

Inglis	Miller (CA)	Schaffer, Bob
Istook	Miller (FL)	Scott
Jackson (IL)	Minge	Sensenbrenner
Jackson-Lee	Mink	Serrano
(TX)	Moakley	Sessions
Jefferson	Molinari	Shadegg
Jenkins	Moran (KS)	Shaw
John	Morella	Shays
Johnson (CT)	Myrick	Sherman
Johnson (WI)	Neal	Shimkus
Johnson, E. B.	Nethercutt	Shuster
Johnson, Sam	Neumann	Sisisky
Jones	Ney	Skaggs
Kanjorski	Northup	Skeen
Kaptur	Norwood	Skelton
Kasich	Nussle	Slaughter
Kelly	Oberstar	Smith (MI)
Kennedy (MA)	Obey	Smith (NJ)
Kennedy (RI)	Olver	Smith (OR)
Kennelly	Ortiz	Smith (TX)
Kildee	Oxley	Smith, Adam
Kim	Packard	Smith, Linda
Kind (WI)	Pallone	Snowbarger
King (NY)	Pappas	Snyder
Kingston	Parker	Solomon
Kleccka	Pascrell	Souder
Klink	Pastor	Spence
Klug	Paul	Spratt
Knollenberg	Paxon	Stabenow
Kolbe	Payne	Stearns
Kucinich	Pease	Stenholm
LaFalce	Pelosi	Stokes
LaHood	Peterson (MN)	Strickland
Lampson	Peterson (PA)	Stump
Lantos	Petri	Stupak
Largent	Pickering	Sununu
Latham	Pickett	Talent
LaTourette	Pitts	Tanner
Lazio	Pombo	Tauscher
Leach	Pomeroy	Tauzin
Levin	Porter	Taylor (MS)
Lewis (CA)	Portman	Taylor (NC)
Lewis (GA)	Poshard	Thomas
Lewis (KY)	Price (NC)	Thompson
Linder	Pryce (OH)	Thornberry
Livingston	Quinn	Thune
LoBiondo	Radanovich	Thurman
Lofgren	Rahall	Tiaht
Lowey	Ramstad	Tierney
Lucas	Rangel	Torres
Luther	Redmond	Towns
Maloney (CT)	Regula	Trafficant
Manzullo	Reyes	Turner
Markey	Riggs	Upton
Martinez	Riley	Velazquez
Mascara	Rivers	Vento
Matsui	Rodriguez	Visclosky
McCarthy (MO)	Roemer	Walsh
McCarthy (NY)	Rogan	Wamp
McCollum	Rogers	Waters
McCrery	Rohrabacher	Watkins
McDade	Ros-Lehtinen	Watt (NC)
McDermott	Rothman	Watts (OK)
McGovern	Roukema	Waxman
McHale	Roybal-Allard	Weldon (FL)
McHugh	Royce	Weldon (PA)
McInnis	Rush	Weller
McIntyre	Ryun	Wexler
McKeon	Sabo	Weygand
McKinney	Salmon	White
McNulty	Sanchez	Whitfield
Meehan	Sanders	Wicker
Meek	Sandlin	Wise
Menendez	Sanford	Wolf
Metcalf	Sawyer	Woolsey
Mica	Saxton	Wynn
Millender-	Scarborough	Young (AK)
McDonald	Schaefer, Dan	Young (FL)

NOES—2

Moran (VA)

Murtha

NOT VOTING—17

Barrett (WI)	Lipinski	Owens
Blunt	Maloney (NY)	Schiff
Cox	Manton	Schumer
Eshoo	McIntosh	Stark
Gordon	Mollohan	Yates
Kilpatrick	Nadler	

So the amendment was agreed to.

71.28 RECORDED VOTE

A recorded vote by electronic device was ordered in the Committee of the Whole on the following amendment submitted by Mr. BUYER:

At the end of title VII (page 288, after line 21), insert the following new subtitle:

Subtitle F—Persian Gulf Illness

SEC. 751. DEFINITIONS.

