State Home domicillary care.....	1,566
From leave of absence.....	2,670
Total losses during fiscal year 1972.....	5,423
Deaths.....	652
Other discharges.....	805
Discharges to State Home domicillary care.....	1,232
To leave of absence.....	2,734
Patients remaining, June 30, 1972.....	3,529
Average daily patient census, fiscal year 1972.....	3,335
Patients treated.....	6,218

**TABLE 37 EXTENDED CARE**

*Community Nursing Homes: Patient Turnover—  
Fiscal Year 1972*

Item	Total
Patients remaining, June 30, 1971	3,759
Total gains during fiscal year 1972	12,403
Direct admissions	10,135
Readmissions after temporary rehospitalization	983
Transfers from other community nursing homes	316
From leave of absence	969
Total losses during fiscal year 1972	11,506
Deaths—Bed occupants	1,750
Maximum benefit discharges	1,155
Irregular discharges	257
Nursing home benefits expired	4,771
Readmitted to VA hospital or domiciliary or restoration center	572
Moved to another private nursing home	211
Remained at same private nursing home	2,298
All other	1,690
Transfers to other community nursing homes	322
Absent (in hospital status)	3,160
Absent (other)	91
Patients remaining, June 30, 1972	4,656
Average daily patient census, fiscal year 1972	3,990
Discharges while on extra mural status	1,574
Deaths while in extramural status	542
Patients in extramural status June 30, 1972:	
Absent (in hospital status)	77
Absent (other)	7
Patients treated	14,789

**TABLE 38 EXTENDED CARE**

*Outpatient Medical Care: Purpose of Visit, Staff,  
Fee—Fiscal Year 1972*

Purpose of visit	Total	Staff	Fee
Total	9,526,881	7,930,080	1,596,801
Compensation or pension	406,065	342,035	64,030
Determine need for hospital or domiciliary care	1,494,491	1,492,548	1,943
Outpatient treatment	4,258,093	2,891,602	1,366,491
Insurance	6,644	6,293	351
Aid and attendance	219,871	60,383	159,488
Prebed care	318,536	318,536	
Post hospital care	2,156,425	2,156,425	
Trial visit	65,582	65,582	
Other <sup>1</sup>	601,174	596,676	4,498

<sup>1</sup> Includes medical care for veterans receiving vocational rehabilitation training; beneficiaries of certain foreign countries and other Federal agencies; employees engaged in certain types of medical care; and first aid to employees, when treated by a physician.

**TABLE 39**

**EXTENDED CARE**

*Outpatient Dental Care: Applications, Staff, Fee—Fiscal Years 1968-72*

Applications	Fiscal year—				
	1968	1969	1970	1971	1972
Total received during year	104,900	180,015	248,485	301,501	309,606
Total dispositions during year	83,575	151,904	229,924	304,955	309,649
Treatment authorized	48,066	86,955	171,165	261,390	279,035
Treatment not authorized <sup>1</sup>	55,509	64,949	58,759	42,565	30,614
Pending authorization for treatment, end of year <sup>2</sup>	21,355	49,466	68,027	64,573	64,530

<sup>1</sup> Legally ineligible, treatment not indicated, applications cancelled or withdrawn.

<sup>2</sup> Includes applications in the following categories; eligibility not deter-

mined, eligibility determined but examination not authorized, examination authorized but not completed, examination completed but treatment not authorized.

**TABLE 40**

**EXTENDED CARE**

*Outpatient Dental Care: Examinations and Treatment Cases Completed, Staff, Fee—Fiscal Years 1968-72*

Fiscal year	Examination cases completed			Treatment cases completed		
	Total	By VA staff dentists <sup>1</sup>	By fee-basis dentists	Total	By VA staff dentists <sup>1</sup>	By fee-basis dentists
1972	256,738	142,919	113,819	248,692	82,873	165,819
1971	239,354	147,794	91,560	228,388	82,724	145,664
1970	180,890	131,542	49,348	135,790	81,110	54,680
1969	121,608	102,593	18,915	92,712	71,162	21,550
1968	79,143	71,856	7,287	66,507	56,972	9,535

<sup>1</sup> Includes prebed care, post-hospital care etc. cases. <sup>2</sup> Includes patients whose dental treatment was completed in posthospital (PHC) status.

PHARMACY

TABLE 41

Prescriptions Filled for VA Patients by VA and Community Pharmacies as Written by VA Staff, Fee or Other Physicians—Fiscal Year 1972

Patient category	Prescriptions filled as written by physician category			
	Total	Staff	Fee	Other <sup>1</sup>
Total.....	16,706,385	12,982,644	2,306,664	1,467,077
Inpatients, total.....	2,659,938	2,659,938		
Hospital inpatients.....	2,275,507	2,275,507		
Domiciliary members.....	506,052	506,052		
Patients in nursing home care.....	82,102	82,102		
Restorees.....	24,277	24,277		
Outpatients, total.....	13,816,447	10,042,706	2,306,664	1,467,077
Patients in post-hospital care status.....	3,368,667	3,368,667		
Military retirees.....	45,189	45,189		
Veterans receiving aid and attendance benefits <sup>1</sup> .....	1,467,077			1,467,077
Veterans in community nursing homes.....	35,332	35,332		
Employees.....	132,722	132,722		
All other outpatients.....	5,767,460	6,460,796	2,306,664	
Prescriptions filled by community pharmacies <sup>2</sup> .....	580,662		580,662	

<sup>1</sup> Prescribed by patient's personal physician.

<sup>2</sup> Not included in total.

CONSTRUCTION

TABLE 42

Replacement and Relocation Hospital Construction Projects Fiscal Year 1972—Completions and Year End Status

Location	Total number of beds and hospital type <sup>1</sup>	Estimated construction cost <sup>2</sup>	Value of work in place	Percent complete <sup>3</sup>	Date construction completed (C) <sup>4</sup> or contract award (A)
Total, 14 projects.....	7,867	\$365,350,212	\$129,186,877	35	
A. Project completed <sup>4</sup> in fiscal year 1972:					
Total, 4 projects.....	2,477	93,209,624	93,209,624	100	
California: San Diego.....	<sup>5</sup> 811	36,915,844	( <sup>6</sup> )	100	December 1971 (C).
Florida: Tampa.....	<sup>5</sup> 720	21,784,606	( <sup>6</sup> )	100	March 1972 (C).
Missouri: Columbia.....	<sup>5</sup> 470	15,730,114	( <sup>6</sup> )	100	October 1971 (C).
New York: Northport.....	<sup>5</sup> 476	18,779,000	( <sup>6</sup> )	100	May 1972 (C).
B. Projects under construction, <sup>7</sup> June 30, 1972:					
Total 2 projects.....	1,130	49,563,000	35,977,253	73	
Kentucky: Lexington.....	<sup>5</sup> 370	15,240,000	12,701,544	83	June 1969 (A).
Texas: San Antonio.....	<sup>5</sup> 760	34,323,000	23,275,709	68	October 1970 (A).
C. Projects authorized <sup>8</sup> not under construction June 30, 1972:					
Total, 8 projects.....	4,260	222,577,588			
California: Loma Linda.....	<sup>5</sup> 620				
San Francisco.....	<sup>5</sup> 460				
Florida: Bay Pines.....	<sup>5</sup> 720				
Georgia: Augusta.....	<sup>5</sup> 440				
Maryland: Baltimore.....	<sup>5</sup> 450				
New York: Stony Brook.....	<sup>5</sup> 500				
Virginia: Richmond.....	<sup>5</sup> 820				
Washington: Seattle.....	<sup>5</sup> 250				

<sup>1</sup> Includes receiving, recovery and nursing home care beds.

<sup>2</sup> Construction anticipated, issued, awarded, including contingencies.

<sup>3</sup> Based on general construction only.

<sup>4</sup> Major general construction contract completed. Minor construction and landscaping may remain to be accomplished.

<sup>5</sup> General.

<sup>6</sup> Same as value of construction issued or awarded when project is financially complete.

<sup>7</sup> Under construction when major general construction contract has been awarded.

<sup>8</sup> Authorized when funds are appropriated for construction, technical services, or site acquisition.

Modernization Construction Projects,<sup>1</sup> Fiscal Year 1972—Completions and Year End Status

Location	Description	Estimated construction cost <sup>2</sup>	Value of work in place	Percent complete	Data construction completed (C) or contract awarded (A) <sup>3</sup>
Total	21 projects	\$86,495,704	\$27,948,141	32	
A. Projects completed, total	5 projects	8,806,833	8,806,833	100	
Oklahoma: Muskogee	Modernization and air conditioning	2,237,614	(2)	100	May 1972 (C).
Texas: Waco	Modernization	5,333,047	(2)	100	April 1972 (C).
Vermont:					
White River Junction B	Structural steel and erection	458,822	(2)	100	March 1972 (C).
White River Junction C	Excavation and foundation	657,427	(2)	100	May 1972 (C).
Virginia: Hampton	Connecting corridor buildings #110 and #137.	119,923	(2)	100	March 1972 (C).
B. Projects under construction, total	13 projects	51,599,771	19,141,308	37	
Alabama: Tuskegee	Air conditioning and alterations of various buildings.	4,855,000	4,386,735	90	July 1970 (A).
Arizona: Phoenix	328 bed addition	19,272,750	73,199	4	February 1972 (A).
Illinois:					
Marion	Replace elevator F1, F2, buildings 1, 2, and 4.	163,566	97,919	99	April 1970 (A).
Marion	Air conditioning and alterations to buildings 1 and 2.	2,977,772	1,551,474	52	April 1971 (A).
Iowa: Des Moines	Phase III; modernization and alterations to buildings 2 and 4.	465,900	335,149	72	October 1971 (A).
Missouri:					
St. Louis	Phase I; modernization, convert laundry building 7 to research, expand pathology, provide special procedure room and cardiac catheterization room, 2d. floor.	679,000	519,241	76	December 1970 (A).
St. Louis A	Consolidation psychiatry service and day hospital phase III.	391,824	200,370	51	August 1971 (A).
St. Louis B	Central tray service and dishwashing area; relocate canteen and medical administration service phase II.	275,500	22,300	8	February 1972 (A).
Texas: Dallas	Modernization and expansion of facilities	11,766,180	11,042,411	100	April 1972 (C).
Vermont: White River Junction	Phase III; modernization, new 204 bed hospital, building #31.	6,267,845	82,525	1	January 1972 (A).
Virginia:					
Hampton	Modernization heating plant replacement.	1,010,500	829,985	82	December 1970 (A).
Hampton	Modernization (phase IV), air conditioning 6 nursing unit, main hospital building.	2,160,000	0	0	May 1972 (A).
Wisconsin: Madison	Surgical suite expansion, air conditioning, 8 bed surgical-intensive care and 4 bed recovery unit and emergency generator.	1,374,000	0	0	June 1972 (A).
C. Projects not under construction, total	3 projects	26,089,100			
Idaho: Boise	New addition to building 67 and modernization.	3,899,100			
Indiana: Indianapolis (TSD)	Air conditioning, clinic consolidation, 178 bed addition and additional research.	18,590,000			
Virginia: Hampton	New 4 story clinic addition to building 110.	3,600,000			

<sup>1</sup> Projects included in table if approved for development by Administrator's office or if there has been an appropriation of funds available for financing all or part of the project.

<sup>2</sup> Same as value of construction issued or awarded when project is financially complete.

<sup>3</sup> For purchase and hire projects, the date the station reports construction started.

**CONSTRUCTION**

**TABLE 44**

*Nursing Home Care Units Construction Projects,<sup>1</sup> Fiscal Year 1972—Completions and Year End Status*

Location	Projects	Number of nursing home care beds	Estimated construction cost	Value of work in place	Percent complete	Date construction completed (C) or contract awarded (A) <sup>4</sup>
Total	21	1,288	\$5,331,507	\$2,970,132	56	
A. Projects completed, total	13	757	2,089,307	2,089,307	100	
California: Sepulveda		40	69,528	(?)	100	September 1971 (C).
Connecticut: West Haven		45	97,437	(?)	100	August 1971 (C).
Illinois: Downey		190	343,575	(?)	100	May 1972 (C).
Kansas: Topeka		(?)	182,201	(?)	100	November 1971 (C).
Massachusetts:						
Bedford		80	227,860	(?)	100	May 1972 (C).
Brookton		49	113,588	(?)	100	February 1972 (C).
Nebraska: Grand Island		42	132,947	(?)	100	March 1972 (C).
New Mexico: Albuquerque		47	99,228	(?)	100	December 1971 (C).
Ohio: Chillicothe		99	295,084	(?)	100	January 1972 (C).
Pennsylvania: Erie		40	72,182	(?)	100	February 1972 (C).
Tennessee: Knoxville		50	118,355	(?)	100	September 1971 (C).
Texas: Bonham		25	113,698	(?)	100	December 1971 (C).
Virginia: North Hampton		50	223,654	(?)	100	March 1972 (C).
B. Projects under construction, total	2	160	1,830,500	880,825	48	
Project \$1,000,000 and over (Florida: Bay Pines)	1	120	1,635,900	880,825	54	June 1971 (A).
Projects under \$1,000,000	1	40	194,600	0	0	
C. Projects not under construction, total	6	371	1,411,700			
Projects \$1,000,000 and over	0	0	0			
Projects under \$1,000,000	6	371	1,411,700			

<sup>1</sup> Projects included in table if approved for development by Administrator's office or if there has been an appropriation of funds available for financing all or part of the project.  
<sup>2</sup> Same as value of construction issued or awarded when project is financially

complete.  
<sup>3</sup> Remodel.  
<sup>4</sup> For purchase and hire projects, the date the station reports construction started.

**CONSTRUCTION**

**TABLE 45**

*Research Facilities Construction Projects,<sup>1</sup> Fiscal Year 1972—Completions and Year End Status*

Location	Type	Estimated construction cost	Value of work in place	Percent complete	Date construction completed (C) or contract awarded (A) <sup>3</sup>
Total	21 projects	\$45,779,819	\$11,824,494	26	
A. Projects completed, total	7 projects	7,908,794	7,908,794	100	
Colorado: Denver	Addition for research	1,071,213	(?)	100	August 1971 (C).
District of Columbia: Washington	Research addition	2,414,022	(?)	100	April 1972 (C).
Ohio:					
Cincinnati	Research wing	1,300,418	(?)	100	March 1972 (C).
Cleveland	Research lab and nursing education	46,389	(?)	100	December 1971 (C).
Oklahoma: Oklahoma City	Research addition	2,094,761	(?)	100	March 1972 (C).
Oregon: Portland	Alteration for research building #6	229,791	(?)	100	May 1972 (C).
Wisconsin: Madison	Addition for research	752,200	(?)	100	September 1971 (C).
B. Projects under construction, total	6 projects	9,664,925	3,915,700	41	
Projects \$1,000,000 and over, total	3 projects	7,873,625	2,832,368		
Delaware: Wilmington	Research addition	1,095,800	551,458	50	June 1971 (A).
Missouri: Kansas City	Research and education training facilities	4,801,125	1,143,813	24	June 1971 (A).
New York: New York	Research and alterations, building #1	1,976,700	1,137,097	58	June 1971 (A).
Projects under \$1,000,000, total	3 projects	1,791,300	1,083,332	60	
C. Projects not under construction, total	8 projects	28,206,100			
Projects \$1,000,000 and over, total	7 projects	27,756,100			
California: Long Beach	Addition research and education	6,060,000			
Florida: Miami	Addition	4,290,000			
Illinois: Chicato (Research)	do	3,325,500			
Mississippi: Jackson	Addition research and education	4,160,000			
Nebraska: Omaha	Addition	3,340,600			
Ohio: Cleveland	do	2,800,000			
Pennsylvania: Philadelphia	do	3,780,000			
Projects under \$1,000,000	1 project	450,000			

<sup>1</sup> Projects included in table if approved for development by Administrator's office or if there has been an appropriation of funds for financing all or part of the project.

<sup>2</sup> Same as value of construction issued or awarded when project is financially complete.  
<sup>3</sup> For purchase and hire projects, the date the station reports construction started.

TABLE 46

CONSTRUCTION

Other Improvement Construction Projects,<sup>1</sup> Fiscal Year 1972—Completions and Year End Status

Location	Description	Estimated construction cost	Value of work in place	Percent complete	Date construction completed (C) or contract award (A) <sup>4</sup>
<b>I. Air conditioning—Construction projects.</b>					
Total	19 projects	\$48,976,450	\$14,801,551	30	
A. Projects completed, total	7 projects	10,190,850	10,190,850	100	
Alabama: Montgomery		400,532	(?)	100	February 1972 (C).
California: Long Beach		595,504	(?)	100	December 1971 (C).
Florida: Bay Pines		512,946	(?)	100	May 1972 (C).
Indiana: Fort Wayne		752,615	(?)	100	June 1972 (C).
Michigan: Allen Park		335,140	(?)	100	June 1972 (C).
New York:					
Brooklyn		7,172,500	(?)	100	December 1971 (C).
Buffalo		421,613	(?)	100	June 1972 (C).
B. Projects under construction, total	3 projects	8,183,400	4,610,701	56	
Projects \$1,000,000 and over, total	2 projects	7,317,700	3,877,669	53	
Kentucky: Louisville		3,907,700	2,017,534	52	June 1971 (A).
North Carolina: Durham		3,410,000	1,860,135	55	May 1971 (A).
Projects under \$1,000,000, total	1 project	865,700	733,032	85	
C. Projects not under construction, total	9 projects	30,602,200			
Projects \$1,000,000 and over, total	8 projects	30,172,200			
Alabama: Tuscaloosa		2,410,000			
California:					
Long Beach	And centralized tray service	2,780,100			
Sepulveda		6,020,000			
Iowa: Iowa City	Additional electric power and auxiliary electric power.	4,650,000			
Kansas: Leavenworth		3,130,500			
Nebraska: Omaha		4,380,000			
North Carolina: Fayetteville		1,680,000			
Tennessee: Murfreesboro		5,121,600			
Projects under \$1,000,000, total	1 project	430,000			

II. Hemodialysis unit—Construction projects:

Total	5 projects	411,202	250,880	61	
A. Projects completed, total	3 projects	236,702	236,702	100	
Arkansas: Little Rock (LRD)	9 bed	111,796	(?)	100	July 1971 (C).
California: Long Beach	8 bed	124,906	(?)	100	April 1972 (C).
New York: Bronx	This project is combined with 3 ICU projects and reported there.		(?)	100	December 1971 (C).
B. Projects under construction, under \$1,000,000 total	1 project	33,900	14,178	42	
C. Projects not under construction, under \$1,000,000, total	1 project	140,600			

III. Intensive care unit—Construction projects:

		Beds			
Total	53 projects	591	12,222,791	6,467,282	51
A. Projects completed, total	14 projects	198	3,940,646	3,940,646	100
California:					
Martinez	6 surgical, 6 medical, 4 coronary	16	144,131	(?)	100
Los Angeles (Wad)	9 surgical, 1 bed emergency recovery	10	110,882	(?)	100
Colorado: Denver	6 medical, 4 coronary	10	177,150	(?)	100
Florida:					
Bay Pines	8 surgical, 12 medical, 5 coronary	20	414,251	(?)	100
Miami		5	74,747	(?)	100
Iowa: Iowa City	12 surgical, 8 medical, 6 coronary	26	450,705	(?)	100
Maine: Togus	10 surgical	10	188,152	(?)	100
Michigan: Iron Mt.	5 surgical, 2 coronary	7	153,862	(?)	100
Missouri: St. Louis	9 surgical, 8 medical, 4 coronary	21	433,859	(?)	100
Nebraska: Lincoln	8 surgical	8	147,733	(?)	100
New York:					
Bronx	10 surgical, 10 medical, 6 coronary	26	905,706	(?)	100
Buffalo	7 surgical, 6 medical, 4 coronary	17	368,387	(?)	100
Rhode Island: Providence	6 surgical, 5 medical, 4 coronary	15	269,539	(?)	100
Texas: Temple	4 medical, 3 coronary	7	101,542	(?)	100
B. Projects under construction, under \$1,000,000, total	29 projects	301	6,062,145	2,526,636	41
C. Projects not under construction under \$1,000,000, total	10 projects	92	2,220,000		

See footnotes at end of table.

Other Improvement Construction Projects,<sup>1</sup> Fiscal Year 1972—Completions and Year End Status

Location	Description	Estimated construction cost	Value of work in place	Percent complete	Date construction completed (C) or contract award (A) <sup>4</sup>
<b>IV. Other improvement construction projects:</b>					
<b>Total</b> .....	151 projects.....	<b>53,919,233</b>	<b>22,447,150</b>	<b>42</b>	
<b>A. Projects completed, total</b> .....	35 projects.....	<b>8,368,867</b>	<b>8,368,867</b>	<b>100</b>	
California:					
Los Angeles (DOM).....	Relocate prosthetic clinic to ground floor, Building 217.	132,281	( <sup>2</sup> )	100	December 1971 (C).
Palo Alto (PAD).....	Replace primary electric cable.....	66,863	( <sup>2</sup> )	100	August 1971 (C).
San Fernando.....	Earthquake damage.....	343,152	( <sup>2</sup> )	100	January 1972 (C).
San Francisco.....	Alteration Building 8 for mental hygiene clinic.	242,360	( <sup>2</sup> )	100	October 1971 (C).
Colorado: Denver.....	Expand clinical pathology.....	239,688	( <sup>2</sup> )	100	February 1972 (C).
Florida: Bay Pines.....	Laundry addition and alteration.....	547,821	( <sup>2</sup> )	100	April 1972 (C).
Indiana: Marion.....	Oldrastic elevators and hoistway.....	193,119	( <sup>2</sup> )	100	November 1971 (C).
Kansas: Leavenworth.....	Restoration of chapel, Building 66.....	183,100	( <sup>2</sup> )	100	November 1971 (C).
Louisiana:					
New Orleans.....	Convert 4 elevators to automatic control, Building 1.	199,990	( <sup>2</sup> )	100	March 1972 (C).
Shreveport.....	Modernize primary electrical distribution system.	83,655	( <sup>2</sup> )	100	January 1972 (C).
Maine: Togus.....	Additional storage, Building 240.....	294,371	( <sup>2</sup> )	100	August 1971 (C).
Massachusetts: Boston.....	Audio visual nurses call system.....	242,265	( <sup>2</sup> )	100	February 1972 (C).
Minnesota: Minneapolis.....	Purchase and install chemistry lab equipment.	87,838	( <sup>2</sup> )	100	July 1971 (C).
Mississippi:					
Biloxi (GP).....	Rebuild special activities, Building 119.....	925,276	( <sup>2</sup> )	100	July 1971 (C).
Biloxi (GP).....	Restoration of hurricane damage.....	909,754	( <sup>2</sup> )	100	September 1971 (C).
Biloxi (GP).....	Covered walkways.....	58,642	( <sup>2</sup> )	100	October 1971 (C).
Biloxi (BD).....	VA share of water storage tank.....	40,790	( <sup>2</sup> )	100	November 1971 (C).
Nebraska: Omaha.....	Central oxygen system.....	104,970	( <sup>2</sup> )	100	June 1972 (C).
New Jersey:					
East Orange.....	Install 750 KVA transformer to switch gear, Building 1.	62,662	( <sup>2</sup> )	100	September 1971 (C).
East Orange.....	Provide and install 300 KVA transformer.....	33,395	( <sup>2</sup> )	100	November 1971 (C).
New York:					
Bronx.....	96 bed spinal cord injury ward.....	950,033	( <sup>2</sup> )	100	June 1972 (C).
Buffalo.....	Piped medical gases.....	298,462	( <sup>2</sup> )	100	April 1972 (C).
Castle Point.....	Enclose second floor ramps, Building's 15, 17, and 18.	87,106	( <sup>2</sup> )	100	November 1971 (C).
New York.....	Central tray service and expand electrical system.	140,002	( <sup>2</sup> )	100	July 1971 (C).
Northport.....	Expand parking facilities.....	153,900	( <sup>2</sup> )	100	November 1971 (C).
North Dakota: Fargo.....	Install piped medical gases system, Building 9.	54,214	( <sup>2</sup> )	100	September 1971 (C).
Pennsylvania:					
Philadelphia.....	Conversion of ward 8, south to physical medical rehabilitation ward.	145,926	( <sup>2</sup> )	100	May 1972 (C).
South Carolina:					
Columbia.....	Air condition Building 22.....	162,064	( <sup>2</sup> )	100	July 1971 (C).
Columbia.....	Connecting corridor and cart storage.....	42,725	( <sup>2</sup> )	100	October 1971 (C).
Tennessee: Murfreesboro.....	Provide primary electric service.....	294,523	( <sup>2</sup> )	100	June 1972 (C).
Texas:					
Temple.....	Renovate Buildings 23-27, 31, and 32.....	506,993	( <sup>2</sup> )	100	June 1972 (C).
Temple.....	Pulmonary emphysema unit.....	148,971	( <sup>2</sup> )	100	December 1971 (C).
Utah: Salt Lake City.....	Education and training facilities.....	97,029	( <sup>2</sup> )	100	December 1971 (C).
Virginia: Hampton.....	43 bed spinal cord injury ward.....	177,913	( <sup>2</sup> )	100	January 1972 (C).
Washington: Seattle.....	Prosthetic treatment center.....	115,066	( <sup>2</sup> )	100	January 1972 (C).
<b>B. Projects under construction, total</b> .....	79 projects.....	<b>33,888,261</b>	<b>14,078,283</b>	<b>41</b>	
Projects \$1,000,000 and over, total.....	4 projects.....	<b>14,481,222</b>	<b>8,062,053</b>	<b>56</b>	
Alabama: Birmingham.....	Education and training facilities.....	1,597,000	1,134,110	71	June 1971 (A)
California: Los Angeles.....	Design, alteration and construction for seismic relocation of patients.	9,355,122	6,792,261	73	January 1972 (A)
North Carolina: Durham.....	Outpatient clinic expansion.....	2,517,500	0	0	June 1972 (A)
Virginia: Richmond.....	Modernize spinal cord injury ward.....	1,011,600	135,682	12	March 1972 (A)
Projects under \$1,000,000, total.....	75 projects.....	<b>19,407,039</b>	<b>6,016,230</b>	<b>31</b>	
<b>C. Projects not under construction, total</b> .....	37 projects.....	<b>11,662,105</b>			
Projects \$1,000,000, and over, total.....	3 projects.....	<b>4,390,000</b>			
Kansas: Leavenworth.....	New laundry.....	1,950,000			
Massachusetts: Brockton.....	60 bed spinal cord injury services, building 5.	1,360,000			
Missouri: St. Louis (JB).....	58 bed spinal cord surgery unit.....	1,070,000			
Projects under \$1,000,000, total.....	34 projects.....	<b>7,282,105</b>			

<sup>1</sup> Projects included in table if approved for development by Administrator's office or if there has been an appropriation of funds available for financing all or part of the project.

