

hard work of preparing sanctions packages related to the executive orders and the Magnitsky laws. More than 200 designations of Russian entities and individuals have been made, constraining their ability to carry out a Kremlin agenda of aggression around the globe. I want to acknowledge the leadership of people like Assistant Secretary of State Wess Mitchell in working to advance a realistic policy with respect to President Putin's actions and intentions. There is no denying that our government is populated with career civil servants and some political appointees who are clear-eyed about the threat posed by the Kremlin and are working every day to counter it. I just wish that our President had their back.

Time and again, this President insists on making statements that serve to hinder the good work done by our diplomats and civil servants.

He insisted that Russia rejoin the G7 though Moscow has done nothing to remedy the reason for its suspension in the first place: the invasion of Ukraine and illegal occupation of Crimea.

He insisted that most people in Crimea speak Russian so therefore want to be part of Russia. This is wrong and an insult to thousands of dead Ukrainians and their families.

He insisted on trashing our oldest allies while seeking to curry favor with Putin.

Given the scale and nature of this threat, we need a fully aligned policy apparatus where the President and bureaucracy are on the same page. With this President, I am not sure that can be achieved, but it is incumbent upon us, in this oversight body, Republican and Democrat, to indeed insist that the President end his irrational affection for the Kremlin. He must finally marshal all the resources of our government to address this threat to our security and to our democracy.

It starts with the NATO summit next month. The President must be rock solid in his commitment to article 5 of the alliance charter. He should be firm about allies meeting their commitment of 2 percent of GDP to defense, but not allow that issue to crowd out a real conversation and coordination on addressing the threat posed by Russia. Our allies take this threat seriously and want a President, in the tradition of Kennedy and Reagan, who will show leadership and clarity of purpose at a NATO summit. The President should use the summit to build common cause on sanctions with those members of the EU present at the meeting. Specifically, he should work with Europe to impose cyber sanctions on Russian actors who threaten our democracies.

In closing, despite some progress in designating some key Russian actors, I remain concerned that seven mandatory provisions of CAATSA have not been implemented. This is simply unacceptable. Secretary Pompeo committed during a recent Foreign Relations Committee hearing that he would pursue the mandatory provisions under

the law. To make sure everyone is on the same page, let me run through the mandatory provisions that have not been implemented under CAATSA authorities: section 225, mandatory sanctions related to special Russian crude oil products; section 226, mandatory sanctions with respect to Russian and other foreign financial institutions; section 227, mandatory imposition of sanctions with respect to significant corruption in the Russian Federation; section 228, mandatory sanctions with respect to certain transactions with foreign sanctions evaders and serious human rights abusers in the Russian Federation; section 231, mandatory sanctions with respect to persons engaging in transactions with the intelligence and defense sectors of the Government of the Russian Federation; section 233, mandatory sanctions with respect to investment in or facilitation of privatization of state-owned assets by the Russian Federation; and section 234, mandatory sanctions with respect to the transfer of arms and related materiel to Syria.

I again implore the administration to follow the law and impose these sanctions with urgency.

Let us recapture the bipartisan spirit we found to collectively confront threats to our national security when this body passed CAATSA nearly a year ago. I urge my colleagues to again join together and now ensure implementation of this law. I urge my colleagues to stand firm in support of our democracy against all forms of aggression, especially from Moscow. There is still time before the 2018 election to make crystal clear to the Kremlin that their days of unfettered cyber hacking, bots, trolls, and lies are over.

ADDITIONAL STATEMENTS

REMEMBERING DR. J. ALEX HALLER, JR.

• Mr. CARDIN. Mr. President, today I wish to pay tribute to Dr. J. Alex Haller, Jr., a pioneer in the field of pediatric surgery, who died on June 13 at the age of 91. Theodore Roosevelt once said, "The greatest gift life has to offer is the opportunity to work hard at work worth doing." Alex Haller certainly spent his life working hard on something worthwhile. He was a professor emeritus of pediatrics, surgery, and emergency medicine at the Johns Hopkins Medical School and was the surgeon in charge of the Johns Hopkins Children's Center for nearly 30 years. Over the course of his distinguished career, he became known as the "father of pediatric trauma care." Throughout his life, Dr. Haller pushed the boundaries and transformed how we care for our children.

Dr. Haller was born in Pulaski, VA, in 1927. He earned his bachelor's degree from Vanderbilt University and then came to Baltimore to earn his MD from the Johns Hopkins University School

of Medicine. After he graduated from Johns Hopkins in 1951, Dr. Haller spent a year as a fellow in pathology at the University of Zurich, and then served in the military for 2 years. He returned to Johns Hopkins to complete his residency. In 1959, he went to Louisville General Hospital, where he served as chief of cardiac surgery for 4 years. Then, Alfred Blalock, the chief of surgery at Johns Hopkins, asked him to return to head the new pediatric surgery division Blalock planned to launch.

