To provide healthcare providers, patients, policy makers, and the general public with a comprehensive assessment of how colorectal cancer screening and surveillance are most appropriately implemented, monitored, and evaluated for average-risk populations in the United States, the National Cancer Institute and the Office of Medical Applications of Research of the National Institutes of Health will convene a State-of-the-Science Conference February 2–4, 2010, to assess the available scientific evidence related to the following questions:

- What are the recent trends in the use and quality of colorectal cancer screening?
- What factors influence the use of colorectal cancer screening?
- Which strategies are effective in increasing the appropriate use of colorectal cancer screening and follow-up?
- What are the current and projected capacities to deliver colorectal cancer screening and surveillance at the population level?
- What are the effective approaches for monitoring the use and quality of colorectal cancer screening?
- What research is needed to make the most progress and have the greatest public health impact in promoting the appropriate use of colorectal cancer screening?

An impartial, independent panel will be charged with reviewing the available published literature in advance of the conference, including a systematic literature review commissioned through the Agency for Healthcare Research and Quality. The first day and a half of the conference will consist of presentations by expert researchers and practitioners and open public discussions. On Thursday, February 4, the panel will present a statement of its collective assessment of the evidence to answer each of the questions above. The panel will also hold a press telebriefing to address questions from the media. The draft statement will be published online later that day, and the final version will be released approximately six weeks later. The primary sponsors of this meeting are the NIH National Cancer Institute and the NIH Office of Medical Applications of Research.

Advance information about the conference and conference registration materials may be obtained from the NIH Consensus Development Program Information Center by calling 888–644–2667 or by sending e-mail to consensus@mail.nih.gov. The Information Center’s mailing address is P.O. Box 2577, Kensington, Maryland 20891. Registration information is also available on the NIH Consensus Development Program Web site at http://consensus.nih.gov.

Please Note: The NIH has instituted security measures to ensure the safety of employees, guests, and property. All visitors must be prepared to show a photo ID upon request. Visitors may be required to pass through a metal detector and have bags, backpacks, or purses inspected or x-rayed as they enter NIH buildings. For more information about the security measures at NIH, please visit the Web site at http://www.nih.gov/about/visitorsecurity.htm.

Raynard S. Kington,
Deputy Director, National Institutes of Health.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health

Moving Into the Future—New Dimensions and Strategies for Women’s Health Research for the National Institutes of Health; Notice

Notice is hereby given that the Office of Research on Women’s Health (ORWH), Office of the Director, National Institutes of Health, Department of Health and Human Services, in collaboration with the Emory University School of Medicine will convene a public hearing and scientific workshop February 16–17, 2010, at Emory University School of Medicine, James B. Williams Medical Education Building, Atlanta, Georgia.

Purpose of the Meeting

With rapid advances in science and wider global understanding of women’s health and sex/gender contributions to well-being and disease, the purpose of the meeting is to ensure that NIH continues to support cutting edge women’s health research that is based upon the most advanced techniques and methodologies. The meeting format is designed to promote an interactive discussion involving leading scientists, advocacy groups, public policy experts, health care providers, and the general public. With a focus upon women’s cardiovascular health, the meeting at Emory University School of Medicine is convened to assist the ORWH and the NIH to move into the next decade of women’s health research.

As scientific and technology advance and fields such as computational biology demonstrate the power of interdisciplinary research, it remains critical for sex and gender factors to be integrated into broad experimental methodologies and scientific approaches across the lifespan. Biomedical and behavioral research are also necessary to understand how cultural, ethnic, and racial differences influence the causes, diagnosis, progression, treatment, and outcome of disease among different populations, including women of diverse geographic locations and socioeconomic backgrounds. Furthermore, health differences among diverse populations of women remain a critical area in need of continued focus and attention.

The ORWH challenges all meeting attendees to assist the NIH in defining the women’s health research agenda of the future by thinking beyond traditional women’s health issues. With a special focus upon women’s cardiovascular health, ORWH and NIH ask meeting participants to consider creative strategies that need to be employed to identify areas of research that are best poised for advancement, identify innovative ways in which persistent issues of health and disease can be addressed, and explore new horizons of scientific concepts and investigative approaches. Attention also needs to be paid to new areas of science application, new technologies, and continuing basic science investigations. Clinical questions that are not currently the focus of research priorities need to be considered to ensure that women’s health research is optimally served and that the ORWH can continue to provide leadership for the benefit of women’s health, nationally and internationally.

Meeting Format

The meeting will consist of public testimony, scientific panels and seven concurrent scientific working groups. Specifically, on February 16, individuals representing a full spectrum of organizations interested in biomedical and behavioral research on women’s health issues will have an opportunity to provide public testimony from 10:30 a.m.–12 p.m. The seven concurrent scientific working groups meeting on February 16 in afternoon sessions will focus on a range of women’s cardiovascular health issues, including the following: pregnancy and cardiovascular disease research and ethical considerations; cardiovascular disease in elderly and frail elderly women—optimal management and research; microvascular disease, biomechanics, and application of new technologies to cardiovascular research; stem cells, progenitor cells, and the "vista of cardiovascular regenerative
medicine; unmet needs in diagnostic testing for women with cardiovascular disease; issues of cardiovascular prevention across the lifespan with an emphasis on gender and underserved populations; and women’s careers in the biomedical sciences. On February 17, the morning session will be devoted to reports by the working group co-chairs regarding the recommendations emerging from working group deliberations on the previous day. The meeting will adjourn at 12:15 p.m. on February 17.