For purposes of this subtitle:
 (1) The term "Gulf War illness" means any one of the complex of illnesses and symptoms that might have been contracted by members of the Armed Forces as a result of service in the Southwest Asia theater of operations during the Persian Gulf War.

(2) The term "Persian Gulf War" has the meaning given that term in section 101 of title 38, United States Code.

(3) The term "Persian Gulf veteran" means an individual who served on active duty in the Armed Forces in the Southwest Asia theater of operations during the Persian Gulf War.

(4) The term "contingency operation" has the meaning given that term in section 101(a) of title 10, United States Code, and includes a humanitarian operation, peace-keeping operation, or similar operation.

SEC. 752. PLAN FOR HEALTH CARE SERVICES FOR PERSIAN GULF VETERANS.

(a) PLAN REQUIRED.—The Secretary of Defense and the Secretary of Veterans Affairs, acting jointly, shall prepare a plan to provide appropriate health care to Persian Gulf veterans (and their dependents) who suffer from a Gulf War illness.

(b) CONTENTS OF PLAN.—In preparing the plan, the Secretaries shall—

(1) use the presumptions of service connection and illness specified in paragraphs (1) and (2) of section 721(d) of the National Defense Authorization Act for Fiscal Year 1995 (Public Law 103-337; 10 U.S.C. 1074 note) to determine the Persian Gulf veterans (and the dependents of Persian Gulf veterans) who should be covered by the plan;

(2) consider the need and methods available to provide health care services to Persian Gulf veterans who are no longer on active duty in the Armed Forces, such as Persian Gulf veterans who are members of the reserve components and Persian Gulf veterans who have been separated from the Armed Forces; and

(3) estimate the costs to the Government to provide full or partial health care services under the plan to covered Persian Gulf veterans (and their covered dependents).

(c) FOLLOW-UP TREATMENT.—The plan required by subsection (a) shall specifically address the measures to be used to monitor the quality, appropriateness, and effectiveness of, and patient satisfaction with, health care services provided to Persian Gulf veterans after their initial medical examination as part of registration in the Persian Gulf War Veterans Health Registry or the Comprehensive Clinical Evaluation Program.

(d) SUBMISSION OF PLAN.—Not later than March 1, 1998, the Secretaries shall submit to Congress the plan required by subsection (a).

SEC. 753. COMPTROLLER GENERAL STUDY OF REVISED DISABILITY CRITERIA FOR PHYSICAL EVALUATION BOARDS.

Not later than March 1, 1998, the Comptroller General shall submit to Congress a study evaluating the revisions made by the Secretary of Defense to the criteria used by Physical Evaluation Boards to set disability ratings for members of the Armed Forces who are no longer medically qualified for continuation on active duty so as to ensure accurate disability ratings related to a diagnosis of a Persian Gulf illness. Such revisions were required by section 721(e) of the National Defense Authorization Act for Fiscal Year 1995 (Public Law 103-337; 10 U.S.C. 1074 note).

SEC. 754. IMPROVED MEDICAL TRACKING SYSTEM FOR MEMBERS DEPLOYED OVERSEAS IN CONTINGENCY OR COMBAT OPERATIONS.

(a) SYSTEM REQUIRED.—Chapter 55 of title 10, United States Code, is amended by insert-

ing after section 1074d the following new section:

“§ 1074e. Medical tracking system for members deployed overseas

“(a) SYSTEM REQUIRED.—The Secretary of Defense shall establish a system to assess the medical condition of members of the armed forces (including members of the reserve components) who are deployed outside the United States or its territories or possessions as part of a contingency operation (including a humanitarian operation, peace-keeping operation, or similar operation) or combat operation.

“(b) ELEMENTS OF SYSTEM.—The system shall include the use of predeployment medical examinations and postdeployment medical examinations (including an assessment of mental health and the drawing of blood samples) to accurately record the medical condition of members before their deployment and any changes in their medical condition during the course of their deployment. The postdeployment examination shall be conducted when the member is redeployed or otherwise leaves an area in which the system is in operation (or as soon as possible thereafter).