<sup>2</sup> Same as value of construction issued or awarded when project is financially complete.

<sup>3</sup> Also includes hemodialysis unit.

<sup>4</sup> For purchase and hire projects; the date the station reports construction started.

TABLE 47

## COMPENSATION AND PENSION

Disability, Death: Number of Cases, Amount, Period of Service

Item	Average amount paid (at end of each fiscal year)		Number (June 30, 1972)	Expenditures (thousands)	
	1972	1971		Fiscal year 1972	Total to June 30, 1972 <sup>1</sup>
Grand total .....	\$1,233.36	\$1,195.68	4,910,196	\$6,045,214	\$106,194,832
Living veterans .....	1,301.40	1,274.88	3,268,826	4,279,952	
Deceased veterans .....	1,097.76	1,034.64	1,641,370	1,765,262	
Indian wars .....	941.88	954.48	135	132	118,358
Living veterans .....	1,920.00	1,620.00	1	2	60,424
Deceased veterans .....	934.56	950.28	134	130	57,934
Civil War .....	1,128.36	1,133.88	641	741	8,219,534
Deceased veterans .....	1,128.36	1,133.88	641	741	8,219,534
Spanish-American War .....	1,028.16	1,025.88	36,855	38,967	5,043,758
Living veterans .....	1,746.00	1,702.56	2,538	4,828	3,568,441
Deceased veterans .....	975.12	965.88	34,317	34,139	1,685,317
World War II .....	1,211.04	1,171.80	2,575,055	3,102,108	46,213,165
Living veterans, total .....	1,254.60	1,222.44	1,846,645	2,319,674	35,279,224
Service connected .....	1,196.16	1,177.68	1,372,083	1,644,834	30,458,552
Reserve officers' retirement .....	4,616.04	4,616.04	3	14	325,651
Non-service connected .....	1,423.56	1,372.80	474,559	665,388	4,357,067
Deceased veterans, total .....	1,100.64	1,040.78	728,410	782,434	10,933,941
Service connected .....	1,712.64	1,558.80	205,058	326,593	7,335,606
Non-service connected .....	860.76	822.96	523,352	455,841	3,598,335
Regular Establishment .....	1,400.40	1,346.64	239,071	330,763	4,009,671
Living veterans .....	1,152.48	1,141.20	189,877	218,417	2,631,581
Deceased veterans .....	2,357.04	2,140.80	49,194	112,346	1,378,090
World War I .....	1,120.44	1,089.12	1,297,783	1,466,459	35,008,325
Living veterans, total .....	1,361.04	1,315.92	640,455	891,267	25,660,098
Service connected .....	1,949.82	1,950.60	71,151	142,697	9,143,041
Emergency officers' retirement .....	3,262.44	3,258.96	511	1,742	176,859
Non-service connected .....	1,285.80	1,233.84	568,793	746,828	16,340,198
Deceased veterans, total .....	886.08	841.44	657,328	676,192	9,348,227
Service connected .....	2,329.44	2,109.36	37,067	83,741	2,573,017
Non-service connected .....	799.80	763.68	620,261	491,451	6,775,210
Korean conflict .....	1,403.52	1,366.92	394,926	553,655	5,850,030
Living veterans, total .....	1,459.20	1,430.40	276,447	405,121	4,386,916
Service connected .....	1,452.96	1,430.28	240,325	351,577	4,080,423
Non-service connected .....	1,500.72	1,431.24	36,122	53,544	306,493
Deceased veterans, total .....	1,273.68	1,210.20	118,479	148,534	1,463,114
Service connected .....	1,851.48	1,691.40	39,627	72,010	1,030,059
Non-service connected .....	983.28	938.76	78,852	76,524	433,055
Vietnam era .....	1,519.68	1,571.64	364,890	551,395	1,536,395
Living veterans, total .....	1,402.80	1,471.32	312,375	439,945	1,186,386
Service connected .....	1,400.64	1,470.80	308,812	434,438	1,174,013
Non-service connected .....	1,582.44	1,539.36	3,563	5,507	12,373
Deceased veterans, total .....	2,215.32	2,115.72	52,515	111,450	350,009
Service connected .....	2,468.40	2,292.72	44,078	104,188	334,833
Non-service connected .....	893.64	841.92	8,437	7,262	15,176
Mexican Border Service .....	1,034.76	933.84	840	994	1,064
Living veterans, total .....	1,235.88	1,060.32	488	698	751
Service connected .....	2,174.54		14	70	71
Non-service connected .....	1,208.16	1,060.32	474	628	680
Deceased veterans, total .....	756.00	652.80	352	296	313
Service connected .....	2,208.00		1	3	2
Non-service connected .....	751.92	652.80	351	293	311

<sup>1</sup> Includes \$194,532,000 expended for War of 1812, Mexican War, and unclassified.

COMPENSATION AND PENSION

TABLE 48

Disability, Age Group, Period of Service—June 1972

Age group	Grand total			World War II			World War I		
	Total	Service connected	Non-service connected	Total	Service connected <sup>1</sup>	Non-service connected	Total	Service connected <sup>2</sup>	Non-service connected
Average age	55.5	49.0	68.2	55.0	53.8	58.9	78.0	77.5	78.1
Total veterans	3,268,826	2,182,762	1,068,064	1,846,645	1,372,086	474,559	640,455	71,662	568,793
Under 20	907	902	5						
20 to 24	118,404	117,570	834						
25 to 29	130,788	128,720	2,048						
30 to 34	60,798	60,038	758						
35 to 39	97,452	87,691	9,861						
40 to 44	219,247	189,993	29,254	18,841	11,129	7,712			
45 to 49	469,624	401,669	67,955	405,545	341,083	64,462			
50 to 54	843,279	546,204	97,075	597,304	500,798	96,506			
55 to 59	408,227	320,695	87,532	379,412	292,199	87,213			
60 to 64	254,462	168,312	86,150	240,039	154,030	86,009			
Under 65	2,403,166	2,021,694	381,472	1,641,141	1,299,239	341,902			
65 to 69	147,539	63,462	84,077	139,078	55,516	83,562	449	22	427
70 to 74	134,509	30,584	103,925	56,381	12,750	43,631	72,216	12,020	60,196
75 to 79	399,635	48,506	351,129	8,687	3,637	5,050	388,979	43,169	345,810
80 to 84	160,090	15,908	144,182	1,112	759	353	168,120	14,402	143,718
85 to 89	20,315	2,263	18,052	182	143	39	19,558	1,837	17,721
90 to 94	2,658	286	2,372	41	24	17	1,001	182	819
95 and over	914	59	855	23	18	5	132	30	102
Over 65	865,660	161,068	704,592	205,504	72,847	132,657	640,455	71,662	568,793

Age group	Korean conflict			Vietnam era			Regular Estab-lishment	Spanish-American War	Indian wars	Mexican border service <sup>3</sup>
	Total	Service connected	Non-service connected	Total	Service connected	Non-service connected				
Average age	44.0	44.4	41.8	28.6	29.1	27.4	43.1	93.0	100.0	78.5
Total veterans	276,447	240,326	36,122	312,375	308,812	3,563	189,877	2,538	1	488
Under 20				907	902	5				
20 to 24				118,396	117,562	834	8			
25 to 29				121,228	119,180	2,048	9,540			
30 to 34				21,918	21,328	592	38,642			
35 to 39		70	166	6,996	6,930	66	47,469			
40 to 44	42,987	33,192	9,795	15,435	15,424	11	28,621			
45 to 49	156,350	134,819	21,531	10,691	10,687	4	15,642			
50 to 54	37,746	34,257	3,489	9,979	9,978	1	17,564			
55 to 59	18,432	17,864	568	5,260	5,259	1	12,924			
60 to 64	10,631	10,313	318	1,285	1,285		7,662			
65 to 69	5,476	5,335	141							
Under 65	271,858	235,850	36,008	312,095	308,533	3,562	178,072			
65 to 69	2,682	2,595	87	250	249	1	5,090			
70 to 74	1,217	1,199	18	27	27		4,588			80
75 to 79	573	567	6	3	3		1,130			263
80 to 84	112	109	3				638			106
85 to 89	3	3					290	2		34
90 to 94	2	2					78	1,532		4
95 and over							11	746	1	1
Over 65	4,589	4,475	114	280	279	1	11,805	2,538	1	488

<sup>1</sup> Includes reserve officers in receipt of retirement pay under Public Law 262, 77th Cong.

<sup>3</sup> SAW and Mexican SC and N/SC combined.

<sup>2</sup> Includes emergency, provisional, probationary, or temporary officers in receipt of retirement pay.

COMPENSATION AND PENSION

TABLE 49

Terminations of Awards: Disability, Death—Fiscal Year 1972

Reasons for terminations	Total	World War II		World War I		Korean conflict		Vietnam era		Regular Establishment	Spanish-American War	Civil War	Indian wars	Mexican border service
		Service connected	Non-service connected											
Terminations of compensation or pension disability awards:														
Total.....	169,544	21,448	50,633	6,590	68,000	2,748	3,516	11,521	510	3,698	830			50
Death of veteran.....	130,446	20,203	34,652	6,549	60,233	2,169	1,607	1,642	114	2,431	807			39
Disability less than 10 percent.....	7,581	507				215		6,284		575				
Disability less than permanent and total.....	1,118		791		7		257		63					
Estate in excess of \$1,500.....	390	85	113	19	57	23	24	28	1	34	6			1
Excessive corpus of estate.....	396		161		224		9		1					
Failure to cooperate.....	2,068	48	658	1	193	47	107	790	26	198				10
Income provision.....	20,420		12,345		6,582		1,225		257					
Person entitled is incarcerated.....	118		96		1		17		4					
Veteran on active duty or in receipt of retirement pay.....	1,773	100	24		1	90		1,416	2	140				
Failure to return questionnaire.....	1,275		915		185		152		23					
Miscellaneous <sup>1</sup> .....	3,959	506	878	21	517	204	118	1,361	19	320	16			
Terminations of compensation, dependency and indemnity compensation or pension death awards:														
Total.....	212,708	17,338	124,721	1,871	39,095	4,582	8,815	5,743	1,015	5,312	4,074	103	21	18
Dependency not established or discontinued.....	103,868	3,000	87,921	35	2,731	1,977	4,578	1,151	106	2,338	31			
Payee incarcerated.....	41		38		1		2							
Death of payee.....	49,807	11,978	4,033	1,684	24,588	1,572	139	683	7	1,436	3,655	103	21	8
Income provisions.....	29,315	195	18,117	2	7,565	117	1,808	888	421	195				7
Excess corpus of estate.....	690	20	209		434	1	21	2		2				1
Widow remarried.....	18,011	884	9,864	81	1,983	364	1,617	2,389	364	624	41			
Failure to return questionnaire.....	1,549	14	846	1	531	3	63	61	13	17				
Miscellaneous <sup>1</sup> .....	9,427	1,247	3,893	68	1,262	548	587	569	104	700	447			2

<sup>1</sup> Includes temporary terminations.

## COMPENSATION

## TABLE 50

## Disability, Degree of Impairment, Type of Major Disability, Period of Service—June 1972

Degree of impairment	Total				Tuberculosis (lungs and pleura)			Psychiatric and neurological diseases			General medical and surgical conditions					
	Number	Percent of total	Monthly value	Average monthly value	Number	Percent of total tuberculosis	Percent of degree of impairment	Average monthly value	Number	Percent of total psychiatric and neurological diseases	Percent of degree of impairment	Average monthly value	Number	Percent of total general medical and surgical conditions	Percent of degree of impairment	Average monthly value
<b>ALL PERIODS</b>																
Total.....	2,182,209	100.0	\$231,720,493	\$106.19	63,597	100.0	2.9	\$119.08	473,427	100.0	21.7	\$177.47	1,645,185	100.0	75.4	\$85.18
No disability.....	29,242	1.3	1,888,462	64.58	27,319	43.0	93.4	65.90					1,923	0.1	6.6	46.00
10 percent.....	861,062	39.5	21,490,945	24.96	1,277	2.0	0.1	55.49	147,331	31.2	17.1	24.85	712,454	43.4	82.8	24.93
20 percent.....	338,121	15.5	15,651,205	46.29	8,391	13.2	2.5	66.19	26,265	5.5	7.8	46.72	303,465	18.4	89.7	45.70
30 percent.....	310,416	14.2	21,856,629	70.41	12,132	19.1	3.9	68.44	81,742	17.3	26.3	69.32	216,542	13.2	69.8	70.93
40 percent.....	176,344	8.1	17,323,665	98.24	1,595	2.5	0.9	98.33	26,129	5.5	14.8	96.71	148,620	9.0	84.3	98.51
50 percent.....	111,929	5.1	17,531,118	156.63	2,906	4.6	2.6	156.27	41,307	8.7	36.9	152.07	67,716	4.1	60.5	159.42
60 percent.....	110,953	5.1	28,889,713	260.38	1,692	2.7	1.5	247.66	18,709	4.0	16.9	226.84	90,552	5.5	81.6	267.55
70 percent.....	69,254	3.2	22,409,724	323.59	1,298	2.0	1.9	251.01	33,255	7.0	48.0	344.87	34,701	2.1	50.1	305.91
80 percent.....	35,482	1.6	12,384,953	349.05	2,046	3.2	5.8	290.47	9,560	2.0	26.9	357.98	23,876	1.5	67.3	350.49
90 percent.....	12,303	0.6	4,863,050	395.27	144	0.2	1.2	376.28	3,219	0.7	26.2	402.02	8,940	0.5	72.6	393.15
100 percent.....	127,103	5.8	67,431,029	530.52	4,797	7.5	3.8	482.01	85,910	18.1	67.6	514.79	36,396	2.2	28.6	573.95
<b>WORLD WAR I</b>																
Total.....	71,151	100.0	11,559,345	162.46	11,014	100.0	15.5	124.83	14,538	100.0	20.4	241.83	45,599	100.0	64.1	146.25
No disability.....	869	1.2	50,883	58.55	502	4.6	57.8	67.00					367	0.8	42.2	47.00
10 percent.....	10,761	15.1	332,965	30.94	29	0.3	0.3	58.48	706	4.9	6.6	31.86	10,026	22.0	93.1	30.80
20 percent.....	17,066	24.1	1,028,445	60.26	7,753	70.2	45.4	66.37	1,970	13.5	11.5	59.94	7,343	16.1	43.1	53.90
30 percent.....	9,242	13.0	710,111	76.84	668	6.1	7.2	79.96	1,691	11.6	18.3	78.09	6,883	15.1	74.5	76.22
40 percent.....	6,934	9.7	730,467	105.35	381	3.5	5.5	107.67	1,173	8.1	16.9	107.71	5,380	11.8	77.6	104.67
50 percent.....	6,033	8.5	917,768	152.12	110	1.0	1.8	154.74	2,137	14.7	35.4	152.33	3,786	8.3	62.8	151.93
60 percent.....	6,085	8.6	1,693,463	278.30	135	1.2	2.2	342.00	978	6.7	16.1	202.20	4,972	10.9	81.7	291.54
70 percent.....	2,799	3.9	835,785	298.60	44	0.4	1.6	264.98	993	6.8	35.5	299.75	1,762	3.9	62.9	298.80
80 percent.....	1,701	2.4	567,488	327.74	17	0.2	1.0	336.06	466	3.2	27.4	293.33	1,218	2.7	71.6	340.79
90 percent.....	390	0.5	149,627	383.66	9	0.1	2.3	330.78	48	0.3	12.3	378.13	333	0.7	85.4	385.89
100 percent.....	9,271	13.0	4,552,343	491.03	1,366	12.4	14.7	473.66	4,376	30.2	47.2	489.25	3,529	7.7	38.1	499.94
<b>WORLD WAR II</b>																
Total.....	1,372,063	100.0	136,769,692	99.68	33,187	100.0	2.4	122.27	312,830	100.0	22.8	157.23	1,026,066	100.0	74.8	81.40
No disability.....	17,992	1.3	1,188,484	66.06	17,143	51.4	95.3	67.00					849	0.1	4.7	47.00
10 percent.....	564,380	41.1	14,270,205	26.28	747	2.3	0.1	59.31	111,714	35.8	19.8	26.12	451,919	44.0	80.1	25.27
20 percent.....	205,802	15.0	9,528,888	46.30	419	1.3	0.2	66.68	17,414	5.6	8.5	46.16	187,969	18.3	91.3	46.27
30 percent.....	201,096	14.7	14,361,313	71.26	6,862	20.7	3.4	70.20	57,512	18.4	28.6	70.14	136,722	13.3	68.0	71.94
40 percent.....	112,815	8.2	11,152,485	98.86	768	2.3	0.7	98.03	98,078	5.7	15.9	96.88	94,072	9.2	83.4	99.24
50 percent.....	69,533	5.1	11,073,432	159.25	1,288	3.9	1.9	164.83	26,337	8.1	36.4	155.30	42,908	4.2	61.7	161.42
60 percent.....	68,722	5.0	18,062,388	263.27	1,101	3.3	1.6	247.30	11,555	3.7	16.8	226.39	56,066	5.5	81.6	271.39
70 percent.....	41,391	3.0	13,739,812	331.95	1,062	3.2	2.5	252.05	19,859	6.3	48.0	364.15	20,480	2.0	49.5	304.94
80 percent.....	21,627	1.6	7,424,789	343.77	1,844	5.6	8.5	291.38	6,590	1.8	25.8	357.11	14,193	1.4	66.7	345.33
90 percent.....	6,812	0.5	2,629,867	386.06	121	0.4	1.8	380.69	1,614	0.5	23.7	389.38	5,077	0.5	74.5	385.14
100 percent.....	61,913	4.5	33,308,044	537.98	1,852	5.6	3.0	511.74	44,260	14.1	71.5	528.92	15,811	1.5	25.5	566.30
<b>KOREAN CONFLICT</b>																
Total.....	240,326	100.0	29,069,195	121.08	11,338	100.0	4.7	87.45	45,484	100.0	18.9	260.39	183,508	100.0	76.4	91.11
No disability.....	7,606	3.2	503,502	66.20	7,301	64.4	96.0	67.90					305	0.2	4.0	47.00
10 percent.....	86,378	36.0	2,214,642	25.64	254	2.2	0.3	63.88	10,338	22.7	12.0	25.39	75,786	41.7	87.7	25.55
20 percent.....	37,124	15.5	1,726,204	46.49	106	1.0	0.3	65.91	2,081	4.5	5.5	46.35	34,995	19.1	94.2	46.43
30 percent.....	33,126	13.8	2,373,691	71.66	2,411	21.3	7.3	70.17	6,560	14.4	19.8	70.39	24,154	13.2	72.9	72.15

40 percent	20,263	8.4	2,024,274	99.90	268	2.4	1.3	97.23	2,372	5.2	11.7	97.92	17,623	9.6	87.0	100.21
50 percent	11,768	4.9	1,962,313	166.75	356	3.1	3.0	161.62	3,729	8.2	51.7	163.67	7,883	4.2	65.3	168.63
60 percent	12,962	5.4	3,531,395	272.44	208	1.8	1.6	236.89	2,191	4.8	16.9	250.02	10,563	5.8	81.5	277.79
70 percent	8,799	3.6	3,041,434	347.24	106	0.9	1.2	267.25	4,094	9.0	46.7	368.62	4,559	2.5	52.1	329.89
80 percent	4,170	1.7	1,591,060	381.55	79	0.7	1.9	323.84	1,155	2.5	27.7	397.03	2,936	1.6	70.4	377.01
90 percent	1,530	0.6	630,894	412.35	8	0.1	0.5	431.63	435	1.0	28.4	421.62	1,087	0.6	71.1	408.50
100 percent	16,630	6.9	9,499,785	571.24	239	2.1	1.4	500.46	12,579	27.7	75.7	558.82	3,812	2.1	22.9	616.27
<b>VIETNAM ERA</b>																
Total	308,812	100.0	36,045,606	116.72	2,184	100.0	0.7	263.69	60,852	100.0	19.7	198.17	245,776	100.0	79.6	95.25
No disability	143	0.0	6,821	47.70	5	0.2	3.5	67.00					138	0.1	96.5	47.00
10 percent	122,364	39.7	3,092,460	25.27	133	6.1	0.1	25.00	15,070	24.7	12.3	25.08	107,161	43.5	87.6	25.30
20 percent	49,273	16.0	2,282,875	46.33	17	0.8	0.0	46.00	3,344	5.5	6.8	46.31	45,912	18.7	93.2	46.33
30 percent	39,487	12.8	2,814,383	71.27	213	9.8	0.5	70.00	9,849	16.2	24.9	70.23	29,425	12.0	74.6	71.63
40 percent	23,875	7.7	2,392,961	103.23	40	1.8	0.2	96.00	3,199	5.3	13.4	98.51	23,636	8.4	86.4	100.50
50 percent	17,273	5.6	2,635,100	152.66	801	36.7	4.6	153.55	6,602	10.8	38.2	147.15	9,870	4.0	57.2	156.09
60 percent	14,133	4.6	3,460,344	244.84	110	5.0	0.8	201.55	2,729	4.5	19.3	227.21	11,294	4.6	79.9	249.62
70 percent	10,715	3.5	3,260,738	304.32	27	1.2	0.3	233.44	4,869	8.0	45.4	301.49	5,819	2.4	64.3	337.01
80 percent	5,683	1.8	2,090,895	367.92	10	0.5	0.2	348.80	1,677	2.8	29.5	367.91	3,996	1.6	70.3	367.97
90 percent	2,904	0.9	1,223,959	421.47	2	0.1	0.1	271.50	935	1.5	32.2	428.84	1,967	0.8	67.7	418.12
100 percent	22,962	7.4	12,785,068	556.79	826	37.8	3.6	490.64	12,578	20.7	64.8	512.16	9,558	3.9	41.6	622.09
<b>REGULAR ESTABLISHMENT</b>																
Total	189,804	100.0	18,235,415	96.07	5,873	100.0	3.1	97.55	39,715	100.0	20.9	198.01	144,216	100.0	76.0	67.94
No disability	2,633	1.4	138,826	52.73	2,369	40.3	90.0	54.18					264	0.2	10.0	39.70
10 percent	77,187	40.5	1,580,829	39.48	114	1.9	0.1	46.55	9,505	23.9	12.3	20.23	67,568	46.9	87.8	20.47
20 percent	28,844	15.2	1,084,682	37.61	94	1.6	0.3	52.87	1,506	3.8	5.2	37.35	27,244	18.9	94.5	37.57
30 percent	27,449	14.5	1,605,486	58.49	1,976	33.7	7.2	56.20	6,128	15.4	22.3	56.60	19,345	13.4	70.5	59.32
40 percent	12,457	6.6	1,023,478	82.16	148	2.5	1.2	78.39	1,400	3.5	11.2	79.19	10,909	7.6	87.6	82.59
50 percent	7,318	3.9	941,921	128.71	352	6.0	4.8	126.10	3,500	8.8	47.8	125.52	3,466	2.4	47.4	132.20
60 percent	9,050	4.8	2,111,880	233.36	138	2.4	1.5	211.24	1,255	5.2	13.9	218.06	7,657	5.3	84.6	236.26
70 percent	5,589	2.9	1,531,715	374.06	69	1.2	1.2	208.16	3,440	8.7	61.6	279.77	2,080	1.4	37.2	286.80
80 percent	2,299	1.2	710,000	308.83	96	1.6	4.2	231.51	672	1.7	29.2	318.16	1,531	1.1	66.6	309.58
90 percent	667	0.4	228,713	342.90	4	0.1	0.6	287.25	187	0.5	28.0	337.60	476	0.3	71.4	345.45
100 percent	16,311	8.6	7,277,886	446.19	513	8.7	3.1	390.72	12,122	30.5	74.4	429.46	3,676	2.5	22.5	509.13
<b>SPANISH-AMERICAN WAR</b>																
Total	20	100.0	8,703	435.15	1	100.0	5.0	478.00	3	100.0	15.0	496.00	16	100.0	80.0	421.06
No disability																
10 percent																
20 percent																
30 percent																
40 percent																
50 percent	2	10.0	284	142.00									2	12.5	100.0	142.00
60 percent	1	5.0	163	163.00									1	6.3	100.0	163.00
70 percent	1	5.0	240	240.00									1	6.3	100.0	240.00
80 percent	2	10.0	720	360.00									2	12.5	100.0	360.00
90 percent																
100 percent	14	70.0	7,296	520.93	1	100.0	7.1	478.00	3	100.0	21.4	496.00	10	62.5	71.5	533.00
<b>MEXICAN BORDER SERVICE</b>																
Total	14	100.0	2,537	181.21					5	100.0	35.7	317.80	9	100.0	64.3	105.33
No disability																
10 percent	1	7.1	25	25.00									1	11.1	100.0	25.00
20 percent	4	28.7	164	46.00									4	44.5	100.0	46.00
30 percent	2	14.3	140	70.00									2	22.2	100.0	70.00
40 percent																
50 percent	3	21.4	419	139.67					2	40.0	66.7	135.00	1	11.1	33.3	149.00
60 percent	1	7.1	227	227.00					1	20.0	100.0	227.00				
70 percent																
80 percent																
90 percent																
100 percent	3	21.4	1,542	514.00					2	40.0	66.7	546.00	1	11.1	33.3	450.00

