

cancer advocacy community to reach common goals.

### Eligibility Requirements for Individual Members

To serve on the DCLG, a member must meet the following minimum eligibility requirements:

- Be involved in the cancer experience as a cancer survivor, a person affected by the suffering and consequences of cancer, or a professional or volunteer who works with survivors or those affected.
- Represent a constituency (formally or informally) with whom she or he communicates regularly on cancer issues and be able to serve as a conduit for information both to and from his/her constituency.

DCLG members must be committed to participating in all activities of the DCLG which includes at least two meetings a year in Bethesda.

### Criteria for Evaluating Individual Candidates

Nominees who meet the minimum eligibility requirements will be further assessed based on the following criteria:

- Cancer advocacy experience.
- Ability to communicate effectively.
- Ability to represent broad issues, think "globally".
- Ability to contribute to an effective group process.
- Leadership ability.

### Characteristics of the DCLG

In addition to the criteria for individual candidates, the following characteristics of the DCLG as a group are intended to ensure that it reflects the breadth and diversity of the consumer advocacy community:

- Multicultural diversity.
- A broad mix of cancer sites.
- Representation of the medically underserved.
- Men and women.
- A range of organizations (local/regional and national).
- Age diversity.
- Geographic diversity (rural/urban mix).

### Selection Process

A call for nominations is disseminated annually to a broad range of groups, including local, regional and national organizations, to encourage nominations of candidates reflecting the diversity sought for the DCLG. All nominees are screened for eligibility, then evaluated according to the criteria. A list of highly qualified candidates who reflect balance and diversity of representation is forwarded to the Director, NCI, who selects the DCLG

members. The original members of the DCLG endorsed this process, which will be used to select future members.

Nominations may come from members of organizations, or individuals, including self-nominations. The nominations must be postmarked no later than November 1, 1999. To request a nomination package send your name, advocacy organization affiliation (if any), and address to the Office of Liaison Activities, NCI, Building 31; Room 10A06, 31 Center Drive, MSC 2580, Bethesda, MD 20892-2580. You may also request a package via fax to 301 480-7558 or e-mail to liaison@od.nci.nih.gov

Dated: August 19, 1999.

### LaVerne Stringfield,

*Director, Office of Federal Advisory Committee Policy, National Institutes of Health.*

[FR Doc. 99-22237 Filed 8-25-99; 8:45 am]

BILLING CODE 4140-01-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Notice of Establishment

Pursuant to the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), the Director, National Institutes of Health, announces the establishment of the Secretary's Advisory Committee on Xenotransplantation (Committee).

This Committee will advise the Secretary of Health and Human Services, through the Assistant Secretary for Health, on all aspects of the scientific development and clinical applications of xenotransplantation. The Committee's charge includes: advise on the current state of knowledge regarding xenotransplantation, review current and proposed xenotransplantation clinical trails, identify and discuss the medical, scientific, ethical, legal, and/or socioeconomic issues raised by these clinical trials, advise on the potential for transmission of infectious diseases, recommend changes to the PHS Guidelines on Infectious Disease Issues in Xenotransplantation, and discuss other issues that are relevant to xenotransplantation.

Unless renewed by appropriate action prior to its expiration, the Charter for the Secretary's Advisory Committee on Xenotransplantation will expire two years from the date of establishment.

Dated: August 16, 1999.

### Harold Varmus,

*Director, National Institutes of Health.*

[FR Doc. 99-22240 Filed 8-25-99; 8:45 am]

BILLING CODE 4140-01-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Center for Research Resources; Notice of Meeting

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 following meeting.

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Center for Research Resources Initial Review Group Comparative Medicine Review Committee.

*Date:* October 13-14, 1999.

*Open:* October 13, 1999, 8:00 AM to 9:30 AM.

*Agenda:* To discuss program planning and program accomplishments.

*Place:* One Washington Circle Hotel, Conference Center, One Washington Circle, Washington, DC 20037.

*Closed:* October 13, 1999, 9:30 AM to Adjournment.

*Agenda:* To review and evaluate grant applications.

*Place:* One Washington Circle Hotel, Conference Center, One Washington Circle, Washington, DC 20037.

*Contact Person:* John D. Harding, PhD, Scientific Review Administrator, Office Of Review, National Center for Research Resources, 6705 Rockledge Drive, MSC 7965, Room 6018, Bethesda, MD 20892-7965, (301) 435-0810.

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine, 93.306; 93.333, Clinical Research, 93.333; 93.371, Biomedical Technology; 93.389, Research Infrastructure, National Institutes of Health, HHS)