“(c) RECORDKEEPING.—The results of all medical examinations conducted under the system, records of all health care services (including immunizations) received by members described in subsection (a) in anticipation of their deployment or during the course of their deployment, and records of events occurring in the deployment area that may affect the health of such members shall be retained and maintained in a centralized location to improve future access to the records.

“(d) QUALITY ASSURANCE.—The Secretary of Defense shall establish a quality assurance program to evaluate the success of the system in ensuring that members described in subsection (a) receive predeployment medical examinations and postdeployment medical examinations and that the record-keeping requirements are met.”.

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by inserting after the item relating to section 1074d the following new item:

“1074e. Medical tracking system for members deployed overseas.”.

SEC. 755. REPORT ON PLANS TO TRACK LOCATION OF MEMBERS IN A THEATER OF OPERATIONS.

Not later than March 1, 1998, the Secretary of Defense shall submit to Congress a report containing a plan for collecting and maintaining information regarding the daily location of units of the Armed Forces, and to the extent practicable individual members of such units, serving in a theater of operations during a contingency operation or combat operation.

SEC. 756. REPORT ON PLANS TO IMPROVE DETECTION AND MONITORING OF CHEMICAL, BIOLOGICAL, AND SIMILAR HAZARDS IN A THEATER OF OPERATIONS.

Not later than March 1, 1998, the Secretary of Defense shall submit to Congress a report containing a plan regarding the deployment, in a theater of operations during a contingency operation or combat operation, of a specialized unit of the Armed Forces with the capability and expertise to detect and monitor the presence of chemical, biological, and similar hazards to which members of the Armed Forces may be exposed.

SEC. 757. NOTICE OF USE OF INVESTIGATIONAL NEW DRUGS.

(a) NOTICE REQUIREMENTS.—Chapter 55 of title 10, United States Code, is amended by adding at the end the following new section:

“§ 1107. Notice of use of investigational new drugs

“(a) NOTICE REQUIRED.—(1) Whenever the Secretary of Defense requests or requires a member of the armed forces to receive an investigational new drug, the Secretary shall provide the member with notice containing the information specified in subsection (d).

“(2) The Secretary shall also ensure that medical providers who administer an investigational new drug or who are likely to treat members who receive an investigational new drug receive the information required to be provided under paragraphs (3) and (4) of subsection (d).

“(b) TIME FOR NOTICE.—The notice required to be provided to a member under subsection (a)(1) shall be provided before the investigational new drug is first administered to the member, if practicable, but in no case later than 30 days after the investigational new drug is first administered to the member.

“(c) FORM OF NOTICE.—The notice required under subsection (a)(1) shall be provided in writing unless the Secretary of Defense determines that the use of written notice is impractical because of the number of members receiving the investigational new drug, time constraints, or similar reasons. If the Secretary provides notice under subsection (a)(1) in a form other than in writing, the Secretary shall submit to Congress a report describing the notification method used and the reasons for the use of the alternative method.

“(d) CONTENT OF NOTICE.—The notice required under subsection (a)(1) shall include the following:

“(1) Clear notice that drug being administered is an investigational new drug.

“(2) The reasons why the investigational new drug is being administered.

“(3) Information regarding the possible side effects of the investigational new drug, including any known side effects possible as a result of the interaction of the investigational new drug with other drugs or treatments being administered to the members receiving the investigational new drug.

“(4) Such other information that, as a condition of authorizing the use of the investigational new drug, the Secretary of Health and Human Services may require to be disclosed.

“(e) RECORDS OF USE.—The Secretary of Defense shall ensure that the medical records of members accurately document the receipt by members of any investigational new drug and the notice required by subsection (d).

“(f) DEFINITION.—In this section, the term ‘investigational new drug’ means a drug covered by section 505(i) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(i)).”

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by adding at the end the following new item:

“1107. Notice of use of investigational new drugs.”

SEC. 758. REPORT ON EFFECTIVENESS OF RESEARCH EFFORTS REGARDING GULF WAR ILLNESSES.

