

information related to the electronic distribution of the prescribing information for animals.

A. General

(1) Currently, who uses and benefits from the prescribing information?

(2) How can electronic distribution and access of the prescribing information be accomplished?

(3) Would electronic distribution and access of the prescribing information improve the public health?

(4) Would electronic distribution and access of prescribing information improve prescribing habits? If so, how?

(5) How might we ensure that changes in the distribution and access of the prescribing information will not negatively affect the current users?

(6) Would an increase in electronic access to prescribing information affect prescribers, pharmacists, clients and patients? If so, how?

(7) Are there any issues particular to the prescribing information for animal drugs that are dissimilar or distinct from those associated with human drugs and that might affect the feasibility of electronic distribution of labeling?

B. Logistics

(1) Generally and without focusing on vendor-specific methods, how can electronic distribution of prescribing information be accomplished?

(2) What are the costs associated with the successful implementation of electronic distribution and access to prescribing information, including startup and maintenance expenses? Please breakdown costs per healthcare sector.

(3) Is the technology and infrastructure currently available to accomplish electronic distribution and access? If so, what is available? If not, what is needed?

(4) What are other potential barriers to accomplishing the electronic prescribing information?

(5) How can we ensure that electronic prescribing information is accessible to those who need the information?

(6) How do we meet the needs of those who do not have electronic capability?

(7) In case of emergency or when a computer system is down, what might be the backup?

(8) How should electronically disseminated prescribing information be regularly updated and remain current?

(9) What are the roles for the involved parties (manufacturers, third-parties, health professionals, FDA, and consumers)?

(10) Should all products have electronic prescribing information or are

there some products or classes of products that should continue to have paper prescribing information accompany the product?

(11) If electronic prescribing information were to be used instead of paper inserts, then how should electronic prescribing information be implemented? Should electronic prescribing information be phased in? If so, over what time period? Which products should use electronic prescribing information first?

III. How to Submit Comments

Interested persons may submit to the Division of Dockets Management (see **ADDRESSES**) written or electronic comments regarding this document. Submit a single copy of electronic comments to <http://www.fda.gov/dockets/ecomments> or two paper copies of any mailed comments, except that individuals may submit one paper copy. Comments are to be identified with the docket number at 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.

Dated: October 16, 2007.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. E7-20759 Filed 10-19-07; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

HRSA's Bureau of Primary Health Care (BPHC) Awards Unsolicited Proposal for Cooperative Agreement to the National Network for Oral Health Access

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: HRSA's Bureau of Primary Health Care (BPHC) announces the award of an unsolicited proposal from the National Network for Oral Health Access (NNOHA) to establish a cooperative agreement with HRSA providing services and resources to support the Health Center Program's oral health providers serving the oral health needs of underserved populations.

Recipient: National Network for Oral Health Access, Ft. Lupton, Colorado.

Purpose of the award: Cooperative Agreement with HRSA to provide services and resources to support the Health Center Program's oral health

providers serving the oral health needs of underserved populations.

Amount of award: \$200,000.

Project period: 1 year; September 25, 2007, to September 24, 2008.

SUMMARY: HRSA's BPHC has performed a formal review of an unsolicited proposal from NNOHA to establish a cooperative agreement with HRSA to provide services and resources to support the Health Center Program's oral health providers serving the oral health needs of underserved populations. BPHC has reviewed the proposal and has determined that it has merit. This request is of strategic importance to the Department of Health and Human Services (HHS) and is time critical. Funding for the proposed activities will promote access to oral health services as an integral component of primary health care, improve the quality of those services provided, and sustain the forward motion of departmental priorities in this area.

The Cooperative Agreement with NNOHA will have a project period of 1 year with funding at \$200,000. The funds will support selected activities described in the application to develop a national infrastructure to support improved access to oral health care, and improved quality and workforce development for the growing number of health center oral health programs.

The key anticipated outcomes of the proposed cooperative agreement are as follows:

- The development of oral health clinical quality infrastructure to support HRSA in achieving its goal of improved quality of care;
- The development of a recruitment and retention strategy to address dentist and dental hygienist vacancies, including National Health Service Corps dentist and dental hygiene openings; and

- NNOHA will work in collaboration with HRSA to implement a strategy to integrate oral health as it moves all of its programs forward in Health Information Technology to assure that oral health strategies are included.

