authority to sign Federal Register notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: June 8, 2010.
Elaine L. Baker,
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Injury Prevention and Control/Initial Review Group, (NCIPC/IRG)

Correction: This notice was published in the Federal Register on February 18, 2010, Volume 75, Number 20, pages 5089-5090. The notice should read as follows:

NCIPC/IRG Workgroup: Preventing Unintentional Childhood Injuries (R21), Funding Opportunity Announcement CE10–001.

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC), announces the following meeting of the aforementioned review group:

Time and Date:
8 a.m.–5 p.m., March 12, 2010 (Closed)
8 a.m.–5 p.m., March 11, 2010 (Closed)

Place: JW Marriott Hotel Buckhead, 3300 Lenox Road, Atlanta, Georgia 30326, Telephone (404) 262–3344.

Status: This meeting was closed to the public in accordance with provisions set forth in 41 CFR part 102 of the General Services Administration Federal Advisory Committee Management Final Rule.

Matters to be Discussed: The meeting included the review, discussion, and evaluation of applications intended to expand and advance the understanding of violence, its causes, and prevention strategies. Requests for Applications are related to the following individual research announcement: CE10–001.

Agenda items are subject to change as priorities dictate.

FOR FURTHER INFORMATION CONTACT: J. Felix Rogers, PhD, M.P.H., NCIPC/ERPO, CDC, 4770 Buford Highway, NE, M/S F63, Atlanta, Georgia 30341–3724, Telephone (770) 488–4334.

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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: June 8, 2010.
Elaine L. Baker,
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2010–N–0291]

Converged Communications and Health Care Devices Impact on Regulation; Public Meeting; Request for Comments

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of public meeting; request for comments.

SUMMARY: The Food and Drug Administration (FDA) and the Federal Communications Commission (FCC) are jointly sponsoring a public meeting entitled “Enabling the Convergence of Communications and Medical Systems: Ways to Update Regulatory and Information Processes.” The purpose of this meeting is to identify the challenges and risks posed by the proliferation of new sophisticated medical implants and other devices that utilize radio communications to effectuate their function, as well as challenges and risks posed by the development and integration of broadband communications technology with healthcare devices and applications. While the general format for this meeting is outlined in this document, the details will be further informed by the comments received, and a final agenda will be published on the Internet in the future.

Dates and Times: The public meeting is scheduled for July 26 and 27, 2010, from 8 a.m. to 5:30 p.m. Persons interested in attending and/or participating in the meeting must register by 5 p.m. EDT on July 19, 2010. Submit either electronic or written comments related to the agenda, by 5 p.m. EDT on June 25, 2010. All other comments must be submitted by August 16, 2010.

Location: The public meeting will be held at the FCC Commission Meeting Room, 445 12th St. SW., Washington, DC 20554.

Contact Persons: Bakul Patel, Food and Drug Administration, Center for Devices and Radiological Health, 10903 New Hampshire Ave., Bldg. 66, rm. 3543, Silver Spring, MD 20993, 301–796–5328, email: bakul.pate@fda.hhs.gov; or Bruce Romano, Federal Communications Commission, 445 12th St. SW., rm. 7–C140, Washington, DC 20554, 202–418–2470, email: bruce.romano@fcc.gov.

Registration and Requests for Oral Presentations: Registration requests must be received by 5 p.m. EDT on July
I. Background

There have been significant developments in recent years in medical and health care devices using radio technology to monitor various body functions and conditions, including critical elements, and to deliver treatment and therapy. There has also been an increasing proliferation of devices using established commercial communications networks such as Internet connectivity to communicate with care providers. Mobile devices like smartphones and personal digital assistants (PDAs) are transforming the transmission of information used by physicians to patients, including communication networks to relay information for patient health monitoring and decision support.

Examples of the latest implant or body-worn monitoring, therapeutic, and treatment technologies include blood glucose monitors and automated insulin pumps, heart monitors, pacemakers, defibrillators, and neural pathway replacements that stimulate muscle movement.