Not later than March 1, 1998, the Secretary of Defense shall submit to Congress a report evaluating the effectiveness of medical research initiatives regarding Gulf War illnesses. The report shall address the following:

(1) The type and effectiveness of previous research efforts, including the activities undertaken pursuant to section 743 of the National Defense Authorization Act for Fiscal Year 1997 (Public Law 104-201; 10 U.S.C. 1074 note), section 722 of the National Defense Authorization Act for Fiscal Year 1995 (Public Law 103-337; 10 U.S.C. 1074 note), and sections 270 and 271 of the National Defense Au-

thorization Act for Fiscal Year 1994 (Public Law 103-160; 110 Stat. 1613).

(2) Recommendations regarding additional research regarding Gulf War illnesses, including research regarding the nature and causes of Gulf War illnesses and appropriate treatments for such illnesses.

(3) The adequacy of Federal funding and the need for additional funding for medical research initiatives regarding Gulf War illnesses.

SEC. 759. PERSIAN GULF ILLNESS CLINICAL TRIALS PROGRAM.

(a) FINDINGS.—Congress finds the following:

(1) There are many ongoing studies that investigate risk factors which may be associated with the health problems experienced by Persian Gulf veterans; however, there have been no studies which examine health outcomes and the effectiveness of the treatment received by such veterans.

(2) The medical literature and testimony presented in hearings on Gulf War illnesses indicate there are therapies, such as cognitive behavioral therapy, which have been effective in treating patients with symptoms similar to those seen in many Persian Gulf veterans.

(b) ESTABLISHMENT OF PROGRAM.—The Secretary of Defense and the Secretary of Veterans Affairs, acting jointly, shall establish a program of cooperative clinical trials at multiple sites to assess the effectiveness of protocols for treating Persian Gulf veterans who suffer from ill-defined or undiagnosed conditions. Such protocols shall include a multidisciplinary treatment model, of which cognitive behavioral therapy is a component.

(c) FUNDING.—Of the funds authorized to be appropriated in section 201(1) for research, development, test, and evaluation for the Army, the sum of \$4,500,000 shall be available for program element 62787A (medical technology) in the budget of the Department of Defense for fiscal year 1998 to carry out the clinical trials program established pursuant to subsection (b).

It was decided in the { Yeas 417 affirmative } Nays 0

¶71.29

[Roll No. 227]

