

which the companies should have on hand in the ordinary course of their business. Because neither firm engaged in any advertising, no costs associated with advertising were incurred.

William E. Kovacic,
General Counsel.

[FR Doc. 01-17436 Filed 7-11-01; 8:45 am]

BILLING CODE 6750-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

Citizens Advisory Committee on Public Health Service (PHS) Activities and Research at Department of Energy (DOE) Sites: Oak Ridge Reservation Health Effects Subcommittee

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Public Law 92-463), the Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC) announce the following meeting.

Name: Citizens Advisory Committee on PHS Activities and Research at DOE Sites: Oak Ridge Reservation Health Effects Subcommittee (ORRHES).

Time and date: 9 a.m.-6 p.m., July 31, 2001.

Place: Children's Defense Fund Lodge, 1000 Alex Haley Lane, Clinton, TN 37716. Telephone: (865) 457-6466.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 50 people.

Background: A Memorandum of Understanding (MOU), signed in October 1990 and renewed in September 2000 between ATSDR and DOE, delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or "Superfund"). These activities include health consultations and public health assessments at DOE sites listed on, or proposed for, the Superfund National Priorities List and at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles. In addition, under an MOU signed in December 1990 with DOE and replaced by an MOU signed in 2000, the Department of Health and Human Services (HHS) has been given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-

nuclear energy production and use. HHS has delegated program responsibility to CDC.

Purpose: This subcommittee is charged with providing advice and recommendations to the Director, CDC, and the Administrator, ATSDR, pertaining to CDC's and ATSDR's public health activities and research at this DOE site. Activities shall focus on providing the public with a vehicle to express concerns and provide advice and recommendations to CDC and ATSDR. The purpose of this meeting is to receive updates from ATSDR and CDC, and to address other issues and topics, as necessary.

Matters to be discussed: The agenda includes a discussion of consensus building techniques for committee members.

Agenda items are subject to change as priorities dictate.

Contact person for more information: La Freta Dalton, Designated Federal Official, or Marilyn Palmer, Committee Management Specialist, Division of Health Assessment and Consultation, ATSDR, 1600 Clifton Road, NE, M/S E-54, Atlanta, Georgia 30333, telephone 1-888-42-ATSDR(28737), fax 404/498-1744.

The Director, Management Analysis and Services Office has been delegated the authority to sign Federal Register notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: July 6, 2001.

John Burckhardt,

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

[FR Doc. 01-17430 Filed 7-11-01; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 01144]

CDC Support To Improve Uptake of Prevention of Mother to Child Transmission of HIV (PMTCT) Programme in Botswana; Notice of Availability of Program Support

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year FY 2001 funds for a grant program for the PMTCT Programme, Ministry of Health and Ministry of Local Government, Botswana. This program addresses the "Healthy People 2010" focus areas of Access to Quality Health Services, Health Communications, Maternal, Infant, and Child Health and Sexually Transmitted Diseases.

The project is a nationwide prevention program targeting pregnant

females to identify HIV positive pregnant women so they may receive antiretroviral prophylactic treatment to prevent the transmission of HIV to their newborn children.

The Government of Botswana will take receipt of the equipment and list as its property to be maintained by them as any other equipment.

B. Eligible Applicants

Assistance will be provided only to the Government of Botswana, Ministry of Health. No other applications are solicited.

This is a sole source grant to provide assistance to the Government of Botswana in the form of equipment to enhance the ability of the program to provide confidential pre- and post-test HIV counseling, and identify HIV positive women eligible for antiretroviral prophylactic treatment so that HIV is not transmitted to the newborn child.

The MOH is the only appropriate and qualified organization to fulfill the requirements set forth in this announcement because:

1. The Ministry of Health is uniquely positioned in terms of constitutional authority, mandate, and ability to oversee and safeguard public health. Additionally, it provides over 95% of health care services in Botswana and is the only health care agency to provide AZT, which is a crucial component of the PMTCT program. No other health care agency in Botswana is able to provide free health care services to the general public. The MOH has the unique ability to extend services to all parts of the country.

2. The MOH has in place the central, district, and community based support structure such as clinics and staff to immediately engage in the activities listed in this announcement.

3. The MOH is directly responsible for the implementation, monitoring, and evaluation of population-based HIV/AIDS prevention and care policies and services.

C. Availability of Program Support

It is expected that the support will begin on or about September 30, 2001 and will be made for a 12-month budget period within a project period of up to 2 years.

Continuation awards within an approved project period will be made on the basis of satisfactory progress as evidenced by required reports.

Use of Support

Support is limited to the transfer of equipment to support the specified program activities.