There is a strategic importance of access to oral health as part of the primary care services supported by BPHC's Health Center Program. The Health Center Program has had significant growth as part of the President's Health Center Initiative. The number of patients seen by the Health Center Program has increased by 90 percent. Health centers have reported significant challenges recruiting and retaining oral health providers. Consequently, HRSA has determined that the scope of this proposal is immediate and necessary. The proposed

outcomes will contribute to the success and quality of oral health programs and are essential for long term sustainability and viability of health centers funded by HRSA.

This award is being made non-competitively because there is no current, pending, or planned funding opportunity announcement under which this proposal could be competed. HRSA/BPHC has identified three key reasons to support rationale for not awarding competitively:

1. NNOHA is uniquely positioned to provide oral health program support services on a national basis to community health centers. As the only organization of health center dental providers, NNOHA is dedicated to increasing the effectiveness of dental programs in reaching all underserved populations by supporting efforts to strengthen existing health center dental programs; manage the growth of new health center dental programs; and manage the quality improvement in health center dental programs.

2. With this experience, and its nationwide membership of health center dentists, NNOHA has a proven track record of effective collaborations with health center dental programs. Increased access to quality oral health is enhanced through NNOHA's partnerships with organizations and governmental agencies at the local, State and national levels.

3. No other organization has the national scope of respected experience in the area of health center oral health leadership and can perform immediately, especially given the complexity of activities that are critical to HRSA.

Legislative Authority: Section 330(l) of the Public Health Service Act.

FOR FURTHER INFORMATION CONTACT: Jay R. Anderson, DMD, MHSA, Office of Quality and Data, Bureau of Primary Health Care, Health Resources and Services Administration. Dr. Anderson may be contacted by e-mail at Janderson@hrsa.gov or via telephone at (301) 594-4295.

Dated: October 15, 2007.

Elizabeth M. Duke,
Administrator.

[FR Doc. E7-20703 Filed 10-19-07; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Heart, Lung, and Blood Institute; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Heart, Lung, and Blood Institute Special Emphasis Panel Research Scientist Development and Clinical Investigator Awards (K02's & K08's).

Date: November 1-2, 2007.

Time: 8 a.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: Marriott Baltimore/Washington Int'l Airport, 1743 West Nursery Road, Baltimore, MD 21240.

Contact Person: David A Wilson, PhD, Scientific Review Administrator, Review Branch/DERA, National Heart, Lung, and Blood Institute, 6701 Rockledge Drive, Room 7204, Bethesda, MD 20892-7924, (301) 435-0299, wilsonda2@nhlbi.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

Name of Committee: National Heart, Lung, and Blood Institute Special Emphasis Panel Research Demonstration and Dissemination Projects.

Date: November 14, 2007.

Time: 1 p.m. to 3 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892. (Telephone Conference Call).

Contact Person: Holly Patton, PhD, Scientific Review Administrator, Review Branch/DERA, National Heart, Lung, and Blood Institute, 6701 Rockledge Drive, Room 7188, Bethesda, MD 20892-7924, 301-435-0280, pattonh@nhlbi.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.233, National Center for Sleep Disorders Research; 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; 93.839, Blood Diseases and Resources Research, National Institutes of Health, HHS).

Dated: October 15, 2007.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 07-5206 Filed 10-19-07; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of General Medical Sciences; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Minority Programs Review Committee, MBRS Review Subcommittee B.

Date: November 2, 2007.

Time: 8:30 a.m. to 2:30 p.m.

Agenda: To review and evaluate grant applications.

Place: Residence Inn Bethesda, 7335 Wisconsin Avenue, Bethesda, MD 20814.

Contact Person: Rebecca H. Johnson, PhD, Office of Scientific Review, National Institute of General Medical Sciences, National Institutes of Health, Natcher Building, Room 3AN18C, Bethesda, MD 20892, 301-594-2771, johnsonrh@nigms.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

Name of Committee: Minority Programs Review Committee, MARC Review Subcommittee A.

Date: November 13-14, 2007.

Time: 8 a.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: Hyatt Regency Bethesda, 7400 Wisconsin Avenue, Bethesda, MD 20814.

Contact Person: Mona R. Trempe, PhD, Scientific Review Administrator, Office of Scientific Review, National Institute of General Medical Sciences, National Institutes of Health, 45 Center Drive, Room 3AN12, Bethesda, MD 20892, 301-594-3998, trempepm@mail.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.375, Minority Biomedical Research Support; 93.821, Cell Biology and