vaccinepriorities.html. For those who may not have Internet access, a hard copy can be requested from the point of contact, Hui-Hsing Wong, Office of the Assistant Secretary for Planning and Evaluation (202) 205-0519.

Date: October 24, 2007.

RADM W. Craig Vanderwagen,

Assistant Secretary for Preparedness and Response.

[FR Doc. 07–5435 Filed 10–31–07; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Board on Radiation and Worker Health (ABRWH or Advisory Board), National Institute for Occupational Safety and Health (NIOSH)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC), announces the following meeting of the aforementioned committee:

Time and Date: 11 a.m.–4 p.m., November 27, 2007.

Place: Audio Conference Call via Federal Telecommunications System Conferencing. The USA toll free dial in number is 1–866–659–0537 with a pass code of 9933701.

Status: Open to the public, but without a public comment period.

Background: The Advisory Board was established under the Energy Employees Occupational Illness Compensation Program Act of 2000 to advise the President on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Advisory Board include providing advice on the development of probability of causation guidelines which have been promulgated by the Department of Health and Human Services (HHS) as a final rule, advice on methods of dose reconstruction which have also been promulgated by HHS as a final rule, advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed for purposes of the compensation program, and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC).

In December 2000, the President delegated responsibility for funding, staffing, and operating the Advisory Board to HHS, which subsequently delegated this authority to the CDC.

NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, most recently, August 3, 2007, and will expire on August 3, 2009.

Purpose: This Advisory Board is charged with (a) providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; (b) providing advice to the Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this program; and (c) upon request by the Secretary, HHS, advising the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class.

Matters To Be Discussed: The agenda for the conference call includes: FY 2008 New Site Profiles and New Procedures for SC&A; Procedures to Select New Contractor for ABRWH; Work Group Updates; Sandia-Livermore Update and Future Activities; Chapman Valve Reports from DOE and DOL; Dow Chemical Report from DOE; SEC and Site Profile Matrices Update; Subcommittee for Dose Reconstruction Reviews Report of the 4th and 5th Sets of Individual Dose Reconstructions, and the Summary Report on the First 100 Cases; Rocky Flats Update; Discussion of Board Procedures: Status of and Plans for Future Board Activities; and Board Working Time.

The agenda is subject to change as priorities dictate. Because there is not a public comment period, written comments may be submitted. Any written comments received will be included in the official record of the meeting and should be submitted to the contact person below well in advance of the meeting.

Contact Person for More Information: Dr. Lewis V. Wade, Executive Secretary, NIOSH, CDC, 4676 Columbia Parkway, Cincinnati, Ohio 45226. Telephone (513) 533–6825, Fax (513) 533–6826.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: October 25, 2007.

Elaine L. Baker,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E7–21505 Filed 10–31–07; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Advisory Committee on Interdisciplinary, Community-Based Linkages; Notice of Request for Nominations

SUMMARY: The Health Resources and Services Administration (HRSA) is requesting nominations to fill seven (7) upcoming vacancies on the Advisory Committee on Interdisciplinary, Community-Based Linkages (ACICBL).

Authority: 42 U.S.C. 294f, Section 756 of the PHS Act, as amended. The Advisory Committee is governed by provisions of Public Law (Pub. L.) 92–463, as amended (5 U.S.C. Appendix 2) which sets forth standards for the formation and use of advisory committees.

DATES: The Agency must receive nominations on or before December 31, 2007.

ADDRESSES: All nominations are to be submitted by mail to Louis D. Coccodrilli, Designated Federal Official, ACICBL, Bureau of Health Professions (BHPr), HRSA, Parklawn Building, Room 9–05, 5600 Fishers Lane; Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT:

Adriana Guerra, Public Health Fellow, Division of Medicine and Dentistry, by e-mail *aguerra@hrsa.gov* or telephone, (301) 443–6194.

SUPPLEMENTARY INFORMATION: Under the authorities that established the ACICBL, the Federal Advisory Committee Act of October 6, 1972 (Pub. L. 92–463), and section 2119 of the Act, 42 U.S.C. 00aa–19, as added by Public Law 99–660 and amended, HRSA is requesting nominations for seven (7) voting members.

The ACICBL provides advice and recommendations to the Secretary and to the Congress concerning policy, program development and other matters of significance related to interdisciplinary, community-based training grant programs authorized under sections 751–756, Title VII, Part D of the Public Health Service Act. The ACICBL prepares an annual report describing the activities conducted

during the fiscal year, identifying findings and developing recommendations to enhance Title VII Interdisciplinary, Community-Based Training Grant Programs. The Annual Report is submitted to the Secretary of the U.S. Department of Health and Human Services, and ranking members of the Committee on Health, Education, Labor and Pensions of the Senate, and the Committee on Energy and Commerce of the House of Representatives.

