Audits conducted pursuant to 2 U.S.C. 437g, § 438(b), and Title 26, U.S.C.

Matters concerning participation in civil actions or proceedings or arbitration.

Internal personnel rules and procedures or matters affecting a particular employee.

DATE & TIME: Thursday, July 18, 2002 at 10 a.m.

PLACE: 999 E Street, NW., Washington DC, (Ninth Floor).

STATUS: This Meeting Will be Open to the Public.

ITEMS TO BE DISCUSSED:

Correction and Approval of Minutes.

Draft Advisory Opinion 2002–07: Careau & Co. and Mohre Communications by Robert F. Carrot, President.

Administrative Matters.

PERSON TO CONTACT FOR INFORMATION: Mr. Ron Harris, Press Officer, Telephone: (202) 694–1220.

Mary W. Dove,

Secretary of the Commission.

[FR Doc. 02–17517 Filed 7–9–02; 11:37 am]

BILLING CODE 6715–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Advisory Committee; Renewals

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the renewal of certain FDA advisory committees by the Deputy Commissioner of Food and Drugs (the Deputy Commissioner). The Deputy Commissioner has determined that it is in the public interest to renew the charters of the committees listed in the following table for an additional 2 years beyond charter expiration date. The new charters will be in effect until the dates of expiration listed in the following table. This notice is issued under the Federal Advisory Committee Act of October 6, 1972 (Public Law 92–463 (5 U.S.C. app. 2)).

DATES: Authority for these committees will expire on the dates indicated in the following table unless the Deputy Commissioner formally determines that renewal is in the public interest.

Name of committee	Date of expiration
Medical Imaging Drugs Advisory Committee	February 28, 2004
Gastrointestinal Drugs Advisory Committee	March 3, 2004
Advisory Committee for Reproductive Health Drugs	March 23, 2004
Arthritis Advisory Committee	April 5, 2004
Veterinary Medicine Advisory Committee	April 24, 2004
Anesthetic and Life Support Drugs Advisory Committee	May 1, 2004
Blood Products Advisory Committee	May 13, 2004
Pulmonary-Allergy Drugs Advisory Committee	May 30, 2004
Drug Safety and Risk Management Advisory Committee (formerly Drug Abuse Advisory Committee)	May 31, 2004
Science Advisory Board/NCTR	June 2, 2004
Peripheral and Central Nervous System Drugs Advisory Committee	June 4, 2004
Psychopharmacologic Drugs Advisory Committee	June 4, 2004
Transmissible Spongiform Encephalopathies Advisory Committee	June 9, 2004

FOR FURTHER INFORMATION CONTACT: Linda A. Sherman, Advisory Committee Oversight and Management Staff (HF–4), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–1220.

Dated: July 5, 2002.

William K. Hubbard,

Senior Associate Commissioner for Policy, Planning, and Legislation.

[FR Doc. 02–17478 Filed 7–10–02; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Request for Nominations for Members on Public Advisory Committees; Drug Safety and Risk Management Advisory Committee (Formally Drug Abuse Advisory Committee)

AGENCY: Food and Drug Administration.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is requesting nominations for four members to serve on the Drug Safety and Risk Management Advisory Committee in the Center for Drug Evaluation and Research.

FDA has a special interest in ensuring that women, minority groups, and the physically challenged are adequately represented on advisory committees and, therefore, extends particular encouragement to nominations for appropriately qualified female, minority, or physically challenged candidates. Final selection from each vacancy will be determined by the expertise required to meet specific agency needs and in a manner to ensure appropriate balance on membership.

DATES: Nominations should be received before September 1, 2002.

ADDRESSES: All nominations for membership should be sent to Kimberly Topper, and all nominations for consumer-nominated members should be sent to Linda Sherman (see **FOR FURTHER INFORMATION CONTACT**).

FOR FURTHER INFORMATION CONTACT: Kimberly Topper, Center for Drug Evaluation and Research (HFD–21), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–7001, e-mail: topperk@cder.fda.gov; or

Linda Sherman, Advisory Committee Oversight and Management Staff (HF–4), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–1220, e-mail: lsherman@oc.fda.gov.

SUPPLEMENTARY INFORMATION: On June 1, 2002, the Drug Safety and Risk Management Advisory Committee (formerly Drug Abuse Advisory Committee) was rechartered with 9 of the proposed 13 members. Accordingly, FDA is requesting nominations for members to serve on the Drug Safety and Risk Management Advisory Committee (formerly Drug Abuse Advisory Committee).

