

on communications networks and make policy recommendations to the President and Congress.

I. PRESIDENTIAL POWER

The President may waive provisions of this Act with a finding of danger to national security, public safety, economic security, or public interest. President must report waiver to Congress in classified or unclassified form w/I 30 days of Presidential action.

J. MISC

- (1) Severability.
- (2) Interpretation: Will not affect intelligence activities outside USA; and will not weaken intellectual property protection.
- (3) Definitions.
- (4) Dates of regulations.
- (5) Authority for fees.●

TRIBUTE TO ALEX HENLIN, BISHOP GUERTIN SENIOR, AND WINNER OF THE AMERICAN LEGION'S NATIONAL ORATORICAL CONTEST.

● Mr. SMITH of New Hampshire. Mr. President, I rise today to congratulate Alex Henlin, a Bishop Guertin High School senior, on winning the American Legion's National Oratorical Contest. This is certainly an accomplishment of which he should be very proud and I salute him for his achievement.

Alex, 18, resides in Dracut, MA. He is president of his senior class and plans to study government next fall at Georgetown University. He was one of the State's representatives to the American Legion's 1996 Boys' Nation conference in Washington.

His speech, "A More Perfect Union," reported the U.S. Constitution as being a versatile, living document able to address unforeseen circumstances. Alex warned that amendments should not be created to address trivial issues. As a former history teacher, I admire and commend Alex's commitment to our Nation's most precious document.

Alex brought home an \$18,000 college scholarship in addition to a \$2,000 scholarship he received from the State contest. The national contest was hosted by Indiana University and Purdue University in Indianapolis.

I congratulate Alex Henlin on his outstanding accomplishments. I commend his hard work and perseverance and wish him luck at Georgetown in the fall semester.●

BAXTER BLACK COMMENTARY ON RANCHERS IN THE DAKOTAS

● Mr. CONRAD. Mr. President, livestock producers across the Dakotas have suffered immeasurable losses this winter. Baxter Black, cowboy poet and commentator on National Public Radio, wrote a touching piece describing the struggles of ranchers facing the realities of the season's severe weather. National Public Radio aired the commentary on April 23.

Mr. President, I ask that the following transcript of Mr. Black's commentary be printed in the RECORD.

The transcript follows:

WE UNDERSTAND

Repeat after me: I do solemnly swear as shepherd of the flock to accept the responsibility

for the animals put in my care, to tend to their basic needs of food and shelter, to minister to their ailments, to put their well being before my own if need be, and to relieve their pain and suffering up to, and including, the final bullet. I swear to treat them with respect, to always remember that we have made them dependent on us, and therefore have put their lives in our hands, as God is my witness.

Helpless. The worst winter in Dakota's memory. Cattle losses already predicted up to 50,000 head. And how did they die? From exposure and lack of feed. Basic needs—food and shelter. And now the flooding.

You think those Dakota ranchers said, "Well, I'll just close down the store and put on the answering machine, we'll wait'll the storm blows over, no harm done?"

No, they couldn't. Wouldn't.

"Charlie, you can't go out there. The cows are clear over in the west pasture. You can't even see the barn from here." But he tried anyway. Tried to get the machinery running, tried to clear a path, tried to load the hay, tried to find the road.

These are not people who live a pampered life. These are not people who are easily defeated. These are not people who quit trying. But days and weeks on end of blizzards, blowing snow, and fatal wind chills took their toll.

Cattle stranded on the open plains with no cover, no protection, no feed, no place to go, and no relief from the Arctic fury died in singles and bunches and hundreds and thousands, frozen as hard as iron.

And back in the house sat the rancher and his family, stranded, unable to do what every fiber in their bodies willed them to do, knowing that every hour he could not tend his cows diminished him in some deep, permanent, undefinable way, changing him forever.

