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House of Representatives

The House met at 10 a.m. and was called to order by the Speaker pro tempore (Mr. FARENTHOLD).

DESIGNATION OF SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,
July 25, 2012.

I hereby appoint the Honorable BLAKE FARENTHOLD to act as Speaker pro tempore on this day.

JOHN A. BOEHNER,
Speaker of the House of Representatives.

MORNING-HOUR DEBATE

The SPEAKER pro tempore. Pursuant to the order of the House of January 17, 2012, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning-hour debate.

The Chair will alternate recognition between the parties, with each party limited to 1 hour and each Member other than the majority and minority leaders and the minority whip limited to 5 minutes each, but in no event shall debate continue beyond 11:50 a.m.

END OF LIFE CARE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oregon (Mr. BLUMENAUER) for 5 minutes.

Mr. BLUMENAUER. Mr. Speaker, our colleague, JIM MCDERMOTT, sent each of us a letter with a Time magazine cover article by Joe Klein entitled ''How to Die.'' This article is jarring to many because it's an issue that most would rather not confront. As a result, there's a great deal of unnecessary pain, confusion, and suffering. It masks one of the most important issues in health care, which, despite the manufactured controversy over ''death panels,'' is a rare, sweet spot in the health care debate. It can improve the quality of life, in some cases the length of life, and most importantly we can help people understand their circumstances and get the care that they want. If this happens, the cost of health care will go down even as satisfaction and quality goes up.

For most Americans, the protocols followed by almost every hospital and practitioner will be to give the maximum amount of the most aggressive care in end-of-life situations. Especially if patients have the money or insurance, they will be hooked up in their final stages of life to be resuscitated, their ribs cracked, and hearts massaged. There will be tubes inserted, chemicals pumped, and defibrillators will shock people, even if they have no awareness of what's going on, other than that they are being tortured.

When people are given the information, resources, and choices, the outcomes are much different. A telling story in The Wall Street Journal last February pointed out how doctors die differently. These are people with knowledge and where money is not usually a consideration. They can get any health care they want, but as a group, they regularly choose less intense, aggressive treatment and more palliative care. They are choosing the comfort and consciousness of being with family and friends in awareness over being hooked up in an ICU and struggling in their last minutes.

Doctors have a better quality of life, and it costs less money. Why can't all Americans spend their final days like doctors? The truth is, they can. My legislation—Personalize Your Health Care—was developed with leaders in health care insurance and palliative care. Patients and doctors alike would help make sure that patients and other health care professionals work with patients to help them understand what they're confronting, what their choices are, determine what works best for them and their families, and then make sure that whatever their decision is, that choice will be honored. Over ninety percent of Americans agree that this is the right approach.

There's an interesting little secret here that extreme treatments not only deteriorate your quality of life, but they're no guarantee of giving you more hours to live. Studies have shown that managing the pain perhaps in the hospice, along with the love and company of families in a familiar setting, in some cases actually leads to patients living longer. People can actually enjoy their remaining hours, and there are more remaining hours to enjoy.

If most of us were to script our departure, it would probably be to go quietly in the middle of the night in the comfort of our own bed. The second-best scenario would be to go at home in that same bed surrounded by family and friends, comfortable, and conversing until the end. The least favored option, I suspect, would be semiconscious with tubes in our bodies in an ICU setting with the institutional hum around and strangers bustling about. Is that anybody's hope for their final memories? Sadly, that's the fate that awaits many people who do not personalize their health care.

I strongly encourage my colleagues to look at this bipartisan legislation, H.R. 1589, and then to do what you can to have a thoughtful and rational conversation about this policy. Let's modernize Medicare to give people the care they want, to find out their choices, and make sure that those choices are respected.

We owe it to the American public, and we owe it to our families and friends to make sure that every American can have the same high quality of life in their final weeks as doctors have.

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HIGH-LEVEL NUCLEAR WASTE

(Mr. SHIMKUS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. SHIMKUS. Mr. Speaker, on June 6, 2012, I offered an amendment to the Energy and Water appropriations bill to do the final scientific study to certify Yucca Mountain as the repository for high-level nuclear waste in this country, and I was joined by a large bipartisan amount from this Chamber, 326 ''yes'' votes, which I appreciate my colleagues who supported this amendment.

Among those in the Michigan delegation, which has 15 Members, there were 11 ''yes'' votes and only four ''no'' votes. Why is this all important? Because what I've tried to do over the past year and a half is help the educational process in explaining where nuclear waste is in this country and where it should be. We did pass a law back in 1982. I wasn't here then. Many of us were not. Then there were amendments to that law in 1987 that said Yucca Mountain in Nevada would be our repository, a long-term geological repository for high-level nuclear waste.

In Michigan, there are five nuclear power plants. They are all located along the Great Lakes. There's three on Lake Michigan, one on, I think, Lake Erie, right next to large bodies of water. Let's compare one of those, Cook, which has high-level nuclear waste on-site next to Lake Michigan, to where it should be, which is Yucca Mountain.

Currently at Cook, there are 1,433 metric tons of uranium of spent fuel on-site. At Yucca Mountain, which should be our single repository, there's currently none. Again, we started this in 1982. If it was at Yucca Mountain, it would be stored 1,000 feet underground. At Cook, it's stored aboveground in pools and in casks. If it was at Yucca Mountain, it would be 1,000 feet above the water table. At Cook, the nuclear waste is 19 feet above the water table. At Yucca Mountain, it would be 100 miles from the Colorado River where it is right next to Lake Michigan.

