subtypes and to define the extent of variability within recognized subtypes. The secondary goal is to collect specimens representing these variants and recognized subtypes (A–I) to prepare a panel of sera collected from people whose infecting virus has been sequenced. The panel will be used to evaluate the sensitivity and specificity of existing and newly developed HIV antibody tests with regard to these strains and to assist, if necessary, in modifying these tests to broaden their sensitivity. Specimens will primarily be blood, but may include urine or oral fluids to evaluate diagnostic tests using these specimens. The research efforts in support of this CRADA are focused on the combined use of molecular and epidemiologic data to examine the question of whether certain HIV strains have distinctive patterns of transmission and disease progression in infected individuals.

The CRADA partner will be expected to provide both financial as well as scientific resources. Substantial involvement in specimen testing including molecular and biochemical analysis of viruses and viral components would be anticipated from the CRADA partner.

Respondents should provide evidence of expertise in the development and marketing of clinical diagnostics (prior experience with HIV preferred) and supporting data (e.g., publications, proficiency testing, certifications, resumes, etc.) of qualifications for the laboratory director and laboratory personnel who would be involved in the CRADA. The respondent will develop the final research plan in collaboration with CDC but should provide an outline of a research plan for review by CDC in judging applications.

Applicant submissions will be judged according to the following criteria:

1. Knowledge of molecular diagnostics including: epitope specific and recombinant based immunoassays, rapid tests, and nucleic acid based detection assays.
2. Working knowledge of nucleic acid sequencing, PCR, eukaryotic expression of recombinant antigens, and the large scale production of said products.
3. Operational experience in an international setting.
4. Procedural understanding of and experience in the development and marketing of HIV diagnostics in the United States.

This CRADA is proposed and implemented under the 1986 Federal Technology Transfer Act: Public Law 99–502, as amended.

The responses must be made to: Lisa Blake-DiSpigna, Program Analyst, National Center for Infectious Diseases, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE., Mailstop C–19, Atlanta, GA 30333.

Dated: April 3, 1998.

Joseph R. Carter

Acting Associate Director for Management and Operations, Centers for Disease Control and Prevention (CDC).

[FR Doc. 98–9335 Filed 4–8–98; 8:45 am]

BILLING CODE 4160–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Ethics Subcommittee of the Advisory Committee to the Director, Centers for Disease Control and Prevention: Meeting

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 subcommittee meeting.

Name: Ethics Subcommittee of the Advisory Committee to the Director, CDC.

Time and Date: 9 a.m.–3 p.m., April 27, 1998.

Place: CDC, Building 16, Room 5126, 1600 Clifton Road, NE, Atlanta, Georgia 30333.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 25 people.

Purpose: This subcommittee will anticipate, identify, and propose solutions to strategic and broad ethical issues facing CDC.

Matters To Be Discussed: Agenda items will include updates from the Associate Director for Science, Dixie E. Snider, M.D., followed by a discussion on issues surrounding the potential destruction of the smallpox virus, privacy and confidentiality of data collection, and scientific misconduct other than falsification, fabrication, and plagiarism.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Linda Kay McGowan, Acting Executive Secretary, Advisory Committee to the Director, CDC, 1600 Clifton Road, NE, M/S D–24, Atlanta, Georgia 30333, telephone 404/639–7080.

Dated: April 2, 1998.

Nancy C. Hirsch,

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

[FR Doc. 98–9332 Filed 4–8–98; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Consolidation of United States Ports Designated To Conduct Rodent Infestation Inspections and Issue Deratting and Deratting Exemption Certificates

AGENCY: Centers for Disease Control and Prevention, Department of Health and Human Services, HHS.

ACTION: Notice.

SUMMARY: In accordance with International and U.S. Federal regulations, the Centers for Disease Control and Prevention (CDC) has, for many years, inspected ships for rodent infestation and issued Deratting and Deratting Exemption Certificates at 18 major U.S. ports, as well as, by special arrangement, more than 100 smaller ports. To streamline these operations and increase cost effectiveness, CDC has consolidated the ports where it conducts these activities. As of October 1, 1997, CDC began conducting these inspections only at the ports of Baltimore, MD; Honolulu, HI: Houston, TX; Jacksonville, FL; Los Angeles, CA; Miami, FL; New Orleans, LA; New York, NY; San Francisco, CA; Savannah, GA; and Seattle, WA.

EFFECTIVE DATE: October 1, 1997.

FOR FURTHER INFORMATION CONTACT: David F. Rogers, Acting Chief, Program Operations Branch, Division of Quarantine, National Center for Infectious Diseases, Centers for Disease Control and Prevention (CDC), Mailstop E–03, Atlanta, Georgia 30333, (404) 639–8107, FAX (404) 639–2599, E-mail dfr1@cdc.gov.

SUPPLEMENTARY INFORMATION:

Purpose and Background

This announcement provides notification of CDC's consolidation of the ports in the U.S. where rodent infestation inspections of ships are conducted and Deratting and Deratting Exemption Certificates are issued.

In accordance with Article 17 of the International Health Regulations, published by the World Health Organization (WHO), Geneva, the United States is required to (1) ensure that a sufficient number of U.S. ports have the capacity to inspect ships for the issue of Deratting Exemption Certificates and (2) depending upon the volume and incidence of international traffic, approve a number of these ports and maintain the capacity to perform rodent infestation inspections and issue