During his time at Johns Hopkins, Dr. Haller was responsible for helping to make Johns Hopkins one of the best hospitals for pediatric care in the country. For almost 30 years, he served as the surgeon in charge of the Johns Hopkins Children's Center and was the founding co-director of the division pediatrics. He created the regional trauma center for children, the first such program of its kind in the United States, and at his urging, Johns Hopkins became the first academic medical center to implement pediatric surgery subspecialties.

Outside of Johns Hopkins, Dr. Haller created opportunities for his colleagues to learn from one another. He was one of 24 pediatric surgeons who founded the American Pediatric Surgical Association and played a key role in developing the Pediatric Advanced Life Support, or PALS, protocol, which details the steps and procedures for stabilizing critically injured children or those with other emergency conditions.

Nelson Mandela once said "There can be no keener revelation of a society's soul than the way in which it treats its children." Dr. Haller spent his life ensuring that our children will have the best care that modern medicine can offer. He leaves a lasting legacy in the lives of children whom he saved and who will be saved because of his pioneering work and because he trained so many other doctors and surgeons who carry on the mission. On behalf of my colleagues, I send my deepest condolences to his wife of 67 years, Emily Simms, whom he met in college and who became an obstetrician; his daughter, Dr. Julia Haller, ophthalmologist in chief at Wills Eye Hospital in Philadelphia; two sons, J. Alex Haller III of Asheville, NC, and Frederick B. "Fritz" Haller of Winston-Salem, NC; another daughter, Clare Haller Hughes of New Canaan, CT; and 16 grandchildren. In the midst of his family's grief, I hope they can find solace in reflecting on what a truly great and kind and humane person Dr. Haller was. The Baltimore Sun contained an obituary and I ask that the obituary be printed in the RECORD following my remarks. The obituary, I think, captures Dr. Haller's wonderful humanity, which should serve as a beacon for all of us to follow.

The material follows:

[From the Baltimore Sun, June 6, 2018]

J. ALEX HALLER JR., JOHNS HOPKINS PEDIATRIC SURGEON WHO GAINED FAME IN SEPARATING CONJOINED TWINS, DIES

(By Jacques Kelly)

Dr. J. Alex Haller Jr., a retired Johns Hopkins pediatric surgeon recalled as the “father of pediatric trauma care,” died of respiratory arrest June 13 at his Glencoe home. He was 91.

He was a professor emeritus of pediatrics, surgery and emergency medicine at the Johns Hopkins Medical School and was the surgeon-in-charge of the Johns Hopkins Children’s Center for nearly 30 years.

“Putting yourself in a child’s shoes is part of being a good surgeon,” he once said.

Born in Pulaski, Va., he was son of J. Alex Haller, a dentist, and his wife Julia Allison.

Emerging from scarlet fever as a young child—he lost his hair permanently as a result—he was determined to go into medicine.

After the death of his mother, he was raised by his father and two maiden aunts who instilled a strong moral sense in him. An Eagle Scout, he was a 1944 graduate of Pulaski High School, where he played basketball.

He obtained a bachelor’s degree at Vanderbilt University, where he met his future wife, Emily Simms. She would go on to become an obstetrician.

In a 2008 oral history, he said he came to Baltimore in 1947 and hailed a cab at Penn Station to take him to Hopkins. He wound up, incorrectly, at the Homewood campus in North Baltimore. From there he caught a streetcar to the East Baltimore medical school.

“I went down through every imaginable slum area, and it got worse and worse as I went deeper and deeper into East Baltimore and finally ended up right there at the hospital,” he said. “I got out and said to myself, ‘Oh, my. This is the end of the world.’ . . . So I registered and that was the beginning of my medical school journey.”

While in medical school, Dr. Haller also studied at Boston Children’s Hospital, where he developed an interest in pediatric surgery. After graduating from Hopkins in 1951, he studied pathology at the University of Zurich.

He did his military service in the Coast Guard—he said he was mainly called upon to remove tattoos—and at the National Institutes of Health.

He performed his residency at Hopkins and joined the faculty of the University of Louisville in 1959, where he served as chief of cardiac surgery at the Louisville General Hospital. The renowned Johns Hopkins surgeon Alfred Blalock asked him to return to Baltimore to head a new pediatric surgery division.

In 1971 Hopkins opened the country’s first pediatric emergency room within a general hospital. In an article in *The Baltimore Sun* about the opening of the new facility, Dr. Haller said he did not like mixing children with adults in crowded general emergency rooms.

In 1982 he led a surgical team that separated conjoined twins, who were connected at their chests. The twin girls, Emily and Francesca Selvaggio, were separated in a 10-hour surgery.

“Dr. Haller was a pioneer in pediatric surgery and responsible for training innumerable surgeons and leaders in the field,” said Dr. George Dover, former director of the Department of Pediatrics at the Johns Hopkins University School of Medicine and former pediatrician-in-chief of the Johns Hopkins Children’s Center.

He said Dr. Haller “was responsible for the concept of the Children’s Medical and Sur-

gical Center . . . the first building to house all children in a separate facility at Johns Hopkins. His impact on pediatric medicine was enormous.”

