the MEDS Act changes that. It updates the law for the 21st century, allowing for groundbreaking research on the potentially lifesaving benefits of medical marijuana.

Compounds found in marijuana have shown promise in treating a wide range of diseases and disorders, but because of bureaucratic redtape and fear, there is a lack of sufficient evidence about the safety and efficacy of these compounds. As a result, millions of Americans are using marijuana for medicinal purposes, nor is there any quality control for the marijuana-based medications that patients eventually use.

Prescribers do not have guidance on appropriate doses, routes of administration, or even the safety of the medical marijuana for populations such as children or the elderly. This lack of oversight creates a dangerous environment that puts American lives at risk. As we continue to encourage the development of new treatments, those with severe medical problems, we must be unremitting in our insistence on scientific rigor. Using only anecdotal information poses a significant public health risk. We lack the science to support the use of medical marijuana products like CBD oils, not because researchers are unwilling to do the work but because of bureaucratic redtape and overregulation. Under current law, those who want to complete research on the benefits of medical marijuana must engage in a complex application process and interact with several Federal agencies. These regulatory acrobatics can take researchers over a year, if not more, to complete and the longer researchers have to wait, the longer patients have to suffer.

Currently, the FDA estimates that a drug takes a minimum of 7 years to move from initial studies to FDA approval. The regulatory hoops that researchers have to jump through significantly delay the production of potentially life-changing medications that Americans need.

To develop more information about marijuana's therapeutic potential, we need robust basic and clinical research. The MEDS Act would encourage this research through reduced regulatory interference, and it would expand sources of research-grade marijuana with the assurance of a quality-controlled product. My proposal would also allow for the commercial production of drugs developed from marijuana once they have been approved by the FDA.

I am pleased with the legislation that Senator SCHATZ and I have been able to craft surrounding CBD oil and medical research. We are committed to seeing that this bill becomes law.

Before I yield the floor, I would like to take a moment to share my perspective on the broader discussion of medical marijuana and its implications in my home State of Utah. In Utah and across the Nation, opioid abuse continues to ravage good, hard-working families who are suffering from the collapse of the economy and the epidemic of addiction. While some people are using these prescription drugs appropriately, others are abusing them at alarming rates. Because Utahans have watched their family members, friends, and neighbors struggle with this epidemic, many are seeking non-narcotic alternatives that can help with pain. Medical marijuana is just one such alternative, and after careful, deliberative thought, I have concluded that it is an alternative worth pursuing.

Now let me be clear. My support for medical marijuana research does not mean that I believe that marijuana is a harmless substance. Much to the contrary, I continue to believe that marijuana can lead to broader drug abuse, and I am deeply concerned by the cottage industries that are springing up in States in which marijuana has been legalized both for medical and recreational use.

So let me be clear. I am still very much opposed to the legalization of recreational marijuana, but I strongly support research into the medicinal benefits of marijuana, and I remain committed to helping patients find the help they need, whether they suffer from cancer, severe seizures, or any other chronic disorder.

In crafting a new regulatory framework to harvest the medicinal benefits of marijuana while also mitigating its harmful effects, we must ensure that any marijuana-derived medications are prescribed by qualified physicians or other healthcare providers. Also, if we make medical marijuana accessible to those who really need it, we should not increase access to recreational marijuana, nor should we do anything to promote the industry that has developed around marijuana dispensaries.

The recreational marijuana industry has its fair share of budding entrepreneurs, but these men and women are in no way qualified to issue prescriptions or give any medical advice to people who are suffering from chronic conditions. Only experienced medical professionals who have undergone years of education and formal training are qualified to consult patients who are seeking a marijuana-derived treatment. Only licensed professionals know how to accurately diagnose illnesses and use approved medical treatments to safely treat disease.

Our purpose in advancing medical marijuana research should be to help doctors help patients, not to help dispensaries turn a profit. To that end, I also believe that treatment options should focus on noncombustive forms of marijuana. Our ability to isolate helpful compounds is advanced enough to make this plan a reality.

I understand that medical marijuana is a difficult issue. I understand that it is not an issue without controversy, but we cannot shrink from our duties simply because they require us to make hard choices. At present, we have a duty to help the thousands of Americans who are suffering from debilitating seizures and chronic pain, who desperately want help but do not know where to find it. Passing the MEDS Act is the first step in giving these men and women the reprieve they need.

