already received PMA-approval (generational changes).

(4) Class III devices that are comparable to a PMA-approved device but are under investigation for a new indication for use. For purposes of studying the new indication, no significant modification to the device were required.

(5) Pre-amendments Class III devices that become the subject of an investigational device exemption after the Food and Drug Administration requires premarket approval, that is, no PMA application was submitted or the PMA application was denied.

(6) Nonsignificant risk device investigations for which the Food and Drug Administration required the submission of an investigational device exemption.

The following information presents the device number, category (in this case, B), and criterion code.

G950165 B3
G950167 B2
G950169 B3
G950170 B4
G950172 B3
G950173 B1
G950174 B4
G950179 B1
G950180 B1
G950181 B1
G950183 B3
G950184 B1
G950187 B2
G950188 B1
G950189 B1
G950190 B4
G950191 B4
G950192 B6
G950193 B4
G950195 B1
G950196 B4
G950197 B3
G950198 B1
G950201 B1
G950202 B4
G950206 B1
G950208 B3
G950209 B4

Note: Some investigational devices may exhibit unique characteristics or raise safety concerns that make additional consideration necessary. For these devices, HCFA and the Food and Drug Administration will agree on the additional criteria to be used. The Food and Drug Administration will use these criteria to assign the device(s) to a category. As experience is gained in the categorization process, this addendum may be modified.

[FR Doc. 96–16217 Filed 6–25–96; 8:45 am]

BILLING CODE 4120–01–P

[BPD–873–N]

Medicare Program; Announcement of Collaborative Effort With the National Institutes of Health to Study the Effectiveness of Lung Volume Reduction Surgery

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Notice.

We are announcing our participation in a collaborative effort with the National Heart, Lung and Blood Institute of the National Institutes of Health to study the effectiveness of lung volume reduction surgery. The purpose of this multi-centered randomized study, which will include a prospective registry examining the role of lung volume reduction surgery, is to evaluate the long-term outcome of the procedure on function, morbidity, and mortality as well as to define appropriate patient selection criteria. We are issuing this announcement so that interested facilities and providers who monitor the Federal Register are aware of this collaborative effort. The National Heart, Lung and Blood Institute announced in the May 9 and 10, 1996 issues of the *Commerce Business Daily* the qualifications and experience required for the clinical centers and the clinical coordinating center to participate in the program. It also described the patient population who will be included in the study and how the study will be conducted.

On June 3, 1996, the National Heart, Lung and Blood Institute made available a formal request for proposals for clinical centers and a clinical coordinating center interested in participating in the study through the National Institutes of Health (NIH) Request for Proposals (RFP) Gopher. Users have access via the NIH Home Page (World Wide Web) at http://www.nih.gov. Once users are at the NIH Home Page, they should select ''Grants & Contracts,'' then select ''R&D Requests for Proposals (RFP).'' Offerors that have access to the NIH Gopher Server but not the Internet can access the RFP by pointing their gopher clients to GOPHER.NIH.GOVPORT70. They should select ''Grant and Research Information,'' then select ''R&D Requests for Proposals (RFP).''

FOR FURTHER INFORMATION CONTACT: Karen McVearry, (410) 786–4643.

Authority: Sections 1102 and 1871 of the Social Security Act (42 U.S.C. 1302 and 1395hh)

(Catalog of Federal Domestic Assistance Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: June 9, 1996.

Bruce C. Vladeck,

Administrator, Health Care Financing Administration.

[FR Doc. 96–16216 Filed 6–25–96; 8:45 am]

BILLING CODE 4120–01–P

National Institutes of Health

National Cancer Institute; Notice of Meeting of the National Cancer Advisory Board

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 meeting of the National Cancer Advisory Board, National Cancer Institute on July 18, 1996. The meeting will be open to the public and attendance by the public will be limited to space available.

The Committee Management Office, National Cancer Institute, National Institutes of Health, Executive Plaza North, Room 630E, 9000 Rockville Pike, Bethesda, Maryland 20892 (301/496–5708), will provide summaries of the meetings and rosters of the Board members, upon request.

Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should contact Ms. Carole Frank, Committee Management Specialist, at 301/496–5708 in advance of the meeting.

Name of Committee: National Cancer Advisory Board.

Contact Person: Dr. Marvin R. Kalt, Executive Secretary, National Cancer Institute, NIH, Executive Plaza North, Room 600A, 6130 Executive Blvd., Bethesda, MD 20892–7405; (301) 496–5147.

Date of Meeting: July 18, 1996.

Place of Meeting: National Cancer Institute via telephone conference, National Institutes of Health, Room 640, 6130 Executive Blvd., Rockville, MD 20852.

Open: 1 pm to approximately 2 pm.

Agenda: To discuss the NCAB resolution for the 25th Anniversity of the National Cancer Act.

Dated: June 21, 1996.

Susan K. Feldman,

Committtee Management Officer, NIH.

[FR Doc.96–16323 Filed 6–25–96; 8:45 am]

BILLING CODE 4140–01–M

Office of Extramural Research; Notice of Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice