

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. DREIER) is recognized for 5 minutes.

(Mr. DREIER addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Ms. WOOLSEY) is recognized for 5 minutes.

(Ms. WOOLSEY addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BURTON) is recognized for 5 minutes.

(Mr. BURTON of Indiana addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

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CONDITIONS AT WALTER REED ARMY MEDICAL CENTER

The SPEAKER pro tempore (Mrs. CAPPAS). Under the Speaker's announced policy of January 18, 2007, the gentleman from Texas (Mr. CARTER) is recognized for 60 minutes as the designee of the minority leader.

Mr. CARTER. Madam Speaker, I want to rise today before this House to talk about something that weighs on the conscience of every Member in this House, a news story that broke very recently that has upset us all, the conditions at Walter Reed Hospital. Many Members of Congress have gone out there and looked at these conditions, and we are shocked by them.

Every Member that I have spoken to is as concerned as I am. I am particularly concerned because I am from a district that I would argue has probably put more fighters in this war than any district in America, having Fort Hood, Texas, a two division post, the only two division post in the Army in my district. The 4th Infantry Division and the 1st Cavalry Division, along with the 3rd Corps, have deployed now to Iraq on three separate occasions each. The 3rd Corps and the 1st Cavalry are over there right now as we speak and the 4th Infantry Division is gearing back up to go back.

Our soldiers have given a lot of their blood, sweat and tears to this war. They believe in their mission and they go to their mission as heroes, as far as I am concerned. And to learn that someone, whoever they may be, from whatever post in America or around the world, would have substandard conditions at what is supposed to be one of the two or three premier medical facilities for our Army in the country, shocks me and concerns me.

I would think it concerns every Member of this Congress, whether they are for this war or whether they are

against it. But for me in particular, having 50,000 soldiers that depend on me and other Members of this Congress to make sure that we have an adequate facility that gives the absolute best medical care that we can give, that we have that, is important. It is very important. It is actually lifesavingly critical.

Now, first, to get the right picture, I have been to Walter Reed. I have been there on multiple occasions. I have visited one patient as he cycled through there a 9-month period of time, maybe even longer than that.

I will tell you that the emergency care, the intensive care that was given in that unit, I can't say enough good about the doctors, the nurses, the orderlies and everyone who was doing the work there. I think that they gave outstanding service, the kind of service we would expect for our soldiers.

The trauma medicine that is developing and has developed in the military today, from a medical standpoint, and I am no doctor, but I have sat in a courtroom and heard an awful lot of medical testimony, the trauma treatment that we have for our soldiers today is, quite frankly, state-of-the-art in what they can do to save lives, and we, by the procedures we have set up for our soldiers, are saving a lot of lives.

But then we learn that people who are there as holdovers, who are at the recovery side of their phase through Walter Reed, are being housed in substandard housing, where there were rodents and infestations of insects, where there was black mold, which I happen to have personal firsthand experience with, having been moved out of my house for a little over a year because of stachybotrys, black mold, and having had my house totally wrecked to get that stuff out of it. I am very familiar with the health hazards that are claimed for that mold.

To know that soldiers who have given their hard work and suffered an injury of some sort on our behalf are being required to stay in substandard housing such as that, or substandard facilities such as that, it is appalling. Quite frankly, if it turns out that is what the black mold was that they found there, that has health implications that affects the breathing of every human being, and it is very critical that we be concerned with that.

So this is an issue where the light of day needs to shine on it, and we need to talk about it. I hope some of my colleagues will join us later here so we can discuss this matter, because I think it is important. I think it is important, and the American people expect, as I expect, that we will give the best quality health care from beginning to end for every soldier and veteran in the United States.

It is Congress' responsibility to ensure that these medical facilities are providing the best possible care. The buck stops here. We have that responsibility.

I think overall we are very proud of the medical care that is provided for our soldiers. But we can only hope to expend much more time and, if necessary, much more resources to make sure that what is going on at Walter Reed is corrected and that we look to see if there is anything we need to do at every hospital in America.

I want to applaud the Army for getting on this deal right away. They have dispatched officials to inspect the quality of care at 11 hospitals, and they are doing that this week and next. Of course, the President immediately acted and appointed Bob Dole and Donna Shalala to head a bipartisan commission to look into the solution to this problem. I think that is commendable, and I think that clearly shows how much the President and the White House care, as we care, about the health care of our soldiers.

Because I have a major hospital in my district, at Fort Hood, I went this weekend out to Carl Darnall Army Medical Center in my district. This wasn't my first trip there. I have been there on numerous occasions. This hospital serves approximately 50,000 active duty soldiers and airmen, approximately 56,000 family members, and over 40,000 retirees and surviving annuitants. This hospital, quite frankly, we have been working very diligently and we are very hopeful that we will expand Darnall so that it can be bigger and better.

I was not concerned from what I had seen on multiple visits in the past that we would find problems at Darnall. But it seemed like to me that in light of the fact that we had this issue at Walter Reed, which by my visits to the intensive care unit at Walter Reed, I certainly did not see these conditions that are being described at Walter Reed, that I should make sure to talk to the folks, to go look at the hospital, to look at where we are housing our medical holdovers, and just see exactly what is going on at Darnall, too.

I am happy to report, Madam Speaker, quite frankly, I was very impressed. In fact, I went into the rooms where some of our holdover medical folks were. Most of them were Guardsmen. They are living in dormitory-like rooms, dormitory barrack rooms, two to a room, occasionally one to a room, the kind of room I checked my boys into when I checked them into Texas Tech University to go to college. They were the kind of room you would put your child in, you would be happy to put your teenager or young adult child in while they were going to school; clean, well-established, well-furnished, kitchenette-type rooms.

I visited some of the soldiers and asked them how things were working, were things working well there at Darnall. They were pleased. I went into more than one room and dropped in to visit with these folks.

I want to say in defense of the people in the Army Medical Corps, these folks do care about our soldiers. I don't