information and failing to regularly test or monitor them; (3) failing to develop, implement, and maintain a comprehensive written information security program; and (4) failing to designate one or more employees to coordinate the information security program. The complaint also alleges that Nationwide failed to provide its customers with the notice required by the Privacy Rule.

The proposed order contains provisions designed to prevent Nationwide from engaging in future practices similar to those alleged in the complaint. Specifically, Part I of the proposed order prohibits Nationwide from violating the Safeguards Rule or the Privacy Rule. Part II of the proposed order requires that Nationwide obtain, within 180 days after being served with the final order approved by the Commission, and on a biennial basis thereafter for a period of ten (10) years, an assessment and report from a qualified, objective, independent thirdparty professional, certifying that: (1) Nationwide has in place a security program that provides protections that meet or exceed the protections required by the Safeguards Rule, and (2) Nationwide's security program is operating with sufficient effectiveness to provide reasonable assurance that the security, confidentiality, and integrity of consumers' personal information has been protected. This provision is substantially similar to comparable provisions obtained in prior Commission orders under Section 5 of the FTC Act. See In the Matter of Petco Animal Supplies Inc., FTC File No. 032-3221 (consent order) (Placed on the public record on Nov. 17, 2004); In the Matter of MTS, Inc., doing business as Tower Records/Books/Video, et al., FTC Docket No. C-4110 (consent order) (Issued May 28, 2004); In the Matter of Guess?, Inc., and Guess.com, Inc., FTC Docket No. C-4091 (consent order) (Issued July 30, 2003); and In the Matter of Microsoft Corporation, FTC Docket No. C-4069 (consent order) (Issued Dec. 20, 2002).

Part II of the proposed order also requires Nationwide to retain documents relating to compliance. For the assessments and supporting documents, Nationwide must retain the documents for three years after the date that each assessment is prepared.

Parts III through VI of the proposed order are reporting and compliance provisions. Part III requires dissemination of the order now and in the future to all employees and other persons having responsibilities with respect to the subject matter of the order. Part IV requires Mr. Eubank to notify the FTC, for a period of ten years, if he discontinues his current business or becomes affiliated with a new one. Part V ensures notification to the FTC of changes in corporate status. Part VI mandates that Nationwide submit compliance reports to the FTC. Part VII is a provision "sunsetting" the order after twenty (20) years, with certain exceptions.

The purpose of this analysis is to facilitate public comment on the proposed order. It is not intended to constitute an official interpretation of the proposed order or to modify its terms in any way.

By direction of the Commission.

Donald S. Clark,

Secretary.

[FR Doc. 05–4967 Filed 3–11–05; 8:45 am] BILLING CODE 6750–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Solicitation of Nomination for Appointment to the Chronic Fatigue Syndrome Advisory Committee

AGENCY: Department of Health and Human Services, Office of the Secretary, Office of Public Health and Science. **ACTION:** Notice.

Authority: 42 U.S.C. 217a, section 222 of the Public Health Service (PHS) Act, as amended. The committee is governed by the provisions of Public Law 92–463, as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

SUMMARY: The Office of Public Health and Science, DHHS, is seeking nominations of qualified candidates to be considered for appointment as a member of the Chronic Fatigue Syndrome Advisory Committee (CFSAC). CFSAC provides sciencebased 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 chronic fatigue syndrome (CFS). CFSAC, which was formerly known as the Chronic Fatigue Syndrome Coordinating Committee, was established by the Secretary of Health and Human Services on September 5, 2002. The appointments of six Committee members are scheduled to end on September 30, 2005. Nominations of qualified candidates are being sought to fill these scheduled vacancies. DATES: Nominations for membership on the Committee must be received no later than 5 p.m. EST on April 20, 2005, at the address listed below.

ADDRESSES: All nominations should be mailed or delivered to Dr. Howard Zucker, Executive Secretary, Chronic Fatigue Syndrome Advisory Committee; Office of Public Health and Science; Department of Health and Human Services; 200 Independence Avenue, SW., Room 716G; Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: Ms. Olga Nelson; Committee Management Officer, OPHS; Department of Health and Human Services; 200 Independence Avenue, SW., 20201; Telephone: (202) 690–5205.