## COMPENSATION

## TABLE 51

Disability: Class of Dependent, Period of Service—June 1972

Class of dependent	Total			World War II		World War I		Korean conflict		Vietnam era		Regular Establishment		Spanish-American War		Mexican Border service	
	Number	Monthly value	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value
Total veterans.....	2,182,209	\$231,720,493	\$106.19	1,372,083	\$99.68	71,151	\$162.46	240,325	\$121.08	308,812	\$116.72	189,804	\$96.07	20	\$435.15	14	\$181.21
Veterans less than 50 percent disabled (no dependency benefit).....	1,715,185	78,214,574	45.60	1,102,085	45.82	44,872	63.58	184,506	47.93	235,142	45.04	148,573	36.58			7	49.86
Veterans 50 percent or more disabled.....	467,024	153,505,919	328.69	269,998	319.55	26,279	331.31	55,819	362.87	73,670	345.54	41,231	310.47	20	435.15	7	312.57
Without dependents.....	120,226	39,419,348	327.88	57,670	325.61	9,440	335.69	10,921	357.91	30,087	326.59	12,091	308.58	13	407.69	4	306.00
With dependents.....	346,798	114,086,571	328.97	212,328	317.90	16,839	328.85	44,898	364.08	43,583	358.62	29,140	311.25	7	486.14	3	321.33
Wife only.....	140,583	46,950,205	320.30	98,524	314.56	16,333	328.13	9,555	361.14	13,357	337.57	8,804	299.32	7	486.14	3	321.33
Wife, child or children.....	163,104	54,766,332	325.79	96,484	310.64	398	349.83	28,827	353.50	26,111	362.40	16,284	307.23				
Wife, child or children, and parent or parents.....	4,011	1,724,839	430.03	2,251	407.49	1	784.00	931	481.47	435	445.27	393	419.44				
Wife, parent or parents.....	3,029	849,227	418.54	1,408	409.36	5	226.80	245	466.22	239	432.30	132	410.40				
Child or children only.....	16,240	5,496,751	338.47	8,209	324.65	90	348.58	3,408	363.45	2,285	373.18	2,248	315.39				
Child or children and parent or parents.....	701	311,573	444.47	309	431.65			193	486.17	97	458.94	102	390.65				
Parent or parents only.....	9,130	3,987,644	436.76	5,143	436.22	12	466.08	1,759	466.13	1,059	438.19	1,177	394.17				
Total dependents on whose account additional compensation was being paid.....	756,856			431,341		17,396		136,369		96,595		75,147		7		3	
Wives.....	320,727			198,667		16,737		39,558		40,142		25,613		7		3	
Children.....	417,823			222,611		641		93,152		54,021		47,398					
Parents.....	18,306			10,063		18		3,659		2,432		2,136					

TABLE 52

COMPENSATION

Death: Total, Class of Beneficiary, Period of Service—June 1972

Class of beneficiary	Total			World War II		World War I		Korean conflict		Vietnam era	
	Number	Monthly value	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value
Total cases	375,354	\$61,372,715	\$163.51	205,058	\$142.72	37,067	\$194.12	39,627	\$154.29	44,078	\$205.70
Compensation	116,310	8,820,904	75.84	93,343	76.09	1,023	80.23	17,446	76.53	57	142.14
Dependency and indemnity compensation	252,783	50,882,385	201.29	107,165	195.35	36,024	197.31	21,004	212.77	43,988	205.72
Dependency and indemnity compensation and compensation	6,261	1,669,426	266.64	4,550	269.90	20	266.75	1,177	263.20	33	286.24
Widow alone	140,462	30,169,212	214.79	68,183	215.34	35,210	195.82	11,043	239.36	6,779	217.17
Widow and children	34,153	9,341,354	273.51	8,792	256.81	566	281.27	3,213	284.26	13,586	278.86
Widow, children and mother	3,420	1,277,373	373.50	442	351.38			211	363.36	1,872	383.88
Widow, children and father	467	171,413	375.09	55	357.89			33	306.33	266	382.40
Widow, children, mother and father	1,219	478,554	392.58	57	364.86			64	364.56	845	399.11
Widow and mother	8,237	2,410,401	292.63	5,418	284.64	31	273.26	969	297.98	759	310.38
Widow and father	1,393	396,166	284.39	1,026	280.34	2	277.00	123	290.74	111	297.50
Widow, mother and father	1,583	484,798	306.25	880	300.76			220	293.22	308	321.33
Children alone	23,136	2,876,849	124.35	4,199	124.10	484	145.64	2,428	122.02	8,039	125.78
Children and mother	2,627	647,702	208.49	298	208.36			244	199.25	1,036	214.34
Children and father	371	76,949	207.41	38	214.47			42	194.12	153	212.35
Children, mother and father	1,065	243,118	228.28	50	231.50			98	216.27	646	230.98
Mother alone	111,944	8,876,026	79.28	84,718	79.47	740	79.71	14,022	78.11	5,489	80.47
Father alone	17,356	1,388,491	80.00	13,672	81.37	31	77.10	2,000	77.12	723	71.88
Mother and father	27,931	2,635,319	94.35	17,230	92.11	3	80.00	4,917	88.39	3,566	110.86
Total dependents	524,460			250,221		37,865		55,911		99,630	
Widows	190,924			84,853		35,809		15,876		24,526	
Children	124,135			23,267		1,246		11,793		54,165	
Mothers	158,026			109,093		774		20,745		14,421	
Fathers	51,375			33,008		36		7,497		6,518	

Class of beneficiary	Regular Establishment		Spanish-American War		Civil War		Indian wars		Mexican border service	
	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value
Total cases	49,177	\$196.49	329	\$198.92	16	\$177.19	1	\$147.00	1	\$184.00
Compensation	4,437	65.96	4	87.00						
Dependency and indemnity compensation	44,259	209.07	325	200.30	16	177.19	1	147.00	1	184.00
Dependency and indemnity compensation and compensation	481	242.84								
Widow alone	18,929	233.11	309	199.98	8	207.38			1	184.00
Widow and children	7,992	277.92	4	324.75						
Widow, children and mother	895	367.46								
Widow, children and father	103	368.17								
Widow, children, mother and father	253	384.11								
Widow and mother	1,060	316.46								
Widow and father	131	299.15								
Widow, mother and father	175	323.72								
Children alone	7,961	122.36	16	147.00	8	147.00	1	147.00		
Children and mother	1,049	204.90								
Children and father	138	204.03								
Children, mother and father	371	227.05								
Mother alone	6,975	78.38								
Father alone	930	72.52								
Mother and father	2,215	98.49								
Total dependents	80,480		335		16		1		1	
Widows	29,538		313		8				1	
Children	33,633		22		8		1			
Mothers	12,993									
Fathers	4,916									

Disability: Total, Period of Service, Type of Major Disability—June 1972

Type of pension and disability	Total				World War II			World War I					
	Number	Percent of total	Monthly value	Average monthly value	Number	Percent of total	Average monthly value	Number	Percent of total	Average monthly value			
Total.....	1,086,030	100.0	\$122,637,927	\$112.92	474,559	100.0	\$118.63	568,793	100.0	\$107.15			
Service pensions.....	1,767	.2	193,870	109.72									
Non-service connected disabilities.....	1,084,263	99.8	122,444,057	112.93	474,559	100.0	118.63	568,793	100.0	107.15			
Tuberculosis (lung and pleura).....	16,652	1.5	1,945,757	116.85	11,253	2.4	117.67	4,128	.7	113.43			
Psychiatric and neurological diseases.....	211,497	19.5	28,980,344	137.02	129,804	27.4	132.82	59,302	10.4	160.00			
Psychoses.....	55,472	5.1	6,588,905	118.78	37,237	7.9	116.94	6,159	1.1	139.05			
Other psychiatric and neurological diseases.....	156,025	14.4	22,391,539	143.51	92,567	19.5	139.21	53,143	9.3	151.94			
General medical and surgical conditions.....	787,422	72.5	85,658,958	108.78	292,930	61.7	116.36	478,103	84.1	103.46			
No disability shown.....	108,692	6.3	5,858,998	85.29	40,572	8.5	89.94	27,260	4.8	79.32			
	Korean conflict				Vietnam era			Spanish-American War			Mexican border service		
	Number	Percent of total	Average monthly value	Number	Percent of total	Average monthly value	Number	Percent of total	Average monthly value	Number	Percent of total	Average monthly value	
Total.....	36,122	100.0	\$125.06	3,563	100.0	\$131.87	2,518	100.0	\$143.20	474	100.0	\$100.66	
Service pensions.....							1,767	70.2	109.72				
Non-service connected disabilities.....	36,122	100.0	125.06	3,563	100.0	131.87	751	29.8	221.97	474	100.0	100.66	
Tuberculosis (lungs and pleura).....	1,238	3.4	120.97	31	.9	106.10	2	.1	195.00				
Psychiatric and neurological diseases.....	20,028	55.4	124.84	2,202	61.8	124.03	140	5.5	223.64	21	4.4	183.05	
Psychoses.....	10,861	30.0	114.07	1,212	34.0	114.10	1		226.00	2	.4	178.50	
Other psychiatric and neurological diseases.....	9,167	25.4	137.60	990	27.8	136.20	139	5.5	223.62	19	4.0	183.53	
General medical and surgical conditions.....	14,795	41.0	126.57	1,325	37.2	145.46	225	8.9	223.70	45	9.1	147.50	
No disability shown.....	58	.2	101.69	5	.1	143.80	386	15.3	220.51	410	86.5	91.57	

<sup>1</sup> Includes one Indian wars pension; monthly value \$100.

TABLE 54

PENSION

## Death: Total, Class of Beneficiary, Period of Service—June 1972

Class of beneficiary	Total			World War II		World War I		Korean conflict		
	Number	Monthly value	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	
Total cases.....	1,265,963	\$88,781,704	\$70.13	523,352	\$71.73	620,261	\$66.65	78,852	\$81.94	
Widow alone.....	793,295	53,597,560	67.56	161,758	71.17	594,389	66.15	3,390	74.79	
Widow and children.....	165,116	17,543,471	113.10	116,849	110.33	13,798	107.37	20,891	129.30	
Children alone.....	317,552	17,640,673	55.55	244,745	53.67	12,074	44.88	54,571	64.25	
Total dependents.....	1,865,990			950,513		643,006		218,723		
Widows.....	948,411			278,607		608,187		24,281		
Children.....	917,579			671,906		34,819		194,442		
Class of beneficiary	Vietnam era		Spanish-American War		Civil War		Indian wars		Mexican border service	
	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value
Total cases.....	8,437	\$74.47	33,975	\$80.14	604	\$93.70	131	\$77.91	351	\$62.66
Widow alone.....	373	74.08	32,587	80.16	343	108.88	112	77.22	343	62.05
Widow and children.....	3,261	106.81	308	101.66	2	133.00	1	142.00	6	104.17
Children alone.....	4,803	52.54	1,080	73.42	259	73.29	18	73.11	2	42.00
Total dependents.....	18,153		34,489		613		133		360	
Widows.....	3,634		32,895		345		113		349	
Children.....	14,519		1,594		268		20		11	

TABLE 55

PENSION

## Death: Special Acts, Class of Beneficiary, Period of Service—June 1972

Class of beneficiary	Total			Regular Establishment		Spanish-American War		Civil War		Indian wars	
	Number	Monthly value	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value	Number	Average monthly value
Total cases.....	53	\$1,424	\$26.87	17	\$14.00	13	\$20.08	21	\$40.16	2	\$41.00
Widow alone.....	28	822	29.36	17	14.00	6	22.83	3	121.67	2	41.00
Widow and children.....											
Children alone.....	25	602	24.08			7	17.71	18	26.57		
Total dependents.....	54			17		13		22		2	
Widows.....	28			17		6		3		2	
Children.....	26					7		19			

*Incompetent and Minor Beneficiaries Served—Fiscal Years 1968-72*

Fiscal year	Total beneficiaries	Incompetent adults				Minors		
		Total	Type of fiduciary			Total	Type of fiduciary	
			State court appointed fiduciaries	Federal fiduciaries	Supervised direct payment		State court appointed fiduciaries	Federal fiduciaries
1972.....	730,532	114,092	64,635	48,740	1,717	616,440	53,941	562,499
1971.....	770,972	114,751	68,087	46,664	.....	656,221	63,738	592,483
1970.....	786,063	114,741	69,844	44,897	.....	671,312	68,288	603,024
1969.....	746,806	112,206	70,433	41,773	.....	634,600	71,334	563,266
1968.....	689,545	111,133	71,217	39,916	.....	578,412	74,798	503,614

<sup>1</sup> This type payment first authorized in fiscal year 1972.

EDUCATION BENEFITS

TABLE 57

*Persons in Training During Fiscal Year by Program and Period of Service*

Program	Fiscal year			
	1972	1971	1970	1969
Post Korean educational assistance program:				
In training during year, total.....	1,864,158	1,584,866	1,210,731	925,013
Institutions of higher learning.....	1,064,513	917,389	677,240	528,515
Schools below college level.....	637,962	521,873	416,658	330,000
On-job training.....	161,683	145,604	116,833	66,498
Children's educational assistance program:				
In training during year, total.....	54,996	50,724	45,391	43,269
Institutions of higher learning.....	49,252	45,383	40,695	38,436
Schools below college level.....	5,667	5,282	4,638	4,788
Special restorative training.....	87	89	88	45
Period of service of deceased or totally disabled veteran:				
World War I.....	429	480	512	576
World War II.....	31,496	30,250	27,930	27,316
Korean conflict.....	9,291	8,474	7,687	7,123
Other.....	13,780	11,520	9,362	8,254
Wives and widows educational assistance program:				
In training during year, total.....	9,560	8,796	7,071	2,819
Institutions of higher learning.....	6,474	5,326	3,884	1,447
Schools below college level.....	3,076	3,459	3,187	1,372
Other.....	10	11	.....	.....
Period of service of deceased or totally disabled veteran:				
World War I.....	76	111	102	41
World War II.....	2,939	2,981	2,631	1,146
Korean conflict.....	1,069	949	667	235
Other.....	5,456	4,765	3,641	1,397
Vocational rehabilitation program for disabled veterans:				
In training during year, total.....	31,635	30,471	24,457	18,969
Institutions of higher learning.....	22,097	20,116	14,928	10,390
Schools below college level.....	7,638	8,560	7,984	7,333
Job training.....	1,718	1,615	1,418	1,132
Institutional on farm.....	182	180	177	114
Period of service of veteran:				
World War II.....	571	681	812	878
Korean conflict.....	628	809	891	1,138
Peacetime.....	30,436	28,981	22,754	16,958

## Post-Korean Veterans and Servicemen Training Programs—Individuals Trained

Training Programs	Cumulative through June 1972			
	Total	Graduate	Undergraduate	Nondegree
Total all types of training .....	3,322,350			
COLLEGE LEVEL				
Total .....	1,746,232	323,602	1,392,483	30,147
Academic degrees—field not specified, total .....	881,997	88,957	793,040	
Associate in arts .....	274,993		274,993	
Associate in science .....	33,385		33,385	
Associate degree, n.e.c. <sup>1</sup> .....	114,146		114,146	
Bachelor of arts .....	99,567		99,567	
Bachelor of science .....	73,717		73,717	
Bachelor's degree, n.e.c. ....	197,232		197,232	
Master of arts .....	20,492	20,492		
Master of science .....	12,245	12,245		
Master's degree, n.e.c. ....	39,101	39,101		
Doctor of philosophy .....	14,386	14,386		
Doctor's degree, n.e.c. ....	2,595	2,595		
Post Doctoral, n.e.c. ....	138	138		
Business and commerce .....	273,933	58,106	215,827	
Education .....	111,458	52,963	58,495	
Engineering .....	72,444	9,977	62,467	
English and journalism .....	10,198	3,517	6,681	
Fine and applied arts .....	23,046	4,535	18,511	
Foreign languages .....	2,918	1,459	1,459	
Law .....	33,274	27,099	6,175	
Liberal arts (major not specified) .....	45,588	1,173	44,415	
Life sciences, total .....	72,370	38,545	33,825	
Agricultural sciences .....	11,632	2,189	9,443	
Biological sciences .....	14,066	3,861	10,205	
Medical and health sciences .....	46,672	32,495	14,177	
Mathematics .....	7,715	2,138	5,577	
Physical sciences .....	13,262	4,665	8,597	
Social sciences .....	63,784	23,775	40,009	
Theology .....	8,734	3,592	5,142	
Technician courses, total .....	106,358		76,211	30,147
Business and commerce .....	18,509		9,302	9,207
Engineering and related .....	4,157		3,600	557
Medical and related .....	6,497		3,095	3,402
Other technician courses .....	77,195		60,214	16,981
All other academic fields .....	19,153	3,101	16,052	
BELOW COLLEGE				
	Total below college	Vocational or technical post-high school	Other vocational or technical	High school
Total .....	1,322,559	272,146	977,127	73,286
Arts .....	98,648	25,266	73,382	
Business .....	285,316	87,188	198,128	
Services .....	91,892	22,500	69,392	
Technical courses, total .....	177,494	51,086	126,408	
Electronic .....	122,734	38,743	83,991	
Engineering .....	33,589	4,769	28,820	
Legal .....	7,287	2,738	4,549	
Medical and related .....	5,642	2,443	3,199	
Other technical, n.e.c. ....	8,242	2,393	5,849	
Trade and industrial, total .....	467,077	77,969	389,108	
Air conditioning .....	64,616	8,646	55,970	
Construction .....	15,615	2,491	13,124	
Electrical and electronic .....	144,688	26,963	117,725	
Mechanical .....	131,588	19,703	111,885	
Metal work .....	39,866	9,179	30,687	
Other trade and industrial .....	70,704	10,987	59,717	
Other institutional .....	112,723	8,137	31,300	73,286
Flight training, total .....	89,409		89,409	

See footnotes at end of table.

*Post-Korean Veterans and Servicemen Training Programs—Individuals Trained—Continued*

Training Programs	Cumulative through June 1972		
	Total job	Apprentice	Other on job
<b>MAJOR OCCUPATIONAL OBJECTIVE JOB TRAINING</b>			
Total.....	263,559	150,058	113,501
Technical and managerial.....	22,862	2,238	20,624
Clerical and sales.....	4,586	526	3,732
Service occupations.....	43,555	4,514	30,041
Farming, fishery, forestry occupations.....	1,766	243	1,523
Trade and industrial, total.....	179,375	135,171	44,207
Processing occupations.....	6,657	4,925	1,732
Machine trades occupations.....	46,396	37,254	9,144
Benchwork occupations.....	8,441	6,003	2,436
Structural work occupations.....	117,882	86,989	30,893
Miscellaneous occupations.....	11,410	7,066	4,344

† Not elsewhere classified.

TABLE 59

## EDUCATION BENEFITS

*Sons, Daughters, Wives and Widows Training Programs*

Training programs	Individuals trained, cumulative thru June 1972				
	Total	Sons	Daughters	Widows	Wives
Total all types of training.....	201,971	95,762	90,583	12,066	3,560
COLLEGE LEVEL					
Total.....	161,601	81,132	70,947	7,390	2,132
Academic degrees, field not specified, total.....	73,269	36,830	31,455	3,862	1,122
Associate in arts.....	11,816	5,458	4,605	1,334	419
Associate in science.....	1,397	611	546	177	63
Associate degree, n.e.c. <sup>1</sup> .....	8,284	4,400	3,260	470	164
Bachelor of arts.....	10,194	4,669	4,948	457	120
Bachelor of science.....	5,160	2,908	1,988	209	55
Bachelor's degree, n.e.c.....	33,338	17,451	14,842	819	226
Master of arts.....	832	259	422	128	28
Master of science.....	203	106	58	30	9
Master's degree, n.e.c.....	1,730	775	719	194	42
Doctor of philosophy.....	197	109	46	31	11
Doctor's degree, n.e.c.....	118	64	21	13	0
Business and Commerce.....	16,494	10,461	5,377	522	134
Education.....	19,971	5,557	12,559	1,449	406
Engineering.....	5,496	5,299	190	4	3
English and journalism.....	2,114	751	1,278	63	22
Fine and applied arts.....	3,690	1,888	1,703	81	18
Foreign languages.....	485	128	332	20	5
Home economics.....	1,220	30	1,126	50	14
Law.....	1,401	1,215	147	32	7
Liberal arts (major not specified).....	10,971	5,508	5,226	183	54
Life sciences, total.....	10,564	4,364	5,653	398	149
Agricultural sciences.....	1,174	1,075	97	1	1
Biological sciences.....	2,292	1,555	706	24	7
Medical and health sciences.....	7,098	1,734	4,850	373	141
Mathematics.....	951	650	291	9	1
Physical sciences.....	1,642	1,340	235	5	2
Social sciences.....	6,802	3,676	2,799	256	71
Theology.....	525	398	117	9	1
Technician courses, total.....	4,798	2,527	1,830	341	100
Business and commerce.....	718	191	338	147	42
Engineering and related.....	84	80	3	1	0
Medical and related.....	1,447	221	1,097	100	29
Other technical courses.....	2,549	2,035	392	93	29
All other academic fields.....	1,208	510	569	106	23
BELOW COLLEGE LEVEL					
Total.....	40,370	14,630	19,636	4,676	1,428
Arts.....	1,819	1,283	426	82	28
Business.....	13,525	2,603	8,990	1,465	467
Services.....	11,242	1,230	7,367	1,973	672
Technical courses, total.....	1,844	1,095	628	93	28
Electronic.....	647	636	9	1	1
Engineering.....	200	193	5	1	1
Medical and related.....	713	112	509	75	17
Other technical, n.e.c.....	284	164	105	16	9
Trades and industrial, total.....	10,862	7,797	1,845	1,009	211
Construction.....	338	331	3	3	1
Dressmaking.....	3,918	1,201	1,622	928	167
Electrical and electronic.....	1,877	1,602	60	10	5
Mechanical.....	3,216	3,146	62	5	3
Metalwork.....	907	879	22	2	4
Other trade and industrial.....	906	738	76	61	31
Other institutional.....	1,078	622	380	54	22

<sup>1</sup> Not elsewhere classified.

