Similar information about planned guidance development is included in the annual agency-wide notice issued by FDA under its good guidance practices (21 CFR 10.115(f)(5)). This CDRH list, however, will be focused exclusively on device-related guidances and will be made available on FDA's Web site prior to the beginning of each fiscal year from 2008 to 2012.

#### **II. Request for Comments**

Interested persons may submit to the Division of Dockets Management (see ADDRESSES) written or electronic comments regarding this document. Submit a single copy of electronic comments or two paper copies of any mailed comments, except that individuals may submit one paper copy. Comments are to be identified with the docket number found in brackets in the heading of this document. Received comments may be seen in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday. Comments submitted to this docket may include draft guidance documents that stakeholders have prepared for FDA's consideration.

To access the list of the guidance documents CDRH is considering for development in 2008, visit the FDA Web Site at http://www.fda.gov/cdrh/ mdufma/guidance/agenda/fy08.html.

Dated: October 2, 2007.

# Jeffrey Shuren,

Assistant Commissioner for Policy. [FR Doc. E7–19864 Filed 10–9–07; 8:45 am] BILLING CODE 4160–01–S

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Health Resources and Services Administration

#### Notice of meeting of the Advisory Committee on Organ Transplantation

**AGENCY:** Health Resources and Services Administration, HHS. **ACTION:** Notice of meeting of the

Advisory Committee on Ōrgan Transplantation.

**SUMMARY:** Pursuant to Public Law 92–463, the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the thirteenth meeting of the Advisory Committee on Organ Transplantation (ACOT), Department of Health and Human Services (HHS). The meeting will be held from approximately 9 a.m. to 5:30 p.m. on November 15, 2007, and from 9 a.m. to 3 p.m. on November 16, 2007, at the Crowne Plaza Hotel Washington,

DC—Silver Spring, 8777 Georgia Avenue, Silver Spring, MD 20910. The meeting will be open to the public; however, seating is limited and preregistration is encouraged (see below). SUPPLEMENTARY INFORMATION: Under the authority of 42 U.S.C. 217a, Section 222 of the Public Health Service Act, as amended, and 42 CFR 121.12 (2000), ACOT was established to assist the Secretary in enhancing organ donation, ensuring that the system of organ transplantation is grounded in the best available medical science, and assuring the public that the system is as effective and equitable as possible, and, thereby, increasing public confidence in the integrity and effectiveness of the transplantation system. ACOT is composed of up to 25 members, including the Chair. Members are serving as Special Government Employees and have diverse backgrounds in fields such as organ donation, health care public policy, transplantation medicine and surgery, critical care medicine and other medical specialties involved in the identification and referral of donors, non-physician transplant professions, nursing, epidemiology, immunology, law and bioethics, behavioral sciences, economics and statistics, as well as representatives of transplant candidates, transplant recipients, organ donors, and family members.

ACOT will hear presentations on xenotransplantation; pediatric transplantation; transplantation economics; a description of two National Institutes of Health long-term living donor follow up studies; and Organ Procurement and Transplantation Network Long-Term Follow Up. The ACOT work groups also will update the full Committee on their deliberations on transplant tourism, informed consent, sources of funding for additional data collection, and tissue recovery and transplantation certification/ accreditation.

The draft meeting agenda will be available on November 1 on the Department's donation Web site at http://www.organdonor.gov/acot.html.

A registration form will be available on October 15 on the Department's donation Web site at *http:// www.organdonor.gov/acot.html*. The completed registration form should be submitted by facsimile to Professional and Scientific Associates (PSA), the logistical support contractor for the meeting, at fax number (703) 234–1701. Individuals without access to the Internet who wish to register may call Sowjanya Kotakonda with PSA at (703) 234–1737. Registration can also be

completed electronically at http:// www.psava.com/dot/acot2007/ Individuals who plan to attend the meeting and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the ACOT Executive Secretary, Remy Aronoff, in advance of the meeting. Mr. Aronoff may be reached by telephone at 301-443-3264, e-mail: Remy.Aronoff@hrsa.hhs.gov or in writing at the address provided below. Management and support services for ACOT functions are provided by the Division of Transplantation, Healthcare Systems Bureau, Health Resources and Services Administration, 5600 Fishers Lane, Parklawn Building, Room 12C-06, Rockville, Maryland 20857; telephone number 301-443-7577.

After the presentations and ACOT discussions, members of the public will have an opportunity to provide comments. Because of the Committee's full agenda and the timeframe in which to cover the agenda topics, public comment will be limited. All public comments will be included in the record of the ACOT meeting.

