revision of Vaccine Information Statements; and recommending to the
Director of the National Vaccine
Program research related to vaccine
injuries which should be conducted to
carry out the VICP.

On July 21, 2016, the ACCV charter
was renewed. Renewal of the ACCV
charter gives authorization for the
Commission to operate until July 21,
2018.

A copy of the ACCV charter is
available on the ACCV Web site at
http://www.hrsa.gov/
advisorycommittees/childhoodvaccines/index.html. A copy of the charter also
can be obtained by accessing the FACA
database that is maintained by the
Committee Management Secretariat
under the General Services
Administration. The Web site address
for the FACA database is http://
www.facadatabase.gov/.

Jason E. Bennett,
Director, Division of the Executive Secretariat.

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BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND
HUMAN SERVICES

Health Resources and Service
Administration

Advisory Commission on Childhood
Vaccines

AGENCY: Health Resources and Service
Administration, HHS.

ACTION: Notice of meeting.

SUMMARY: In accordance with section
10(a)(2) of the Federal Advisory
Committee Act (Public Law 92–463),
notice is hereby given that a meeting is
scheduled for the Advisory Commission
on Childhood Vaccines (ACCV). This
meeting will be open to the public.
Information about the ACCV and the
agenda for this meeting can be obtained
by accessing the following Web site:
http://www.hrsa.gov/
advisorycommittees/childhoodvaccines/
index.html.

DATES: The meeting will be held on
December 1 and 2, 2016, at 10:00 a.m.
EST.

ADDRESSES: This meeting will be held
via Adobe Connect Webinar. The public
can join the meeting by:
1. (Audio Portion) Calling the
conference phone number 800–779–
3561 and providing the following
information:
   Leader Name: Dr. Narayan Nair.
   Password: 8164763.
2. (Visual Portion) Connecting to the
ACCV Adobe Connect Pro Meeting
using the following URL: https://
hrsa.connectsolutions.com/accv/ (copy
and paste the link into your browser if
it does not work directly, and enter as
a guest). Participants should call and
connect 15 minutes prior to the meeting
in order for logistics to be set up. If you
have never attended an Adobe Connect
meeting, please test your connection
using the following URL: https://
hrsa.connectsolutions.com/common/
help/en/support/meeting_test.htm
and get a quick overview by following URL:
http://www.adobe.com/go/connectpro_
overview.

FOR FURTHER INFORMATION CONTACT:
Anyone requesting information
regarding the ACCV should contact
Annie Herzog, Program Analyst,
Division of Injury Compensation
Programs (DICP), Health Resources and
Services Administration in one of three
ways: (1) Send a request to the following
address: Annie Herzog, Program
Analyst, DICP, Health Resources and
Services Administration, 5600 Fishers
Lane, 08N146B, Rockville, Maryland
20857; (2) call (301) 443–6593; or (3)
send an email to aherzog@hrsa.gov.

At this time the meeting is scheduled
to be held over 2 days via conference
call and Adobe Connect webinar; however, meeting times and locations
could change. For the latest information
regarding meeting start time and
location, please check the ACCV Web
site: http://www.hrsa.gov/
advisorycommittees/childhoodvaccines/
index.html.

SUPPLEMENTARY INFORMATION: The ACCV
was established by section 2119 of the
Public Health Service Act (the Act) (42
U.S.C. 300aa–19), as enacted by Public
Law (Pub. L.) 99–660, and as
subsequently amended, and advises the
Secretary of Health and Human Services
(the Secretary) on issues related to
implementation of the National Vaccine
Injury Compensation Program (VICP).

Other activities of ACCV include:
Recommending changes to the Vaccine
Injury Table at its own initiative or as
the result of the filing of a petition;
advising the Secretary in implementing
section 2127 of the Act regarding the
need for childhood vaccination
products that result in fewer or no
significant adverse reactions; surveying
federal, state, and local programs and
activities related to gathering
information on injuries associated with
the administration of childhood
vaccines, including the adverse reaction
reporting requirements of section
2125(b) of the Act; advising the
Secretary on the methods of obtaining,
compiling, publishing, and using
credible data related to the frequency
and severity of adverse reactions
associated with childhood vaccines;
consulting on the development or
revision of Vaccine Information
Statements; and recommending to the
Director of the National Vaccine
Program research related to vaccine
injuries which should be conducted to
carry out VICP.