## HOUSING ASSISTANCE

TABLE 60

*Guaranteed or Insured Loans, Direct Loans, Property Management*

Item	Cumulative through June 30, 1972	Fiscal year 1972	Fiscal year 1971
<b>Guaranteed or insured loans</b>			
Number of loans, total.....	8,140,847	359,010	<sup>1</sup> 197,915
Home.....	7,835,734	354,571	197,606
Mobile home.....	4,708	4,430	278
Farm.....	71,151	4	19
Business.....	229,254	5	12
Amount of loans (thousands), total.....	\$90,241,434	\$7,860,833	\$4,112,014
Home.....	89,265,201	7,822,580	4,109,367
Mobile home.....	40,329	38,118	2,211
Farm.....	283,900	88	334
Business.....	652,104	47	102
Amount of guaranty and insurance (thousands), total.....	\$46,790,369	\$3,921,657	\$2,133,214
Home.....	46,473,256	3,910,178	2,132,351
Mobile home.....	12,091	11,428	663
Farm.....	120,077	41	168
Business.....	184,945	10	32
Defaults and claims:			
Defaults reported.....	2,044,970	88,868	83,023
Loans in default—end of period.....	38,247	38,247	36,266
Defaults disposed of, total.....	2,006,723	86,887	80,346
Cured or withdrawn.....	1,718,502	75,049	69,950
Percent.....	85.6	86.4	87.1
Claims vouchered for payment.....	288,220	11,838	10,396
Rate per 1,000 loans outstanding.....		3.22	2.91
Average number of loans outstanding.....		3,672,690	3,576,723
<b>Direct loans</b>			
Number of loans fully disbursed.....	314,351	3,245	6,056
Amount of loans fully disbursed (thousands).....	\$3,061,618	\$49,251	\$82,677
<b>Property management</b>			
Number acquired.....	313,573	15,470	13,993
Number sold.....	299,787	14,561	13,900
Number redeemed.....	3,130	382	383
Number on hand—end of period.....	10,656	10,656	10,129

<sup>1</sup> Prior data corrected.

## INSURANCE

TABLE 61

*Appropriations and Other Receipts versus Expenditures Cumulative Through June 30, 1972*

Item	U.S. Government life insurance fund	National service life insurance fund	Veterans' reopened insurance fund	Veterans' special life insurance fund	Service disabled veterans' insurance fund	Servicemen's group life insurance fund
<b>Appropriations and other receipts:</b>						
Appropriations.....					\$4,250,000	
Receipts other than appropriations.....	\$4,283,724,615	\$27,255,223,343	\$306,824,646	\$615,098,039	176,814,600	\$1,061,291,640
Total.....	4,283,724,615	27,255,223,343	306,824,646	615,098,039	181,064,600	1,061,291,640
<b>Expenditures:</b>						
Fiscal year 1972.....	94,494,475	806,246,928	13,035,341	24,801,156	20,646,404	107,696,456
Cumulative to June 30, 1972.....	3,480,217,858	19,811,475,637	75,778,850	263,884,143	159,938,885	1,061,290,640
Covered into U.S. Treasury.....				4,250,000		
Investments, loans, and liens.....	792,977,910	7,396,540,099	232,106,859	353,229,245	23,923,807	
Balance.....	10,528,847	47,207,607	(1,061,063)	(6,265,349)	(2,798,092)	1,000

TABLE 62

## INSURANCE

## Summary of Operations (Accrual Basis)

(In thousands)

Item	U.S. Government life insurance		National service life insurance		Veterans special life insurance		Service-disabled veterans insurance		Veterans reopened insurance	
	Fiscal year 1972	Cumulative totals from origin January 1919 to June 30, 1972	Fiscal year 1972	Cumulative totals from origin October 1940 to June 30, 1972	Fiscal year 1972	Cumulative totals from origin April 1951 to June 30, 1972	Fiscal year 1972	Cumulative totals from origin April 1951 to June 30, 1972	Fiscal year 1972	Cumulative totals from origin May 1965 to June 30, 1972
<b>INCOME</b>										
Premiums	\$9,015	\$2,025,471	\$524,763	\$15,316,845	\$38,950	\$495,438	\$14,716	\$112,323	\$32,122	\$251,466
Policy proceeds left to be paid in installments	7,214	743,284	42,620	5,091,890	1,651	26,603	1,045	17,237	990	6,112
Dividends left on credit or deposit	3,781	49,371	77,709	980,731						
Investment income	34,632	1,853,166	328,500	5,493,665	15,351	93,157	507	2,888	13,783	46,114
Extra hazard contributions from the U.S. Government	49	142,047	2,445	4,793,726						
<b>Total</b>	<b>54,691</b>	<b>4,813,339</b>	<b>976,037</b>	<b>31,676,857</b>	<b>55,952</b>	<b>615,198</b>	<b>16,268</b>	<b>132,448</b>	<b>46,895</b>	<b>303,691</b>
<b>DISPOSITION OF INCOME</b>										
Death benefits	40,855	1,160,939	245,567	7,504,212	11,626	133,956	14,301	116,614	9,517	51,069
Matured endowments	771	491,805	32,546	386,643	85	180	18	44	150	251
Surrender benefits	2,982	296,800	34,602	533,226	2,608	16,797	784	5,718	979	4,648
Disability benefits	2,349	376,300	30,115	419,728	918	5,922	4,278	28,806	967	3,182
Payments from policy proceeds left to be paid in installments	23,667	879,850	145,424	6,598,790	1,565	21,406	1,265	12,884	881	4,068
Dividends withdrawn	2,980	41,726	57,089	784,839						
Net deposits for policy reserves	-38,633	732,842	133,787	6,721,701	31,141	340,657	8,967	78,459	32,392	215,292
Reserve for dividends left on credit or deposit	1,447	17,491	35,162	320,313						
Administrative costs									541	12,465
<b>Total</b>	<b>36,418</b>	<b>3,997,753</b>	<b>714,292</b>	<b>23,269,452</b>	<b>47,943</b>	<b>518,818</b>	<b>29,613</b>	<b>242,525</b>	<b>45,427</b>	<b>290,965</b>
Net gain (+) or loss (-) from operations before dividends and transfers	18,273	815,586	261,745	8,407,405	8,009	96,380	-13,345	-110,077	1,468	12,726
Dividends to policyholders	20,890	796,433	260,856	8,315,079		148,999				
Transfers to U.S. Government					8,000	47,113				
Gain (+) or loss (-) after dividends and transfers	-2,617	19,153	889	92,326	9	268	-13,345	-110,077	1,468	12,726

<sup>1</sup> Special dividend authorized by legislation.

TABLE 63

## INSURANCE

## In Force—Fiscal Year 1972

Item	Participating				Nonparticipating					
	U.S. Government life insurance		National service life insurance		Veterans special life insurance		Service-disabled veterans' insurance		Veterans reopened insurance	
	Number of policies	Amount of insurance (thousands)	Number of policies	Amount of insurance (thousands)	Number of policies	Amount of insurance (thousands)	Number of policies	Amount of insurance (thousands)	Number of policies	Amount of insurance (thousands)
In force at beginning of year	185,886	\$798,457	4,342,414	\$28,651,841	614,321	\$5,384,314	114,874	\$1,026,839	192,301	\$1,342,252
Insurance issued during year							18,928	177,710		
Insurance reinstated during year	4	17	5,073	28,825	375	3,514	209	2,054	182	842
Insurance terminated during year by:										
Death	8,847	40,895	38,302	244,307	1,350	11,576	1,563	14,072	1,409	9,481
Maturity as endowment	151	782	6,911	32,810	15	85	6	18	32	153
Permanent total disability	236	1,405								
Lapse, expiry, and net changes	113	466	34,825	302,660	2,955	29,278	2,779	27,587	461	4,430
Cash surrender	942	3,839	11,834	61,136	898	6,868	401	3,220	426	2,903
<b>Total terminated</b>	<b>10,289</b>	<b>47,367</b>	<b>91,872</b>	<b>640,913</b>	<b>5,218</b>	<b>47,807</b>	<b>4,749</b>	<b>44,897</b>	<b>2,328</b>	<b>16,967</b>
In force at end of year	175,601	751,107	4,255,615	28,039,753	609,478	5,340,021	129,262	1,161,706	190,155	1,326,127
Selected year end items:										
In force on 5-year term plan	1,397	9,014	1,822,235	14,076,767	424,152	3,881,621	69,881	667,994		
In force on all other plans	174,204	742,093	2,433,380	13,962,986	185,326	1,458,400	59,381	493,712	190,155	1,325,127
In force with disability income rider	5,709	43,222	622,235	4,718,059	109,714	999,581			12,730	94,435
In force under disability premium waiver	168	1,072	104,450	718,099	3,308	28,172	26,751	252,104	3,215	21,939

**PERSONNEL**

**TABLE 64**

*Employment: Full and Part Time by Installation*

Installation	June 30	
	1972	1971
Total.....	187,988	182,546
Central office.....	3,828	3,852
Field.....	184,165	178,694
Hospitals (separate).....	140,943	136,047
Domiciliary and hospital centers.....	15,613	15,854
Regional offices (separate).....	13,382	12,812
Regional offices and hospital centers.....	7,791	7,677
Regional offices with insurance activities.....	2,099	2,115
Outpatient clinics (separate).....	1,411	1,387
Data processing centers.....	1,329	1,241
Supply depots and marketing centers.....	464	457
Veterans Benefits Office (Washington, DC).....	447	436
Domiciliary (separate).....	276	261
Miscellaneous <sup>1</sup> .....	411	407

<sup>1</sup> Includes Veterans Canteen Service field offices, Prosthetic Center and Record Processing Center.

**PERSONNEL**

**TABLE 65**

*Employment: Full and Part Time by Pay System*

Pay system	June 30	
	1972	1971
Total.....	187,988	182,546
General schedule.....	108,964	104,240
Title 38, ch. 73.....	30,222	35,908
Wage system.....	30,181	35,897
Canteen.....	3,020	3,052
Nationals (Manila).....	265	268
Others <sup>1</sup> .....	3,316	3,188

<sup>1</sup> Includes summer aids.

**PERSONNEL**

*Employment: Minority Group, Grade—May 31, 1972*

**TABLE 66**

Grade or salary levels	Total employment	Percent minority employment	Negro	Spanish surnamed	American Indian	Oriental
Total all pay plans.....	163,264	29.3	42,084	3,668	362	1,650
GS and similar:						
GS-1 through 4.....	45,464	35.9	14,910	1,106	125	177
GS-5 through 8.....	40,787	27.6	9,999	778	89	302
GS-9 through 11.....	25,796	18.1	2,563	289	33	459
GS-12 and above.....	15,519	7.9	474	308	18	487
Wage systems:						
WG-1 through WG-3.....	16,553	56.1	8,526	684	52	74
WG-4 through WG-09.....	8,211	42.4	3,187	288	18	41
WG-10 and above.....	3,367	9.4	241	56	12	6
WL.....	1,819	42.1	509	40	5	1
WS.....	3,330	34.1	1,041	83	4	14

**PERSONNEL**

*Employment: Sex, Veterans Preference—June 30, 1972*

**TABLE 67**

Eligibility	All employees		Male employees		Female employees	
	Number	Percent	Number	Percent	Number	Percent
With veterans preference.....	84,812	45.1	75,439	76.8	9,373	10.4
Without veterans preference.....	108,176	64.9	22,314	28.2	80,362	86.6
Total.....	187,988	100.0	98,253	100.0	89,735	100.0

TABLE 68

## APPEALS

*Appeals to Board of Veterans' Appeals*

Item	Number of cases	
	Fiscal year 1971	Fiscal year 1972
Pending beginning of year .....	24,215	26,291
Undocketed, field office development not completed .....	18,862	20,694
Docketed, pending in BVA .....	5,353	5,597
Filed during year .....	49,311	54,189
Settled in field offices .....	26,223	28,659
Allowed on review of appealed action .....	8,852	9,860
Closed, failure to respond to statement of case .....	14,394	15,741
Withdrawn by appellant .....	2,977	3,068
Submitted to Board of Veterans' Appeals .....	25,445	29,326
Decided by Board of Veterans' Appeals .....	25,201	29,692
Allowed .....	2,976	3,737
Remanded for further action .....	3,611	4,328
Withdrawn and dismissed .....	274	268
Denied .....	18,340	21,359
Pending end of year .....	26,291	27,360
Undocketed, field office development not completed .....	20,694	22,129
Docketed, pending in BVA .....	5,597	5,231
Summary:		
Appeals filed .....	49,311	54,189
Final dispositions .....	47,813	54,023
Allowed (percent) .....	24.7	25.2
Closed (percent) .....	30.1	29.1
Withdrawn (percent) .....	6.8	6.2
Denied or dismissed (percent) .....	38.4	39.5
Pending end of year .....	26,291	27,360

TABLE 69

## APPEALS

*Advisory Opinions Requested by the Board of Veterans' Appeals From Outside Medical Experts*

Medical specialty	Number of advisory opinions requested	
	Fiscal year 1971	Fiscal year 1972
All specialties .....	249	252
Number requested in connection with:		
Appellate consideration .....	228	233
Reconsideration .....	21	19
Internal medicine:		
General .....	12	13
Cardiovascular .....	26	24
Gastroenterology .....	16	11
Pulmonary diseases .....	15	13
Surgery:		
General .....	2	2
Orthopedic .....	7	11
Thoracic .....	1	2
Otolaryngology and ophthalmology .....	9	10
Psychiatry .....	64	74
Neurology—medical and/or surgical .....	27	28
Pathology—medical and/or surgical .....	60	51
Other .....	10	13

TABLE 70

## APPEALS

*Analysis of Cases Decided by Board of Veterans' Appeals—Fiscal Year 1972*

	Cases				
	Total	Allowed	Denied	Remanded	Withdrawn and dismissed
Benefits involved:					
Total .....	29,692	3,737	21,359	4,328	268
Disability .....	24,969	3,148	17,939	3,680	192
Death .....	2,361	370	1,623	347	21
Insurance and indemnity .....	329	15	266	44	4
Education and training .....	789	76	607	91	15
Loan guaranty, waiver of indebtedness .....	336	49	232	50	5
Waivers and forfeitures .....	460	46	347	70	6
Medical treatment and reimbursement .....	449	33	345	46	25
Period of service:					
Total .....	29,692	3,737	21,359	4,328	268
World War I .....	804	78	613	102	11
World War II .....	14,610	1,575	11,010	1,919	106
Korean conflict .....	4,146	521	3,006	582	38
Vietnam .....	8,476	1,372	5,544	1,494	66
Regular establishment .....	1,640	190	1,178	226	46
Other .....	16	1	9	5	1

## Appropriations, Expenditures and Balances—Cash Basis

Item	Appropriations	Expenditures		Nonexpenditure transfers	Covered into U.S. Treasury or restored	Investments	Cash balance
		Fiscal year 1972	Cumulative through June 30, 1972				
<b>General and special funds:</b>							
Compensation and pensions	\$92,204,802,000	\$6,143,543,816	\$91,558,466,151				\$646,335,849
Readjustment benefits	30,306,604,404	1,917,508,627	30,205,536,074				100,068,330
Veterans insurance and indemnities	318,190,036	14,039,839	357,620,959	\$41,000,000			1,569,077
Medical care, 1972	2,299,325,667	2,036,241,503	2,036,241,503		\$13,892,544		249,191,620
Medical care, 1964-71	19,600,643,872	192,658,133	19,520,364,019		74,793,402		5,486,451
Medical and prosthetic research	477,783,131	66,462,774	463,913,802				13,869,329
Medical administration and miscellaneous operating expenses, 1972	22,531,000	18,285,508	18,285,508		100,007		4,145,486
Medical administration and miscellaneous operating expenses, 1964-71	357,291,904	2,687,616	348,690,404		8,063,379		548,121
General operating expenses, 1972	291,112,705	266,068,736	266,068,736		475,001		24,548,968
General operating expenses, 1964-71	3,236,288,262	17,762,210	3,206,336,737		29,670,227		281,296
Construction of hospital and domiciliary facilities	1,042,596,863	105,106,373	907,815,149				134,781,714
Grants for construction of state extended care facilities, 1972-74	8,000,000						8,000,000
Grants for construction of state extended care facilities, 1966-73	26,000,000	1,830,829	11,947,348		61,628		13,991,024
Grants to the Republic of the Philippines	600,000	25,196	492,802				7,196
Grants to the Republic of the Philippines, 1972	2,100,000	1,801,519	1,801,519		142,398		156,063
Grants to the Republic of the Philippines, 1960-71	34,246,232	172,403	22,432,115		11,813,719		398
Construction, Corregidor-Bataan Memorial	1,600,000		1,458,077		3,626		38,297
Loan guaranty revolving fund	21,952,332	154,067,380	590,699,888	1,109,735,249			540,967,693
Direct loans to veterans and reserves	1,733,055,699	1245,838,184	29,383,471	1,881,690,377			821,961,751
Canteen service revolving fund	4,985,000	1,367,061	13,335,138		12,068,086		6,232,062
Rental, maintenance and repair of quarters		4,066	119,495		94,026		25,469
Service-disabled veterans insurance	4,500,000	4,807,197	6,307,860				10,807,860
Soldiers' and sailors' civil relief	3,528,000	6,164	2,013,169		1,500,000		14,831
Veterans reopened insurance fund		131,399,403	1220,931,222			\$220,206,000	725,222
Veterans special life insurance fund	250,000	136,107,567	1368,692,052	142,660,000	4,250,000	321,028,000	1,014,052
Vocational rehabilitation revolving fund	2,000,000	4,241	153,444		1,600,000		246,556
Servicemen's group life insurance fund		111,362,849	111,363,849			11,361,000	2,849
Supply fund		114,146,151	123,587,677	171,400	15,677,579		7,838,698
Consolidated working fund		143,918	1244,704				244,704
<b>Total, appropriations and funds</b>	<b>151,998,767,007</b>	<b>10,397,991,721</b>	<b>148,905,148,878</b>	<b>226,323,472</b>	<b>174,205,622</b>	<b>552,595,000</b>	<b>2,593,140,979</b>
Deduct: Proprietary receipts from the public		2,158,895					
<b>Total, Federal funds</b>	<b>151,998,767,007</b>	<b>10,395,833,126</b>	<b>148,905,148,878</b>	<b>226,323,472</b>	<b>174,205,622</b>	<b>552,595,000</b>	<b>2,593,140,979</b>
<b>Trust funds:</b>							
General post fund, national homes	46,858,746	2,576,160	41,500,011		387	1,429,000	3,729,348
National service life insurance fund	24,552,378,761	720,073,788	18,076,393,549		89	6,465,064,000	10,901,123
U.S. Government life insurance fund	3,627,249,733	81,213,109	2,906,243,368		1,811,199	716,800,000	3,596,166
<b>Subtotal, trust funds</b>	<b>28,226,287,240</b>	<b>803,863,057</b>	<b>21,023,136,928</b>		<b>1,811,675</b>	<b>7,183,113,000</b>	<b>18,225,637</b>
Deduct: Proprietary receipts from the public		486,743,699					
<b>Total, trust funds</b>	<b>28,226,287,240</b>	<b>317,119,458</b>	<b>21,023,136,928</b>		<b>1,811,675</b>	<b>7,183,113,000</b>	<b>18,225,637</b>
Deduct: Intragovernmental transactions		2,483,866					
<b>Total, Veterans' Administration</b>	<b>180,225,064,247</b>	<b>10,710,468,718</b>	<b>169,928,285,806</b>	<b>226,323,472</b>	<b>176,017,297</b>	<b>7,735,708,000</b>	<b>2,611,366,616</b>
<b>Appropriations and funds not included above:</b>							
National Cancer Institute, National Institutes of Health (transfer to Veterans' Administration), 1967-72	11,866,900	3,011	11,474,430		392,470		
Personal funds of patients		292,924	148,718,094				48,718,094
Funds due incompetent beneficiaries		55,249	190,347				190,347
Miscellaneous administrative and construction expenses	10,853,853,759		10,474,607,118		378,976,671		
Miscellaneous benefit and insurance expenses	25,110,301,012		24,621,740,653		488,560,359		
Miscellaneous trust funds	4,700,842,393		4,668,621,658		42,220,735		
Miscellaneous transfer appropriations and working funds	26,768,096		19,796,261		6,972,535		
<b>Total, other appropriations and funds</b>	<b>40,708,362,190</b>	<b>351,184</b>	<b>39,737,330,679</b>		<b>917,123,070</b>		<b>48,908,441</b>

1 Credit.

FISCAL

VA Gross Expenditures <sup>1</sup>—Fiscal Years 1963–1972

TABLE 72

Fiscal year	Grand total	Medical and administrative expenses					Hospital and domiciliary facilities (construction and related costs)	Compensation and pension	
		Total	General operating expenses	Medical administration and miscellaneous operating expenses	Medical care	Medical and prosthetic research		Total	Compensation and pensions
1972	\$12,778,621,582	\$2,650,982,373	\$290,516,258	\$22,321,769	\$2,269,185,623	\$68,958,723	\$107,335,950	\$6,167,996,446	\$6,045,214,262
1971	11,622,023,722	2,256,979,848	260,146,750	20,186,893	1,913,508,523	63,138,682	80,919,238	5,839,390,281	5,726,457,889
1970	10,289,746,879	2,007,783,909	243,024,802	17,781,534	1,687,622,806	59,354,767	71,153,768	5,357,407,811	5,253,839,611
1969	9,158,983,042	1,735,043,428	206,239,450	14,322,334	1,464,103,543	50,378,100	46,102,621	4,039,409,724	4,848,851,703
1968	8,552,577,463	1,620,046,513	189,640,831	12,762,188	1,372,300,914	45,342,579	47,993,173	4,611,180,743	4,519,304,373
1967	8,121,543,326	1,518,199,132	178,939,727	14,000,224	1,281,231,866	44,027,313	59,957,224	4,494,130,947	4,392,834,057
1966	7,473,628,178	1,406,409,123	164,338,764	13,142,466	1,190,450,963	38,476,932	83,464,488	4,391,943,302	4,305,367,750
1965	7,139,296,223	1,358,061,153	162,763,754	14,137,422	1,144,011,420	37,138,557	76,996,460	4,107,721,051	4,042,143,926
1964	7,061,816,611	1,291,692,430	157,844,559	14,296,645	1,087,847,711	31,704,413	68,576,499	3,959,187,575	3,900,202,888
1963	7,003,948,586	1,246,129,763	158,932,634	15,984,135	1,043,762,387	27,450,611	66,170,410	3,868,465,720	3,814,748,740
Compensation and pension—Continued									
	Statutory burial awards	Special allowance (sec. 412, title 38, U.S.C.)	Mortgage life insurance	Subsistence allowance (ch. 31, title 38, U.S.C.)	Invalid lifts, devices, etc. (sec. 617, title 38, U.S.C.)	Burial flags (sec. 901, title 38, U.S.C.)	Tort claim settlements (sec. 617, title 38, U.S.C.)	Other <sup>2</sup>	Grants for construction of State extended care facilities
1972	\$75,753,044	\$663,017	\$1,850,000	\$42,051,401	\$3,007,622	\$2,257,664	\$37,254	<sup>3</sup> \$2,837,818	\$2,553,288
1971	69,644,373	603,653	-----	39,561,067	2,541,021	2,005,881	92,616	<sup>3</sup> 1,516,219	4,168,114
1970	73,385,181	572,945	-----	27,866,405	1,459,708	1,542,930	172,400	1,400,304	3,451,576
1969	66,949,861	477,137	-----	20,042,537	783,728	1,650,080	90,950	563,724	1,769,335
1968	63,798,148	388,030	-----	15,622,758	419,877	1,463,611	215,085	9,968,857	1,890,043
1967	61,425,288	314,128	-----	13,495,763	175,866	1,119,286	103,500	24,673,055	77,471
1966	58,496,893	248,406	-----	12,055,219	157,874	1,060,419	82,750	14,483,989	-----
1965	56,727,747	138,534	-----	8,936,869	43,575	561,725	272,715	<sup>3</sup> 1,104,043	-----
1964	50,169,202	127,817	-----	7,507,674	22,304	-----	-----	1,157,688	-----
1963	48,072,010	112,269	-----	5,904,839	19,746	-----	-----	<sup>3</sup> 391,884	-----
	National Cancer Institute Public Health Service (transfer to Veterans' Administration)	Grants to the Republic of the Philippines	Servicemen's group life insurance fund	Veterans reopened insurance fund	Veterans special term insurance	Service-disabled veterans insurance	Soldiers' and sailors' civil relief	Military and naval insurance	U.S. Government life insurance
1972	<sup>1</sup> \$70	\$1,954,474	\$113,341,078	\$16,021,871	\$22,629,652	\$18,909,369	\$9,957	\$1,227,405	\$104,217,996
1971	27,379	1,652,300	163,988,014	14,710,802	22,063,259	17,590,247	10,318	1,352,490	101,057,270
1970	1,020,531	1,454,083	135,216,033	13,586,911	21,910,442	23,847,187	2,539	1,519,693	106,955,265
1969	800,750	1,369,022	194,788,657	10,073,725	16,480,391	17,126,352	334	1,741,466	96,385,689
1968	964,936	1,309,692	229,532,406	8,549,402	14,011,961	13,312,743	5,827	1,867,140	94,509,559
1967	990,312	445,809	150,449,931	9,054,310	19,844,577	13,828,964	2,796	2,016,259	97,216,854
1966	938,419	326,048	79,619,142	9,330,355	17,509,282	12,793,723	7,873	2,262,913	94,861,296
1965	1,007,250	360,303	-----	2,987,212	11,426,839	11,521,826	23,945	2,198,332	97,273,775
1964	1,160,261	258,345	-----	-----	19,590,061	10,856,011	22,831	2,372,299	97,560,092
1963	1,143,315	300,621	-----	-----	11,189,733	10,069,824	22,513	2,398,392	108,642,189

See footnotes at end of table

TABLE 72—CONTINUED

FISCAL

VA Gross Expenditures <sup>1</sup>—Fiscal Years 1963—1972—Continued

	National service life insurance	Servicemens' indemnities	Readjustment benefits						
			Total	Vocational rehabilitation of disabled veterans	Post-Korean conflict veterans' educational assistance	Sons and daughters and wives and widows educational assistance	Automobiles and other conveyances for disabled veterans	Specially adapted housing for disabled veterans	Education and training prior laws and other miscellaneous expenditures
1972.....	\$958,006,040	\$5,883	\$1,935,797,731	\$22,937,790	\$1,812,434,284	\$76,631,860	\$10,539,775	\$7,068,429	\$6,185,593
1971.....	859,289,985	743	1,631,738,617	19,168,047	1,521,699,607	70,644,290	6,642,228	8,016,871	5,567,574
1970.....	877,780,135	16,443	1,018,861,723	13,776,262	938,775,099	51,927,780	5,856,799	7,785,818	739,965
1969.....	741,623,221	7,841	678,903,395	9,922,707	614,736,833	40,320,423	4,931,648	4,952,552	4,039,230
1968.....	728,478,285	40,920	461,506,628	7,132,409	407,047,466	37,104,563	3,467,763	4,416,178	3 406,084
1967.....	755,190,359	564,136	297,601,152	5,990,558	251,651,864	34,322,084	827,998	4,485,431	3 78,635
1966.....	654,392,770	4,724,313	42,097,184	5,371,195	31,112,561	25,570,005	929,755	4,817,823	11,488
1965.....	655,721,331	9,967,695	49,392,151	5,596,588	118,621	176,816,043	1,144,004	5,208,088	11,858,470
1964.....	691,018,072	14,913,868	68,827,750	4,249,633	93,119	178,816,043	1,287,528	4,723,825	33,935,701
1963.....	782,559,854	22,035,789	95,565,684	3,338,169	90,983	179,872,023	1,017,823	3,458,959	62,462,857
	Vocational rehabilitation revolving fund	Direct loans to veterans	Loan guaranty revolving fund	Construction, Corregidor-Bataan Memorial	Rental, maintenance and repair of quarters	Supply fund	General Post Fund	Personal funds of patients	All others
1972.....	\$378,464	\$113,126,877	\$322,052,753	-----	\$180,281	\$182,937,825	\$2,603,569	\$55,796,420	\$556,150
1971.....	351,058	147,134,261	268,240,129	-----	142,653	150,744,832	2,480,062	57,341,699	649,364
1970.....	302,370	180,403,169	248,961,391	76,138	101,842	125,888,435	2,398,790	59,051,066	600,609
1969.....	6,348	208,546,050	282,955,331	778,153	107,681	123,347,400	2,228,408	59,188,589	201,315
1968.....	14,111	208,381,593	328,098,576	519,956	114,530	120,172,974	2,242,756	57,837,277	4,700
1967.....	637	161,659,592	368,873,003	7,681	113,325	109,073,081	2,442,812	59,803,006	-----
1966.....	1,132	92,431,897	378,027,450	65,911	114,177	140,047,826	1,910,989	56,857,989	3,442,467
1965.....	1,908	171,394,327	363,926,806	11,474	118,621	162,858,651	1,410,320	53,796,342	233,167
1964.....	30,547	237,279,600	355,313,428	-----	93,119	176,816,043	1,600,343	54,290,727	376,702
1963.....	4,660	246,331,764	309,519,859	-----	90,983	179,872,023	1,571,759	50,774,333	1,067,356

<sup>1</sup> Data for fiscal years 1970-72 are on an accrued expenditures basis. Prior year data based on a non-accrual basis.