The Department of Health and Human Services is requesting a total of seven (7) nominations for voting members of the ACICBL from schools that have administered or are currently administering awards from the following programs: Area Health Education Centers (AHECs)—1 nominee, Allied Health—1 nominee, Geriatric Education and Training Programs—1 nominee, Health Education and Training Centers (HETCs)-1 nominee, and Quentin N. Burdick Program for Rural Interdisciplinary Training—1 nominee. Nominations are also requested for two student, resident, and/or fellow representatives.

Interested individuals may nominate multiple qualified professionals for membership to the ACICBL to allow the Secretary to choose from a highly qualified list of potential candidates. Nominees willing to serve as members of the ACICBL should have no appearance of a conflict of interest that would preclude their participation. Potential candidates will be asked to provide detailed information concerning consultancies, research grants, or contracts to permit an evaluation of possible sources of conflicts of interest. În addition, a curriculum vitae and a statement of interest will be required of the nominee to support experience working with Title VII Interdisciplinary, Community-Based Training Grant Programs, expertise in the field, and personal desire in participating on a National Advisory Committee. Qualified candidates will be invited to serve a one-, two-, or three-year term. All nominations must be received no later than December 31, 2007.

The legislation governing this Committee requires a fair balance of health professionals who represent the general population with regard to a broad geographic distribution and an evenness of urban and rural areas, along with professionals who are women and minorities. As such, the pool of appropriately qualified nominations should reflect these requirements to the degree possible.

Dated: October 25, 2007.

Alexandra Huttinger,

Acting Director, Division of Policy Review and Coordination.

[FR Doc. E7-21521 Filed 10-31-07; 8:45 am] BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND **HUMAN SERVICES**

Health Resources and Services Administration

Revisions to the Program Guidance for the Training in Primary Care Medicine and Dentistry Program

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

ACTION: General notice.

SUMMARY: HRSA announces a revision to the program guidance for the Training in Primary Care Medicine and Dentistry Program posted on August 23, 2007 on Grants.gov, http://www.grants.gov. The guidance includes information for the following competitive funding opportunities:

HRSA-08-032 Academic Administrative Units; HRSA-08-035 Physician Faculty Development; HRSA-08-037 Predoctoral Training; HRSA-08-039 Physician Assistant Training; HRSA-08-042 Residency Training; and HRSA-08-044 Residency Training in General and Pediatric Dentistry. This revision only affects the Physician Faculty Development program, HRSA-08–035. A revised guidance has been posted on Grants.gov. Specifically, the additional language included in the guidance is presented below:

Primary Care Clinician Research Fellowship—This track provides fellowships that focus on development of primary care research investigators.

Duration—Fellowships will last 2 to 3

Features—Applications should include a rigorous research/training track which is offered at an academic health science center. Advanced degrees (e.g., M.P.H., M.P.A.) are a desirable option. Desirable candidates include multidisciplinary physician faculty and fellows. Research areas should be consistent with the scope and content of primary care practice and education, and may include such areas as the linkage between Healthy People 2010 and health disparities, community and practice-based research, patient safety, quality improvement, professionalism, health literacy, and cultural competency.

Stipend Level—Enhanced stipend level is equivalent to National Research Service Award (NRSA) stipends, which range from \$36,996 for individuals entering immediately following receipt of their doctoral degree to \$51,036 for individuals with 7 years or more of relevant experience and/or training. A table of stipend levels is provided in this guidance. Supplementation of the stipends is allowable and encouraged; however, the combination of stipend and supplementation may not exceed the full-time salary of comparable multidisciplinary physician faculty at the applicant's institution.

Time Requirement—Pro-rated stipends are not available. For applicants requesting full stipends, 60 percent of a Fellow's time for 24- to 36 months of fellowship must be devoted to formal research training. The remaining 40 percent of time for a 24 to 36-month fellowship must be spent in activities consistent with the roles of academic faculty (clinical practice, teaching, and/or administration).

FOR FURTHER INFORMATION CONTACT: Brenda L. Williamson, MA, CTHE, Chief, Primary Care Medical Education

Branch, Division of Medicine and Dentistry, Bureau of Health Professions, HRSA, 5600 Fishers Lane, Rockville, MD 20857, (301) 443-1467.

Dated: October 25, 2007.

Elizabeth M. Duke,

Administrator.

[FR Doc. E7-21520 Filed 10-31-07; 8:45 am] BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection: Comment Request; A Process Evaluation of the NIH Director's Pioneer Award (NDPA) **Program**

Summary: In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the Office of the Director, the National Institutes of Health (NIH), will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for

review and approval.

Proposed Collection: Title: A Process Evaluation of the NIH Director's Pioneer Award (NDPA) Program. Type of Information Collection Request: Extension of a currently approved collection. Need and Use of Information Collection: This study will assess the NDPA Program operations and the outputs of the identification, evaluation and selection process. The primary