Control and Prevention (CDC), and the Administrator, Agency for Toxic Substances and Disease Registry (ATSDR), regarding community, American Indian Tribes, and labor concerns pertaining to CDC's and ATSDR's public health activities and research at respective DOE sites. Activities shall focus on providing a forum for community, American Indian Tribal, and labor interaction and serve as a vehicle for community concern to be expressed as advice and recommendations to CDC and ATSDR. The Hanford Health Effects Subcommittee (HHES) was established to advise the ATSDR and CDC on human health studies and public health activities that the agencies may undertake to address human exposures to historical releases of hazardous materials from the Hanford Nuclear Reservation in eastern Washington State.

Nominiations are being sought to broaden the pool of available expertise, including the areas of occupational/environmental public health, social sciences/psychology, and science/health physics. Close attention will be given to minority and female representation so long as the effectiveness of the Subcommittee is not impaired.

Nominations for new members will be accepted by fax or written correspondence. Submissions must include the nominee's qualifications to serve, personal assets for working on the Subcommittee, and a current resume or curriculum vitae. The closing date for nominations is October 15, 1996.

Nominations should be sent to: Mr. James K. Carpenter, Executive Secretary, HHES, 1600 Clifton Road, NE, M/S E–28, Atlanta, Georgia 30333; Fax 404/639–0759, E-Mail jkc1@atsoaa1.em.cdc.gov.

Dated: September 18, 1996.

Carolyn J. Russell,

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

[FR Doc. 96–24547 Filed 9–24–96; 8:45 am]

BILLING CODE 4163–70–M

Centers for Disease Control and Prevention

The National Center for HIV, STD, and TB Prevention (NCHSTP) of the Centers for Disease Control and Prevention (CDC) Announces the Following meeting

Name: Consultation on Partner Notification Program Policies in Disease Control Efforts Conducted by Public Health Programs in the United States.

Time and Date: 8 a.m.–5 p.m., October 17, 1996; 8 a.m.–1 p.m., October 18, 1996.

Place: Atlanta Marriott North Central, 2000 Century Boulevard NE, Atlanta, Georgia, 30345, telephone 404/325–0000, fax 404/325–4920.

Status: Open to the public for participation, comment, and observation, limited only by the space available. The meeting room accommodates approximately 65 people.

Purpose: To invite comment from recognized representatives of public health agencies and the public on proposed public health principles and practices of partners notification services used to control infectious diseases such as HIV and STD in the United States.

Currently CDC requires all health department recipients of HIV prevention funding to ''establish standards and implement procedures for partner notification consistent with State/local needs, priorities, and resources availability.'' Summarily, STD cooperative agreements also require grantees to have provisions for partner notification services.

Matters to be discussed: The panel of expert consultants will examine future directions in partner notification policy, practice and research for the purpose of disease control in the United States concerning HIV and STD.

Agenda items are subject to change as priorities dictate.

Contact person for more information: Jill Leslie, Division of HIV/AIDS Prevention, NCHSTP, CDC, M/S E40, 1600 Clifton Road, NE, Atlanta, Georgia 30303, telephone 404/639–2918.

Dated: September 19, 1996.

Carolyn J. Russell,

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

[FR Doc. 96–24548 Filed 9–24–96; 8:45 am]

BILLING CODE 4163–18–M

Food and Drug Administration

[Docket No. 96N–0075]

Hance Brothers and White Co., et al.; Withdrawal of Approval of 16 Abbreviated Applications

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is withdrawing 3 abbreviated antibiotic applications (AADA'S) and 13 abbreviated new drug applications (ANDA's). The basis for the withdrawals is that the sponsors have repeatedly failed to file required annual reports for these applications.

EFFECTIVE DATE: September 25, 1996.

FOR FURTHER INFORMATION CONTACT: Olivia A. Vieira, Center for Drug Evaluation and Research (HFD–7), Food and Drug Administration, 7500 Standish Pl., Rockville, MD 20855, 301–594–1046.

SUPPLEMENTARY INFORMATION: The holders of approved applications to market new drugs or antibiotics for human use are required to submit annual reports to FDA concerning each of their approved applications in accordance with § 314.81 (21 CFR 314.81).

In the Federal Register of March 15, 1996 (61 FR 10768), FDA offered an opportunity for a hearing on a proposal to withdraw approval of 17 abbreviated applications because the firms had failed to submit the required annual reports for these applications.

One application holder, Superpharm Corp. notified the agency in writing that ANDA 89–184, Acetaminophen and Codeine Phosphate Tablets, is no longer marketed and requested that approval of the application be withdrawn. FDA withdrew approval of ANDA 89–184 in the Federal Register of August 5, 1996 (61 FR 40649).

The holders of the other 16 applications did not respond to the notice of opportunity for a hearing. Failure to file a written notice of participation and request for a hearing as required by 21 CFR 314.200 constitutes an election by the applicant not to make use of the opportunity for a hearing concerning the proposal to withdraw approval of the applications and a waiver of any contentions concerning the legal status of the drug products.

Therefore, the Director, Center for Drug Evaluation and Research, is withdrawing approval of the applications listed in the table in this document.