<sup>2</sup> Expenditures for yellow fever experiments, adjusted service and dependent pay, adjusted service certificates for WWI, death gratuities, change in receivables, etc.

<sup>3</sup> Credit.

NOTE.—Detail may not add to total because of rounding.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Total expenditures <sup>1</sup>	Vocational rehabilitation and education							
		Total		Vocational rehabilitation (title 38, U.S.C., ch. 31)		Sons and daughters of deceased veterans and totally disabled veterans (title 38, U.S.C., ch. 35)		Wives and Widows (title 38, U.S.C., ch. 35)	
		Total number who trained during year	Amount	Total number who trained during year	Amount	Total number who trained during year	Amount	Total number who trained during year	Amount
Grand total.....	\$11,813,879,367	1,960,349	\$1,954,055,335	31,635	\$64,989,191	54,996	\$67,688,226	9,560	\$8,943,634
Foreign countries.....	117,480,732	16,991	14,049,126	7	5,227	4,872	2,915,197	1,042	570,463
U.S. possessions and associated areas.....	119,721,122	14,372	19,750,068	306	682,391	1,132	1,729,744	218	204,868
Puerto Rico.....	117,171,045	13,618	19,162,308	306	682,391	1,121	1,716,775	213	201,026
All others.....	2,550,077	754	587,760			11	12,969	5	3,842
Total United States.....	11,576,677,513	1,928,986	1,920,256,141	31,322	64,301,573	48,992	63,043,285	8,300	8,168,303
Alabama.....	224,373,729	32,674	36,841,002	930	1,690,310	1,246	1,603,380	315	310,044
Alaska.....	9,360,845	3,147	2,241,045	26	37,667	33	42,491	5	4,917
Arizona.....	135,370,386	28,344	30,001,058	516	1,050,154	1,016	1,307,392	210	206,658
Arkansas.....	167,243,421	16,337	18,089,437	419	787,904	796	1,024,327	140	137,775
California.....	1,203,177,019	299,103	315,837,232	2,467	4,875,782	5,962	7,571,561	1,233	1,213,485
Colorado.....	144,378,300	35,012	34,065,580	845	1,885,089	889	1,143,983	183	180,087
Connecticut.....	134,392,971	24,088	22,308,543	354	777,219	469	603,513	38	37,394
Delaware.....	29,359,379	4,436	4,110,631	73	148,949	92	118,395	8	7,874
District of Columbia.....	224,796,691	27,370	23,364,416	417	874,144	292	375,738	81	79,714
Florida.....	497,806,884	76,979	79,728,888	1,299	2,510,300	3,069	3,949,094	695	683,997
Georgia.....	265,492,095	47,889	48,299,036	724	1,274,938	1,514	1,948,227	354	348,427
Hawaii.....	12,118	12,118	10,882,812	161	290,629	217	279,219	37	36,414
Idaho.....	47,795,752	7,252	7,731,685	169	367,303	229	294,664	33	32,477
Illinois.....	498,681,993	94,670	82,356,691	927	1,923,055	1,035	1,331,852	166	163,358
Indiana.....	220,144,780	38,612	33,893,643	537	1,114,002	712	916,208	112	110,215
Iowa.....	155,075,965	21,299	23,934,306	383	917,453	502	646,005	68	66,915
Kansas.....	137,581,165	21,650	23,741,366	349	674,766	644	828,704	107	105,298
Kentucky.....	193,767,161	21,540	20,998,898	313	628,833	729	938,084	94	92,506
Louisiana.....	208,423,693	28,795	33,783,530	324	626,030	969	1,246,933	218	214,532
Maine.....	68,385,748	7,887	7,510,369	226	504,325	278	357,708	31	30,509
Maryland.....	171,424,199	32,431	27,741,421	406	849,049	707	909,778	127	124,975
Massachusetts.....	368,129,474	46,183	45,653,873	871	2,420,859	1,576	2,027,976	136	133,838
Michigan.....	389,289,331	74,921	72,063,896	1,251	2,375,477	1,456	1,873,553	223	219,460
Minnesota.....	237,200,538	38,679	39,578,920	708	1,304,133	896	1,152,999	56	55,112
Mississippi.....	141,707,944	13,047	14,619,228	265	554,969	794	1,021,743	132	129,901
Missouri.....	274,792,208	42,460	41,871,978	630	1,317,631	818	1,052,634	147	144,661
Montana.....	41,421,526	7,440	7,619,139	114	238,692	199	286,082	25	24,603
Nebraska.....	84,433,937	18,535	13,205,864	319	669,315	472	607,359	58	57,080
Nevada.....	26,942,080	4,868	4,937,008	101	199,616	84	108,119	23	22,634
New Hampshire.....	42,823,024	6,891	6,857,794	231	554,927	212	272,788	23	22,634
New Jersey.....	300,853,880	43,795	43,025,898	762	1,637,748	648	833,874	112	110,215
New Mexico.....	79,077,437	14,403	15,900,867	405	831,153	652	838,980	108	106,278
New York.....	895,133,466	113,621	107,053,003	1,628	3,962,733	2,368	3,097,443	271	266,744
North Carolina.....	277,066,629	41,027	43,605,013	510	1,086,424	1,499	1,928,935	235	231,261
North Dakota.....	31,118,667	7,254	7,389,489	109	200,778	106	136,426	11	10,823
Ohio.....	495,984,944	79,259	66,304,133	1,229	2,713,880	1,402	1,804,110	196	192,878
Oklahoma.....	194,796,023	31,380	34,907,397	716	1,355,922	1,066	1,397,480	205	201,741
Oregon.....	141,285,394	28,394	27,831,045	447	877,128	566	728,339	84	82,663
Pennsylvania.....	615,941,890	88,076	79,244,162	1,248	2,714,627	1,717	2,209,415	164	161,389
Rhode Island.....	60,125,036	10,034	9,915,010	186	516,969	273	351,277	26	25,583
South Carolina.....	136,892,554	24,821	24,639,279	359	655,506	698	898,178	87	85,612
South Dakota.....	52,972,821	7,055	7,008,782	208	442,512	170	218,760	30	29,520
Tennessee.....	254,617,107	35,656	39,400,426	508	982,649	1,067	1,373,020	182	179,106
Texas.....	710,060,493	116,629	126,705,251	3,645	6,727,243	4,222	5,482,938	829	815,866
Utah.....	65,090,621	16,579	15,981,363	289	583,166	459	590,653	63	61,997
Vermont.....	27,014,965	2,981	3,003,239	69	152,631	135	173,747	7	6,886
Virginia.....	254,197,652	34,238	30,085,262	846	1,769,209	1,236	1,690,519	217	213,544
Washington.....	220,867,195	48,368	51,007,177	1,169	2,132,578	1,356	1,744,912	243	239,135
West Virginia.....	128,650,149	12,326	11,177,212	218	390,960	478	615,113	57	56,092
Wisconsin.....	233,427,273	38,950	38,821,650	467	998,267	879	1,131,123	87	85,612
Wyoming.....	28,155,436	3,433	3,481,604	59	129,070	68	87,504	8	7,874

See footnotes at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Vocational rehabilitation and education—Continued		Automobiles and other conveyances for disabled veterans	Homes for paraplegics	Direct loans	Insurance and indemnities	Hospital and domiciliary construction	Medical services and administrative costs
	Post-Korean conflict veterans (title 38, U.S.C., ch. 34)							
	Total number who trained during year	Amount						
Grand total	1,864,158	\$1,812,434,284	\$10,539,775	\$7,068,429	\$82,635,656	\$919,344,314	\$109,889,288	\$2,686,182,308
Foreign countries	11,070	10,558,239	7,132			6,735,083		2,139,276
U.S. possessions and associated areas	12,716	17,133,065	111,960	75,000	5,111	1,696,682	142,313	24,447,826
Puerto Rico	11,978	16,582,116	111,960	62,500	5,111	1,406,450	142,313	24,447,826
All others	738	570,949		12,500		290,232		
Total United States	1,840,372	1,784,742,980	10,420,683	6,993,429	82,630,545	910,912,649	109,746,975	2,658,645,206
Alabama	30,183	33,237,268	123,808	100,000	240,912	13,117,611	4,023,203	52,315,094
Alaska	3,063	2,155,970	11,268		12,500	792,050		2,449,726
Arizona	26,602	27,436,864	141,774	212,500	189,646	8,599,506	418,213	29,178,428
Arkansas	14,982	16,139,431	141,412	87,500	2,783,524	7,902,072	333,080	40,021,466
California	289,441	302,176,404	878,961		883,652	100,694,531	14,487,344	268,274,248
Colorado	33,095	30,856,421	314,960	25,000		9,791,323	243,426	32,590,662
Connecticut	23,227	20,890,417	105,639	50,000		14,858,126	484,101	31,743,769
Delaware	4,263	3,835,413	14,907		550,350	2,328,042	1,092,673	8,751,504
District of Columbia	26,680	22,034,820	532,732		23,603,183	4,773,578	12,610,251	131,282,413
Florida	71,916	72,585,497	540,522	611,892	1,055,114	37,753,807	5,929,711	87,943,521
Georgia	45,297	44,727,444	259,682	161,362	609,787	16,428,390	686,069	54,358,087
Hawaii	11,703	10,276,550	80,515	25,000		2,025,133		3,586,414
Idaho	6,821	7,037,241	22,060	25,000	8,525,863	3,025,376		6,079,062
Illinois	92,642	78,988,326	391,277	309,351	1,316,972	51,548,231	3,560,871	142,905,318
Indiana	37,251	31,783,218	145,467	62,500	1,037,696	21,025,384	817,645	42,960,244
Iowa	20,346	22,303,933	129,325	75,000	576,009	12,165,317	813,650	40,996,041
Kansas	20,550	22,132,598	85,548	12,500	258,273	10,029,535	243,438	38,889,746
Kentucky	20,404	19,339,475	143,360	100,000	3,369,743	12,448,102	7,592,109	34,218,628
Louisiana	27,284	31,697,035	189,131	37,500	883,379	13,687,322	351,537	40,741,089
Maine	7,852	6,617,827	72,823	62,939	987,080	4,513,266	86,564	14,577,128
Maryland	31,191	25,857,339	111,709	149,071	42,436	17,248,368	143,825	35,183,667
Massachusetts	43,600	41,071,200	291,605	215,000		28,330,115	831,019	87,064,558
Michigan	71,991	67,595,356	445,063	212,500	358,823	34,855,225	1,326,315	71,890,127
Minnesota	36,919	37,066,676	196,455	162,500	5,296,675	16,627,984	426,278	58,302,274
Mississippi	11,856	12,912,615	109,615	162,500	253,415	7,866,553	1,068,849	30,424,992
Missouri	40,866	39,357,152	204,002	87,139	1,470,638	20,939,124	2,439,240	63,682,005
Montana	7,102	6,999,762	24,464	47,737	1,997,381	3,282,023	3,487	7,737,493
Nebraska	17,686	11,872,110	84,802	75,000	464,831	6,046,167	356,660	24,706,896
Nevada	4,360	4,606,639	29,883	25,000		2,394,495		5,870,780
New Hampshire	6,425	6,007,445	41,877	87,500		3,554,573	17,939	6,172,177
New Jersey	42,273	40,444,061	242,569	150,000		35,960,021	1,168,532	51,565,348
New Mexico	13,238	14,124,456	49,337	73,724	111,623	4,504,725	487,725	16,068,370
New York	109,354	99,726,063	617,650	320,820	158,798	85,427,783	8,691,796	237,713,719
North Carolina	38,783	40,358,393	202,635	122,647	142,147	17,334,037	2,174,980	57,827,865
North Dakota	7,028	7,041,462	39,905	37,500	262,350	2,114,610	14,948	7,278,655
Ohio	76,432	61,593,265	410,165	386,617	2,759,314	47,828,660	1,984,357	103,617,999
Oklahoma	29,373	31,952,254	159,512	112,408	3,181,923	11,538,215	2,470,224	30,718,863
Oregon	24,297	26,142,915	119,917	112,500	1,840,967	10,489,068	229,792	30,705,796
Pennsylvania	84,947	74,158,731	781,543	317,727	666,690	59,145,501	348,119	138,292,081
Rhode Island	9,549	9,021,181	99,948			4,527,641	127,917	12,332,082
South Carolina	23,177	22,999,983	94,240	100,000	1,427,466	8,787,836	40,839	24,141,155
South Dakota	6,647	6,317,990	39,578		1,442,300	2,656,262	103,323	19,812,478
Tennessee	33,809	36,865,651	273,319	111,502	609,329	15,541,621	389,736	67,601,926
Texas	108,033	113,679,204	639,682	469,965	2,982,543	47,429,225	27,396,045	135,153,453
Utah	15,768	14,745,547	49,459	25,000	4,006,669	3,969,443	203,989	17,575,189
Vermont	2,730	2,669,975				473,427		6,491,629
Virginia	31,939	26,511,990	171,975	187,500	1,069,378	1,853,821	1,166,871	57,958,760
Washington	45,600	46,890,552	225,432	199,986	123,301	15,747,713	627,998	47,167,316
West Virginia	11,115	10,115,047	81,947	50,000	1,368,775	7,848,567	344,830	31,950,370
Wisconsin	37,517	36,608,648	168,639	112,490	1,644,610	18,026,550	232,920	58,822,601
Wyoming	3,298	3,257,156	9,029	25,000	2,316,042	1,784,091		10,990,865

See footnotes at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Number of living and deceased veterans whose dependents were receiving compensation or pension benefits including certain retirement pay as of June 1972, and expenditures for these benefits during fiscal year 1972							
	Total living and deceased veterans						Living veterans	
	Total		Service connected		Non-service connected		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total	4,910,196	\$6,045,214,262	2,558,077	\$3,503,005,817	2,352,119	\$2,542,208,445	3,268,826	\$4,279,953,404
Foreign countries	73,981	94,550,115	47,334	58,620,713	26,647	35,929,402	29,582	42,213,082
U.S. possessions and associated areas	37,163	73,492,162	19,994	49,074,713	17,169	24,417,449	27,045	60,466,080
Puerto Rico	35,791	71,832,577	19,082	47,856,276	16,709	23,976,901	26,216	59,459,236
All others	1,372	1,659,585	912	1,218,437	460	441,148	829	1,006,844
Total United States	4,799,052	5,877,171,985	2,490,749	3,395,310,391	2,308,303	2,481,861,594	3,212,199	4,177,274,242
Alabama	92,129	117,611,499	45,230	63,540,856	46,899	54,070,643	57,934	78,861,766
Alaska	3,377	3,673,356	2,405	2,689,691	972	983,665	2,619	2,841,216
Arizona	47,564	66,628,911	27,458	44,917,274	20,106	21,711,637	33,853	50,203,269
Arkansas	66,233	97,884,930	29,155	52,574,559	37,078	45,310,371	44,374	73,686,045
California	410,272	502,080,758	227,725	315,254,300	182,547	186,826,458	276,751	348,351,796
Colorado	51,286	67,347,349	30,958	45,705,563	20,328	21,641,786	36,194	49,486,963
Connecticut	59,681	64,845,793	35,996	41,650,716	23,685	23,195,077	42,389	47,405,926
Delaware	10,679	12,511,272	5,860	7,502,342	4,819	5,008,930	7,127	8,696,481
District of Columbia	20,331	28,680,118	11,658	18,980,954	8,673	9,699,164	13,605	18,908,457
Florida	208,745	284,232,429	107,917	175,195,404	100,828	109,037,025	143,287	207,662,675
Georgia	108,924	144,689,712	53,881	81,261,005	55,043	63,428,707	68,378	97,134,466
Hawaii	10,339	13,006,779	7,263	9,684,022	3,076	3,322,757	7,377	9,028,288
Idaho	17,611	22,386,726	8,734	12,730,883	8,877	9,655,843	12,471	17,182,567
Illinois	199,255	216,293,382	92,170	107,750,779	107,085	108,542,603	125,163	146,436,383
Indiana	104,963	120,212,201	49,482	63,994,644	55,481	56,217,557	67,089	83,033,247
Iowa	62,559	76,386,317	27,477	39,032,319	35,082	37,353,998	41,212	55,549,212
Kansas	53,308	64,320,759	24,261	33,883,103	29,047	30,437,656	34,408	44,738,675
Kentucky	90,284	114,896,321	41,875	58,418,524	48,409	56,477,797	58,147	79,986,105
Louisiana	90,615	118,780,205	40,329	59,465,010	50,286	59,315,195	57,138	81,372,100
Maine	29,758	40,605,579	14,454	23,192,513	15,304	17,413,066	19,976	29,995,606
Maryland	76,563	90,803,982	42,566	56,622,793	33,997	34,181,189	49,350	60,105,262
Massachusetts	176,730	205,753,304	113,598	140,463,377	63,132	65,289,927	128,526	153,920,451
Michigan	178,601	208,134,412	98,537	126,763,186	80,064	81,371,226	122,550	153,399,673
Minnesota	97,409	116,610,452	49,564	63,764,226	47,845	52,846,226	68,650	87,790,535
Mississippi	64,065	87,212,792	28,400	43,009,029	35,655	44,203,763	40,947	60,392,475
Missouri	118,320	144,147,482	52,369	71,898,474	65,951	72,249,008	76,333	101,376,296
Montana	17,284	20,809,812	8,607	11,689,154	8,677	9,120,658	11,869	15,441,821
Nebraska	31,566	39,493,717	15,162	21,599,460	16,404	17,924,257	21,489	29,140,000
Nevada	11,693	13,684,934	6,877	8,735,349	4,816	4,949,585	8,534	10,323,545
New Hampshire	20,537	26,091,164	11,133	15,993,405	9,404	10,097,759	14,143	19,183,319
New Jersey	160,576	168,741,512	93,458	102,696,349	67,118	66,045,163	110,882	119,385,524
New Mexico	28,525	41,881,066	16,610	27,664,086	11,915	14,216,980	20,446	32,036,407
New York	407,082	455,149,897	229,700	275,704,637	177,382	179,445,260	282,449	330,977,368
North Carolina	116,632	155,657,405	55,370	85,348,052	61,262	70,309,353	73,027	107,146,205
North Dakota	12,104	13,981,200	6,367	7,574,077	5,737	6,407,123	8,542	10,398,424
Ohio	238,211	272,693,699	125,976	157,066,107	112,235	115,827,592	161,079	196,197,417
Oklahoma	81,495	111,707,481	39,150	60,964,274	42,345	50,743,207	55,149	82,659,350
Oregon	57,106	69,956,309	25,222	36,016,389	31,884	33,939,920	39,401	52,477,685
Pennsylvania	296,924	337,146,067	154,000	191,149,675	142,924	145,996,392	194,511	233,413,627
Rhode Island	27,830	33,122,488	16,086	20,968,965	11,744	12,163,523	19,485	24,296,864
South Carolina	60,082	77,661,749	26,525	38,810,639	33,557	38,851,110	35,327	49,398,972
South Dakota	17,461	21,908,098	7,146	10,302,901	10,315	11,605,197	11,863	16,274,584
Tennessee	101,882	130,689,248	45,046	65,420,026	56,836	65,269,222	63,724	89,324,750
Texas	278,442	369,274,328	146,199	217,994,379	132,243	151,279,949	185,707	262,029,814
Utah	19,768	23,279,509	11,144	14,433,790	8,624	8,845,719	13,682	16,987,778
Vermont	10,452	14,008,702	5,267	8,355,699	5,185	5,653,003	6,918	10,164,815
Virginia	106,606	143,703,451	55,881	88,393,222	50,725	55,310,229	68,458	97,166,470
Washington	81,633	105,768,272	44,042	65,662,516	37,691	40,105,556	56,858	78,382,076
West Virginia	58,531	75,828,439	25,085	36,950,443	33,446	38,877,996	38,057	54,148,498
Wisconsin	99,259	115,597,813	47,560	60,585,137	51,699	55,012,676	68,309	85,559,418
Wyoming	7,780	9,598,805	3,814	5,316,114	3,966	4,282,601	5,452	7,213,686

