

Department of Health and Human Services; the Assistant Secretary for Health; the Director, CDC; the Commissioner, Food and Drug Administration (FDA); and the Administrator, Centers for Medicare and Medicaid Services (CMS). The advice and guidance pertain to general issues related to improvement in clinical laboratory quality and laboratory medicine practice and specific questions related to possible revision of the CLIAC standards. Examples include providing guidance on studies designed to improve safety, effectiveness, efficiency, timeliness, equity, and patient-centeredness of laboratory services; revisions to the standards under which clinical laboratories are regulated; the impact of proposed revisions to the standards on medical and laboratory practice; and the modification of the standards and provision of non-regulatory guidelines to accommodate technological advances, such as new test methods and the electronic transmission of laboratory information.

Matters To Be Discussed: The agenda will include agency updates from the CDC, the CMS, and the FDA; and presentations and discussions addressing activities of the Clinical Laboratory Integration into Health Care Collaborative (CLIHCC); the Laboratory Medicine Best Practices (LMBP) Initiative; the Communication in Informatics Workgroup; and the topic of usability of electronic health records. Also discussed will be the potential need for educational materials and resources for sites that test under a Provider-performed Microscopy Certificate; and the increased use of culture-independent microbiology diagnostics and the impact on public health.

Agenda items are subject to change as priorities dictate.

Providing Oral or Written Comments: It is the policy of CLIAC to accept written public comments and provide a brief period for oral public comments whenever possible.

Oral Comments: In general, each individual or group requesting to make an oral presentation will be limited to a total time of five minutes (unless otherwise indicated). Speakers must also submit their comments in writing for inclusion in the meeting's Summary Report. To assure adequate time is scheduled for public comments, individuals or groups planning to make an oral presentation should, when possible, notify the contact person below at least one week prior to the meeting date. Written Comments: For individuals or groups unable to attend

the meeting, CLIAC accepts written comments until the date of the meeting (unless otherwise stated). However, it is requested that comments be submitted at least one week prior to the meeting date so that the comments may be made available to the Committee for their consideration and public distribution. Written comments, one hard copy with original signature, should be provided to the contact person below. Written comments will be included in the meeting's Summary Report.

Availability of Meeting Materials: To support the green initiatives of the federal government, the CLIAC meeting materials will be made available to the Committee and the public in electronic format (PDF) on the internet instead of by printed copy. Refer to the CLIAC Web site on the day of the meeting for materials. http://www.cdc.gov/cliac/cliac_meeting_all_documents.aspx.

Note: If using a mobile device to access the materials, please verify the device's browser is able to download the files from the CDC's Web site before the meeting. Alternatively, the files can be downloaded to a computer and then emailed to the portable device. An internet connection, power source and limited hard copies may be available at the meeting location, but cannot be guaranteed.

Contact Person for Additional Information: Nancy Anderson, Chief, Laboratory Practice Standards Branch, Division of Laboratory Science and Standards, Laboratory Science, Policy and Practice Program Office, Office of Surveillance, Epidemiology and Laboratory Services, Centers for Disease Control and Prevention, 1600 Clifton Road NE., Mailstop F-11, Atlanta, Georgia 30333; telephone (404) 498-2741; fax (404) 498-2219; or via email at NAnderson@cdc.gov.

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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: July 2, 2012.

Elaine L. Baker,

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

[FR Doc. 2012-17024 Filed 7-11-12; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Subcommittee for Dose Reconstruction Reviews (SDRR), Advisory Board on Radiation and Worker Health (ABRWH or the 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 for the aforementioned subcommittee:

Time and Date: 8:30 a.m.-5 p.m., Eastern Time, August 6, 2012.

Place: Cincinnati Airport Marriott, 2395 Progress Drive, Hebron, Kentucky 41018, Telephone: (859) 334-4611, Fax: (859) 334-4619.

Status: Open to the public, but without an oral public comment period. To access by conference call dial the following information: 1 (866) 659-0537, Participant Pass Code 9933701.

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 that 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 CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, and will expire on August 3, 2013.

Purpose: The 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, advise 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. The Subcommittee for Dose Reconstruction Reviews was established to aid the Advisory Board in carrying out its duty to advise the Secretary, HHS, on dose reconstruction.

