

persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States. Additional information on all bank holding companies may be obtained from the National Information Center website at www.ffiec.gov/nic/.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than May 12, 2003.

A. Federal Reserve Bank of Atlanta (Sue Costello, Vice President) 1000 Peachtree Street, N.E., Atlanta, Georgia 30303:

1. *SunTrust Banks, Inc.*, Atlanta, Georgia; to acquire 100 percent of the voting shares of Lighthouse Community State Bank, Hilton Head, South Carolina. Lighthouse Community State Bank is currently operating as Lighthouse Community Bank, Hilton Head, South Carolina.

Board of Governors of the Federal Reserve System, April 11, 2003.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. 03-9401 Filed 4-16-03; 8:45 am]

BILLING CODE 6210-01-S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of Meeting of the Advisory Committee on Blood Safety and Availability

AGENCY: Office of the Secretary.

ACTION: Notice of meeting.

SUMMARY: The Advisory Committee on Blood Safety and Availability will meet on Thursday May 1, 2003, and Friday May 2, 2003, from 8 a.m. to 5 p.m. The meeting will take place at the Hyatt Regency Hotel on Capitol Hill, 400 New Jersey Ave., NW., Washington, DC 20001. The meeting will be entirely open to the public.

The purpose of this meeting will be to examine the economics of blood and where blood fits into the overall cost of health care.

Public comment will be solicited at the meeting. Public comment will be limited to five minutes per speaker. Those who wish to have printed material distributed to Advisory Committee members should submit 30

copies to the Acting Executive Secretary prior to close of business April 25, 2003. Those who wish to utilize electronic data projection in their presentation to the Committee must submit their material to the Acting Executive Secretary prior to close of business April 25, 2003. In addition, anyone planning to comment is encouraged to contact the Acting Executive Secretary at her/his earliest convenience.

FOR FURTHER INFORMATION CONTACT:

CAPT Lawrence C. McMurtry, Acting Executive Secretary, Advisory Committee on Blood Safety and Availability, Department of Health and Human Services, Office of Public Health and Science, 1101 Wootton Parkway, Room 275, Rockville, MD 20852, (301) 443-2823, FAX (301) 443-4361, e-mail lmcmurtry@osophs.dhhs.gov

Dated: April 11, 2003.

Lawrence C. McMurtry,

Acting Executive Secretary, Advisory Committee on Blood Safety and Availability.

[FR Doc. 03-9515 Filed 4-16-03; 8:45 am]

BILLING CODE 4150-28-M

DEPARTMENT OF HEALTH SERVICES

National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services announced the following advisory committee meeting.

Name: National Committee on Vital and Health Statistics (NCVHS), Workgroup on the National Health Information Infrastructure.

Time and Date: 8:30 a.m.-4:30 p.m., April 22, 2003.

Place: Sheraton Buckhead Hotel, 3405 Lenox Road, NE, Atlanta, GA 30326.

Status: Open.

Purpose: The Workgroup will hear testimony about issues related to the population health dimension of the national health information infrastructure, including public health surveillance, disease registries, and privacy issues.

Contact Person For More Information: Substantive program information as well as summaries of meetings and a roster of committee members may be obtained from Mary Jo Deering, Lead Staff Person for the NCVHS Workgroup on the National Health Information Infrastructure, Office of Public Health and Science, DHHS, Room 738G, Humphrey Building, 200 Independence Avenue SW., Washington, DC 20201, telephone (202) 260-2652, or Majorie S. Greenberg, Executive Secretary, NCVHS, NCHS, CDC, Room 1100, Presidential Building, 6525 Belcrest Road, Hyattsville, Maryland 20782, telephone (301) 436-7050. Information also is available on the NCVHS home page of the HHS Web site: <http://www.ncvhs.hhs.gov/>, where an agenda for the meeting will be posted when available.

Dated: April 9, 2003.

James Scanlon,

Acting Director, Office of Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 03-9365 Filed 4-16-03; 8:45 am]

BILLING CODE 4151-04-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

National Advisory Council for Healthcare Research and Quality: Request for Nominations for Public Members

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Request for nominations for public members.