Function: The committee advises the Commissioner of Food and Drugs regarding the scientific and medical evaluation of all information gathered

by the Department of Health and Human Services (DHHS) and the Department of Justice with regard to safety, abuse potential, risk management, risk communication, and quantitative evaluation of spontaneous reports, and recommends actions to be taken by DHHS with regard to marketing, investigation, and control of such drugs or other substances.

Criteria for Members

Persons nominated for membership on the committees described previously in this document must have adequately diversified research and/or clinical experience appropriate to the work of the committee in such fields as anesthesiology, surgery, internal medicine, infectious disease, asthma, rheumatology, microbiology, pediatrics, ophthalmology, cardiology, clinical/medical oncology, hematology, radiology, nuclear medicine, biostatistics, epidemiology, dermatopathology/immunodermatology, dermatology, psychopharmacology, neurochemistry, neuropharmacology, endocrinology, obstetrics and gynecology, reproductive endocrinology, gastroenterology, pharmacology, clinical pharmacology, hepatology, virology, pharmaceutical manufacturing, bioavailability and bioequivalence research, pharmacokinetics, neurology, psychiatry, psychology, neuropharmacology, neuropathology, pulmonary disease, allergy, immunology, clinical immunology, safety, abuse potential, risk management, risk communication and quantitative evaluation of spontaneous reports or other appropriate areas of expertise.

The specialized training and experience necessary to qualify the nominee as an expert suitable for appointment is subject to review, but may include experience in medical practice, teaching, research, and/or public service relevant to the field of activity of the committee. The term of office is up to 4 years.

Criteria for Consumer-Nominated Members

FDA currently attempts to place on each of the committees described previously in this document one voting member who is nominated by consumer organizations. These members are recommended by consumer organizations which have the responsibility for screening, interviewing, and recommending candidates with appropriate scientific credentials. Candidates are sought who are aware of the consumer impact of committee issues, but who also possess enough technical background to understand and contribute to the committee's work. This would involve, for example, an understanding of research design, benefit/risk and the legal requirements for safety and efficacy of the products under review, and considerations regarding individual products. The agency notes, however, that for some advisory committees, it may require such nominees to meet the same technical qualifications and specialized training required of other expert members of the committee. The term of office for these members is up to 4 years. Nominations for all committees listed previously in this document are invited for consideration for membership as openings become available.

Nomination Procedure

Any interested person may nominate one or more qualified persons for membership on one or more of the advisory committees. Nominations shall specify the committee for which the nominee is recommended. Nominations shall state that the nominee is aware of the nomination, is willing to serve as a member of the advisory committee, and appears to have no conflict on interest that would preclude committee membership. Potential candidates will be asked by FDA to provide detailed information concerning such matters as financial holdings, consultancies, and research grants or contracts in order to permit evaluation of possible sources of conflict of interest.

This notice is issued under the Federal Advisory Committee Act (5 U.S.C. app. 2) and 21 CFR part 14, relating to advisory committees.

Dated: July 5, 2002.

William K. Hubbard,

Senior Associate Commissioner for Policy, Planning, and Legislation.

[FR Doc. 02–17477 Filed 7–10–02; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Drug Safety and Risk Management Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). The meeting will be open to the public.

Name of Committee: Drug Safety and Risk Management Advisory Committee (formerly Drug Abuse Advisory Committee).

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on July 17, 2002, from 8 a.m. to 5 p.m.

Location: Holiday Inn, The Ballroom, Two Montgomery Village Ave., Gaithersburg, MD.

Contact Person: Kimberly L. Topper, Center for Drug Evaluation and Research (HFD–021), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857 (for Express delivery: 5630 Fishers Lane, Room 1093, Rockville MD 20857), 301–827–7001, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 12535. Please call the Information Line for up-to-date information on this meeting.

Agenda: The committee will discuss ways to improve the usefulness of consumer medication information (CMI) distributed with prescriptions being filled at the nation's pharmacies. Findings of a recent FDA-sponsored study(www.fda.gov/ohrms/dockets/ac/acmenu.htm) showed that CMI is currently being distributed with more than 85 percent of prescriptions and that scientific accuracy of the materials is high, but the usefulness of materials is variable due largely to omissions of important risk and benefit information. The committee will consider: (1) Potential causes of insufficiencies in CMI, including current practices of the parties involved in developing and processing CMI and pharmacy practices that may affect the distribution and content of CMI, and (2) potential interventions to address causes of CMI insufficiencies in the current system, and scientific methods to assess and monitor whether effective communication of key information to patients is occurring.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by July 15, 2002. Oral presentations from the public will be scheduled between approximately 1 p.m. and 2 p.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before July 15, 2002, and submit