The losses will eventually be tallied, the number of head, and extrapolated to dollars. But dollars were not what kept him pacing the floor at night, looking out the window every two minutes, walking out in it 50 times a day, trying, trying, trying, knowing if he could only get to them he could save them. And then finally having to face the loss, his failure as a shepherd. That's what kept him trying. Exhausting, depression, and despair.

It's hard to comfort a person who has had his spirit battered like that. "It couldn't be helped, there's nothing you could do," is small consolation.

So, all I can say to our fellow stockman in the Dakotas is, in our own way, we understand.●

TRIBUTE TO GARY HODSON ON BEING NAMED THE 1997 SOMERSWORTH CITIZEN OF THE YEAR

● Mr. SMITH of New Hampshire. Mr. President, I rise today to pay tribute to Gary Hodson, postal carrier of Somersworth, on being named the Citizen of the Year by the Greater Somersworth Chamber of Commerce. I commend his outstanding community commitment and congratulate him on this well-deserved honor.

Gary's community involvements are numerous but his special dedication was directed to youth. Gary serves as director of youth education at Holy Trinity Church and volunteers teaching on evenings and weekends. He is president of the baseball, football, and hockey boosters.

Gary is known to many as always willing to take responsibility to make

his community a better place to live and raise children. He puts forth his time and energy to help the youth of the community. Whatever he commits to, he always gets the job done.

Gary has dedicated his time, talent, and energy to serving the residents of Somersworth in an exemplary way. I am proud to honor Gary Hodson's outstanding community commitment, which is so important to the youth and their future. We are indeed indebted to him for his efforts. Congratulations to Dan for this distinguished recognition. I am honored to represent him in the U.S. Senate.●

PARTIAL-BIRTH ABORTION—THE TRUTH

● Mr. ABRAHAM. Mr. President, I would like to submit the following testimony for the RECORD. Dr. Curtis Cook is a board-certified obstetrician/gynecologist and a subspecialist in maternal-fetal medicine in Michigan. In March, Dr. Cook testified before the House-Senate joint hearing on "Partial-Birth Abortion—The Truth." His expert testimony speaks to both the medical necessity of the partial-birth procedure and the issue of fetal pain during the procedure.

The testimony follows:

TESTIMONY BY CURTIS COOK, M.D., MATERNAL FETAL MEDICINE, BUTTERWORTH HOSPITAL, MICHIGAN STATE COLLEGE OF HUMAN MEDICINE

My name is Dr. Curtis Cook. I am a board-certified Obstetrician/Gynecologist and a subspecialist in Maternal-Fetal Medicine (also known as Perinatology or High Risk Obstetrics). In my practice I take care of referred complicated pregnancies because of preexisting chronic medical conditions of the mother, or suspected abnormalities in the baby. I am also the Associate Director of our region's Maternal-Fetal Medicine division and also serve as Assistant Residency Director for our Obstetrics and Gynecology training program. I am an Assistant Clinical Professor at Michigan State University of College of Human Medicine, and a member of the American College of OB/GYN, The Society of Perinatal Obstetricians, The American Medical Association, and the Association of Professors of Gynecology and Obstetrics. I am a founding member of PHACT (Physicians Ad Hoc Coalition for Truth about Partial Birth Abortion), which I helped organize after hearing the appalling medical misinformation circulated in the media regarding this procedure. PHACT includes in its membership over 400 physicians from Obstetrics, Maternal-Fetal Medicine and Pediatrics. Many of these physicians are educators or heads of departments, and also include the former Surgeon General, C. Everett Koop. All that is required of a physician for membership in an Interest in maternal and child health, and a desire to educate the population on this single issue.

I must begin my statement by defining partial birth abortion as the feet first delivery of a living infant up to the level of its after coming head, before puncturing the base of its skull with a sharp instrument and sucking out the brain contents, thereby killing it and allowing the collapse of its skull and subsequent delivery. This description is based upon the technique of Dr. Haskell of Ohio, who has subsequently identified it as accurate. He has referred to his technique as

"D & X" (Dilatation and Extraction), while Dr. McMahon of California refers to it as an "intact D & E." An ACOG ad hoc committee came up with the hybrid term "intact D & X". As you can see, many terms are used and are not clear in their description.