See footnotes at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Living veterans				Deceased veterans					
	Service connected		Non-service connected		Total		Service connected		Non-service connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total.....	2,182,723	\$2,803,327,543	1,066,103	\$1,476,625,861	1,641,370	\$1,765,260,858	375,354	\$609,678,274	1,266,016	\$1,065,582,584
Foreign countries.....	17,924	22,433,848	11,658	19,779,234	44,399	52,337,083	29,410	36,186,865	14,989	16,150,168
U.S. possessions and associated areas.....	17,291	43,958,674	9,754	16,507,406	10,118	13,026,082	2,703	5,116,089	7,415	7,910,043
Puerto Rico.....	16,609	43,136,049	9,607	16,323,187	9,575	12,373,341	2,473	4,720,227	7,102	7,653,114
All others.....	682	822,625	147	184,219	543	652,741	230	365,812	313	256,929
Total United States.....	2,147,508	2,736,935,021	1,064,691	1,440,339,221	1,586,853	1,699,897,743	343,241	658,375,370	1,243,612	1,041,522,373
Alabama.....	36,925	48,176,303	21,009	30,685,463	34,195	38,749,733	8,305	15,364,553	25,890	23,325,180
Alaska.....	2,246	2,359,696	373	451,520	758	832,140	159	329,995	599	502,145
Arizona.....	23,375	36,337,393	10,478	13,515,876	13,711	16,425,642	4,063	8,529,881	9,623	7,895,761
Arkansas.....	23,641	42,985,112	20,733	30,700,933	21,859	24,198,885	5,514	9,599,447	16,345	14,609,438
California.....	193,512	240,571,579	83,239	107,750,217	133,521	153,728,962	34,213	74,682,721	99,308	79,046,241
Colorado.....	26,567	36,520,349	9,627	12,966,514	15,092	17,860,486	4,391	9,185,214	10,701	8,675,273
Connecticut.....	32,717	35,265,028	9,672	12,140,898	17,292	17,439,867	3,279	6,385,688	14,013	11,054,179
Delaware.....	5,181	6,066,249	1,946	2,630,232	3,582	3,514,791	679	1,436,093	2,378	2,378,698
District of Columbia.....	9,674	13,364,897	3,931	5,543,560	6,726	9,771,661	1,984	5,616,067	4,742	4,155,604
Florida.....	90,740	138,142,359	52,547	69,520,316	65,458	76,569,754	17,177	37,053,045	48,281	39,516,700
Georgia.....	43,238	60,083,425	25,140	37,051,041	40,546	47,555,246	10,643	21,177,580	29,903	26,377,666
Hawaii.....	6,103	7,255,249	1,274	1,773,039	2,962	3,973,491	1,160	2,423,733	1,802	1,549,718
Idaho.....	7,656	10,850,630	4,815	6,331,927	5,140	5,204,169	1,078	1,690,253	4,062	3,323,916
Illinois.....	80,766	87,767,169	45,397	58,669,214	73,092	69,856,999	11,404	19,933,610	61,688	49,873,389
Indiana.....	42,791	52,320,743	24,298	30,712,504	37,874	37,178,954	6,691	11,673,901	31,183	25,505,053
Iowa.....	23,532	32,358,655	17,690	23,190,557	21,347	20,837,105	3,945	6,677,532	17,402	14,163,441
Kansas.....	20,017	26,203,371	14,391	18,535,304	18,900	19,582,084	4,244	7,679,732	14,656	11,902,352
Kentucky.....	33,999	45,047,012	24,148	34,939,093	32,137	34,910,216	7,876	13,371,612	24,261	21,538,704
Louisiana.....	33,369	46,517,476	23,769	34,854,624	33,477	37,408,106	6,960	12,947,534	26,517	24,460,571
Maine.....	12,154	19,021,901	7,822	10,973,705	9,782	10,609,973	2,300	4,170,612	7,482	6,439,361
Maryland.....	36,675	43,423,982	12,675	16,681,280	27,213	30,698,720	5,891	13,198,811	21,322	17,499,909
Massachusetts.....	103,066	119,717,131	25,460	34,203,320	48,204	51,832,553	10,332	20,746,246	37,672	31,096,607
Michigan.....	89,153	110,360,396	33,397	43,039,277	56,051	64,734,739	9,394	16,402,790	46,667	38,331,949
Minnesota.....	44,093	54,275,501	24,557	33,515,034	28,759	28,819,917	5,471	9,488,726	23,288	19,331,192
Mississippi.....	22,504	32,199,567	18,443	28,192,908	23,108	26,820,317	5,896	10,899,462	17,212	16,010,855
Missouri.....	44,067	57,291,974	32,276	44,084,322	41,987	42,771,186	8,312	14,606,500	33,675	28,164,686
Montana.....	7,596	9,948,795	4,273	5,493,026	5,415	5,367,991	1,011	1,740,359	4,404	3,627,632
Nebraska.....	12,960	17,605,267	8,529	11,534,733	10,077	10,353,717	2,202	3,964,193	7,875	6,389,524
Nevada.....	6,195	7,321,555	2,339	3,001,987	3,159	3,361,389	682	1,413,791	2,477	1,947,598
New Hampshire.....	9,735	13,148,203	4,408	6,035,116	6,394	6,907,845	1,398	2,845,202	4,996	4,062,643
New Jersey.....	85,194	86,791,893	25,688	32,593,631	49,694	49,355,988	8,264	15,904,456	41,430	33,451,532
New Mexico.....	14,055	22,756,173	6,391	9,280,234	8,079	9,844,659	2,555	4,907,913	5,524	4,936,746
New York.....	208,553	236,254,673	73,896	94,722,690	124,633	124,172,529	21,147	39,449,959	103,486	84,722,570
North Carolina.....	45,111	66,035,730	27,916	41,110,475	43,605	48,511,200	10,259	19,312,322	33,346	29,198,878
North Dakota.....	5,611	6,406,661	2,381	3,992,773	3,562	3,582,776	756	1,168,426	2,806	2,414,350
Ohio.....	112,642	133,267,725	48,437	62,939,692	77,132	76,496,282	13,394	23,908,332	63,736	52,637,900
Oklahoma.....	32,344	48,853,737	22,805	33,805,613	26,346	29,048,131	6,806	12,110,537	19,540	16,937,594
Oregon.....	21,936	29,941,221	17,456	22,536,464	17,705	17,478,624	3,286	6,075,168	14,419	11,403,456
Pennsylvania.....	135,310	157,818,496	59,201	75,595,131	102,413	103,732,440	18,690	33,331,179	83,723	70,401,261
Rhode Island.....	14,439	17,662,020	5,046	6,634,844	8,345	8,825,624	1,647	3,306,945	6,698	5,518,679
South Carolina.....	20,964	27,751,974	14,463	21,646,988	24,755	23,262,777	5,601	11,058,665	19,094	17,204,112
South Dakota.....	6,136	8,618,298	5,717	7,656,286	5,608	5,633,514	1,010	1,694,603	4,598	3,948,911
Tennessee.....	36,173	49,981,427	27,551	39,343,323	38,158	41,364,498	8,873	15,438,599	29,285	25,925,899
Texas.....	121,397	169,545,763	64,310	92,484,046	92,736	107,244,514	24,802	48,448,611	67,933	88,796,908
Utah.....	9,806	11,980,791	3,877	5,006,987	6,086	6,291,731	1,339	2,432,999	4,747	3,838,732
Vermont.....	4,454	6,821,612	2,464	3,343,203	3,534	3,943,887	813	1,534,067	2,721	2,309,900
Virginia.....	45,631	65,843,880	22,827	31,322,690	38,148	46,536,981	10,260	22,649,342	27,888	23,957,639
Washington.....	38,004	53,197,416	18,364	25,184,660	24,775	27,386,196	6,088	12,466,100	18,737	14,921,096
West Virginia.....	20,411	29,435,265	17,646	24,713,233	20,474	21,679,941	4,674	7,515,178	15,800	14,164,763
Wisconsin.....	41,831	50,936,659	26,478	34,622,759	30,960	30,033,396	5,729	9,648,478	23,221	20,389,917
Wyoming.....	3,370	4,487,637	2,082	2,726,049	2,328	2,386,119	444	828,477	1,884	1,566,642

See footnotes at end of table

Estimated Selected Expenditures by State—Fiscal Year 1972

State	World War II									
	Living veterans								Deceased veterans	
	Total		Service connected		Non-service connected		Reserve officers		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total.....	1,846,645	\$2,319,674,483	1,372,083	\$1,654,272,533	474,559	\$665,387,867	3	\$14,093	728,410	\$782,433,805
Foreign countries.....	17,101	20,028,307	14,165	15,391,092	2,936	4,637,215			28,798	30,570,267
U.S. possessions and associated areas.....	8,090	17,322,852	4,378	11,069,236	3,712	6,253,616			2,804	3,704,078
Puerto Rico.....	7,720	16,941,261	4,088	10,798,779	3,632	6,142,482			2,604	3,492,270
All others.....	370	381,591	290	270,457	80	111,134			200	211,808
Total, United States.....	1,821,454	2,282,323,324	1,353,540	1,627,812,205	467,911	654,497,026	3	14,093	696,808	748,159,460
Alabama.....	33,414	43,107,261	23,431	28,719,165	9,983	14,388,096			15,046	16,413,406
Alaska.....	1,429	1,524,725	1,226	1,258,715	203	266,010			413	396,217
Arizona.....	18,231	27,159,523	13,403	20,477,336	4,828	6,682,187			6,127	6,881,286
Arkansas.....	24,666	40,184,966	14,801	25,720,292	9,866	14,464,674			8,662	9,626,517
California.....	150,110	178,897,149	113,475	129,897,816	36,635	48,999,333			57,978	63,856,642
Colorado.....	18,576	24,014,990	14,878	18,749,247	3,698	5,265,743			6,253	6,541,160
Connecticut.....	25,551	26,827,033	21,860	21,790,397	3,691	5,036,636			7,993	8,335,747
Delaware.....	4,042	4,759,403	3,119	3,433,114	923	1,326,289			1,704	1,766,872
District of Columbia.....	7,192	9,541,842	4,981	6,304,389	2,211	3,237,453			2,991	4,326,038
Florida.....	72,728	106,875,536	52,648	78,833,954	20,080	28,041,582			26,384	30,499,460
Georgia.....	39,099	53,611,996	24,999	33,029,345	14,100	20,582,651			18,060	19,969,809
Hawaii.....	3,010	3,684,523	2,647	3,021,298	463	663,225			1,286	1,457,651
Idaho.....	6,721	9,366,355	4,862	6,829,896	1,859	2,536,459			2,213	2,235,361
Illinois.....	72,357	79,772,170	53,962	55,109,733	18,395	24,662,437			32,658	32,262,236
Indiana.....	36,093	42,000,443	27,166	30,381,330	8,927	11,619,113			15,585	15,713,511
Iowa.....	21,225	27,627,639	15,332	19,673,610	5,893	7,954,029			8,368	8,066,543
Kansas.....	18,177	22,662,221	13,101	15,947,805	5,076	6,714,416			7,637	8,140,194
Kentucky.....	34,888	46,196,722	22,720	28,227,388	12,168	17,969,334			13,779	14,994,082
Louisiana.....	33,686	46,094,251	20,964	27,588,547	12,722	18,507,704			15,495	17,220,602
Maine.....	10,947	16,227,242	7,387	11,168,362	3,560	5,058,880			4,004	4,471,239
Maryland.....	27,646	32,433,074	21,936	24,680,715	5,709	7,748,146	1	4,213	12,123	13,318,914
Massachusetts.....	78,666	91,443,613	68,251	76,465,143	10,415	14,978,470			20,847	23,693,175
Michigan.....	70,347	84,386,707	57,381	66,748,942	12,966	17,637,765			25,620	26,145,257
Minnesota.....	36,562	44,856,955	27,646	32,114,834	8,916	12,742,121			11,880	12,390,389
Mississippi.....	24,302	34,348,563	14,262	19,258,248	10,040	15,090,315			9,966	11,393,733
Missouri.....	40,465	51,435,339	27,907	33,753,726	12,558	17,681,613			16,409	17,217,699
Montana.....	6,584	8,346,743	4,787	5,964,986	1,797	2,381,757			2,559	2,514,770
Nebraska.....	11,377	15,236,884	8,237	10,831,615	3,140	4,405,269			4,112	4,326,115
Nevada.....	4,853	5,736,109	3,706	4,232,484	1,147	1,503,625			1,606	1,460,835
New Hampshire.....	7,627	10,074,471	5,667	7,266,591	1,960	2,807,880			2,723	2,958,332
New Jersey.....	68,796	70,404,652	58,849	56,779,776	9,947	13,624,876			23,004	23,817,959
New Mexico.....	11,318	18,116,680	7,886	13,058,443	3,432	5,058,217			3,732	4,324,148
New York.....	175,016	199,429,711	142,393	155,205,318	32,623	44,224,393			59,509	62,436,328
North Carolina.....	40,981	58,251,685	26,943	37,294,523	14,038	20,957,162			19,578	21,002,066
North Dakota.....	4,814	6,574,729	3,703	4,030,225	1,111	1,544,504			1,646	1,586,375
Ohio.....	96,248	111,135,173	75,227	82,330,189	21,021	28,754,984			35,687	36,320,117
Oklahoma.....	29,820	43,818,015	19,176	27,903,279	10,644	15,914,736			10,456	11,501,591
Oregon.....	20,548	26,873,456	13,148	17,045,999	7,400	9,827,457			7,175	7,208,348
Pennsylvania.....	117,735	136,776,454	92,260	102,485,000	25,475	34,291,454			48,231	51,143,223
Rhode Island.....	11,779	14,468,143	9,821	11,721,416	1,958	2,746,727			3,515	3,897,025
South Carolina.....	19,263	26,426,515	11,584	15,008,127	7,679	11,418,388			10,643	11,658,208
South Dakota.....	5,715	7,625,022	3,573	4,779,392	2,142	2,846,230			2,088	2,181,890
Tennessee.....	37,397	49,529,660	23,515	29,998,155	13,882	19,521,505			16,464	17,591,235
Texas.....	105,591	144,616,245	73,553	98,746,562	31,736	45,859,803	2	9,880	40,900	45,933,471
Utah.....	7,428	8,962,232	6,085	7,042,364	1,343	1,919,868			2,729	2,782,050
Vermont.....	3,857	5,646,653	2,851	4,231,153	1,006	1,415,500			1,457	1,647,048
Virginia.....	36,391	49,617,255	25,034	33,932,913	11,357	15,684,342			15,459	18,822,959
Washington.....	28,578	38,309,388	21,114	27,769,625	7,464	10,539,763			9,977	10,645,271
West Virginia.....	22,846	31,955,830	13,291	18,378,227	9,555	13,577,603			9,585	10,454,252
Wisconsin.....	33,834	42,556,268	24,481	29,967,074	9,353	12,589,194			12,711	12,927,340
Wyoming.....	2,928	3,794,530	2,111	2,667,422	817	1,127,108			981	996,832

See footnotes at end of table.

## Estimated Selected Expenditures by State—Fiscal Year 1972

State	World War II				World War I					
	Deceased veterans				Living veterans					
	Service connected		Non-service connected		Total		Service connected		Non-service connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total.....	205,068	\$326,592,799	523,362	\$455,841,006	640,455	\$891,267,454	71,161	\$142,697,347	568,793	\$746,828,487
Foreign countries.....	25,567	26,915,464	3,231	3,654,803	8,931	15,785,879	407	1,088,750	8,523	14,694,517
U.S. possessions and associated areas.....	660	1,272,816	2,144	2,431,262	4,429	7,556,916	83	328,544	4,346	7,228,372
Puerto Rico.....	597	1,193,539	2,007	2,298,731	4,381	7,507,610	78	318,929	4,303	7,188,691
All others.....	63	79,277	137	132,531	4 <sup>a</sup>	49,306	5	9,615	43	39,681
Total United States.....	178,831	298,404,519	517,977	449,754,941	627,095	867,924,659	70,661	141,280,053	555,924	724,905,698
Alabama.....	4,048	6,246,805	10,998	10,166,600	11,357	17,357,383	1,182	2,351,407	10,166	14,977,003
Alaska.....	43	78,022	370	317,195	160	202,606	8	8,862	152	193,744
Arizona.....	1,735	3,134,046	4,392	3,747,239	6,594	9,695,922	1,267	3,025,759	5,314	6,628,845
Arkansas.....	2,892	4,292,878	5,770	5,333,639	11,330	18,158,068	1,137	2,913,731	10,184	15,215,737
California.....	15,393	29,669,855	42,585	34,196,787	51,451	70,124,555	7,952	15,859,113	43,425	54,009,251
Colorado.....	1,761	2,979,101	4,492	3,662,059	6,784	10,118,108	1,211	2,943,317	5,561	7,133,979
Connecticut.....	1,899	3,336,578	6,094	4,999,169	6,662	8,511,056	1,095	1,973,725	5,552	6,519,074
Delaware.....	317	579,597	1,387	1,187,275	1,004	1,296,215	76	139,432	1,150	1,150,252
District of Columbia.....	854	2,426,607	2,137	1,899,431	1,775	2,637,650	358	677,096	1,411	1,839,367
Florida.....	7,795	14,821,097	18,589	15,678,363	35,340	48,069,672	4,411	8,844,627	30,890	39,060,932
Georgia.....	4,792	8,177,400	13,268	11,782,409	10,941	17,177,961	1,244	2,648,704	9,775	14,457,547
Hawaii.....	414	708,716	872	748,935	767	1,100,295	40	103,528	727	996,767
Idaho.....	565	846,090	1,648	1,389,261	3,099	4,199,620	266	603,998	2,833	3,594,563
Illinois.....	6,624	10,449,013	26,034	21,803,223	27,925	35,672,374	2,519	3,839,488	25,389	31,782,455
Indiana.....	3,614	5,513,127	11,971	10,200,384	16,148	20,651,064	1,695	2,830,064	14,446	17,792,196
Iowa.....	2,392	3,583,996	5,976	5,081,547	12,373	16,808,451	1,011	2,176,602	11,361	14,627,848
Kansas.....	2,383	3,662,687	5,254	4,477,507	9,734	12,768,392	817	1,500,684	8,913	11,251,974
Kentucky.....	4,184	6,061,076	9,595	8,933,006	12,661	18,424,459	1,609	2,905,355	11,044	15,493,179
Louisiana.....	3,440	5,652,425	12,055	11,568,177	10,837	16,852,445	806	2,017,328	10,027	14,821,960
Maine.....	1,272	2,013,543	2,732	2,457,696	4,306	6,323,034	372	881,878	3,933	5,431,612
Maryland.....	2,673	5,353,957	9,450	7,964,957	7,520	10,153,654	1,084	1,965,369	6,421	8,134,411
Massachusetts.....	6,131	10,848,852	14,716	12,844,323	17,118	24,082,212	3,254	6,543,525	13,848	17,484,380
Michigan.....	5,579	8,727,018	20,041	17,418,239	20,991	26,662,067	2,019	3,340,609	18,968	23,311,919
Minnesota.....	3,121	4,733,770	8,759	7,636,619	17,184	24,804,682	2,236	5,161,662	14,940	19,617,896
Mississippi.....	2,907	4,511,070	7,059	6,862,063	9,066	14,806,687	1,269	2,675,512	7,793	12,117,284
Missouri.....	4,511	6,864,915	11,898	10,352,784	20,650	28,710,014	1,868	3,682,458	18,762	24,963,589
Montana.....	539	799,592	2,020	1,715,178	2,799	3,807,791	441	861,116	2,367	2,940,803
Nebraska.....	1,266	1,986,427	2,846	2,339,688	5,661	7,846,355	517	1,100,996	5,143	6,742,264
Nevada.....	277	491,891	1,229	968,944	1,300	1,732,055	181	346,644	1,119	1,385,411
New Hampshire.....	719	1,273,206	2,004	1,695,126	2,551	3,664,884	306	667,750	2,243	2,891,709
New Jersey.....	5,006	8,623,427	17,998	15,194,532	16,271	20,107,958	1,523	2,522,993	14,737	17,548,034
New Mexico.....	1,236	2,030,103	2,496	2,298,985	3,145	4,959,128	513	1,265,830	2,630	3,680,961
New York.....	13,446	23,162,434	46,063	39,273,894	42,628	54,371,078	4,554	8,449,038	38,043	45,816,659
North Carolina.....	5,005	8,010,075	14,573	12,991,991	13,837	21,038,371	1,122	2,690,397	12,707	18,318,326
North Dakota.....	406	558,219	1,140	1,028,156	1,969	2,834,809	246	514,212	1,722	2,317,655
Ohio.....	7,509	11,954,614	28,178	24,365,503	28,707	37,246,931	3,440	6,092,705	25,286	31,068,607
Oklahoma.....	3,601	5,390,923	6,855	6,110,668	12,487	19,202,015	1,159	2,621,436	11,324	16,569,046
Oregon.....	1,707	2,773,497	5,468	4,434,851	10,511	13,986,899	980	2,073,019	9,525	11,895,251
Pennsylvania.....	11,450	18,317,811	36,781	32,825,412	35,450	45,396,403	3,861	7,162,556	31,563	38,139,272
Rhode Island.....	950	1,674,192	2,565	2,222,833	3,250	4,319,577	328	663,210	2,920	3,649,883
South Carolina.....	2,464	4,088,904	8,179	7,569,304	6,667	10,193,718	561	996,379	6,105	9,164,833
South Dakota.....	566	801,969	1,622	1,379,921	3,671	5,118,706	336	650,710	3,335	4,467,995
Tennessee.....	4,548	6,729,414	11,916	10,861,821	13,904	20,827,356	1,291	2,735,612	12,604	18,066,593
Texas.....	12,317	20,484,939	28,583	25,448,532	33,854	51,124,264	3,333	7,665,371	30,499	43,383,559
Utah.....	678	1,063,333	2,061	1,728,717	2,746	3,675,645	316	649,591	2,430	2,926,064
Vermont.....	438	741,060	1,019	906,988	1,584	2,285,277	205	471,284	1,378	1,810,898
Virginia.....	4,370	8,183,069	12,089	10,639,834	11,406	16,181,183	1,072	2,202,068	10,314	13,914,961
Washington.....	2,727	4,803,178	7,250	5,842,093	11,870	16,185,832	1,197	2,621,448	10,664	13,533,399
West Virginia.....	2,722	3,952,021	6,863	6,502,231	7,784	10,992,573	585	1,215,980	7,196	9,765,840
Wisconsin.....	3,326	4,887,565	9,385	8,039,775	17,932	23,967,993	1,687	3,131,025	16,239	20,804,722
Wyoming.....	219	350,355	762	646,477	1,342	1,800,303	151	304,870	1,190	1,492,491

See footnotes at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	World War I								Korean conflict	
	Living veterans		Deceased veterans						Living veterans	
	Emergency officer Retirement pay		Total		Service connected		Non-service connected		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total.....	511	\$1,741,620	657,328	\$575,191,488	37,067	\$83,741,214	620,261	\$491,450,274	276,447	\$405,120,604
Foreign countries.....	1	2,612	10,408	11,807,714	565	1,297,008	9,843	10,510,706	948	1,786,661
U.S. possessions and associated areas.....			4,214	4,362,534	157	345,622	4,057	4,016,912	6,870	16,078,648
Puerto Rico.....			4,093	4,286,445	153	339,891	3,940	3,946,554	6,707	15,884,979
All others.....			121	76,089	4	5,731	117	70,358	163	193,669
Total United States.....	510	1,739,008	642,706	559,021,240	36,345	82,098,584	606,361	476,922,656	268,629	387,255,295
Alabama.....	9	28,973	13,228	12,432,270	736	1,601,302	12,492	10,830,968	5,129	7,719,741
Alaska.....			95	83,604	5	11,978	90	71,626	336	367,412
Arizona.....	13	43,318	4,652	4,420,795	618	1,399,529	4,034	3,021,266	3,076	5,386,258
Arkansas.....	9	28,620	9,991	9,601,241	728	1,950,778	9,263	8,010,463	2,981	5,987,922
California.....	74	256,191	47,259	41,424,786	3,748	8,709,337	43,511	32,715,449	26,794	38,091,333
Colorado.....	12	40,812	5,435	5,151,693	634	1,449,436	4,801	3,702,257	3,520	5,300,052
Connecticut.....	5	18,257	7,140	5,917,618	453	1,043,158	6,687	4,874,460	3,480	4,189,325
Delaware.....	2	6,531	1,237	1,034,133	55	130,228	1,182	903,905	684	991,360
District of Columbia.....	6	21,187	2,118	2,142,692	230	582,710	1,888	1,659,982	1,670	2,777,438
Florida.....	49	174,113	26,280	22,908,401	1,668	3,817,726	24,612	19,085,675	11,492	20,012,695
Georgia.....	22	71,710	14,598	13,997,739	1,023	2,289,330	13,575	11,708,409	5,926	9,398,717
Hawaii.....			646	578,637	25	57,241	621	521,396	1,246	1,739,612
Idaho.....		1,059	2,003	1,678,984	99	225,228	1,904	1,453,756	905	1,376,426
Illinois.....	17	49,431	31,285	25,439,207	1,192	2,665,061	30,093	22,774,146	9,307	11,538,595
Indiana.....	7	28,084	16,846	14,032,411	845	1,875,314	16,001	12,157,097	5,114	6,881,617
Iowa.....	1	4,001	10,438	8,664,252	469	1,009,367	9,969	7,654,885	2,690	4,018,542
Kansas.....	4	15,734	8,308	6,849,869	368	822,169	7,940	6,027,700	2,401	3,866,197
Kentucky.....	8	25,925	13,134	12,157,641	865	1,935,973	12,269	10,221,668	4,227	6,211,251
Louisiana.....	4	13,157	13,079	12,410,801	771	1,701,007	12,308	10,709,794	4,986	7,707,767
Maine.....	3	9,544	4,268	3,742,945	200	452,038	4,068	3,290,907	1,685	2,717,359
Maryland.....	15	53,874	10,220	8,759,072	573	1,337,734	9,647	7,421,338	4,910	6,471,857
Massachusetts.....	16	54,307	21,792	19,134,617	1,550	3,607,508	20,242	15,527,109	14,009	16,867,726
Michigan.....	4	9,539	22,887	18,368,200	868	1,955,773	22,019	16,412,427	9,984	14,307,262
Minnesota.....	8	25,035	13,444	11,699,240	885	2,000,242	12,559	9,698,998	5,132	6,877,232
Mississippi.....	4	12,891	9,791	9,976,434	970	2,173,554	8,821	7,802,880	2,949	4,778,384
Missouri.....	20	63,967	19,630	17,011,608	975	2,155,721	18,655	14,855,887	5,548	8,337,460
Montana.....	1	6,072	1,973	1,663,022	109	245,321	1,864	1,417,701	864	1,183,556
Nebraska.....	1	3,095	4,410	3,732,462	223	510,563	4,187	3,221,899	1,746	2,551,724
Nevada.....			946	792,170	58	131,980	888	660,190	785	1,050,624
New Hampshire.....	2	5,425	2,700	2,321,190	175	399,474	2,525	1,921,716	1,201	1,773,781
New Jersey.....	11	36,931	20,844	16,756,304	748	1,739,736	20,096	15,016,568	9,716	11,191,854
New Mexico.....	2	6,437	2,598	2,616,312	315	716,876	2,283	1,899,436	2,030	3,568,484
New York.....	31	105,381	51,581	42,647,799	2,235	5,119,823	49,346	37,527,976	22,697	29,411,759
North Carolina.....	8	29,648	16,466	15,050,068	789	1,762,284	15,677	13,287,784	6,236	9,942,164
North Dakota.....	1	2,942	1,425	1,210,446	67	143,101	1,358	1,066,945	603	813,731
Ohio.....	21	67,619	31,082	25,944,473	1,610	3,584,588	20,472	22,359,885	12,987	17,285,210
Oklahoma.....	4	11,633	11,533	10,464,912	601	1,313,587	10,932	9,151,325	4,304	7,289,960
Oregon.....	6	18,629	7,725	6,383,044	436	961,751	7,289	5,421,293	2,518	3,877,481
Pennsylvania.....	26	94,575	42,511	35,658,891	1,892	4,298,423	40,619	31,360,468	15,195	19,946,330
Rhode Island.....	2	6,484	3,802	3,130,894	139	324,925	3,663	2,805,969	1,496	1,966,400
South Carolina.....	11	42,506	9,618	9,025,445	539	1,207,898	9,079	7,817,547	3,111	4,963,779
South Dakota.....			2,748	2,344,801	117	253,162	2,631	2,091,639	950	1,490,006
Tennessee.....	9	35,151	15,406	14,329,688	923	2,025,737	14,483	12,303,951	4,545	7,130,418
Texas.....	22	75,334	34,923	31,759,532	2,118	4,695,207	32,805	27,064,325	14,846	23,722,169
Utah.....			2,288	1,876,141	139	309,018	2,149	1,567,123	1,199	1,723,807
Vermont.....	1	3,095	1,544	1,406,945	122	277,688	1,422	1,129,257	574	924,443
Virginia.....	20	64,254	13,712	12,362,372	740	1,699,587	12,972	10,662,785	6,635	10,814,806
Washington.....	9	30,985	9,628	8,034,908	539	1,206,816	9,089	6,828,092	5,215	8,038,938
West Virginia.....	3	10,744	7,961	7,067,991	321	716,324	7,640	6,341,667	3,123	5,075,470
Wisconsin.....	6	22,246	14,536	12,029,490	780	1,724,562	13,756	10,304,928	5,462	6,984,170
Wyoming.....	1	2,942	942	808,450	57	130,711	885	677,739	410	614,811

