

needed for the agency to complete its review of the issues raised by the petition. Additionally, FDA believes that it should seek comment on these issues from other interested persons. Given these factors, the agency is persuaded that it is in the public interest to stay the provisions for the lower standards for sodium in the definition of "healthy" in § 101.65 while the agency endeavors to resolve the issues raised by the petition.

Therefore, the agency is staying the provisions for further reducing the sodium level in foods labeled as "healthy" until January 1, 2000, to allow time for FDA to reevaluate the standard, including the data contained in the petition and any additional data that the agency may receive, to conduct any necessary notice-and-comment rulemaking, and for industry to respond to the rule or to any change in the rule that may result from the agency's reevaluation.

To assist the agency in its reevaluation, FDA intends to issue an advance notice of proposed rulemaking (ANPR) in the near future to ask for comments on the petition as well as for additional data regarding the technological feasibility of reducing the sodium content of individual foods to 360 mg per RACC and of meals and main dishes to 480 mg sodium per RACC. The agency will also be seeking comments on other approaches to reduce the amount of sodium in foods labeled "healthy." It is important that consumers seeking to eat a health-promoting diet have food choices that enable them to further reduce the amount of sodium in their diet. Interested persons need not wait for the publication of the ANPR but should feel free to review the petition and to submit to the agency any information or views they have on consumer acceptance of foods with low sodium levels and on the lack of acceptable sodium substitutes and the difficulties in manufacturing lines of food products with low sodium levels.

Accordingly, FDA is announcing a stay of the provisions in § 101.65(d)(2)(ii)(C) and (d)(4)(ii)(B) until January 1, 2000. Interested persons may also submit comments regarding the appropriateness of the basis of this stay. In doing so, however, FDA encourages manufacturers who can meet the lower sodium levels for particular foods and still produce an acceptable product to do so even as the agency reevaluates the issues discussed previously in this document.

Interested persons may, on or before May 1, 1997 submit to the Dockets Management Branch (address above)

written comments regarding this document. Two copies of any comments are to be submitted, except that individuals may submit one copy. Comments are to be identified with the docket number found in brackets in the heading of this document. Received comments may be seen in the office above between 9 a.m. and 4 p.m., Monday through Friday.

This document is issued under sections 4, 5, 6 of the Fair Packaging and Labeling Act (15 U.S.C. 1453, 1454, 1455); secs. 201, 301, 402, 403, 409, 701 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321, 331, 342, 343, 348, 371).

For the reasons set forth in the preamble, 21 CFR 101.65(d)(2)(ii)(C) and (d)(4)(ii)(B) are stayed until January 1, 2000.

Dated: March 26, 1997.

William B. Schultz,

Deputy Commissioner for Policy.

[FR Doc. 97-8127 Filed 3-31-97; 8:45 am]

BILLING CODE 4160-01-F

21 CFR Parts 556 and 558

Animal Drugs, Feeds, and Related Products; Tilimicosin Phosphate Type A Medicated Article; Correction

AGENCY: Food and Drug Administration, HHS.

ACTION: Final rule; correction.

SUMMARY: The Food and Drug Administration (FDA) is correcting a final rule that appeared in the **Federal Register** of December 27, 1996 (61 FR 68147). The document amended the animal drug regulations to reflect approval of Elanco Animal Health's new animal drug application (NADA) 141-064 for use of a Type A medicated article containing tilimicosin phosphate in manufacturing a Type B or Type C medicated feed indicated for the control of swine respiratory disease associated with certain bacterial organisms. The document was published with some errors. This document corrects those errors.

EFFECTIVE DATE: December 27, 1996.

FOR FURTHER INFORMATION CONTACT: George K. Haibel, Center for Veterinary Medicine (HFV-133), Food and Drug Administration, 7500 Standish Pl., Rockville, MD 20855, 301-594-1644.