Partial birth abortion is mostly performed in the fifth and six months of pregnancy. However, these procedures have been performed up to the ninth month of pregnancy. The majority of patients undergoing this procedure do not have significant medical problems. In Dr. McMahon's series, less than ten percent were performed for maternal indications, and these included some ill-defined reasons such as depression, hyperemesis, drug exposed spouse, and youth. Many of the patients undergoing partial birth abortion are not even carrying babies with abnormalities. In Dr. McMahon's series, only about half of the babies were considered "flawed", and these included some easily correctable conditions like cleft lip and ventricular septal defect. Dr. Haskell claimed that eighty percent of his procedures were purely elective, and a group of New Jersey physicians claimed that only a minuscule amount of their procedures were done for genetic abnormalities or other defects. Most were performed on women of lower age, education, or socioeconomic status who either delayed or discovered late their unwanted pregnancies. It is also clear that this procedure occurs thousands of times a year, rather than a few hundred times a year, as claimed by pro-abortion advocates. This has been independently confirmed by the investigative work of The Washington Post, The New Jersey Bergen Record and the American Medical Association News.

One of the often ignored aspects of this procedure is that it requires three days to accomplish. Before performing the actual delivery, there is a two day period of cervical dilation that involves forcing up to twenty five dilators into the cervix at one time. This can cause great cramping and nausea for the women, who are then sent to their home or to a hotel room overnight while their cervix dilates. After returning to the clinic, their bag of water is broken, the baby is forced into a feet first position by grasping the legs and pulling it down through the cervix and into the vagina. This form of internal rotation, or version, is a technique largely abandoned in modern obstetrics because of the unacceptable risk associated with it. These techniques place the women at greater risk for both immediate (bleeding) and delayed (infection) complications. In fact, there may also be longer repercussions of cervical manipulation leading to an inherent weakness of the cervix and the inability to carry pregnancies to term. We have already seen women who have had trouble maintaining pregnancies after undergoing a partial birth abortion.

There is no record of these procedures in any medical text, journals, or on-line medical service. There is no known quality assurance, credentialing, or other standard assessment usually associated with newly-described surgical techniques. Neither the CDC nor the Alan Guttmacher Institute have any data on partial birth abortion, and certainly no basis upon which to state the claim that it is a safer or even a preferred procedure.

The bigger question then remains: Why ever do a partial birth abortion? There are and always have been safer techniques for partial birth abortion since it was first described by Dr. McMahon in 1989 and Dr. Haskell in 1992. The usual and customary (and previously studied) method of delivery at this gestation is the medical induction of labor using either intravaginal or intramuscular medications to cause contrac-

tions and expulsion of the baby. This takes about twelve hours on average, and may also include possible cervical preparation with the use of one to three cervical dilators (as opposed to the three-day partial birth abortion procedure, with up to 25 dilators in the cervix at one time). This also results in an intact baby for pathologic evaluation, without involving the other risk of internally turning the baby or forcing a large number of dilators into the cervix. The only possible "advantage" of partial birth abortion, if you can call it that, is that it guarantees a dead baby at time of delivery.

The less common situation of partial birth abortion involves, an abnormal baby. These conditions do not threaten a woman over and above a normal pregnancy, and do not require the killing of the baby to preserve her health or future fertility. I have taken care of many such women with the same diagnoses as the women who provided testimony on this issue in the past. Each of these women stated that they needed to have a partial birth abortion performed in order to protect their health or future fertility. In these cases of trisomy (extra chromosomal material), hydrocephaly (water on the brain), polyhydramnios (too much amniotic fluid) and arthrogryposis (stiffened baby), there are alternatives to partial birth abortion that do not threaten a woman's ability to bear children in the future. I have personally cared for many cases of all of these disorders, and have never required any technique like partial birth abortion in order to accomplish delivery. Additionally, I have never had a colleague that I have known to have used the technique of partial birth abortion in order to accomplish delivery in this same group of patients. Moreover, there are high profile providers of third trimester abortions who likewise do not use the technique of partial birth abortion.

