GOG group member at the University of Iowa, in order to justify enrollment of a patient in GOG clinical protocol 182.

The questioned research was supported by National Institutes of Health (NIH) funds to the University of Iowa through the American Society for Obstetrics and Gynecology under National Cancer Institute (NCI), National Institutes of Health (NIH), cooperative agreement U10 CA27469.

Dr. Geisler has entered into a Voluntary Exclusion Agreement (Agreement) in which he has voluntarily agreed, for a period of three (3) years, beginning on December 2, 2005:

- (1) To exclude himself from serving in any advisory capacity to PHS including but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as consultant; and
- (2) That any institution which uses the Respondent in any capacity on PHSsupported research, or that submits an application for PHS support for a research project on which the Respondent's participation is proposed or submits a report of PHS-funded research in which the Respondent's participation is continuing, must concurrently submit a plan for supervision of the Respondent's duties to the funding agency for approval. The supervisory plan must be designed to ensure the scientific integrity of the Respondent's research contribution. A copy of the supervisory plan must also be submitted to ORI by the institution. Respondent agrees that he will not participate in any PHS-supported research until such a supervision plan is submitted to ORI.

Respondent disagrees with the ORI finding set forth herein but executes this Agreement to avoid further proceedings and bring this matter to a close. The execution of this Agreement shall not be deemed an admission to the charge of scientific misconduct by the Respondent.

## FOR FURTHER INFORMATION CONTACT:

Director, Division of Investigative Oversight, Office of Research Integrity, 1101 Wootton Parkway, Suite 750, Rockville, MD 20852, (240) 453–8800.

## Chris B. Pascal,

Director, Office of Research Integrity.
[FR Doc. E5–8202 Filed 12–30–05; 8:45 am]

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Office of the Secretary

## **Findings of Scientific Misconduct**

**AGENCY:** Office of the Secretary, HHS. **ACTION:** Notice.

**SUMMARY:** Notice is hereby given that the Office of Research Integrity (ORI) and the Acting Assistant Secretary for Health have taken final action in the following case:

Ralph A. Highshaw, M.D., M.D.
Anderson Cancer Center: Based on the report of an investigation conducted by the M.D. Anderson Cancer Center (MDACC) and additional analysis conducted by ORI in its oversight review, the U.S. Public Health Service (PHS) found that Ralph A. Highshaw, M.D., Fellow, Department of Urologic Surgery, MDACC, engaged in scientific misconduct while supported by National Cancer Institute (NCI), National Institutes of Health (NIH), postdoctoral training grant T32 CA079449–01A1.

Specifically, PHS found that Dr. Highshaw engaged in scientific misconduct by plagiarizing nine pages of a twenty-one page expert review article entitled "Chemoprevention of Urologic Cancer."

Dr. Highshaw has entered into a Voluntary Exclusion Agreement (Agreement) in which he has voluntarily agreed, for a period of three (3) years, beginning on December 12, 2005:

- (1) That he is required to certify in every PHS research application or report, and any other text, article, or manuscript, that all contributors are properly cited or otherwise acknowledged; the certification by the Respondent must be endorsed by an institutional official, and a copy of the certification is to be sent to ORI by the institution;
- (2) To ensure that any institution employing him submits, in conjunction with each application for PHS funds, annual reports, manuscripts, or abstracts of PHS funded research in which the Respondent is involved, a certification that the data provided by the Respondent are based on actual experiments or are otherwise legitimately derived, and that the data, procedures, and methodology are accurately reported in the application or report; the Respondent must ensure that the institution also sends a copy of the certification to ORI; and
- (3) To exclude himself from serving in any advisory capacity to PHS including

but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as consultant.

### FOR FURTHER INFORMATION CONTACT:

Director, Division of Investigative Oversight, Office of Research Integrity, 1101 Wootton Parkway, Suite 750, Rockville, MD 20852, (240) 453–8800.

#### Chris B. Pascal,

Director, Office of Research Integrity.
[FR Doc. E5–8201 Filed 12–30–05; 8:45 am]
BILLING CODE 4150–31–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

## National Institute for Occupational Safety and Health Advisory Board on Radiation and Worker Health

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 committee meeting:

Name: Advisory Board on Radiation and Worker Health (ABRWH), National Institute for Occupational Safety and Health (NIOSH) and Subcommittee for Dose Reconstruction and Site Profile Reviews.

Subcommittee Meeting Time and Date: 9 a.m.-5 p.m., January 24, 2006. Committee Meeting Times and Dates: 8:30 a.m.-5 p.m., January 25, 2006. 8:30 a.m.-4:30 p.m., January 26, 2006.

Place: Doubletree Oak Ridge Hotel, 215 South Illinois Avenue, Oak Ridge, Tennessee, 37830, telephone (865) 481– 2468, fax (865) 481–2474.

Status: Open to the public, limited only by the space available. The meeting space accommodates approximately 75 people.