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Yucca Mountain is obviously a mountain in a desert. There is no safer place.

So, as I mentioned, in the vote total from my colleagues here on the floor, we addressed this on the floor. We took a vote, 326 out of 425. That's a huge bipartisan majority.

Where do the Senators stand on this position? Well, you have three ''yes'' votes and one ''no'' vote. And actually, the ''no'' vote is a very good friend of mine, a former classmate in the House, Senator STABENOW of Michigan, who has voted against moving that nuclear waste out of her State into a mountain underneath the desert.

And part of this process is, because it is now politicized with the majority leader blocking any movement on this—elections have consequences; they matter—and it's time to educate the public throughout the country about which Senators support moving nuclear waste out of their State to a single repository and who does not. And, unfortunately, my friend Senator STABENOW is on the list as not being helpful.

I also have done this numerous times. I have gone through the whole country and covered all the Senators as far as public statements or actual votes. And as you see, we have 55 Senators who said, yes, let's move this to Yucca Mountain. You would think, oh, that is a simple majority. It should be done. But the Senate operates on interesting rules. They have to have 60. We have 22 who have never taken a position, either ''yes'' or ''no'' or any public statement. Some of these have served 5½ years. It's pretty amazing that we have such an important issue pending as this, and the Senate has yet to get on record. If only five of these 22 would say ''yes,'' we could continue to move forward on addressing our nuclear waste issues.

Now, nuclear waste is not just spent nuclear fuel. It's World War II defense waste that might be in Hanford, Washington. It could be scientific waste that might be in Idaho or in Tennessee. And especially after Fukushima Daiichi and the Blue Ribbon Commission, we have to have a single long-term geological repository.

We've gone on record in the House. We passed a law that said it should be Yucca Mountain in Nevada. It's time for the Senators to get past their leadership and do what's in the best interest of this country and their own individual States.

THE SECOND AMENDMENT IS NOT LIMITLESS

The SPEAKER pro tempore. The Chair recognizes the gentleman from Illinois (Mr. QUIGLEY) for 5 minutes.

Mr. QUIGLEY. Mr. Speaker, 2 nights ago, six people were shot inside of 15 minutes in my home city of Chicago. Seven more victims were killed just last weekend by gunfire, including two 16-year-old boys. In Chicago, this year alone, over 200 people have been killed in shootings. And nationwide, every day, 34 people are killed by guns.

In the hours following the horrific tragedy in Colorado, we paused to reflect and send our prayers to families grieving an unimaginable loss. But now is the time to have a national discussion about how to stem these epidemic levels of gun violence.

I wish this tragedy in Aurora were an isolated incident, but it seems to be part of a recurring pattern: 19 people were shot, and eight were killed in Tucson in 2011; 29 people were shot, and 13 died at Fort Hood in 2009; 21 people were shot, and five were killed at Northern Illinois University in 2008; and 17 people were wounded, while 32 people died at Virginia Tech in 2007.

When will we have enough? When will we stand up and say we may not be able to stop every crime, but we can stop some of them and at least minimize the damage of others?

The gun lobby doesn't want us to have this conversation. First, they accuse anyone who tries to spark a national debate about how to mitigate gun violence with exploiting the deaths of innocent people. Yet no one was accused of exploitation when, after Hurricane Katrina, we discussed how to improve FEMA's emergency response, or after a deadly salmonella outbreak, when we debated how to improve public safety.

After such national tragedies, society should engage in a discussion about how to address and potentially prevent such tragedies from happening again. We might not all agree; but this is a democracy, and this is how public policy is made.

Next, the gun lobby seeks to stymie debate by arguing that guns don't kill people, people kill people. I don't buy this argument. I don't buy that there's nothing we can do to stop criminals and the mentally ill from killing if they want to. Sure, we can't stop them with 100 percent certainty; but we can make it a lot harder for would-be assassins.

We can ensure every gun is purchased after a background check, rather than only 60 percent of guns, as is the current case. And we can reduce the fatality rate by banning assault rifles and high-capacity magazines that are designed exclusively for killing dozens of people at once.

Finally, the gun lobby tries to argue that any attempt to regulate gun access is an attempt to restrict all gun access. This is simply not true.

There is such a thing as commonsense, middle-ground gun reform, and most gun owners support it. Eighty-one percent of gun owners support requiring a background check on all firearm purchases.

Yet 40 percent of U.S. gun sales are conducted by private sellers who are not required to perform background checks. These private sellers operate at gun shows where anyone can walk in and buy whatever gun they want. Convicted felons, domestic abusers, the severely mentally ill, and even people on the terrorist watch list can—and do—go into gun shows and buy any gun they want.

Ninety percent of all Americans also support strengthening databases to prevent the mentally ill from buying guns. But, sadly, 10 States have still failed to flag a single person as mentally ill in the national background check database, and 17 other States have fewer than 100 people listed as mentally ill. Over 1 million disqualifying mental health records are still missing from the database.

Finally, we must have a conversation about getting assault weapons and high-capacity magazines, machines designed exclusively for killing people, off the streets. When you have a 100-round clip on your gun, you are not