I hope my colleagues will not shy away from making hard choices that will improve people’s lives. The bill Senator SCHATZ and I introduce today represents what our two parties can accomplish when we work together in good faith. I hope my colleagues will join us in supporting this commonsense proposal.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 251—AMENDING RULE XXXI OF THE STANDING RULES FOR THE SENATE, TO PROVIDE FOR TIMELY CONSIDERATION OF NOMINATIONS

Mr. GARDNER submitted the following resolution; which was referred to the Committee on Rules and Administration:

S. Res. 251

Resolved, SECTION 1. TIMELY CONSIDERATION OF NOMINATIONS.

Rule XXXI of the Standing Rules of the Senate is amended—

(1) by redesignating paragraphs 3 through 7 as paragraphs 4 through 8, respectively; and

(2) by inserting after paragraph 2 the following:

"(3) (a) In this paragraph, the term ‘basic requirements’ means:

‘(1) an agreement with the Office of Government Ethics;

‘(2) a financial disclosure form;

‘(3) a background check conducted by the Federal Bureau of Investigation;

‘(4) a questionnaire of each relevant committee;

‘(5) tax forms, if required by a relevant committee; and

‘(6) any other requirements of a relevant committee;

‘(b) If a nomination has not been confirmed or rejected not later than 180 days after the day on which the nominee completes the basic requirements, the appropriate committees shall be automatically discharged and the nomination shall be eligible for expedited consideration in accordance with paragraph (c).

‘(c)(1) The majority leader may provide notice that a nomination that is eligible for expedited consideration in accordance with this subparagraph shall be considered on an expedited basis.

‘(2) Notwithstanding rule XXII, expedited consideration of a covered nomination under this subparagraph, including consideration of any debatable matter or appeal in connection therewith shall be limited to 2 hours, evenly divided in the usual form.”.“
SENATE RESOLUTION 252—DESIGNATING SEPTEMBER 2017 AS “NATIONAL SPINAL CORD INJURY AWARENESS MONTH”

Mr. MCGILLIN (for Mr. RUBIO (for himself and Mr. NELSON)) submitted the following resolution; which was considered and agreed to:

S. Res. 252

WHEREAS more than 285,000 individuals in the United States live with spinal cord injuries, which cost society billions of dollars in health care costs and lost wages;

WHEREAS there are approximately 17,500 new spinal cord injuries in the United States each year;

WHEREAS more than 80,000 spinal cord injury victims are veterans who suffered a spinal cord injury while serving in the Armed Forces;

WHEREAS motor vehicle accidents are the leading cause of spinal cord injuries and the third leading cause of traumatic brain injuries;

WHEREAS more than 50 percent of all spinal cord injured people under the age of 18 occur as a result of motor vehicle accidents;

WHEREAS there is an urgent need to develop new neuroprotection, pharmacological, and regenerative treatments to reduce, prevent, and reverse paralysis; and

WHEREAS increased education and investment in research are key factors in improving outcomes of spinal cord injuries, ultimately curing paralysis: Now, therefore, be it

Resolved, That the Senate—

(1) designates September 2017 as “National Spinal Cord Injury Awareness Month”;

(2) supports the goals and ideals of National Spinal Cord Injury Awareness Month; and

(3) continues to support research to find better treatments, therapies, and a cure for spinal cord injuries;

(4) supports clinical trials for new therapies that offer promise and hope to individuals living with paralysis; and

(5) commends the dedication of national, regional, and local organizations, researchers, doctors, volunteers, and people across the United States that are working to improve the quality of life of individuals living with spinal cord injuries and their families.