See footnotes at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Korean conflict									
	Living veterans				Deceased veterans					
	Service connected		Non-service connected		Total		Service connected		Non-service connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total.....	240,325	\$351,577,389	36,122	\$53,543,215	118,479	\$148,534,497	39,627	\$72,010,784	78,862	\$76,523,713
Foreign countries.....	870	1,639,666	78	147,006	909	1,502,826	484	1,066,210	425	436,616
U.S. Possessions and associated areas.....	5,296	13,279,577	1,674	2,799,071	1,890	2,703,173	944	1,481,380	946	1,221,798
Puerto Rico.....	5,154	13,116,479	1,553	2,768,500	1,812	2,604,962	909	1,427,263	903	1,177,699
All others.....	142	163,098	21	30,571	78	96,211	35	54,117	43	44,094
Total United States.....	234,169	\$36,668,186	34,470	\$6,697,139	115,680	\$144,323,498	38,199	\$69,468,194	77,481	\$74,806,304
Alabama.....	4,355	6,545,664	774	1,174,077	2,843	3,584,733	1,062	1,818,458	1,781	1,766,240
Alaska.....	823	361,366	13	10,047	122	118,474	14	24,585	108	93,689
Arizona.....	2,791	4,961,919	286	424,339	1,290	1,719,077	460	939,326	830	779,752
Arkansas.....	2,398	5,146,862	563	841,060	1,391	1,718,302	604	968,106	787	750,196
California.....	24,321	34,477,147	2,473	3,614,186	11,457	15,612,513	4,007	8,862,915	7,450	6,759,598
Colorado.....	3,227	4,864,568	293	446,494	1,353	1,766,870	451	906,320	932	861,550
Connecticut.....	3,133	3,709,159	347	490,166	1,149	1,389,915	299	567,565	850	822,350
Delaware.....	600	866,720	84	134,640	267	324,206	66	133,753	201	190,453
District of Columbia.....	1,422	2,392,106	248	365,536	687	1,106,988	270	746,916	367	363,072
Florida.....	10,272	18,185,838	1,220	1,826,857	4,897	7,268,848	2,115	4,708,408	2,782	2,555,445
Georgia.....	4,696	7,555,687	1,230	1,813,030	3,334	4,219,628	1,222	2,233,198	2,112	1,986,436
Hawaii.....	1,169	1,639,034	77	100,578	469	600,786	226	378,900	243	221,886
Idaho.....	803	1,212,016	102	164,410	445	517,917	108	191,231	337	326,686
Illinois.....	7,967	9,715,824	1,340	1,822,771	5,074	5,527,476	1,238	1,883,666	3,886	3,643,811
Indiana.....	4,366	5,866,040	749	1,015,477	2,709	3,060,006	720	1,101,363	1,989	1,945,633
Iowa.....	2,353	3,545,314	337	473,228	1,341	1,507,723	409	607,644	932	900,079
Kansas.....	2,085	3,430,279	316	436,918	1,290	1,536,890	456	760,647	894	773,213
Kentucky.....	3,422	4,972,806	806	1,236,446	2,310	2,746,126	940	1,362,902	1,370	1,363,224
Louisiana.....	4,067	6,338,555	919	1,369,212	2,437	3,082,227	890	1,488,852	1,547	1,593,375
Maine.....	1,408	2,312,729	277	404,630	701	879,254	268	423,776	436	466,478
Maryland.....	4,427	5,776,818	433	696,039	2,135	2,909,442	667	1,497,032	1,468	1,412,410
Massachusetts.....	12,986	15,394,962	1,023	1,472,764	2,740	3,616,738	958	1,811,352	1,782	1,805,386
Michigan.....	8,756	12,599,646	1,228	1,707,616	4,251	4,776,048	938	1,510,134	3,313	3,265,914
Minnesota.....	4,554	5,962,560	578	914,662	1,835	2,236,570	536	946,266	1,249	1,300,304
Mississippi.....	2,384	3,886,117	565	892,267	1,625	2,088,229	675	1,137,674	950	950,555
Missouri.....	4,718	7,113,781	830	1,223,679	2,915	3,400,542	964	1,552,092	1,951	1,848,450
Montana.....	770	1,049,434	94	134,122	439	488,761	103	168,346	336	320,406
Nebraska.....	1,554	2,269,262	192	292,462	756	876,166	207	342,330	549	533,336
Nevada.....	724	967,716	61	92,908	340	395,727	72	162,477	268	233,250
New Hampshire.....	1,048	1,524,947	153	248,814	452	585,963	144	288,563	308	297,270
New Jersey.....	8,862	9,992,369	854	1,199,485	3,066	3,756,633	792	1,484,214	2,294	2,272,419
New Mexico.....	1,741	3,101,196	289	467,288	804	1,073,982	263	509,404	541	564,878
New York.....	19,242	25,386,335	2,773	4,025,424	7,451	8,842,419	1,931	3,365,127	5,520	5,477,292
North Carolina.....	5,185	8,308,721	1,051	1,633,443	3,312	3,965,376	1,156	1,937,067	2,156	2,026,309
North Dakota.....	520	703,633	33	110,048	338	368,830	99	120,277	239	248,533
Ohio.....	11,210	14,755,181	1,777	2,530,029	5,425	6,065,567	1,345	2,111,390	4,080	3,954,177
Oklahoma.....	3,594	6,199,055	710	1,100,905	1,902	2,371,735	799	1,223,630	1,103	1,088,106
Oregon.....	2,098	3,279,126	420	698,355	1,224	1,407,895	331	592,467	863	815,423
Pennsylvania.....	13,366	17,293,206	1,829	2,653,125	6,317	7,516,821	1,921	3,116,166	4,396	4,400,355
Rhode Island.....	1,357	1,760,332	139	208,068	462	609,479	155	290,089	307	319,410
South Carolina.....	2,506	4,019,091	606	944,838	2,018	2,569,234	722	1,274,545	1,296	1,264,556
South Dakota.....	736	1,135,640	214	304,366	424	539,304	106	182,458	318	350,846
Tennessee.....	3,635	5,746,840	910	1,333,578	2,777	3,186,171	1,047	1,554,243	1,730	1,631,923
Texas.....	13,042	20,970,708	1,804	2,751,461	7,131	9,643,182	2,804	5,510,306	4,327	4,132,577
Utah.....	1,119	1,602,839	80	120,968	543	627,578	124	217,442	419	410,136
Vermont.....	504	821,493	70	102,950	244	292,780	84	130,888	160	161,962
Virginia.....	5,603	9,308,414	1,032	1,606,392	3,213	4,573,583	1,378	2,822,975	1,840	1,750,609
Washington.....	4,676	7,251,527	539	787,411	2,063	2,805,145	724	1,548,920	1,359	1,258,222
West Virginia.....	2,300	3,830,336	823	1,245,134	1,574	1,828,594	670	896,788	904	932,806
Wisconsin.....	4,727	5,994,375	735	989,795	2,058	2,393,078	614	956,331	1,444	1,437,697
Wyoming.....	356	532,839	54	81,972	205	245,405	48	90,945	157	154,460

See footnote at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Vietnam era									
	Living veterans						Deceased veterans			
	Total		Service connected		Non-service connected		Total		Service connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total.....	312,375	\$439,945,338	308,812	\$434,438,259	3,563	\$5,507,079	52,515	\$111,449,318	44,078	\$104,187,650
Foreign countries.....	838	1,751,379	827	1,734,322	11	17,057	1,165	3,025,808	1,077	2,920,431
U.S. possessions and associated areas.....	5,106	14,771,691	5,006	14,584,537	100	187,154	608	1,209,934	561	1,157,609
Puerto Rico.....	4,957	14,496,826	4,859	14,312,495	98	184,331	540	1,068,998	494	1,016,946
All others.....	149	274,865	147	272,042	2	2,823	68	140,936	67	140,663
Total United States.....	306,431	423,422,268	302,979	418,119,400	3,452	5,302,868	50,742	107,213,576	42,440	100,109,610
Alabama.....	4,685	6,672,309	4,620	6,565,773	65	106,536	1,377	3,029,101	1,194	2,870,589
Alaska.....	404	506,661	400	502,845	4	3,816	88	156,743	65	142,745
Arizona.....	3,521	4,762,229	3,493	4,720,896	28	41,333	677	1,525,618	680	1,441,698
Arkansas.....	3,097	5,616,316	3,040	5,526,682	57	89,634	726	1,472,131	629	1,381,875
California.....	27,735	37,701,232	27,441	37,274,949	294	426,283	5,428	12,162,115	4,642	11,510,436
Colorado.....	4,237	6,378,858	4,201	6,319,683	36	59,175	860	2,081,937	745	1,985,679
Connecticut.....	4,000	5,290,437	3,954	5,240,502	46	49,935	327	661,483	268	610,426
Delaware.....	902	1,091,981	897	1,084,528	5	7,453	164	349,189	129	327,996
District of Columbia.....	1,659	2,198,637	1,646	2,182,556	14	16,282	215	476,629	177	449,783
Florida.....	14,211	20,531,065	14,079	20,327,250	132	203,806	2,626	5,962,738	2,323	5,686,541
Georgia.....	7,976	11,421,999	7,882	11,298,032	94	123,967	2,187	4,880,432	1,923	4,666,865
Hawaii.....	1,485	1,713,388	1,480	1,705,113	5	8,275	289	740,749	257	714,368
Idaho.....	1,016	1,395,290	1,007	1,382,506	9	12,784	171	309,284	124	276,462
Illinois.....	10,806	13,596,015	10,631	13,364,615	175	231,400	1,559	2,896,436	1,203	2,591,979
Indiana.....	6,374	9,732,443	6,303	9,616,124	71	116,319	980	1,848,333	756	1,651,129
Iowa.....	3,303	4,944,899	3,264	4,887,473	39	57,426	421	810,995	321	728,714
Kansas.....	2,466	3,304,370	2,437	3,269,437	29	34,933	584	1,282,314	476	1,183,624
Kentucky.....	3,768	5,818,091	3,724	5,733,538	44	84,553	1,139	2,310,951	995	2,186,181
Louisiana.....	4,479	6,842,462	4,400	6,727,774	79	114,688	1,147	2,319,878	941	2,137,587
Maine.....	1,873	3,262,275	1,834	3,204,077	39	58,198	324	688,492	279	646,412
Maryland.....	5,390	7,120,132	5,367	7,073,342	23	46,790	1,013	2,329,826	881	2,224,733
Massachusetts.....	10,520	13,815,968	10,434	13,697,909	86	118,059	864	1,911,397	740	1,806,216
Michigan.....	14,632	20,673,371	14,477	20,433,733	155	239,638	1,423	2,602,047	1,066	2,300,115
Minnesota.....	6,550	7,928,913	6,470	7,777,710	80	151,203	571	1,019,198	442	916,437
Mississippi.....	2,715	3,973,212	2,685	3,913,639	30	59,573	761	1,562,810	650	1,484,652
Missouri.....	6,082	8,398,637	6,020	8,306,363	62	93,184	1,115	2,174,029	894	1,998,632
Montana.....	979	1,353,652	963	1,331,138	16	22,514	164	287,503	121	249,570
Nebraska.....	1,628	2,137,462	1,600	2,096,855	28	40,607	295	568,005	232	520,016
Nevada.....	901	1,069,355	893	1,057,931	8	11,424	174	337,960	139	311,404
New Hampshire.....	1,818	2,621,690	1,797	2,590,554	21	31,136	186	431,494	159	405,306
New Jersey.....	9,752	12,202,632	9,685	12,107,934	67	94,698	965	2,074,986	800	1,940,274
New Mexico.....	2,576	3,714,169	2,553	3,674,276	23	39,893	449	900,739	372	841,823
New York.....	27,945	32,275,996	26,759	31,961,954	286	414,032	2,128	4,060,137	1,668	3,660,965
North Carolina.....	7,560	12,016,494	7,483	11,892,425	77	124,069	2,097	4,618,738	1,819	4,375,327
North Dakota.....	770	763,382	760	739,226	10	14,156	118	213,414	93	188,617
Ohio.....	15,188	21,557,441	14,967	21,234,987	221	332,454	2,014	3,797,789	1,652	3,393,564
Oklahoma.....	5,358	8,372,955	5,261	8,209,129	97	163,826	1,032	2,180,761	899	2,064,502
Oregon.....	3,555	4,989,009	3,499	4,880,155	66	108,854	505	933,612	380	830,425
Pennsylvania.....	15,966	20,172,157	15,799	19,915,725	167	256,432	1,957	3,863,181	1,579	3,547,183
Rhode Island.....	1,861	2,399,619	1,846	2,384,657	15	14,962	183	434,603	159	407,848
South Carolina.....	3,959	5,170,078	3,913	5,096,216	46	73,862	1,183	2,573,702	1,021	2,431,132
South Dakota.....	1,039	1,411,671	1,022	1,388,602	17	23,009	145	276,078	115	251,973
Tennessee.....	4,865	7,672,020	4,789	7,535,572	76	136,448	1,402	2,879,650	1,179	2,687,940
Texas.....	20,065	28,827,718	19,892	28,525,389	173	302,329	4,151	9,028,151	3,679	8,530,072
Utah.....	1,428	1,779,698	1,416	1,759,012	12	20,586	222	476,203	184	442,747
Vermont.....	506	828,793	499	820,641	7	8,152	85	179,503	69	164,941
Virginia.....	8,821	14,201,497	8,759	14,089,083	62	112,414	1,973	4,872,481	1,750	4,681,595
Washington.....	6,807	10,503,229	6,702	10,329,892	105	173,337	1,020	2,298,380	867	2,159,960
West Virginia.....	2,887	4,019,749	2,834	3,933,549	53	86,200	576	1,105,343	479	1,018,731
Wisconsin.....	7,016	8,024,272	6,932	7,896,971	84	127,301	613	1,097,336	461	955,459
Wyoming.....	485	646,560	471	631,629	14	14,931	81	161,972	64	148,462

See footnote at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Vietnam conflict		Mexican border period							
	Deceased veterans		Living veterans						Deceased veterans	
	Non-service connected		Total		Service connected		Non-service connected		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total	8,437	\$7,261,668	488	\$698,216	14	\$70,444	474	\$627,772	352	\$296,033
Foreign countries	88	105,377								
U.S. possessions and associated areas	47	52,325								
Puerto Rico	46	52,052								
All others	1	273								
Total United States	8,302	7,103,966	488	698,216	14	70,444	474	627,772	352	296,033
Alabama	183	158,512	2	3,303			2	3,303	1	1,017
Alaska	23	13,998								
Arizona	97	83,920	5	7,301	1	1,528	4	5,773	4	2,988
Arkansas	97	90,256	10	16,239			10	16,239	3	2,443
California	786	651,679	31	37,514	2	3,590	29	33,924	13	6,714
Colorado	115	96,258	2	5,223	1	4,657	1	566	1	958
Connecticut	59	51,057	15	16,145			15	16,145	6	4,496
Delaware	25	21,193	2	2,780			2	2,780	2	1,448
District of Columbia	36	25,846								
Florida	303	277,197	35	41,413			35	41,413	25	22,190
Georgia	264	214,567	6	11,271			6	11,271	6	4,152
Hawaii	32	26,381								
Idaho	47	32,822	1	2,305			1	2,305		
Illinois	356	304,457	11	14,387	1	1,887	10	12,500	10	7,470
Indiana	224	197,204	16	22,218	1	1,887	15	20,331	12	12,195
Iowa	100	82,281	16	23,171			16	23,171	13	11,626
Kansas	108	98,690	7	33,221	1	24,125	6	9,096	6	6,869
Kentucky	144	124,770	11	14,621			11	14,621	4	3,689
Louisiana	206	182,201	1	833			1	833		
Maine	45	42,080	1	2,180			1	2,180	4	2,818
Maryland	132	105,093	6	5,090			6	5,090	19	15,485
Massachusetts	124	105,181	17	26,641	1	4,154	16	22,487	15	13,849
Michigan	357	301,932	15	15,711	1	1,887	14	13,824	9	8,354
Minnesota	129	102,761	12	34,454	1	18,462	11	15,992	16	16,562
Mississippi	111	98,158		1,642				1,642		
Missouri	221	175,397	11	11,837			11	11,837	9	5,568
Montana	43	37,033								
Nebraska	63	47,989	7	9,496			7	9,496	3	4,940
Nevada	35	26,556								
New Hampshire	27	26,188	20	36,264			20	36,264	10	5,110
New Jersey	165	134,712	9	11,047			9	11,047	3	1,324
New Mexico	77	68,916	8	8,946			8	8,946	3	3,002
New York	460	399,272	26	23,776			26	23,776	28	18,097
North Carolina	278	243,411	16	27,271			16	27,271	4	4,024
North Dakota	25	24,797							2	1,902
Ohio	462	404,225	16	19,812	1	513	15	19,299	13	10,140
Oklahoma	133	116,259	5	8,534			5	8,534	1	880
Oregon	125	103,187	8	10,309	1		7	10,309	9	8,712
Pennsylvania	378	315,998	38	49,446		2,185	38	47,261	34	32,298
Rhode Island	24	26,755	6	3,519			6	3,519	3	1,141
South Carolina	162	142,570	13	15,395			13	15,395	8	4,454
South Dakota	30	23,105	2	4,728			2	4,728	1	431
Tennessee	223	191,710	7	13,368			7	13,368	10	14,935
Texas	572	498,079	26	37,694			26	37,694	17	14,115
Utah	38	32,456	2	1,814			2	1,814		
Vermont	16	14,562	1	613			1	613	4	2,750
Virginia	223	190,886	12	18,293	2	5,569	10	12,724	2	3,345
Washington	153	138,420	7	10,835			7	10,835	6	4,454
West Virginia	97	86,612	2	2,953			2	2,953	1	1,072
Wisconsin	152	141,877	22	32,443			22	32,443	12	8,066
Wyoming	17	13,510	2	2,160			2	2,160		

See footnotes at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Mexican Border period				Regular establishment					
	Deceased veterans				Living veterans					
	Service connected		Non-service connected		Total		Service connected		Special acts	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total.....	1	\$2,693	351	\$293,340	189,877	\$218,417,290	189,804	\$218,401,810	73	\$15,480
Foreign countries.....					1,654	2,577,416	1,654	2,577,416		
U.S. possessions and associated areas.....					2,528	4,696,780	2,528	4,696,780		
Puerto Rico.....					2,430	4,589,367	2,430	4,589,367		
All others.....					98	107,413	98	107,413		
Total United States....	1	2,693	351	293,340	185,695	211,143,094	185,622	211,127,614	73	15,480
Alabama.....			1	1,017	3,328	3,961,277	3,328	3,961,277		
Alaska.....					289	237,909	289	237,909		
Arizona.....			4	2,938	2,408	3,155,470	2,407	3,155,316	1	154
Arkansas.....			3	2,443	2,258	3,649,450	2,256	3,648,925	2	525
California.....			13	6,714	20,247	22,785,174	20,244	22,784,711	3	463
Colorado.....			1	958	3,037	3,603,429	3,036	3,603,043	1	386
Connecticut.....			6	4,496	2,671	2,533,091	2,670	2,532,988	1	103
Delaware.....			2	1,448	487	545,986	487	545,924		62
District of Columbia.....					1,264	1,788,153	1,262	1,787,767	2	386
Florida.....			25	22,190	9,280	11,766,496	9,279	11,766,342	1	154
Georgia.....			6	4,152	4,398	5,450,953	4,395	5,449,947	3	1,006
Hawaii.....					867	786,276	867	786,276		
Idaho.....					718	821,155	718	821,155		
Illinois.....			10	7,470	5,671	5,681,285	5,668	5,680,822	3	463
Indiana.....			12	12,195	3,260	3,584,124	3,252	3,582,194	8	1,930
Iowa.....			13	11,626	1,572	2,071,784	1,571	2,071,655	1	129
Kansas.....			6	6,869	1,572	2,015,307	1,572	2,015,307		
Kentucky.....			4	3,689	2,529	3,177,776	2,515	3,175,082	14	2,694
Louisiana.....					3,128	3,834,115	3,128	3,834,115		
Maine.....			4	2,818	1,151	1,445,465	1,150	1,445,311	1	154
Maryland.....			19	15,485	3,846	3,870,037	3,845	3,869,651	1	386
Massachusetts.....			15	13,849	8,124	7,554,098	8,184	7,554,098		
Michigan.....			9	8,354	6,515	7,226,040	6,515	7,226,040		
Minnesota.....			16	16,562	3,178	3,215,258	3,178	3,215,258		
Mississippi.....					1,900	2,446,709	1,899	2,446,555	1	154
Missouri.....			9	5,568	3,524	4,372,664	3,524	4,372,633		31
Montana.....					634	736,049	634	736,049		
Nebraska.....			3	4,940	1,051	1,312,834	1,050	1,312,680	1	154
Nevada.....					691	726,783	691	726,783		
New Hampshire.....			10	5,110	915	1,092,936	915	1,092,936		
New Jersey.....			3	1,324	6,264	5,351,890	6,264	5,351,890		
New Mexico.....			3	3,002	1,360	1,649,991	1,360	1,649,991		
New York.....			28	18,097	14,896	15,241,248	14,891	15,239,987	5	1,261
North Carolina.....			4	4,024	4,374	5,820,994	4,370	5,820,016	4	978
North Dakota.....			2	1,902	381	415,363	381	415,363		
Ohio.....	1	2,693	12	7,447	7,819	8,717,049	7,814	8,716,107	5	942
Oklahoma.....			1	880	3,151	3,919,562	3,150	3,919,305	1	257
Oregon.....			9	8,712	2,203	2,638,677	2,203	2,638,677		
Pennsylvania.....			34	32,298	9,999	10,865,379	9,998	10,865,250	1	129
Rhode Island.....			3	1,141	1,085	1,125,921	1,085	1,125,921		
South Carolina.....			8	4,454	2,300	2,598,804	2,299	2,598,644	1	160
South Dakota.....			1	431	469	613,894	469	613,894		
Tennessee.....			10	14,935	2,940	4,019,877	2,933	4,018,423	7	1,454
Texas.....			17	14,115	11,253	13,543,729	11,252	13,543,536	1	193
Utah.....					869	926,985	869	926,985		
Vermont.....			4	2,750	394	473,946	394	473,946		
Virginia.....			2	3,345	5,145	6,242,351	5,141	6,241,579	4	772
Washington.....			6	4,454	4,306	5,193,939	4,306	5,193,939		
West Virginia.....			1	1,072	1,697	2,063,733	1,697	2,063,733		
Wisconsin.....			12	8,066	3,997	3,923,744	3,997	3,923,744		
Wyoming.....					280	347,935	280	347,935		