Matters To Be Discussed: The agenda for the Subcommittee meeting includes: revisiting the Board's dose reconstruction review process; dose reconstruction program quality management and assurance activities, including an overview of contractor quality management system and an update on the results of NIOSH internal dose reconstruction blind reviews; dose reconstruction issues from NIOSH 10-year review, including review of resource impact of possible changes to efficiency process and plans for a NIOSH Division of Compensation Analysis and Support claimant favorability analysis; discussion of dose reconstruction cases under review (sets 8–9, cases with Category A findings from sets 10–13, Savannah River Site cases from sets 10–13); and pre-selection of set 16 dose reconstruction cases to be reviewed by the Board's technical support contractor.

The agenda is subject to change as priorities dictate.

In the event an individual cannot attend, written comments may be submitted. Any written comments received will be provided at the meeting and should be submitted to the contact person below well in advance of the meeting.

Contact Person for More Information: Theodore Katz, Designated Federal Officer, NIOSH, CDC, 1600 Clifton Road, Mailstop E–20, Atlanta, Georgia 30333, Telephone: (513) 533–6800, Toll Free 1 (800) CDC–INFO, Email: ocas@cdc.gov.

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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: July 6, 2012.

Elaine L. Baker,

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

[FR Doc. 2012–17041 Filed 7–11–12; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket Number NIOSH–190]

Revised Document Posted: NIOSH List of Antineoplastic and Other Hazardous Drugs in Healthcare Settings 2012, Correction

AGENCY: National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: A notice of issuance of Final Guidance Publication was published in the **Federal Register** June 27, 2012, (77 FR 38297). This notice is corrected as follows:

On page 38297, the Docket number has been changed to NIOSH–190.

FOR FURTHER INFORMATION CONTACT:

Barbara MacKenzie, NIOSH, Robert A. Taft Laboratories, 4676 Columbia Parkway, MS–C26, Cincinnati, OH 45226, Telephone (513) 533–8132, email hazardousdrugs@cdc.gov.

Dated: July 6, 2012.

John Howard,

Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.

[FR Doc. 2012–17002 Filed 7–11–12; 8:45 am]

BILLING CODE 4163–19–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Office of Clinical and Preventive Services Funding Opportunity: National HIV Program for Enhanced HIV/AIDS Screening and Engagement in Care

AGENCY: Indian Health Service, HHS

ACTION: Notice: correction.

SUMMARY: The Indian Health Service published a document in the **Federal Register** on June 19, 2012, concerning Announcement Type: New. Funding Announcement Number: HHS–2012–

IHS–OCPS–HIV–0001. Catalog of Federal Domestic Assistance Number: 93.933. The document contained five incorrect dates.

FOR FURTHER INFORMATION CONTACT: Dr. Charlene Avery, Director, Office of Clinical and Preventative Services, Indian Health Service, 801 Thompson Avenue, Suite 300, Reyes Building, Rockville, MD 20852, Telephone 301–443–1190. (This is not a toll-free number.)

Corrections

In the **Federal Register** of June 19, 2012, in FR DOC 2012–14891, on page 36550, in the third column, under the heading “Dates: Key Dates:” “Application Deadline Date: July 16, 2012.” should read “July 20, 2012.” On page 36552, in the first column, under the heading “Proof of Non-Profit Status”; “A copy of the 501(c)(3) Certificate must be received with your application submission by the deadline date of July 16, 2012.” should read “A copy of the 501(c)(3) Certificate must be received with your application submission by the deadline date of July 20, 2012.” On page 36553, in the first column, under the heading “3. Submission Dates and Times” “Applications must be submitted electronically through Grants.gov by 12:00 a.m., midnight Eastern Daylight Time (EDT) on July 16, 2012” should read “Applications must be submitted electronically through Grants.gov by 12:00 a.m., midnight Eastern Daylight Time (EDT) on July 20, 2012.” On page 36553, in the second column, under the heading “Proof of Non-Profit Status:” “Due Date July 16, 2012” should read “Due Date July 20, 2012.” On page 36553, in the third column, under the fourth bullet “If the waiver is approved, the application should be sent directly to the DGM by the deadline date of July 16, 2012.” should read “If the waiver is approved, the application should be sent directly to the DGM by the deadline date of July 20, 2012.”

Dated: July 2, 2012.

Yvette Roubideaux,

Director, Indian Health Service.

[FR Doc. 2012–17047 Filed 7–11–12; 8:45 am]

BILLING CODE 4165–16–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Office of Urban Indian Health Programs Funding Opportunity: Title V HIV/AIDS Program

AGENCY: Indian Health Service, HHS.