Examples of devices and applications that use commercial communications networks and represent the convergence of communications and medicine include a smartphone application that displays real-time fetal heartbeat and maternal contraction data allowing obstetricians to track a mother’s labor and wearable wireless patch-like sensors that transmit health data over commercial wireless networks to practitioners, caregivers, and patients. These and other products cover a broad range of health care solutions. At one end, general-purpose communications devices such as smartphones, wireless routers and certain video-conferencing equipment are regulated by FCC. At the other end, medical devices that critically monitor patient health or provide treatment or therapy are regulated by FDA. Devices that do provide critical care and also use communications, such as life-critical wireless devices like remotely controlled drug-release mechanisms, are regulated by both agencies. In addition, device applications that would not be governed by FCC but transmit over wireless networks might warrant FDA oversight, while FCC might have better capability to assess the reliability of their communications capability.

The objective of this meeting is to gather information and to better understand issues and perspectives from various stakeholders so the Agencies can identify potential areas where each Agency’s jurisdiction can be identified and clarified for affected parties, collection and assessment of each Agency’s respectively appropriate information can be improved, expertise can be shared, and regulatory approval can be coordinated and simplified. These concerns relate both to devices operating on designated frequencies and to convergent medical device and information technology, as described previously. This includes challenges faced by manufacturers and innovators in ensuring compliance with various regulatory requirements and risks associated with medical device systems using spectrum shared by other medical devices, using spectrum shared by other types of devices and services, and using broadband communication capabilities. FDA and FCC recognize the need to work with all stakeholders to identify pathways and strive to improve processes that will help continue to spur innovation in these areas while maintaining safety and effectiveness and promoting public health.

II. Public Meeting

The information gathered during the meeting will be used to enhance the coordination between FDA and FCC for such devices and applications, and clarify and delineate the respective...
4. Risks Management:  
   - The need to define levels of “criticality” of device function that can be used for determining reliability requirements.  
   - Environmental factors and delivery setting—hospitals, users, clinics, home, travel, etc.  

5. Views on current FDA and FCC regulatory requirements:  
   - Relationship between FDA approval/clearance and FCC certification of applications, post market and compliance requirements.  
   - Each of the previous topics will cover:  
     1. Defining topics and scope;  
     2. Identifying the needs, goals, and stakeholders; and  
     3. Recommendations.  

FDA and FCC are seeking comments on the topics and soliciting suggestions on alternate or additional topics that commenters deem closely related. All comments and suggestions will be considered with the constraint of completing the workshop in no more than 2 days. To be considered, topics proposed must be relevant to the objective and intent of the workshop.

IV. Transcripts  

Transcripts of the public meeting may be requested in writing from the Freedom of Information Office (HFI–35), Food and Drug Administration, 5600 Fishers Lane, rm. 6–30, Rockville, MD 20857 or at the Federal Communications Commission, Reference Information Center, 445 12th St. SW., rm. CY–A257, Washington, DC 20554, Monday through Thursday, between the hours of 8 a.m. and 4:30 p.m. and on Fridays between 8 a.m. and 12 noon, approximately 15 working days after the public meeting at a cost of 10 cents per page. A transcript of the public meeting will be available on the Internet at http://www.regulations.gov.

Dated: June 14, 2010.  

David Dorsey,  
Acting Deputy Commissioner for Policy, Planning and Budget.

[FR Doc. 2010–14648 Filed 6–16–10; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES  

National Institutes of Health  

Eunice Kennedy Shriver National Institute of Child Health and Human Development; Notice of Closed Meeting  

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.  

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Heart, Lung, and Blood Institute Special Emphasis Panel, Effectiveness Research on Smoking Cessation in Hospitalized Patients.  

Date: June 22–23, 2010.  

Time: 6 p.m. to 5 p.m.  

Agenda: To review and evaluate grant applications.  

Place: Doubletree Hotel Bethesda, (Formerly Holiday Inn Select), 8120 Wisconsin Avenue, Bethesda, MD 20814.  

Contact Person: Shelley S. Sehnert, PhD, Scientific Review Officer, Review Branch/DERA, National Heart, Lung, and Blood Institute, 6701 Rockledge Drive, Room 7206, Bethesda, MD 20892–7924. 301–435–0903. ssehnert@nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle. (Catalog of Federal Domestic Assistance Program Nos. 93.233, National Center for Sleep Disorders Research; 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; 93.839, Blood Diseases and Resources Research, National Institutes of Health, HHS)

Dated: June 11, 2010.  

Jennifer Spaeth,  
Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2010–14648 Filed 6–16–10; 8:45 am]