

did when Japan had agreements with other countries that permitted those countries and the citizens from those countries to sue.

So what we have now is a situation that even after the status of their case and their ability to sue had changed, our State Department became the biggest block to having these heroes from the Bataan Death March exercise their right, because our State Department would intercede in their court cases and undermine their right to sue in court.

What this bill does and why it is necessary to put it on this appropriations bill is, it prevents the State Department from using its resources or its people to interfere with the rights of those American POWs and interfere with their right to take their case to court.

That is why it was important for us to get it on this bill. This was the vehicle. It was written in a way that was ruled in order, so the provision was ruled in order by the Parliamentarian.

This gives us an opportunity to bring justice to these men. They are dying every day. Every day there is another survivor of the Bataan Death March who passes away. All of us have family members who were in World War II, and we are seeing them pass away, at great pain to us. We need to make sure that when they die, they know their country has done right by them.

That is what this is all about. Every day that we postpone this, another number of these men pass into eternity. Let us let them go knowing their country backed them up and appreciated what they did.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mr. OTTER). Without objection, the previous question is ordered on the motion to instruct.

There was no objection.

The SPEAKER pro tempore. The question is on the motion to instruct offered by the gentleman from California (Mr. ROHRBACHER).

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. ROHRBACHER. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

#### APPOINTMENT OF MEMBERS TO BRITISH-AMERICAN INTER-PARLIAMENTARY GROUP

The SPEAKER pro tempore. Without objection, pursuant to 22 United States Code 2761 and clause 10 of rule I, the Chair announces the Speaker's appointment of the following Members of the House to the British-American Interparliamentary Group in addition to Mr. PETRI of Wisconsin, chairman, and Mr. GALLEGLY of California, vice-chairman, appointed on May 1, 2001:

Mr. BEREUTER of Nebraska;  
Mr. TAYLOR of North Carolina;  
Mr. HORN of California;  
Mr. GREEN of Wisconsin;  
Mr. BROWN of South Carolina;  
Mr. SPRATT of South Carolina;  
Mr. PRICE of North Carolina;  
Mr. POMEROY of North Dakota;  
Mr. CLYBURN of South Carolina; and  
Mr. ALLEN of Maine.  
There was no objection.

#### SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2001, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

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

(Mr. BROWN of Ohio 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 Georgia (Mr. COLLINS) is recognized for 5 minutes.

(Mr. COLLINS 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 Ohio (Ms. KAPTUR) is recognized for 5 minutes.

(Ms. KAPTUR 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 the District of Columbia (Ms. NORTON) is recognized for 5 minutes.

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

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#### MEDICAL EDUCATION FOR NATIONAL DEFENSE ACT IN THE 21ST CENTURY

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

Mr. BUYER. Mr. Speaker, today, I have introduced the Medical Education for National Defense Act in the 21st Century, H.R. 3254. I would like to thank the gentleman from New Jersey (Mr. SMITH), the gentleman from Florida (Mr. BILIRAKIS), the gentleman from New York (Mr. MCHUGH), the gentleman from Arkansas (Mr. SNYDER), and the gentleman from Florida (Mr. STEARNS). These are Members of the House Committee on Veterans' Affairs,

Committee on Armed Services and Committee on Energy and Commerce, with whom we have coordinated on this bill.

This legislation would authorize funds to establish partnership between the Department of Veterans' Affairs, the VA, and the Department of Defense, we call DOD, to develop education and training programs on medical responses to the consequences of terrorist activities.

We are fighting a war on terror on two fronts, domestically and overseas. Unfortunately, as a Nation, we are not prepared for the new face of terror that we have been exposed to in the aftermath of the September 11 attacks. What has become all too clear is that our health care providers are not armed with the proper tools to diagnose and treat casualties in the face of nuclear, biological, and chemical weapons.

The events of September 11 have forced the American people to reexamine many facets as to how we live our lives. We have been forced as a Nation to become more aware of our surroundings and more vigilant in the defense of our freedoms.

Most recently, we have come under attack through our own mail systems by terrorists who have used its efficiency to spread the deadly disease of anthrax. The difficulty experienced by government officials and our health care community, in responding to this attack, use infectious diseases rarely seen by medical personnel that should serve as wake-up call for us all.

A Washington Post article on November 1, 2001 by Susan Okie is a perfect illustration of the urgency of our medical community's lack of preparedness to deal with biological, chemical, and nuclear attacks. Ms. Okie reports the accounts of two of the heroic physicians who treated victims of the anthrax attacks: Dr. Susan Matcha, a Washington, D.C. area physician, and Dr. Carlos Omenaca, of Miami, Florida.

Dr. Matcha was quoted as saying, "We're really in uncharted territory here. As much as we want to have literature to look at, we really have nothing to guide us." According to the article, Dr. Omenaca, who encountered a rare form of inhalation anthrax in the case of Ernesto Blanco, found the description of the symptom that Mr. Blanco displayed in a 1901 textbook.

Just think, a doctor in the United States of America, home of the best medical system of the world, this doctor had to use a medical textbook from the first half of the last century to acquire information that he sought on the diagnosis and prognosis of the anthrax. I find that not only unbelievable but unacceptable.

As disturbed as this makes me, we are not here to try to place blame on this predicament to any group or organization. The reason why so many of our medical personnel feel uncomfortable about their ability to respond to these situations is because very few of