Dr. Haller also worked with the University of Maryland’s shock trauma pioneer, R. Adams Cowley, to organize a statewide shock trauma system, the Maryland Emergency Medical Services system.

“By far, the leading cause of pediatric death was then and remains trauma—injury from auto accidents, falls and burns,” said Dr. James A. O’Neill, a friend for more than 50 years.

“The basis of trauma medicine was military experience in Korea and Vietnam. Very little was known about how to treat children involved in accidents,” Dr. O’Neill said. “Dr. Haller led the effort to treat injured children and is truly the father of pediatric trauma care.”

Dr. O’Neill, a professor of pediatric surgery at Vanderbilt University, also called Dr. Haller “a true social genius. He could relate to anyone. He was charming, outgoing, calm, humble and sensitive to other people. He had a fantastic sense of humor and an appreciation for other people’s strengths as well as their foibles. He never cared about money.”

“He was one of the best-known and well-beloved persons to walk the halls of Hopkins,” said his daughter Dr. Julia Haller, ophthalmologist-in-chief at Wills Eye Hospital in Philadelphia, Pa.

“As a father, he gave us a wonderful childhood,” she said. “He shared his enthusiasm about the world with all of us.”

He published more than 350 scholarly papers and 60 book chapters. He also wrote the 1967 book, “The Hospitalized Child and His Family.”

His daughter said her father and mother were a well-known couple, particularly in the Hopkins medical community.

“They were true partners, and each year hosted back-to-back Christmas parties on Friday and Saturday nights so that whoever had the weekend rotation could attend,” she said.

“They served country ham and crab dip. Everyone sang Christmas carols late into the night,” she said. “On family vacations, they canoed together. When we were young, they spent a month as camp doctors in western North Carolina. My father threw himself in all the camp activities, too.

“It’s not hard to see why children loved him,” she said.

He was the recipient of the American Academy of Pediatrics’ William Edwards Ladd Medal, the Denis Browne Gold Medal, the British Association of Pediatric Surgeons’ award and the Vaclav Kafka Medal from the Society of Pediatric Surgery of Bohemia.

A funeral will be held at 11 a.m. June 23 at the Episcopal Cathedral of the Incarnation, University Parkway and St. Paul Street.

In addition to his wife of 67 years and daughter, survivors include two sons, J. Alex Haller III of Asheville, N.C., and Frederick B. “Fritz” Haller of Winston-Salem, N.C.; another daughter, Clare Haller Hughes of New Canaan, Conn.; and 16 grandchildren. ●

TRIBUTE TO TIFFANY AND WAIDE SATRE

● Mr. DAINES. Mr. President, this week I have the honor of recognizing Tiffany and Waide Satre of Sweet Grass County for the years of hard work they put in to grow Thirsty Turtle Burgers & BBQ and serve their local community.

Tiffany and Waide opened the Thirsty Turtle Burgers & BBQ in Feb-

ruary of 2011. What started as a bar quickly grew with a kitchen and now operates as a full-service restaurant. The restaurant has continued to grow, turning it into a community staple.

Tiffany and Waide built both their marriage and their restaurant around each other, and that partnership has fostered growth within the business. Together, they employ around 20 people, including their son Shadow, who is a cook in the restaurant. While their leadership provides the vision behind the restaurant, Tiffany and Waide believe the restaurant would not be where it is without the hard work and dedication of their employees.

While Tiffany and Waide appreciate the business from visitors in the summer months, they rely on their Big Timber regulars to carry them through the off-season. It is this sense of community that has cemented the success of the Thirsty Turtle Burgers & BBQ.

I congratulate Tiffany and Waide on the success of their business and their impact on the greater Sweet Grass County. I look forward to my next visit to the Thirsty Turtle Burgers & BBQ. ●

AFFORDABLE HOUSING

● Mr. NELSON. Mr. President, I ask that the following statement from Mona Wadsworth, a Florida constituent, be printed in the RECORD.

The material follows:

Until my memory begins to fail me there will be one date that will remain one of the most significant to me.

That is not to say that there are not other dates in my life that are important; birthdays, weddings, graduations, holidays, the usual dates we all mark on the calendar.

Then there are those dates that hold great value to us because on those days something happened to alter our lives in some way.

For me there is one that stands out among all others. December 15, 2017. That is the day God sent an angel into my life and that angel is here in this room.

Before I identify that angel I want to tell you a story about a woman.

There was nothing exceptional about this woman. She was much like most of us. She played as a child, drove her parents crazy as a teen, became a young adult, fell in love, married, raised a family, worked and was basically the average everyday woman in her community.

She had always wanted to own a house of her own but no matter how she tried life’s ups and downs always dipped into her savings and that dream never came to pass.

She may not have owned any of dwellings she and her family lived in, but she took pride in her home. It was always well furnished, clean and had many of the comforts of the day.

In the hustle and bustle of everyday life we tend to take for granted all the things that give us joy and comfort. She was no different. She never