Dated: October 2, 2007.

# Elizabeth M. Duke,

Administrator.

[FR Doc. E7–19969 Filed 10–9–07; 8:45 am] BILLING CODE 4165–15–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Health Resources and Services Administration

#### Statement of Organization, Functions and Delegations of Authority

This notice amends Part R of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA) (60 FR 56605, as amended November 6, 1995; 67 FR 46519, July 15, 2002; 68 FR 787-793, January 7, 2003; 68 FR 8515-8517, February 21, 2003; 68 FR 64357-64358, November 13, 2003; 69 FR 56433-56445, September 21, 2004; as last amended at 70 FR 19962-19963, April 15, 2005). This Order of Succession supersedes the Order of Succession for the Administrator, HRSA, published at FR 70 19962–19963, April 15, 2005.

This notice updates changes to HRSA's hierarchy affecting the Office of the Administrator; Deputy Administrator; Senior Advisor to the Administrator, Chief Financial Officer; Bureau of Primary Health Care; Office of Management; Bureau of Health Professions; HIV/AIDS Bureau; Maternal and Child Health Bureau; Bureau of Clinician Recruitment and Service; Healthcare Systems Bureau; and Office of Performance Review.

This notice is to reflect the Order of Succession for the HRSA.

# Section R-30, Order of Succession

During the absence or disability of the Administrator or in the event of a vacancy in the office, the first official listed below who is available shall act as Administrator, except that during a planned period of absence, the Administrator may specify a different order of succession. The order of succession will be as such:

1. Deputy Administrator;

2. Senior Advisor to the

Administrator;

3. Chief Financial Officer;

4. Associate Administrator, Bureau of Primary Health Care;

5. Associate Administrator, Office of Management;

6. Associate Administrator, Bureau of Health Professions;

7. Associate Administrator, HIV/AIDS Bureau;

8. Associate Administrator, Maternal and Child Health Bureau;

9. Associate Administrator, Bureau of Clinician Recruitment and Service;

10. Associate Administrator, Healthcare Systems Bureau: and

11. Associate Administrator, Office of Performance Review.

#### Section R-40, Delegation of Authority

All delegations and redelegations of authorities to officers and employees of the Health Resources and Services Administration which were in effect immediately prior to the effective date of this action will be continued in effect in them or their successors, pending further redelegation, provided they are consistent with this action.

This document is effective upon date of signature.

Dated: October 1, 2007.

#### Elizabeth M. Duke,

Administrator.

[FR Doc. E7–19966 Filed 10–9–07; 8:45 am] BILLING CODE 4165–15–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# National Institutes of Health

#### Submission for OMB Review; Comment Request; Graduate Student Training Program Applications

Summary: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Graduate Partnerships Program/OIR/OD/, the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the **Federal Register** on Monday, June 25, 2007/Vol. 72, No. 121/Pages 34692-34693 and allowed 60days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been

extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection: Title: Graduate Student Training Programs Application. *Type of Information Collection Request:* Revision. Need and Use of Information Collection: The information gathered in the Graduate Student Training Programs application will enable the identification and evaluation of graduate students interested in performing their dissertation research in the NIH Intramural Research Program laboratories (NIH–IRP). The GSTP application models graduate university applications by containing the sections that will aid in the NIH Admission Committee's evaluation of an applicant: Contact information, citizenship, education history and transcripts, standardized examination scores, research interests, personal statement research proposal, references and letters of recommendation, and partnership selection. Ethnicity and gender are additional optional information used to evaluate the GPP recruiting abilities and compliance with federal regulations. Feedback questions forwarded to interviewed applicants will assist in modifying interview day schedules and identification of factors used when deciding to accept or decline the admission offer. Frequency of Response: Once. Affected Public: Individuals. Type of Respondents: Students pursuing an advanced degree and wish to perform dissertation research in the NIH Intramural Research Program laboratories. The annual reporting burden is displayed in the following table:

# A.12–1 ESTIMATES OF ANNUAL BURDEN HOUR

Type of respondents	Estimated number of respondents	Estimated number of responses per respondent	Average burden hours per response	Estimated total annual burden hours requested
$\begin{array}{llllllllllllllllllllllllllllllllllll$	100 500 600 1800 200	1 1 1 1	0.50 0.50 0.25 0.25	50 250 300 450 50
Totals	3200			1100

Request for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Direct Comments to OMB: Written comments and/or suggestions regarding