Public Testimony

ORWH invites individuals with an interest in research related to women’s health to provide written and/or oral testimony on these topics and/or on issues related to the sustained advancement of women in various biomedical careers. Due to time constraints, only one representative from an organization or professional specialty group may submit oral testimony. Individuals not representing an organized entity but a personal point of view are similarly invited to present written and/or oral testimony. A letter of intent to present oral testimony is necessary and should be sent electronically to http://www.orwhmeetings.com/movingintothefuture/Emory or by mail to Ms. Jory Barone, Educational Services, Inc., 4350 East West Highway, Suite 1100, Bethesda, MD 20814, no later than midnight February 1, 2010. The date of receipt of the communication will establish the order of those selected to give oral testimony at the February meeting.

Those wishing to present oral testimony are also asked to submit a written form of their testimony that is limited to a maximum of 10 pages, double spaced, 12-point font, and should include a brief description of the organization. Electronic submission to the above Web site is preferred; however, for those who do not have access to electronic means, written testimony, bound by the restrictions previously noted and postmarked no later than February 1, 2010, can be mailed to Ms. Jory Barone at the above address. All written presentations must meet the established page limitations. Submissions exceeding this limit will not be accepted and will be returned. Oral testimony of this material at the meeting will be limited to no more than 5–6 minutes in length.

Because of time constraints for oral testimony, testifiers may not be able to present all the local health information as it is contained in their written form submitted for inclusion in the public record for the meeting. Therefore, testifiers are requested to summarize the major points of emphasis from the written testimony not to exceed 6 minutes of oral testimony. Those individuals and/or organizations who have indicated that they will present oral testimony at the meeting in Atlanta, will be notified prior to the meeting regarding the approximate time for their oral presentation.

Individuals and organizations wishing to provide written statements only should send a copy of their statements, electronically or by mail, to the above Web site or address by February 1, 2010. Written testimony received by that date will be made available at the February 16–17 meeting.

Logistics questions related to the meeting should be addressed to Ms. Jory Barone, joryb@esi-dc.com at ESI, while program-specific questions should be addressed to Dr. Nanette K. Wenger at the Emory University School of Medicine, Atlanta, 404–616–4420, nwenger@emory.edu.

The resulting report to the ORWH and the NIH will ensure that women’s health research in the coming decade continues to support a vigorous research agenda incorporating the latest advances in technology and cutting edge science in support of women’s cardiovascular health.

Dated: January 8, 2010.

Francis S. Collins, Director, National Institutes of Health.

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Advisory Committee on Heritable Disorders in Newborns and Children

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: Notice of Request for Nominations.

SUMMARY: The Health Resources and Services Administration (HRSA) is requesting nominations to fill three (3) vacancies on the Secretary’s Advisory Committee on Heritable Disorders in Newborns and Children.


DATES: The agency must receive nominations on or before May 1, 2010.

ADDRESSES: All nominations are to be submitted to Michele A. Lloyd-Puryear, M.D., PhD, Designated Federal Official and Executive Secretary, Advisory Committee on Heritable Disorders in Newborns and Children, and Chief, Genetic Services Branch, Maternal and Child Health Bureau, Health Resources and Services Administration, Room 18A–19, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857. E-mailed nominations can be sent to Screening@hrsa.hhs.gov.

FOR FURTHER INFORMATION CONTACT: Ms. Alaina Harris, Genetic Services Branch, Maternal and Child Health Bureau, HRSA, at abarris@hrsa.gov or (301) 443–1080. A copy of the Committee Charter and list of the current membership can be obtained by contacting Ms. Harris or by accessing the Advisory Committee Web site at http://hrsa.gov/hereditarydisorderscommittee.

SUPPLEMENTARY INFORMATION: The Secretary’s ACHDNC is chartered under section 1111 of the Public Health Service Act, 42 U.S.C. 300b–10, as amended by the Newborn Screening Saves Lives Act 2008 (Act). The Committee was established in February 2003 to advise the Secretary of the U.S. Department of Health and Human Services. The Committee is governed by the provisions of Public Law 92–463, as amended (5 U.S.C. App. 2), and 41 CFR Part 102–3, which sets forth standards for the formation and use of advisory committees. The ACHDNC is directed to review and report regularly on newborn and childhood screening practices for heritable disorders and to recommend improvements in the national newborn and childhood heritable screening programs.

The Committee is established to advise and guide the Secretary regarding the most appropriate application of universal newborn screening tests, technologies, policies, guidelines and programs for effectively reducing morbidity and mortality in newborns and children having or at risk for heritable disorders. In addition, the Committee provides advice and recommendations to the Secretary concerning the grants and projects authorized under section 1109 and technical information to develop policies and priorities for this Program that will enhance the ability of the State and community programs to provide for newborn and child screening, counseling and health care services for