In FR Doc. 96-32881, appearing on p. 68147, in the **Federal Register** of Friday, December 27, 1996, the following corrections are made:

§ 556.735 [Corrected]

1. On page 68148, in the second column, in line 2, "7.2" is corrected to read "7.5".

§ 558.618 [Corrected]

2. On page 68148, in the second column, in paragraph (d)(1), "181.8" and "363.6" are corrected to read "181" and "363", respectively.

Dated: February 7, 1997.

Robert C. Livingston,

Director, Office of New Animal Drug Evaluation, Center for Veterinary Medicine.

[FR Doc. 97-8116 Filed 3-31-97; 8:45 am]

BILLING CODE 4160-01-F

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

21 CFR Parts 1300, 1309 and 1310

[DEA No. 132C]

RIN 1117-AA33

Consolidation, Elimination, and Clarification of Various Regulations; Correction

AGENCY: Drug Enforcement Administration (DEA), Justice.

ACTION: Correction to final regulations.

SUMMARY: This document contains corrections to the final regulations (DEA 132) which were published on Monday, March 24, 1997 (62 FR 13938). The regulations related to the consolidation, elimination, and clarification of DEA's regulations as part of the President's National Performance Review, Regulatory Reinvention Initiative.

EFFECTIVE DATE: April 1, 1997.

FOR FURTHER INFORMATION CONTACT: G. Thomas Gitchel, Chief, Liaison and Policy Section, Office of Diversion Control, Drug Enforcement Administration, Washington, D.C. 20537, Telephone (202) 307-7297.

SUPPLEMENTARY INFORMATION: The final regulations that are the subject of these corrections revise Title 21, Code of Federal Regulations (CFR), Chapter II in accordance with the President's Regulatory Reinvention Initiative. As published, the final regulations contain errors that could cause confusion in the regulated industry. Specifically, the final regulations did not take into account the amendment of certain definitions and the amendment of 21 CFR 1310.09 that were included in an Interim Rule published by DEA on February 10, 1997 (62 FR 5914), which

became effective upon publication in the **Federal Register**.

Accordingly, the publication on March 24, 1997, of the final regulations to consolidate, eliminate, and clarify various regulations, which were the subject of Federal Register Document 95-7036, is corrected as follows:

PART 1300—[CORRECTED]

§ 1300.02 [Amended]

1. On page 13945, in the first column, in § 1300.02 remove paragraphs (b)(28)(i)(D)(1) through (D)(2)(ii) and add the following text:

* * * * *

(b) * * *

(28) * * *

(i) * * *

(D) * * *

(1)(i) the drug contains ephedrine or its salts, optical isomers, or salts of optical isomers; or

(ii) The Administrator has determined pursuant to the criteria in 1310.10 that the drug or group of drugs is being diverted to obtain the listed chemical for use in the illicit production of a controlled substance; and

(2) The quantity of ephedrine or other listed chemical contained in the drug included in the transaction or multiple transactions equals or exceeds the threshold established for that chemical.

* * * * *

2. On page 13945, in the second column, in § 1300.02(b)(29), remove the introductory text and add the following text:

* * * * *

(b) * * *

(29) The term *retail distributor* means a grocery store, general merchandise store, drug store, or other entity or person whose activities as a distributor relating to drug products containing pseudoephedrine, phenylpropanolamine, or ephedrine are limited almost exclusively to sales for personal use, both in number of sales and volume of sales, either directly to walk-in customers or in face-to-face transactions by direct sales. For the purposes of this paragraph, sale for personal use means the distribution of below-threshold quantities in a single transaction to an individual for legitimate medical use. Also for the purposes of this paragraph, a grocery store is an entity within Standard Industrial Classification (SIC) code 5411, a general merchandise store is an entity within SIC codes 5300 through 5399 and 5499, and a drug store is an entity within SIC code 5912.

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PART 1309—[CORRECTED]

1. On page 13968, in the second column, in amendment number 4, remove “(a) Section 1309.02(g)” and redesignate (b) through (d) as (a) through (c).