AYES—417

Table listing names of representatives: Abercrombie, Ackerman, Aderholt, Allen, Andrews, Archer, Arney, Bachus, Baesler, Baker, Baldacci, Ballenger, Barcia, Barr, Barrett (NE), Bartlett, Barton, Bass, Bateman, Becerra, Bencisen, Bereuter, Berman, Berry, Bilbray, Bilirakis, Bishop, Blagojevich, Biley, Blumenauer, Boehlert, Boehner, Bonilla, Bonior, Bono, Borski, Boswell, Boucher, Boyd, Brady, Brown (CA), Brown (FL), Brown (OH), Bryant, Bunning, Burr, Burton, Buyer, Callahan, Calvert, Camp, Campbell, Canady, Cannon, Capps, Cardin, Carson, Castle, Chabot, Chambliss, Chenoweth, Christensen, Clay, Clayton, Clement, Clyburn, Coble, Coburn, Collins, Combust, Condit, Conyers, Cook, Cooksey, Costello, Coyne, Cramer, Crane, Crapo, Cubin, Cummings, Cunningham, Danner, Davis (FL), Davis (IL), Davis (VA), Deal, DeFazio, DeGette, Delahunt, DeLauro, DeLay, Dellums, Deutsch, Diaz-Balart, Dickey, Dicks, Dingell, Dixon, Doggett, Dooley, Doolittle, Doyle, Dreier, Duncan, Dunn, Edwards, Ehlers, Ehrlich, Emerson, Engel, English, Ensign, Etheridge, Evans, Everett, Ewing, Farr, Fattah, Fawell, Fazio, Filner, Flake, Foglietta, Foley, Forbes, Ford, Fowler, Fox, Frank (MA), Franks (NJ), Frelinghuysen, Frost, Furse, Gallegly, Ganske, Gejdenson, Gekas, Gephardt, Gibbons, Gilchrest, Gillmor, Gilman, Gonzalez, Goode, Goodlatte, Goodling, Goss, Graham, Granger, Green, Greenwood, Gutierrez, Gutknecht, Hall (OH), Hall (TX), Hamilton, Hansen, Harman, Hastert, Hastings (FL), Hastings (WA), Hayworth, Hefley, Hefner, Herger, Hill, Hilleary, Hilliard, Hinchey, Hinojosa, Hobson, Hoekstra, Holden, Hooley, Horn, Hostettler, Houghton, Hoyer, Hulshof, Hunter, Hutchinson, Hyde, Inglis, Istook, Jackson (IL), Jackson-Lee (TX), Jefferson, Jenkins, John, Johnson (CT), Johnson (WI), Johnson, E. B., Johnson, Sam, Jones, Kanjorski, Kaptur, Kasich, Kelly, Kennedy (MA), Kennedy (RI), Kennelly, Kildee, Kim, Kind (WI), King (NY), Kingston, Kleczka, Klink, Klug, Knollenberg, Kolbe, Kucinich, LaFalce, LaHood, Lampson, Lantos, Largent, Latham, LaTourette, Lazio, Leach, Levin, Lewis (CA), Lewis (GA), Lewis (KY), Linder, Livingston, LoBiondo, Lofgren, Lowey, Lucas, Luther, Maloney (CT), Manton, Manzullo, Markey, Martinez, Mascara, Matsui, McCarthy (MO), McCarthy (NY), McCollum, McCrery, McDermott, McGovern, McHale, McHugh, McInnis, McIntyre, McKeon, McKinney, McNulty, Meehan, Meek, Menendez, Metcalf, Mica, Millender-McDonald, Miller (CA), Miller (FL), Minge, Mink, Moakley, Molinari, Moran (KS), Moran (VA), Morella, Murtha, Myrick, Neal, Nethercutt, Neumann, Ney, Northup, Norwood, Nussle, Oberstar, Obey, Oliver, Ortiz, Owens, Oxley, Packard, Pallone, Pappas, Parker, Pascrell, Pastor, Paul, Paxton, Payne, Pease, Pelosi, Peterson (MN), Peterson (PA), Petri, Pickering, Pickett, Pitts, Pomo, Pomeroy, Porter, Portman, Poshard, Price (NC), Pryce (OH), Quinn, Radanovich, Rahall, Ramstad, Rangel, Redmond, Regula, Reyes, Riley, Rivers, Rodriguez, Roemer, Rogan, Rogers, Rohrabacher, Ros-Lehtinen, Rothman, Roukema, Roybal-Allard, Royce, Rush, Ryun, Sabo, Salmon, Sanchez, Sanders, Sandlin, Sanford, Sawyer, Saxton, Scarborough, Schaefer, Dan, Schaffer, Bob, Scott, Sensenbrenner, Serrano, Sessions, Shadegg, Shaw, Shays, Sherman, Shimkus, Shuster, Sisisky, Skaggs, Skeen, Skelton, Slaughter, Smith (MI), Smith (NJ), Smith (OR), Smith (TX), Smith, Adam, Smith, Linda, Snowbarger, Snyder, Solomon, Souder, Spence, Spratt, Stabenow, Stearns, Stenholm, Stokes, Strickland, Stump, Stupak, Sununu, Talent, Tanner, Tauscher, Tauzin, Taylor (MS), Taylor (NC), Thomas, Thompson, Thornberry, Thune, Thurman, Tiahrt, Tierney, Torres, Towns, Traficant, Turner, Upton, Velazquez, Vento, Visclosky, Walsh, Wamp, Waters, Watkins, Watt (NC), Watts (OK), Waxman, Weldon (FL), Weldon (PA), Weller, Wexler, Weygand, White, Whitfield, Wicker