SENATE RESOLUTION 253—DESIGNATING THE WEEK BEGINNING SEPTEMBER 18, 2017, AS “NATIONAL HISPANIC-SERVING INSTITUTIONS WEEK”

Mr. SCHUMER (for Mr. MENENDEZ (for himself, Mr. CORNYN, Mr. BLUMENTHAL, Mr. BOOKER, Mr. CASEY, Ms. CORTEZ MASTO, Mr. DURBIN, Mrs. FEINSTEIN, Mr. MENENDEZ, Mr. NELSON, Mr. RUBIO, and Mr. HARRIS)) submitted the following resolution; which was considered and agreed to:

S. Res. 253

WHEREAS Hispanic-Serving Institutions are degree-granting institutions that have a full-time equivalent undergraduate enrollment of not less than 25 percent Hispanic students; Wherein Hispanic-Serving Institutions play an important role in educating many underprivileged students and helping those students attain their full potential through higher education;

WHEREAS more than 470 Hispanic-Serving Institutions operate in the United States; Whereas Hispanic-Serving Institutions represent just 13 percent of all nonprofit institutions of higher education, yet serve more than 63 percent of all Hispanic undergraduate students in 2014; more than 1,750 Hispanic undergraduate students and more than 80,000 Hispanic graduate students;

WHEREAS the number of “emerging Hispanic-Serving Institutions”, defined as institutions that do not yet meet the threshold of 25 percent Hispanic enrollment but serve a Hispanic student population of between 15 and 24 percent, grew to more than 300 colleges and universities in 2014;

WHEREAS Hispanic-Serving Institutions are located in 18 States and the Commonwealth of Puerto Rico and emerging Hispanic-Serving Institutions are located in 33 States and the District of Columbia;

WHEREAS Hispanic-Serving Institutions are actively involved in stabilizing and improving the communities in which the institutions are located;

WHEREAS Hispanic-Serving Institutions are leading efforts to increase Hispanic participation in the fields of science, technology, engineering, and mathematics;

WHEREAS celebrating the contributions of Hispanic-Serving Institutions to the United States strengthens the culture of the United States; and

WHEREAS the achievements and goals of Hispanic-Serving Institutions deserve national recognition: Now, therefore, be it

Resolved, That the Senate—

(1) recognizes the achievements and goals of Hispanic-Serving Institutions across the United States and in the Commonwealth of Puerto Rico;

(2) designates the week beginning September 18, 2017, as “National Hispanic-Serving Institutions Week”; and

(3) calls on the people of the United States and interested groups to observe National Hispanic-Serving Institutions Week with appropriate ceremonies, activities, and programs to demonstrate support for Hispanic-Serving Institutions.

SENATE RESOLUTION 254—RELATIVE TO THE DEATH OF PETER V. DOMENICI, FORMER UNITED STATES SENATOR FOR THE STATE OF NEW MEXICO

Mr. MCCONNELL (for himself, Mr. SCHUMER, Mr. UDALL, Mr. HARRIS, Mr. LEE, Mr. BROWN, Mrs. COOK, Mr. FLAKE, Mr. FRANKEN, Mr. GARDALEN, Mr. HARKIN, Mr. VELAZQUEZ, Mr. WEXLER, Mr. WYDEN, Mr. YOUNG) submitted an amendment intended to be proposed by him to the bill H. R. 2810, supra; which was ordered to lie on the table.

RESOLVED, That the Senate has heard with profound sorrow and deep regret the announcement of the death of Peter V. Domenici, former member of the United States Senate.

RESOLVED, That the Secretary of the Senate communicate these resolutions to the House of Representatives and transmit an enrolled copy thereof to the family of the late Pete V. Domenici.

AMENDMENTS SUBMITTED AND PROPOSED

SA 1002. Mr. DONNELLY submitted an amendment intended to be proposed by him to the bill H.R. 2810, to authorize appropriations for fiscal year 2018 for military activities of the Department of Defense, to prescribe military personnel strength for such fiscal year, to prescribe military personnel strength for such fiscal year, and for other purposes; which was ordered to lie on the table.

SA 1003. Mr. MCCAIN (for himself and Mr. REED) proposed an amendment to the bill H.R. 2810, supra.

SA 1004. Mr. BENNET (for himself and Mr. GARDNER) submitted an amendment intended to be proposed by him to the bill H.R. 2810, supra; which was ordered to lie on the table.

SA 1005. Mr. MERKLEY submitted an amendment intended to be proposed by him to the bill H.R. 2810, supra; which was ordered to lie on the table.

SA 1006. Mr. MORA (for himself, Mr. UDALL, Mr. DAINES, and Mr. WARD) submitted an amendment intended to be proposed to amendment SA 1003 proposed by Mr.