PART 1310—[CORRECTED]

1. On page 13968, in the third column, amendment number 5 should be removed and amendment 6 redesignated as amendment 5.

Dated: March 27, 1997.

James Milford,

Acting Deputy Administrator, Drug Enforcement Administration.

[FR Doc. 97-8334 Filed 3-31-97; 8:45 am]

BILLING CODE 4410-09-P-M

DEPARTMENT OF TRANSPORTATION

Federal Highway Administration

23 CFR Part 625

[FHWA Docket No. 95-12]

RIN 2125-AD38

Design Standards for Highways; Geometric Design of Highways and Streets

AGENCY: Federal Highway Administration (FHWA), DOT.

ACTION: Final rule.

SUMMARY: The National Highway System (NHS) was established by the National Highway System Designation Act of 1995 (NHS Act), Pub. L. 104-59, 109 Stat. 568. In order to reflect the establishment of the NHS, the FHWA is revising several areas of the text in its regulation at 23 CFR part 625 governing design standards for highways; updating the listing of standards; relocating the guides and references; and adopting as its policy for the design standards which apply to highway construction and reconstruction projects on the NHS, a 1994 revision of the American Association of State Highway and Transportation Officials' (AASHTO) publication, “A Policy on Geometric Design of Highways and Streets” (AASHTO 1994 Policy). The primary reason for development of the new AASHTO 1994 Policy was to convert the numerical values in AASHTO's 1990 Policy to the metric system (SI). With the recent enactment of the NHS Act, the Secretary of the Department of Transportation (Secretary) cannot require that any State use, or plan to use, the metric system for Federal-aid projects before September 30, 2000. However, almost all of the States

continued their conversion to metric to meet the previously established deadline of September 30, 1996, and are either awarding contracts in metric or plan to do so in the near future.

DATES: This final rule is effective May 1, 1997. The incorporation by reference of certain publications listed in the regulation is approved by the Director of the Federal Register as of May 1, 1997.

ADDRESSES: The current design standards are on file at the Office of the Federal Register in Washington, DC, and are available for inspection and copying from the FHWA Washington, D.C., Headquarters and all FHWA Division and Regional Offices as prescribed in 49 CFR Part 7, appendix D. Copies of the current AASHTO publications are also available for purchase from the American Association of State Highway and Transportation Officials, Suite 249, 444 North Capitol Street, NW., Washington, DC 20001.

FOR FURTHER INFORMATION CONTACT: Mr. Seppo I. Sillan, Geometric and Roadside Design Branch, Federal-Aid and Design Division, Office of Engineering (202) 366-0312, or Mr. Wilbert Baccus, Office of Chief Counsel (202) 366-0780, Federal Highway Administration, 400 Seventh Street SW., Washington DC 20590. Office hours are from 7:45 a.m. to 4:15 p.m., e.t., Monday through Friday, except Federal holidays.

SUPPLEMENTARY INFORMATION: This final rule is based on the FHWA's Interim Final Rule (IFR), FHWA Docket No. 95-12, Design Standards for Highways; Geometric Design of Highways and Streets, at 61 FR 17566 (April 22, 1996). All comments received in response to the IFR have been considered in adopting this final rule. For discussion of comments, see the section entitled “Discussion of Comments” later in this final rule.

Revisions to the text in 23 CFR part 625 reflect the establishment of the NHS by the NHS Act as the basic highway network in the United States. References to “Federal-aid highway projects” have accordingly been changed to “NHS projects.” The standards, policies, and standard specifications that have been approved by the FHWA for application on all projects on the NHS are incorporated by reference in 23 CFR part 625.

Section 625.3(d) of the rule provides that these Federal design standards apply to all projects on the NHS, regardless of funding source. Under prior law, Federal standards applied to most projects solely as a condition of receipt of Federal grant funds. The change, applying Federal standards even to NHS projects wholly funded by