Background: The ABRWH was established under the Energy Employees Occupational Illness Compensation Program Act (EEOICPA) of 2000 to advise the President, delegated to the Secretary of Health and Human Services (HHS), on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Board include providing advice on the development of probability of causation guidelines which have been promulgated by HHS as a final rule, advice on methods of dose reconstruction which have also been promulgated by HHS as a final rule, advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed

for purposes of the compensation program, and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC). In December 2000, the President delegated responsibility for funding, staffing, and operating the Board to HHS, which subsequently delegated this authority to the CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, and will expire on July 27, 2007.

Purpose: This board is charged with (a) providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; (b) providing advice to the Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this program; and (c) upon request by the Secretary, HHS, advise the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class.

Matters To Be Discussed: The agenda for the meeting includes Y–12 (1948–1957) SEC; NIOSH identified SEC classes; Site Profiles for Bethlehem Steel, Rocky Flats, and Savannah River Site; Letter from Steel Workers; SEC Rule rewrite; Task 3 Review of SC&A Contract; Report on additions to the list of 22 Cancers; Conflict of Interest; Dose Reconstruction Reviews; and an update on science issues. The evening public comment sessions are scheduled for January 24 from 5:30 p.m.–6:30 p.m. and January 25 from 7 p.m.–8:30 p.m.

The agenda is subject to change as priorities dictate. In the event an individual cannot attend, written comments may be submitted. Any written comments received will be provided at the meeting and should be submitted to the contact person below well in advance of the meeting.

Contact Person for More Information: Dr. Lewis V. Wade, Executive Secretary, NIOSH, CDC, 4676 Columbia Parkway, Cincinnati, Ohio 45226, telephone 513–533–6825, fax 513–533–6826.

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: December 27, 2005.

#### B. Kathy Skipper,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E5–8191 Filed 12–30–05; 8:45 am] BILLING CODE 4163–18–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

# The National Institute for Occupational Safety and Health (NIOSH)

The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) announces the following public meetings and request for information:

Name: NIOSH Opportunity to Provide Input for the National Occupational Research Agenda (NORA) with a special emphasis on the Agriculture, Forestry, and Fishing Sector, and the Health Care and Social Assistance Sector, with regional and multi-sector input.

Meeting Dates, Times, and Places: Agriculture, Forestry, and Fishing (AFF) Sector, Tuesday, January 17, 2006, 9 a.m.–5 p.m. pst, 9 a.m.–12 p.m. Multi-Sector Public Comments, 1 p.m.–5 p.m. AFF Specific Public Comments.

Museum of History and Industry (MOHAI, 2700 24th Avenue East, Seattle, WA 98112–2099. And HealthCare and Social Assistance Sector, Monday, January 23, 2006, 9 a.m.–5 p.m. cst, 9 a.m.–12 p.m. Multi-Sector Public Comments, 1 p.m.–5 p.m. HSA Specific Public Comments.

The University of Texas School of Public Health Auditorium, 1200 Herman Pressler, Houston, Texas 77030.

Status: Meetings are open to the public, limited only by the space available.

Background: A large part of our lives is shaped by the work we do. NORA is a framework to guide occupational safety and health research for the nation. It is an ongoing endeavor to focus research to reduce work-related injury and illness. As the program approaches a ten-year milestone, NIOSH is hosting public meetings to seek input from individuals and organizations on important research issues and agendas. Information about the public meetings and registration can be found on the NORA Web page at http://www.cdc.gov/niosh/nora/townhall.

Given that NORA represents a broadbased partnership involving government, business, the worker community, academia, and others, public input is essential for planning future directions for the initiative, which will be based on eight different industry sector groups. Each meeting will be structured to provide an opportunity for regional and multisector input during the morning, followed where appropriate by an afternoon session to focus on individual sector issues.

All participants are requested to register for the free meeting at the NORA Web page or onsite the day of the meeting. Participants wishing to speak are encouraged to register early. The public meetings are open to everyone, including all workers, professional societies, organized labor, employers, researchers, health professionals, government officials, and elected officials. Broad participation is desired.

*Purpose:* The public meetings will address both regional and sectorspecific priorities for research. During the morning session, stakeholders will be invited to speak for 5 minutes on an important occupational safety and health issue, including those that occur in multiple sectors. Where noted in the agenda, the afternoon session will focus on sector-specific problems facing the nation. Again, participants will be asked to make 5-minute presentations describing what they perceive to be the top concerns within their sector or subsector. Participants are encouraged to attend both the regional and sectorspecific sessions, or they may elect to participate in only one session.

Types of occupational safety and health issues might include diseases, injuries, exposures, populations at risk, and needs of occupational safety and health systems. For example, falls from heights might be a top injury issue for the residential construction industry. Low back pain and related back disorders might be a top disease concern for the urban transit industry. If possible, please include as much information as might be useful for understanding the safety or health research priority you identify. Such information could include characterization of the frequency and severity with which the injury, illness, or hazardous exposure is occurring and of the factors you believe might be causing the health or safety issue. Input is also requested on the types of research that you believe might make a difference and the partners (e.g., specific industry associations, labor organizations, research organizations, governmental agencies) who should be involved in informing research efforts and in solving the problem.

All presentations will be entered into the NORA Docket, which is maintained