The agenda items for the December
2016 meeting will include, but are not
limited to, updates from the Division of
Injury Compensation Programs (DICP),
Department of Justice (DOJ), National
Vaccine Program Office (NVPO),
Immunization Safety Office (Centers for
Disease Control and Prevention),
National Institute of Allergy and
Infectious Diseases (National Institutes
of Health) and Center for Biologics,
Evaluation and Research (Food and
Drug Administration). A draft agenda
and additional meeting materials will be
posted on the ACCV Web site
(http://www.hrsa.gov/advisorycommittees/
childhoodvaccines/index.html) prior to
the meeting. Agenda items are subject to
change as priorities dictate.

Members of the public will have the
opportunity to provide comments. Oral
comments will be honored in the order
they are requested and may be limited
time allows. Requests to make oral
comments or provide written comments
to the ACCV should be sent to Annie
Herzog using the address and phone
number above by November 29, 2016.
Individuals who need special
assistance, such as sign language
interpretation or other reasonable
accommodations, should notify Annie
Herzog using the address and phone
number above at least 10 days prior to
the meeting.

Jason E. Bennett,
Director, Division of the Executive Secretariat.

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DEPARTMENT OF HEALTH AND
HUMAN SERVICES

Renewal of Charters for Certain
Federal Advisory Committees

AGENCY: Office of the Assistant
Secretary for Health, Office of the
Secretary, Department of Health and
Human Services.

ACTION: Notice.

SUMMARY: As stipulated by the Federal
Advisory Committee Act, as amended
(5 U.S.C. App), the U.S. Department of
Health and Human Services is hereby
announcing that the charters have been
renewed for the following federal
advisory committees for which Office of
the Assistant Secretary for Health provides management support: Chronic Fatigue Syndrome Advisory Committee (CFSAC); President’s Council on Fitness, Sports, and Nutrition (PCFSN; the Council); Secretary’s Advisory Committee on Human Research Protections (SACHRP); and Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA).

Functioning as federal advisory committees, these committees are governed by the provisions of the Federal Advisory Committee Act (FACA). Under FACA, it is stipulated that the charter for a federal advisory committee must be renewed every two years in order for the committee to continue to operate.

FOR FURTHER INFORMATION CONTACT: Olga B. Nelson, Committee Management Officer, Office of the Assistant Secretary for Health; U.S. Department of Health and Human Services; 200 Independence Avenue SW., Room 714B; Washington, DC 20201; (202) 690–5205.

SUPPLEMENTARY INFORMATION: CFSAC was established on September 5, 2002 as a discretionary federal advisory committee. The Committee provides science-based advice and recommendations to the Secretary of Health and Human Services, through the Assistant Secretary for Health, on a broad range of issues and topics pertaining to myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS), including (1) opportunities to improve knowledge and research about the epidemiology, etiologies, biomarkers and risk factors for ME/CFS; (2) research on the diagnosis, treatment, and management of ME/CFS and potential impact of treatment options; (3) strategies to inform the public, health care professionals, and the biomedical academic and research communities about ME/CFS advances; (4) partnerships to improve the quality of life of ME/CFS patients; and (5) strategies to ensure that input from ME/CFS patients and caregivers is incorporated into HHS policy and research.

The new charter includes the following amendments: (1) The language in the Description of Duties has been simplified. A fifth duty has been added to emphasize the importance of getting stakeholder input on HHS policy and research concerning ME/CFS; (2) authority has been given to the Assistant Secretary for Health (ASH) as an official to whom the Committee will report. Extending this authority to the ASH is necessary to have CMS involved, and (c) expand the Committee structure to include two government agencies that will provide valuable information on services available to patients with ME/CFS and research being conducted on illnesses with similar symptoms to ME/CFS.

On September 5, 2016, the Secretary of Health and Human Services approved for the CFSAC charter with the proposed amendments to be renewed. The new charter has been made effective; the charter was filed with the appropriate Congressional committees and the Library of Congress on September 5, 2016. Renewal of the CFSAC charter provides authorization for the Committee to continue to operate until September 5, 2018. A copy of the Committee charter is available on the CFSAC Web site at http://www.hhs.gov/advcmsac.

The PCFSN is a non-discretionary federal advisory committee. The PCFSN was established under Executive Order 13545, dated June 22, 2010. This authorizing directive was issued to amend the purpose, function, and name of the Council, which formerly operated as the President’s Council on Physical Fitness and Sports (PCPFS). The scope of the Council was changed to include nutrition to bring attention to the importance of good nutritional habits with regular physical activity for maintaining a healthy lifestyle. The PCFSN is the only federal advisory committee that is focused solely on the promotion of physical activity, fitness, sports, and nutrition. Since the PCFSN was established by Presidential directive, appropriate action had to be taken by the President or agency head to authorize continuation of the PCFSN. The President issued Executive Order 13708, dated September 30, 2015. Under the authority given in this directive, the Council can continue to operate until September 30, 2017.

