some of these slots; and rather than maintaining sufficient LPNs to give medications and perform other tasks normally requiring formal training, Nurse Aides are often assigned to these duties. And so on. Employees who have not undergone the required training to perform certain duties are nevertheless assigned to them. Their pay, of course, remains the same, while management succeeds in further cutting costs.

## Profits Vs. Lives

While employees' salaries constitute the main cost in operating a hospital, costs are also squeezed out in other areas. Profit hospitals typically make available fewer specialized services than other general hospitals. These types of service, though vital to comprehensive patient care, are usually not as profitable as more basic services. In the same vein, equipment representing the latest in medical technology is rarely found in profit hospitals. While much modern equipment incorporates important advances in improving health, it usually does not improve profits. These are merely some of the cost-cutting methods used by profit hospital operators; there



are others. The point is that the pressure of the profit motive keeps costs to a bare minimum, wherever and however this can be accomplished. That suffering people are caught in this insidious squeeze is of demonstrated secondary concern to the hospital owners.

But to make a profit, revenue must exceed costs. How is revenue kept up? One device employed is to limit the stay of the average in-patient. For it is normally the first few days of a patient's confinement that is most profitable. The initial tests, diagnosis, and operation are all highly profitable. As the patient lingers in the hospital, his profitability




**" Yes we treat everyone equally here. All of our employees are overworked..."**