need has been a constant motivation throughout his career. His deep understanding of the noble responsibility entrusted to him as a guardian of the community was always evident.

Sergeant Lovren exemplified his commitment to protecting the community during the May 6, 2023, mass shooting at the Allen Premium Outlets, displaying exceptional bravery and professionalism in the face of intense adversity.

His passion for his profession was recognized not only by his colleagues but also by the community he served, as evidenced by commendations and accolades throughout his tenure.

Beyond the call of duty, Sergeant Lovren is active in various outreach programs in his community and is a devoted family man to his wife, Lendsie, and their three children, Alice, Hunter, and Libby.

As he embarks on this new chapter of his life, I commend Sergeant Lovren for his outstanding contributions to law enforcement and the community, and I want to extend my congratulations and best wishes for a well-deserved retirement.

CELEBRATE THE BICYCLE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oregon (Mr. BLUMENAUER) for 5 minutes.

Mr. BLUMENAUER. Madam Speaker, I am here this morning on the occasion of the 24th annual National Bike Summit to celebrate the bicycle. It was an honor to kick off the annual bicycle ride through the Capitol this morning with several hundred enthusiasts.

We had a lot to celebrate. The infrastructure bill, the Inflation Reduction Act, has unleashed unprecedented investments. We have \$1 billion a year for the Safer Streets for All Act, and we have already \$1.7 billion committed. There are over 1,000 communities that are dealing with plans for their bicycle network.

Madam Speaker, there is a lot of dissension here on Capitol Hill. You may have noticed that it is hard sometimes for people to agree, but we are celebrating bike partisanship.

The bicycle brings people together to be able to burn calories instead of fossil fuel. It is the most efficient form of transportation ever designed.

There are exciting programs internationally. The World Bicycle Relief program has distributed three-quarters of a million bicycles to developing countries. A health professional in sub-Saharan Africa with a bicycle can see three times as many patients and do so more safely.

We have opportunities in terms of being able to extend the range of activities for our children. Legislation I have been working on for years in terms of the Safe Routes to School Program has been extended to include high schools now.

I started the week watching grade school bike bus with young people surrounded by a rope moving as a bus on their way to school.

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The bicycle helps eliminate the congestion around our schools in the morning, and it gives young people a sense of freedom while it encourages their health.

During the pandemic, people turned to the bicycle for recreation in a way that was safe, and it extended their recreational experience.

Bicycle tourism is having a profound effect in rural and small-town America as people discover the joy of looking at the countryside at 10 miles an hour instead of 70. It is also good for the economy because people on bicycles tend to actually spend more than people who are racing through neighborhoods.

This notion of burning calories instead of fossil fuel, I think, is profound. We are working to extend activities for e-bikes. Part of our legislation has more e-bike charging stations, and the e-bike makes any bicycle commuter into a regular, effective commuter, extending their range.

It has contributed here on Capitol Hill. When I first came, there were a few of us who were biking. You would see an occasional bike messenger, but now we are looking at massive investments even in our Nation's Capital.

One of the things I am most proud of is bicycle lanes in the center of perhaps America's most iconic street, Pennsylvania Avenue. There is a whole range of investments that have been made in our Nation's Capital to make it more livable.

Madam Speaker, I urge my colleagues to greet these bicycle warriors, welcome them to Capitol Hill, learn about the opportunities in this new legislation, and then work with them to implement it in their relationships. After all, the bicycle is the indicator species of livable communities.

HOUSE OF MEDICINE IS IN CRISIS

The SPEAKER pro tempore. The Chair recognizes the gentleman from North Carolina (Mr. MURPHY) for 5 minutes.

Mr. MURPHY. Madam Speaker, the house of medicine is crumbling down.

I have been a physician now for 35 years, and I spent 10 years prior to that training to become a surgeon. However, the house of medicine is in crisis.

Since the pandemic, medicine, a truly objective science, has become political. It has become a field of activism, not advocacy: believe the science, and then don't trust the science.

The record of preauthorizations now facing physicians and surgeons leads to poor patient care, burnout, early retirement, and massive administrative costs. Insurance companies are raking in record profits for their CEOs and shareholders by denying patients critical medicine or procedures and then not paying the doctors or hospitals, the ones who actually deliver the care.

The cost of medications is skyrocketing. One primary reason is something called PBMs, pharmacy benefit managers, that most people don't know anything about. These things are extortion artists driven by insurance companies to steal money from pharmaceutical companies and, most importantly, patients.

Madam Speaker, a pet peeve of mine is every other commercial seen on television is direct-to-consumer advertising. We are only one of two countries in the world, New Zealand being the other one, that allows this.

I have never once in my 35 years in medicine prescribed a medicine that was because somebody advertised it on television. Now, we have hospital closures in every district because we are restricting access to care because Medicare and Medicaid do not pay the bills. Yet, we have Democrats screaming: Medicare for All. That absolutely would lower the standard of medicine.

The express purpose of the ACA, ObamaCare, is to drive private practice out of business and for us all to be under one government-payer system.

What is happening? We are now employing more and more doctors and delivering a lower standard of care. These doctors, good people, really now have more ownership to a clock than their patient. We no longer have the work ethic that is seen in doctors as was seen before. It is 5 o'clock. It is time to leave. There is an absolute loss of patient ownership.

Madam Speaker, when I was seeing patients full time, if a physician called me to see a patient, my answer was: Do you want me to see them today or tomorrow?

It was not: Send them to the emergency room.

Now, it takes a year. I tried to get an appointment with a dermatologist for a patient. It took a year because of the severe doctor shortage. It is estimated that 40,000 to 120,000 more doctors are needed in a decade.

Sadly enough, our medical schools, while they are increasing in numbers, are failing in the doctors that they produce. We now have more identity politics in medical schools than excellence in care. Activism in so many schools now is the oath. DEI is the oath to get into medical school. This needs to stop.

It has now been shown that 63 percent of medical students now in medical school do not plan on practicing clinical medicine. There are medical students who come, take up a slot, and rarely practice. Why are medical schools allowing these individuals to get in?

There are increasing numbers of fellowships after residency programs because we have work-hour limitations, and the students are just not well-trained to come out and practice.

Burnout is at a record high, sadly, amongst physicians. I can understand that in a physician who has practiced until they are 65 or 70, but now we have