In the even rarer case of a severe maternal medical condition requiring early delivery, partial birth abortion is not preferred, and medical induction suffices without threatening future fertility. Again, the killing of the fetus is not required, only separation from the mother.

Finally, I wish to address the fetal pain issue, since it has been claimed that a fetus feels no pain at these gestational ages. This is about as ridiculous as the earlier claim that the anesthesia of partial birth abortion put the baby into a medical coma and killed it prior to the performance of the auctioning technique. This was no small claim to the many pregnant women undergoing non-obstetric surgery every day in this country. Fortunately, this was soundly denounced by both the American Society of Anesthesiologists and the Society of Obstetrical Anesthesia and Perinatology. In the course of my practice, we must occasionally perform life-saving procedures on babies while still in the uterus. I have often observed babies of five to six months gestation withdraw from needles and instruments, much like a pain response. Dr. Fisk in England has recently reported an increase in fetal pain response hormones during the course of these procedures at these same gestational ages. In addition, we frequently observe the standard grimaces and withdrawals of neonates born at six months gestation like any other pain response in a more mature infant.

While it is not my desire for legislators to enter into the realm of medical policy making, there are times when the public health risk needs to be addressed if the medical community is either unwilling or unable to address it. We have seen this precedent for female circumcision and forty-eight hour postpartum stays. I believe the unnecessary, unstudied, and potentially dangerous procedure of partial birth abortion is unworthy of

continuance in modern obstetrics. It neither protects the life, the health or the future fertility of women, and certainly does not benefit the baby. For these reasons, I urge you to support the ban on partial birth abortion.

I thank you for the opportunity to share my testimony and my concern for the women and children of this country. •

TRIBUTE TO RAYMOND REID

• Mr. HUTCHINSON. Mr. President, I rise today to pay tribute to a great patriot who has served over 54 years in the Federal Government. On May 15, 1997, Raymond "Ray" T. Reid, retired from the U.S. House of Representatives, where he worked as a chief of staff for 23 years, lending his expertise and leadership to three different Congressmen representing the Third District of Arkansas. I was one of those fortunate Members who had the privilege of working with Ray for the 4 years that I served in the House. When I was first elected to Congress in 1992, I replaced John Paul Hammerschmidt, a retiring Member who had represented the Third District for 26 years, and had become a legend both on Capitol Hill and in the State of Arkansas. However, it was no secret that behind this great politician was Ray Reid, a man who over the years had become an Arkansas legend himself. When John Paul retired, his work continued on through Ray's service and dedication. As a newly elected freshman, Ray provided my office with continuity, efficiency, stability, and a wisdom that could only come from 19 years of being a chief of staff.

The successful career of Ray Reid began long before he worked on Capitol Hill. Ray began his career back in 1942 when he left Bowdoin College in Brunswick, ME, to join the U.S. Army to defend our Nation in World War II. Following the war, he rose quickly up the ranks, receiving honors for his leadership ability and outstanding achievement. He made the Army his career for 31 years, where he served on both foreign soil and here in the United States. Ray moved his family several times, living in countries around the globe. He fought for freedom and justice in World War II, Korea, and Vietnam in addition to faithfully serving his country in peacetime.

He continued his service undiminished until December 31, 1973, when he retired from the Army as a colonel. Having worked in the Office of the Congressional Liaison at the Pentagon, Ray was able to make a smooth, natural transition to working in a congressional office. He brought to Congressman Hammerschmidt's office a vast degree of knowledge from several years of international exposure and a solid background in domestic policy. By the time Ray came to work for me, he was an invaluable resource who possessed a wealth of information and experience. Throughout his tenure as chief of staff in my office, he provided guidance and an institutional knowl-