See footnotes at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Regular establishment						Spanish-American War			
	Deceased veterans						Living veterans			
	Total		Service connected		Special acts		Total		Service connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total.....	49,194	\$112,345,674	49,177	\$112,342,170	17	\$3,504	2,538	\$4,828,168	20	\$114,048
Foreign countries.....	1,713	3,977,400	1,713	3,977,400			110	283,440		
U.S. possessions and associated areas.....	380	856,718	380	856,718			22	39,193		
Puerto Rico.....	319	740,694	319	740,694			21	39,193		
All others.....	61	116,024	61	116,024			1			
Total United States.....	47,101	107,511,566	47,064	107,608,052	17	3,504	2,406	4,505,535	20	114,048
Alabama.....	1,259	2,815,219	1,259	2,815,219			19	40,492		4,044
Alaska.....	32	72,415	32	72,415			1	1,903		
Arizona.....	689	1,610,845	689	1,610,845			18	36,566		1,321
Arkansas.....	658	1,348,145	658	1,348,145			32	73,064		
California.....	6,392	15,872,793	6,390	15,872,312	2	481	383	714,839	3	18,062
Colorado.....	798	1,861,017	798	1,861,017			38	66,203	1	5,032
Connecticut.....	358	823,817	358	823,817			20	38,839		
Delaware.....	112	264,519	112	264,519			6	8,756		
District of Columbia.....	450	1,404,188	450	1,404,188			45	64,737		
Florida.....	3,246	7,945,697	3,245	7,945,625	1	72	201	365,808	2	10,235
Georgia.....	1,675	3,792,196	1,675	3,792,196			32	61,569		
Hawaii.....	237	567,261	237	567,261			2	4,194		
Idaho.....	179	334,915	179	334,915			11	21,406		
Illinois.....	1,135	2,365,321	1,135	2,365,321			85	189,705	1	5,399
Indiana.....	741	1,494,284	739	1,493,815	2	469	84	161,448	2	14,310
Iowa.....	340	713,961	340	713,961			33	54,726		
Kansas.....	558	1,243,872	558	1,243,872			51	88,967		
Kentucky.....	883	1,797,631	880	1,797,090	3	541	63	143,186	1	6,919
Louisiana.....	918	1,967,663	918	1,967,663			21	40,227		
Maine.....	282	624,949	282	624,949			11	18,061		
Maryland.....	1,088	2,760,036	1,087	2,759,856	1	180	32	51,418		
Massachusetts.....	1,147	2,657,589	1,146	2,657,409	1	180	72	130,193		3,033
Michigan.....	924	1,887,253	923	1,887,073	1	180	66	128,515		
Minnesota.....	482	958,998	482	958,998			32	73,141		
Mississippi.....	692	1,517,249	692	1,517,249			15	38,278	1	6,605
Missouri.....	961	2,019,227	961	2,019,227			53	110,445		56
Montana.....	136	271,849	136	271,849			9	14,030		
Nebraska.....	271	599,193	271	599,193			19	45,245	1	764
Nevada.....	136	315,646	136	315,646			4	8,619		
New Hampshire.....	198	473,506	198	473,506			11	19,313		
New Jersey.....	913	2,105,778	913	2,105,778			74	115,491		
New Mexico.....	366	803,519	366	803,519			9	19,029		
New York.....	1,849	4,098,309	1,846	4,097,719	3	590	141	223,810	1	6,665
North Carolina.....	1,486	3,217,920	1,486	3,217,920			23	49,226		
North Dakota.....	91	188,212	91	188,212			5	6,410		
Ohio.....	1,296	2,721,526	1,296	2,721,526			114	226,801	2	10,424
Oklahoma.....	902	1,997,410	902	1,997,410			24	48,309		
Oregon.....	428	905,457	428	905,457			48	101,854	1	5,616
Pennsylvania.....	1,835	4,025,413	1,835	4,025,413			128	207,468		
Rhode Island.....	243	607,868	243	607,868			8	13,685		
South Carolina.....	911	2,047,324	911	2,047,324			14	30,653		1,011
South Dakota.....	106	195,041	106	195,041			7	9,958		
Tennessee.....	1,156	2,387,134	1,155	2,386,954	1	180	66	122,051	1	1,674
Texas.....	3,971	9,197,073	3,970	9,196,622	1	451	72	157,995	1	8,988
Utah.....	213	428,050	213	428,050			10	17,697		
Vermont.....	97	211,683	97	211,683			2	5,090		
Virginia.....	2,006	5,146,822	2,006	5,146,822			48	91,065		
Washington.....	1,173	2,726,783	1,173	2,726,783			75	139,915		
West Virginia.....	483	932,494	482	932,314	1	180	18	33,190	1	2,695
Wisconsin.....	542	1,111,415	542	1,111,415			46	80,523	1	1,224
Wyoming.....	55	105,071	55	105,071			5	7,387		

See footnotes at end of table.

Estimated Selected Expenditures by State—Fiscal Year 1972

State	Spanish-American War								Civil War	
	Living veterans		Deceased veterans						Deceased veterans	
	Non-service connected		Total		Service connected		Non-service connected		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total	2,518	\$4,714,120	34,317	\$34,138,834	329	\$765,982	33,988	\$33,372,852	641	\$741,321
Foreign countries	110	283,440	1,402	1,449,879	4	10,352	1,398	1,439,327	3	2,504
U.S. possessions and associated areas	22	39,193	222	189,645	1	1,894	221	187,751		
Puerto Rico	21	39,193	207	179,972	1	1,894	206	178,078		
All others	1		15	9,673			15	9,673		
Total United States	2,386	4,391,487	32,693	32,499,510	324	753,736	32,369	31,745,774	638	738,817
Alabama	19	36,448	417	445,103	6	12,145	411	432,958	23	28,086
Alaska	1	1,903	8	5,687			8	5,687		
Arizona	18	35,245	261	255,303	1	4,438	260	250,865	3	3,058
Arkansas	32	73,064	406	402,822	3	7,665	403	395,157	21	24,362
California	380	696,777	4,944	4,743,608	32	76,386	4,912	4,667,222	31	33,220
Colorado	37	61,171	352	345,705	2	4,661	350	341,044	9	10,347
Connecticut	20	38,839	315	301,262	2	4,144	313	297,118	4	5,529
Delaware	6	8,756	74	72,778			74	72,778	2	1,647
District of Columbia	45	64,737	305	299,447	1	2,689	304	296,758	8	11,420
Florida	199	355,573	1,963	1,932,326	31	73,670	1,932	1,858,656	27	30,140
Georgia	32	61,569	661	667,563	8	19,596	653	647,967	24	32,791
Hawaii	2	4,194	34	32,608	1	2,287	33	30,321		
Idaho	11	21,406	127	126,008	3	6,327	124	119,681	1	226
Illinois	84	154,337	1,340	1,334,556	11	25,415	1,329	1,309,141	25	28,213
Indiana	82	147,138	969	997,043	16	36,869	953	960,174	29	28,146
Iowa	33	54,726	409	443,942	11	25,058	398	418,884	15	17,088
Kansas	51	88,967	496	502,060	3	6,833	493	495,227	19	21,320
Kentucky	62	136,266	863	868,760	12	28,290	851	840,470	23	29,738
Louisiana	21	40,227	394	397,717			394	397,717	6	8,418
Maine	11	18,051	188	188,213	2	4,894	186	183,319	11	12,063
Maryland	32	51,418	604	593,587	9	23,533	595	570,054	8	9,587
Massachusetts	72	127,160	783	788,862	7	14,909	776	773,953	14	14,960
Michigan	66	128,515	918	926,741	9	20,089	909	906,652	16	18,088
Minnesota	32	73,141	470	486,044	4	10,424	466	475,620	7	9,058
Mississippi	14	31,673	254	251,196	2	5,263	252	250,933	18	20,198
Missouri	53	110,389	917	906,292	6	13,947	911	892,345	26	31,724
Montana	9	14,030	141	138,153	3	5,681	138	132,472	2	2,573
Nebraska	18	44,481	225	239,508	3	5,164	222	234,344	3	3,904
Nevada	4	8,619	56	57,688			56	57,295		
New Hampshire	11	19,313	125	122,350	3	5,117	122	117,233		
New Jersey	74	115,491	865	828,172	4	9,061	861	819,111	10	10,666
New Mexico	9	19,029	121	116,473	3	6,128	118	110,345	2	2,494
New York	140	217,145	2,068	2,046,994	21	43,991	2,047	2,003,003	17	18,889
North Carolina	23	49,226	635	625,418	4	9,649	631	615,769	24	24,714
North Dakota	5	6,410	40	42,070			40	42,070	1	1,128
Ohio	112	215,377	1,580	1,602,637	19	40,007	1,561	1,562,630	31	32,435
Oklahoma	24	48,309	508	515,483	4	10,485	504	504,998	11	13,419
Oregon	47	96,238	634	624,924	4	11,571	630	613,353	2	3,105
Pennsylvania	128	207,458	1,499	1,463,519	12	24,703	1,487	1,438,816	24	24,691
Rhode Island	8	13,655	132	140,495	1	2,043	131	138,452	5	4,119
South Carolina	14	29,672	357	362,495	4	8,859	353	353,636	16	20,582
South Dakota	7	9,958	89	90,699			89	90,699	2	1,647
Tennessee	65	130,377	899	923,472	19	51,352	880	872,120	41	50,147
Texas	71	149,007	1,609	1,628,359	13	29,002	1,596	1,599,357	25	33,292
Utah	10	17,697	88	100,328	1	2,409	87	97,919	1	1,411
Vermont	2	5,090	100	100,246	3	7,827	97	92,419	3	2,932
Virginia	48	91,085	753	726,208	6	15,294	747	710,914	24	27,829
Washington	75	139,915	878	860,688	8	18,439	870	842,249	7	7,653
West Virginia	17	35,494	282	285,788			282	285,788	12	14,407
Wisconsin	46	79,304	474	465,705	6	14,096	468	451,609	4	5,965
Wyoming	5	7,387	63	66,405	1	2,933	62	63,472	1	824

See footnotes at end of table.

## Estimated Selected Expenditures by State—Fiscal Year 1972

State	Civil War				Indian War					
	Deceased veterans				Living veterans		Deceased veterans			
	Service connected		Non-service connected		Non-service connected		Total <sup>1</sup>		Non-service connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Grand total .....	16	\$33,086	625	\$708,285	1	\$1,851	134	\$129,888	133	\$127,942
Foreign countries .....			3	2,504			1	835	1	835
U.S. possessions and associated areas .....										
Puerto Rico .....										
All others .....										
Total United States .....	16	33,086	622	705,781	1	1,851	133	129,053	132	127,107
Alabama .....			23	28,086			1	799	1	799
Alaska .....										
Arizona .....			3	3,058			8	6,723	8	6,723
Arkansas .....			21	24,362			1	2,922	1	2,922
California .....	1	1,480	30	31,740			19	16,571	19	16,571
Colorado .....			9	10,347			1	799	1	799
Connecticut .....			4	5,529						
Delaware .....			2	1,647						
District of Columbia .....	1	2,201	7	9,219			4	3,259	3	2,296
Florida .....			27	30,140			10	9,954	10	8,971
Georgia .....			24	32,791			1	936	1	936
Hawaii .....							1	799	1	799
Idaho .....			1	226			1	1,484	1	1,484
Illinois .....	1	3,156	24	25,057	1	1,851	6	6,048	6	6,064
Indiana .....	1	2,294	28	25,852			3	3,025	3	3,025
Iowa .....	3	4,924	12	12,164			2	1,975	2	1,975
Kansas .....			19	21,320			2	1,726	2	1,726
Kentucky .....			23	29,738			2	1,598	2	1,598
Louisiana .....			6	8,418			1	799	1	799
Maine .....			11	12,063						
Maryland .....	1	1,966	7	7,821			3	2,771	3	2,771
Massachusetts .....			14	14,960			2	1,666	2	1,666
Michigan .....	1	2,588	15	15,500			3	2,751	3	2,751
Minnesota .....	1	2,588	6	6,470			4	3,555	4	3,555
Mississippi .....			18	20,198			1	459	1	459
Missouri .....	1	1,966	25	29,758			5	4,497	5	4,497
Montana .....			2	2,573			1	1,370	1	1,370
Nebraska .....			3	3,904			2	3,424	2	3,424
Nevada .....				564			1	799	1	799
New Hampshire .....										
New Jersey .....	1	1,966	9	8,700			4	4,166	4	4,166
New Mexico .....			2	2,494			4	3,990	4	3,990
New York .....			17	18,889			2	3,557	2	3,557
North Carolina .....			24	24,714			3	2,876	3	2,876
North Dakota .....			1	1,128			1	799	1	799
Ohio .....			31	32,435			2	1,598	2	1,598
Oklahoma .....			11	13,419			1	1,940	1	1,940
Oregon .....			2	3,105			3	3,527	3	3,527
Pennsylvania .....	1	1,480	23	23,211			5	4,703	5	4,703
Rhode Island .....			5	4,119						
South Carolina .....			16	20,552			1	1,355	1	1,355
South Dakota .....			2	1,647			5	4,623	5	4,623
Tennessee .....	2	2,959	39	47,188			3	2,066	3	2,066
Texas .....	1	2,464	24	30,828			8	7,339	8	7,339
Utah .....			1	1,411			2	970	2	970
Vermont .....			3	2,932						
Virginia .....			24	27,829			1	1,438	1	1,438
Washington .....		1,004	7	6,649			3	2,911	3	2,911
West Virginia .....			12	14,407						
Wisconsin .....			4	5,965						
Wyoming .....			1	824				160		160

<sup>1</sup> Excludes the following which are not distributable by State: adjusted service and dependents pay; statutory burial awards and burial flags; special allowances under ch. 23, title 38 U.S.C.; invalid lifts, devices, equipment, etc.; death gratuities; adjusted service certificates World War I; tort claim settlements; mortgage life insurance; funds transferred to Veterans' Administration by National Cancer Institute; vocational rehabilitation revolving fund; loan guaranty revolving fund; rental, maintenance and repair

of quarters; supply revolving fund; general post fund; and personal funds of patients.

<sup>2</sup> Includes \$2,553,288 in grants for construction of state extended care facilities.

<sup>3</sup> Includes 1 service-connected case in the District of Columbia for \$963 and \$983 in Florida for a case which was terminated during fiscal year 1972.

TABLE 74

Veterans' Administration Comparative Consolidated Balance Sheet <sup>1</sup>

FISCAL

	June 30, 1972	June 30, 1971	Increase (decrease)
<b>ASSETS</b>			
<b>Current assets:</b>			
Cash and disbursing authority <sup>2</sup> .....	\$2,669,504,139.19	\$2,386,123,942.62	.....
Accounts receivable.....	64,225,852.66	66,045,539.75	.....
Interest receivable.....	30,790,988.32	31,791,348.10	.....
Advance for bidding at public sales.....	53,959.75	120,332.25	.....
Inventories.....	62,558,935.06	55,314,522.43	.....
Acquired security or collateral property.....	141,532,515.51	123,421,054.73	.....
Accrued reimbursements due from insurance appropriations.....	80,000.00	70,000.00	.....
<b>Total current assets.....</b>	<b>2,968,746,390.49</b>	<b>2,661,886,739.88</b>	<b>\$306,859,650.61</b>
<b>Other assets:</b>			
Loans receivable.....	2,054,378,689.92	2,291,784,425.73	.....
Vendee accounts receivable.....	1,230,138,065.75	1,318,210,320.41	.....
Investments.....	7,735,708,000.00	7,644,667,000.00	.....
Policy liens.....	576,935.29	583,005.67	.....
Deposits with trustee.....	80,916,840.95	59,890,412.56	.....
<b>Total other assets.....</b>	<b>11,101,718,531.91</b>	<b>11,315,035,164.37</b>	<b>(213,316,632.46)</b>
<b>Fixed assets:</b>			
Land, buildings and plants.....	1,796,235,015.35	1,731,300,331.29	.....
Construction and betterments in process.....	231,350,982.23	186,671,046.35	.....
Leasehold improvements.....	347,522.84	296,975.52	.....
Equipment.....	479,921,086.31	457,270,130.86	.....
<b>Total fixed assets.....</b>	<b>2,507,554,586.73</b>	<b>2,375,538,484.02</b>	<b>132,316,102.71</b>
<b>Deferred charges:</b>			
Construction advance.....	3,440,126.80	1,949,291.90	.....
Advance payments on undelivered supplies and services.....	5,522,771.87	1,285,875.08	.....
Advance to employees for travel expenses.....	951,385.32	412,161.47	.....
Value of ADP equipment purchase options.....	1,723,751.31	2,372,571.68	.....
<b>Total deferred charges.....</b>	<b>11,638,035.30</b>	<b>6,019,900.03</b>	<b>5,618,135.27</b>
<b>Total assets.....</b>	<b>16,589,957,544.43</b>	<b>16,358,480,288.30</b>	<b>231,477,256.13</b>
<b>LIABILITIES AND CAPITAL</b>			
<b>Current liabilities:</b>			
Accounts payable.....	658,560,158.10	532,888,780.36	.....
Accrued salaries and wages.....	44,087,425.55	94,763,467.16	.....
Accrued annual leave, canteen service.....	312,110.04	228,531.69	.....
Accrued services and benefits.....	150,346,139.44	128,382,238.11	.....
Undelivered orders, personal funds of patients.....	95,826.53	88,883.94	.....
Employees payroll allotments for U. S. savings bonds.....	1,407,692.83	1,367,444.44	.....
Federal, state and territorial income taxes withheld and FICA taxes.....	7,759,263.20	4,435,772.20	.....
Canteen Service unredeemed coupons.....	30,006.76	.....	.....
Canteen Service withholdings for application.....	123,436.28	160,246.77	.....
Other miscellaneous liabilities, canteen service.....	12,777.97	5,830.21	.....
Accrued interest, U. S. Treasury.....	8,183,688.98	11,333,735.93	.....
Accrued interest on policy liens due general fund.....	153,752.98	175,353.00	.....
Accrued interest on dividend deposits.....	1,875,977.27	5,914,568.05	.....
Accrued reimbursements due insurance fund.....	80,000.00	70,000.00	.....
Premiums paid in advance.....	92,144,000.00	88,777,000.00	.....
Matured contracts payable.....	28,612,597.45	28,351,481.40	.....
Undeposited general fund receipts.....	763,147.14	813,474.42	.....
<b>Total current liabilities.....</b>	<b>994,548,000.52</b>	<b>897,756,807.68</b>	<b>96,791,192.84</b>
<b>Other liabilities:</b>			
Participation certificates outstanding, net.....	1,352,427,569.89	1,507,736,539.26	.....
Insurance program operating reserves.....	8,268,540,003.00	8,216,274,190.00	.....
<b>Total other liabilities.....</b>	<b>9,620,967,572.89</b>	<b>9,724,010,729.26</b>	<b>(103,043,156.37)</b>
<b>Unfunded liabilities:</b>			
Accrued annual leave.....	204,102,694.33	187,316,448.60	.....
Unredeemed coupons.....	267,476.41	267,476.41	.....
<b>Total unfunded liabilities.....</b>	<b>204,370,170.74</b>	<b>187,583,925.01</b>	<b>16,786,245.73</b>
<b>Total liabilities.....</b>	<b>10,819,886,744.15</b>	<b>10,809,351,461.95</b>	<b>10,534,282.20</b>
<b>Accountabilities:</b>			
Funds of patients and incompetent beneficiaries.....	48,041,439.42	48,422,118.64	.....
Policyholders insurance dividend deposit accounts.....	335,928,006.12	295,280,360.22	.....
Borrowers deposits for taxes and insurance.....	53,083,275.27	59,396,973.13	.....
Unapplied insurance collections.....	12,173,888.25	1,737,249.40	.....
Bid deposits and other suspense items.....	4,492,458.40	1,496,397.87	.....
<b>Total accountabilities.....</b>	<b>453,719,067.46</b>	<b>406,333,099.26</b>	<b>47,385,968.20</b>
<b>Capital reserves:</b>			
Insurance fund retained earnings (reserve for contingencies).....	67,480,987.45	78,398,110.13	.....
Direct loan and loan guaranty programs, reserve for losses.....	694,867,751.96	687,369,240.30	.....
<b>Total reserves.....</b>	<b>762,348,739.41</b>	<b>765,767,350.43</b>	<b>(3,418,611.02)</b>
<b>Capital borrowings from U. S. Treasury—interest bearing—direct loan program.....</b>	<b>1,730,077,998.00</b>	<b>1,730,077,996.00</b>	.....
<b>Capital residual.....</b>	<b>2,823,925,997.41</b>	<b>2,646,950,380.66</b>	<b>176,975,616.73</b>
<b>Total liabilities and capital.....</b>	<b>16,589,957,544.43</b>	<b>16,358,480,288.30</b>	<b>231,477,256.13</b>

<sup>1</sup> Contingent liabilities with respect to the guaranty or insurance of loans not shown.

<sup>2</sup> Cash and disbursing authority for annual appropriations reduced by the

unobligated balance returned to the Treasury in accordance with sec. 18, title 7, GAO Policy and Procedures Manual.

## VA Supply Fund Comparative Balance Sheet

	June 30, 1972	June 30, 1971	Increase (decrease)
<b>Assets:</b>			
Cash.....	\$7,838,697.67	\$6,692,547.39	
Advance payments on undelivered orders.....	466,901.11	174,861.44	
Advances to employees.....	14,660.66	14,815.00	
Accounts receivable.....	6,737,245.77	5,488,495.78	
Inventories.....	49,076,876.44	42,180,439.75	
Work in process, service and reclamation division.....	37,741.12	67,079.07	
Work in process, printing and reproduction.....	23,126.66	27,868.50	
Work in process, depot stock.....		41,187.57	
Supply Depot operating equipment less reserve for depreciation.....	881,851.81	865,573.45	
Printing & Reproduction equipment less reserve for depreciation.....	183,622.00	212,864.62	
Marketing center equipment less reserve for depreciation.....	35,533.88	35,161.61	
<b>Total assets.....</b>	<b>64,796,247.01</b>	<b>55,260,304.11</b>	<b>\$9,545,882.90</b>
<b>Liabilities and capital:</b>			
Accrued salaries and wages.....	154,840.35	347,340.55	
Accrued transportation and service costs.....	387,033.14	372,900.95	
Accounts payable.....	15,595,239.77	10,898,340.21	
Advances from other Government agencies.....	291,679.29	16,186.85	
Advance from VA appropriations.....	10,000,000.00	5,000,000.00	
<b>Total liabilities.....</b>	<b>26,428,792.55</b>	<b>16,634,768.56</b>	<b>9,794,023.99</b>
Capital at beginning of period.....	38,623,881.82	38,623,881.82	
Operating profit or loss, <sup>1</sup> current fiscal year.....	1,248,171.09	286,186.04	
Operating profit or loss, <sup>1</sup> prior fiscal year.....	1,826.27	1,244,442.31	
<b>Capital at end of period.....</b>	<b>38,367,454.46</b>	<b>38,615,626.55</b>	<b>1,248,171.09</b>
<b>Total liabilities and capital.....</b>	<b>64,796,247.01</b>	<b>55,260,304.11</b>	<b>9,545,882.90</b>

<sup>1</sup> Credit.

## FISCAL

## TABLE 76

## VA Supply Fund—Statement of Income and Expense—Fiscal Year 1972

INCOME	
Sale of supplies and equipment.....	\$175,891,694.44
Less: cost of goods sold.....	170,826,649.71
<b>Income on sales.....</b>	<b>3,565,044.73</b>
<b>Other income:</b>	
Reimbursable earnings.....	983,773.21
Discounts on purchases.....	1,055,108.68
Increased valuation.....	214,806.21
Station transfers.....	3,744,070.53
Credit allowances.....	924,377.51
Donated income.....	630,911.65
Miscellaneous income.....	12,774.79
Variances and adjustments.....	170,174.02
<b>Total.....</b>	<b>7,585,497.16</b>
<b>Total income.....</b>	<b>11,150,541.89</b>
EXPENSES	
Net transportation costs.....	1,890,082.58
Completed service and reclamation projects.....	868,680.16
Depot storage, handling, etc.....	696,072.05
Maintenance and operation of supply depots.....	4,568,482.51
Donations, reappraisals and write offs.....	284,523.45
Other operating expenses.....	3,949,611.75
Disposal of operating equipment.....	760.47
<b>Total expense.....</b>	<b>11,898,712.96</b>
<b>Operating loss.....</b>	<b>248,171.09</b>

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