No amendments were recommended for the PCFSN charter. The charter was approved by the Secretary of Health and Human Services on September 8, 2016, and it was filed with the appropriate Congressional committees and the Library of Congress on September 10, 2016. A copy of the Council charter is available on the PCFSN Web site at http://fitness.gov.

SACHRP is a discretionary federal advisory committee. SACHRP provides advice to the Secretary, through the Assistant Secretary for Health, on matters pertaining to the continuation and improvement of functions within the authority of the Department of Health and Human Services concerning protections for human subjects in research.

There was one amendment recommended and approved for the SACHRP charter. The charter stipulated that appointment of the Designated Federal Officer (DFO) was restricted to the Director of the Office for Human Research Protections. This restriction has been removed to allow for other senior level program and management staff to be considered for appointment as the DFO. On September 30, 2016, the Secretary of Health and Human Services approved for the SACHRP charter to be renewed. The new charter was filed with the appropriate Congressional committees and the Library of Congress on October 1, 2016. SACHRP is authorized to continue to operate until October 1, 2018. A copy of the charter is available on the Committee Web site at http://www.hhs.gov/ohrp/sachrp.

The ACBTSA is a discretionary federal advisory committee. The Committee provides advice to the Secretary, through the Assistant Secretary for Health, on a range of policy issues related to the safety of blood, blood products, organs and tissues. For organs and blood stem cells, the Committee’s work is limited to policy issues related to donor derived infectious disease complications of transplantation around the safety and availability of the blood supply and blood products.

There were two minor amendments recommended and approved for the ACBTSA charter. The charter has been amended to include the option for a Vice Chair and/or Co-Chairs to be
DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Short-Term Alternative Animal Models or In Vitro Tests Used To Identify Substances With the Potential To Cause Excessive Inflammation or Exaggerated Immune Responses; Request for Information

SUMMARY: The National Toxicology Program (NTP) at the National Institute of Environmental Health Sciences (NIEHS) requests available data and information on approaches and/or technologies currently used to identify substances with the potential to cause excessive inflammation or exaggerated immune responses leading to tissue injury. Respondents should provide information on any activities relevant to the development or validation of alternatives to in vivo tests currently used in the assessment of immune toxicity and autoimmunity. Respondents to this request for information should include their name, affiliation (if applicable), mailing address, and telephone number. The NTP will not pay for the preparation of any information submitted or for its use.

Dated: October 20, 2016.

Karen B. DeSalvo,
Acting Assistant Secretary for Health.

Supplementary Information:
Background: NTP has an interest in developing more efficient and scalable test platforms to provide the scientific basis for predictive models of chemical effects on human disease. Short-term toxicity tests may be conducted to determine the potential for a single or short-term dose of a substance to cause inflammation-related responses or impact local and systemic immune function when inhaled (inhalation toxicity testing), swallowed (oral toxicity testing), or absorbed through the skin (dermal toxicity testing). A number of observations support a role for environmental influences on inflammatory and immune-related diseases such as diabetes. One specific use of information received in response to this request is to assist NTP in identifying in vitro or alternative animal model screens that might be used to assess the potential for chemicals to cause outcomes related to Type 1 diabetes. In addition, information received from this request will provide fundamental knowledge on the use of these in vitro platforms for identifying environmental triggers of excessive inflammation and exaggerated immune responses that could lead to tissue injury.

Request for Information: NTP requests available data and information on approaches and/or technologies currently used to identify substances with the potential to cause excessive inflammation or exaggerated immune responses leading to tissue injury. Respondents should provide information on any activities relevant to the development or validation of alternatives to in vivo tests currently used in the assessment of immune toxicity and autoimmunity.

The deadline for receipt of the requested information is December 12, 2016.

Responses to this request are voluntary. No proprietary, classified, confidential, or sensitive information should be included in responses. This request for information is for planning purposes only and is not a solicitation for applications or an obligation on the part of the U.S. Government to provide support for any ideas identified in response to the request. Please note that the U.S. Government will not pay for the preparation of any information submitted or for its use.

Background Information on NTP: NTP is an interagency program established in 1978 (43 FR 53060) to strengthen the Department’s activities in toxicology research and testing and to develop and validate new and better testing methods. Other activities of the program focus on strengthening the science base in toxicology and providing information about potentially toxic chemicals to health-regulatory and research agencies, scientific and medical communities, and the public. NTP is located administratively at the NIEHS.

Information about NIEHS and NTP is available at http://www.niehs.nih.gov and http://ntp.niehs.nih.gov, respectively.

Dated: October 20, 2016.

John R. Bucher,
Associate Director, National Toxicology Program.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Allergy and Infectious Diseases; Notice of Closed Meetings

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 meetings.

The meetings 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.