SUMMARY: 42 U.S.C. 299c, section 921 of the Public Health Service (PHS Act), established a National Advisory Council for Healthcare Research and Quality (the Council). The Council is to advise the Secretary of HHS and the Director of the Agency for Healthcare Research and Quality (AHRQ) on matters related to actions of the Agency to enhance the quality, improve the outcomes, and reduce the costs of health care services, as well as improve access to such services, through scientific research and the promotion of improvements in clinical practice and in the organization, financing, and delivery of health care services. Seven current members' terms will expire in November 2003. To fill these positions in accordance with the legislative mandate establishing the Council, we are seeking individuals who are distinguished in the conduct of research, demonstration projects, and evaluations with respect to health care; individuals distinguished in the fields of health care quality research or health care improvement; individuals distinguished in the practice of medicine; individuals distinguished in the other health professions; individuals either representing the private health care sector (including health plans, providers, and purchasers) or individuals distinguished as administrators of health care delivery systems; individuals distinguished in the fields of health care economics, management science, information systems, law, ethics, business, or public policy, and individuals representing the interests of patients and consumers of health care. Individuals are particularly sought with experience and success in activities specified in the summary

paragraph above, through which the Agency carries out its work.

DATES: Nominations should be received on or before May 23, 2003.

ADDRESSES: Nominations should be sent to Ms. Anne Lebbon, AHRQ, 2101 East Jefferson Street, Suite 600, Rockville, Maryland, 20852. Nominations also may be faxed to (301) 594-2249.

FOR FURTHER INFORMATION CONTACT: Ms. Anne Lebbon, AHRQ, at (301) 594-7216.

SUPPLEMENTARY INFORMATION: 42 U.S.C. 299c, section 921 of the PHS Act, provides that the National Advisory Council for Healthcare Research and Quality shall consist of 21 appropriately qualified representatives of the public appointed by the Secretary of Health and Human Services and eight ex officio representatives from Federal agencies conducting or supporting health care research. The Council meets in the Washington, DC, metropolitan area, generally in Rockville, Maryland, approximately three times a year to provide broad guidance to the Secretary and AHRQ's Director on the direction and programs for AHRQ.

Nine individuals will presently be selected by the Secretary to serve on the Council beginning with the meeting in the fall of 2003. Members generally serve 3-year terms. Appointments are staggered to permit an orderly rotation of membership.

Interested persons may nominate one or more qualified persons for membership on the Council. Nominations shall include a copy of the nominee's resume or curriculum vitae, and state that the nominee is willing to serve as a member of the Council. Potential candidates will be asked to provide detailed information concerning their financial interests, consultant positions, and research grants and contracts, to permit evaluation of possible sources of conflict of interest.

The Department is seeking a broad geographic representation and has special interest in assuring that women, minority groups, and the physically handicapped are adequately represented on advisory bodies and, therefore, extends particular encouragement to nominations for appropriately qualified female, minority, and/or physically handicapped candidates.

Dated: April 9, 2003.

Carolyn M. Clancy,
Director.

[FR Doc. 03-9415 Filed 4-16-03; 8:45 am]

BILLING CODE 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day-03-61]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 498-1210.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Send comments to Dale Verell, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project

Youths Evaluation of Anti-Tobacco Ads—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background

In FY 2002, Congress mandated CDC, Office on Smoking and Health (OSH), to facilitate programs to prevent tobacco use among young people using counter-advertising targeted to young people. Demoralization and the reduction of tobacco use among youth and adolescents are the focus of six objectives in *Healthy People 2010*. There are no nationwide studies assessing the perceived effectiveness of multiple categories of anti-tobacco advertisements (only one nationwide study exists which only explores the

effectiveness of one type of message). CDC is coordinating an effort to plan, implement, and evaluate a media literacy lesson plan designed to clearly communicate messages that will prevent tobacco use among young people. The lesson plan will be based on principles that have been shown to enhance success, including: showing messages based on research; testing messages with the intended audiences; involving young people in media literacy, providing salient reasons to not smoke; enlisting the involvement and support of teachers and other influencers; and tracking the lesson plan's effectiveness.

For tobacco control efforts to continue to be successful and to promote the use of CDC media resources for tobacco control (Media Campaign Resource Center), it is critical that we understand which ads are perceived as most effective with the target audience. CDC planners are seeking a vehicle to evaluate anti-tobacco ads that are used by state health departments. In order to maximize the CDC's Media Campaign Resource Center, it is important to determine which ads should be promoted to the state health departments for use with their constituents. This understanding will facilitate any strategic changes and or promotions that may be necessary to increase the Media Campaign Resource Center's effectiveness and sustainability. The data will provide state health departments, the government, health education and communication practitioners, and committees that make recommendations regarding which types of tobacco prevention advertisements may be perceived as most likely to reduce tobacco use among youth.

CDC proposes to use an evaluation tool with middle and high school students from schools across the United States. GIS mapping will inform the selection of approximately 200 public and private American schools. The data collection instrument is a paper and pencil computer scan sheet. Students will view 12 tobacco prevention advertisements and respond using a computer scan sheet. The survey will take 26 minutes to complete and will be delivered during school hours. CDC will support the cost for development, implementation, data collection, and analysis out of funds budgeted for these purposes. There is no cost to the respondents.