Name of Committee: Center for Scientific Review Special Emphasis Panel.

Date: July 7, 2000.

Time: 3:00 PM to 4:00 PM.

Agenda: To review and evaluate grant applications.

Place: NIH, Rockledge 2, Bethesda, MD 20892 (Telephone Conference Call).

Contact Person: Philip Perkins, PhD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4148, MSC 7804, Bethesda, MD 20892, (301) 435–1718.

(Catalogue of Federal Domestic Assistance Program Nos 93.306, Comparative Medicine, 93.306; 93.333, Clinical Research, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS)

June 19, 2000.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 00–15937 Filed 6–22–00; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director, National Institutes of Health; Notice of Meeting

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of a meeting of the Peer Review Oversight Group.

The meeting will be open to the public, 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.

Name of Committee: Peer Review Oversight Group.

Date: July 10–11, 2000.

Time: July 10, 2000, 8:30 AM to 5:00 PM.

Agenda: The discussions will focus on peer review-related issues including, the use of lay reviewers, structured review, preliminary data, modular grant applications, conflict of interest, Federal reimbursement for compliance costs, and the status of activities related to the implementation of recommendations in the Regulatory Burden Report.

Place: National Institutes of Health, Building 60, 9000 Rockville Pike, Bethesda, MD 20892.

Contact Person: Barbara Nolte, Program Analyst, Office of Extramural Research, National Institutes of Health, 9000 Rockville Pike, Building 1, Room 252, Bethesda, MD 20892, 301–402–1058.

(Catalogue of Federal Domestic Assistance Program Nos. 93.14, Intramural Research Training Award; 93.187, Undergraduate Scholarship Program for Individuals from Disadvantaged Backgrounds; 93.22, Clinical Research Loan Repayment Program for Individuals from Disadvantaged Backgrounds; 93.232, Loan Repayment Program for Research Generally; 93.39, Academic Research Enhancement Award; 93.936, NIH Acquired Immunodeficiency Syndrome Research Loan Repayment Program, National Institutes of Health, HHS)

Dated: June 19, 2000.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 00–15938 Filed 6–22–00; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Federal Drug Testing Custody and Control Form

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice of final form.

SUMMARY: The Substance Abuse and Mental Health Services Administration (SAMHSA) has revised the Federal Drug Testing Custody and Control Form (CCF). The current Federal CCF has a July 31, 2000, expiration date. The Office of Management and Budget (OMB) has approved the use of the new Federal CCF until June 30, 2003. OMB approval of the new Federal CCF allows Federal agencies and employers regulated by the Department of Transportation (DOT) to begin using the new Federal CCF on August 1, 2000, for their workplace drug testing programs.

EFFECTIVE DATE: August 1, 2000.

FOR FURTHER INFORMATION CONTACT: Walter F. Vogl, Ph.D., Drug Testing Section, Division of Workplace Programs, CSAP, 5600 Fishers Lane, Rockwall II, Suite 815, Rockville, Maryland 20857, tel. (301) 443–6014, fax (301) 443–3031, or email: wvogl@samhsa.gov.

SUPPLEMENTARY INFORMATION:

Background

All urine specimens must be collected using chain of custody procedures to document the integrity and security of the specimen from the time of collection until receipt by the laboratory. To ensure uniformity among all Federal agency and federally regulated workplace drug testing programs, the use of an OMB approved Federal CCF is required. Based on the experiences of using the current Federal CCF for the past several years, SAMHSA and DOT initiated a joint effort to develop a new Federal CCF that was easier to use and more accurately reflected both the collection process and how results were reported by the drug testing laboratories. This effort included scheduling two public meetings attended by over 35 industry representatives who recommended most of the changes to the current Federal CCF. As a result of these two meetings, SAMHSA published a proposed revised Federal CCF in a **Federal Register** notice (64 FR 61916) on November 15, 1999. A sample of the proposed form was included in that notice.

The first major proposed change was to make the revised Federal CCF a six-part form by eliminating the split specimen copy. Since the split specimen copy is used only when the split specimen is tested (*i.e.,* less than approximately 5 percent of split specimens are tested), it would be more efficient to have the split specimen test result reported on the original laboratory copy (Copy 1). When the split specimen is tested, the primary laboratory would need to make a photocopy of Copy 1 of the Federal CCF and send it along with the split specimen to the second laboratory. Although this procedure requires the primary laboratory to make a photocopy, SAMHSA and DOT believe the cost saving associated with not including a separate split specimen copy with each Federal CCF outweighs the cost associated with the few times that Copy 1 will need to be photocopied by the primary laboratory. Additionally, eliminating the split specimen copy will help make any handwritten information appear more legible on the later copies.

The second major proposed change was to move the specimen bottle seal(s)/label(s) from the right side of the form to the bottom of Copy 1. This change would permit overprinting information on the form using standard width tractor feed printers rather than requiring more expensive wide carriage printers. In addition, the storage and handling requirements would be similar to other documents since the overall size of the new Federal CCF (including the tractor feed strips) is essentially the same as a standard sheet of paper.

The third major proposed change involved simplifying the chain of custody step by requiring the collector to only sign the form once. SAMHSA and DOT believe the current requirement for the collector to sign the