A copy of the Committee charter and list of the current membership can be obtained by contacting Ms. Nelson or by accessing the CFSAC Web site, *http:// www.hhs.gov/advcomcfs.*

SUPPLEMENTARY INFORMATION:

1. The Committee shall advise and make recommendations to the Secretary, through the Assistant Secretary for Health, on a broad range of topics including: (1) The current state of knowledge and research about the epidemiology and risk factors relating to chronic fatigue syndrome, and identifying potential opportunities in these areas; (2) current and proposed diagnosis and treatment methods for chronic fatigue syndrome, and; (3) development and implementation of programs to inform the public, health care professionals, and the biomedical, academic, and research communities about chronic fatigue syndrome advances.

2. Nominations

The Office of Public Health and Science is requesting nominations to fill six positions for the CFSAC. The positions are scheduled to become vacant in September 30, 2005. The Committee is composed of seven biomedical research scientists with demonstrated expertise in biomedical research and four individuals with demonstrated expertise in health care delivery, private health care services or insurer, or voluntary organizations concerned with the problems of individuals with CFS. To qualify for consideration of appointment to the Committee, an individual must possess demonstrated experience and expertise in the designated fields or discipline, as well as expert knowledge of the broad issues and topics pertinent to the chronic fatigue syndrome.

Individuals selected for appointment to the Committee will serve as voting members. Individuals selected for appointment to the Committee can be invited to serve terms of up to four years. Committee members receive a stipend for attending Committee meetings and conducting other business in the interest of the Committee, including *per diem* and reimbursement for travel expenses incurred.

Nominations should be typewritten. The following information should be included in the package of material submitted for each individual being nominated for consideration: (1) A letter of nomination that clearly states the name and affiliation of the nominee, the basis for the nomination (*i.e.*, specific attributes which qualify the nominee for service in this capacity), and a statement that the nominee is willing to serve as a member of the Committee; (2) the nominator's name, address, and daytime telephone number, and the home and/ or work address, telephone number, and e-mail address of the individual being nominated; and (3) a current copy of the nominee's *curriculum vitae*. The names of Federal employees should not be nominated for consideration of appointment to this Committee.

The Department makes every effort to ensure that the membership of DHHS Federal advisory committees is fairly balanced in terms of points of view represented and the committee's function. Every effort is made to ensure that a broad representation of geographic areas, females, ethnic and minority groups, and the disabled are given consideration for membership on DHHS Federal advisory committees. Appointment to this Committee shall be made without discrimination on the basis of age, race, ethnicity, gender, sexual orientation, disability, and cultural, religious, or socioeconomic status. Nominations must state that the nominee is willing to serve as a member of CFSAC and appears to have no conflict of interest that would preclude membership. Potential candidates are required to provide detailed information concerning such matters as financial holdings, consultancies, and research grants or contracts to permit evaluation of possible sources of conflict of interest.

Dated: March 4, 2005.

Howard A. Zucker,

Executive Secretary, Chronic Fatigue Syndrome Advisory Committee. [FR Doc. 05–4949 Filed 3–11–05; 8:45 am] BILLING CODE 4150–28–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the Chronic Fatigue Syndrome Advisory Committee

AGENCY: Department of Health and Human Services, Office of the Secretary, Office of Public Health and Science.

ACTION: Notice.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Services is hereby giving notice that the Chronic Fatigue Syndrome Advisory Committee (CFSAC) will hold a meeting. The meeting will be open to the public.

DATES: The meeting will be held on Monday, April 4, 2005, from 9 a.m. to 5 p.m.

ADDRESSES: Department of Health and Human Services, Room 800 Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: Dr. Howard Zucker; Executive Secretary, Chronic Fatigue Syndrome Advisory Committee; Department of Health and Human Services, 200 Independence Avenue, SW., Room 716G, Washington, DC 20201; (202) 690–7694.

SUPPLEMENTARY INFORMATION: CFSAC was established on September 5, 2002, to replace the Chronic Fatigue Syndrome Coordinating Committee. CFSAC was established to advise, consult with, and make recommendations to the Secretary, through the Assistant Secretary for Health, on a broad range of topics including (1) the current state of knowledge and research about the epidemiology and risk factors relating to chronic fatigue syndrome, and identifying potential opportunities in these areas; (2) current and proposed diagnosis and treatment methods for chronic fatigue syndrome; and (3) development and implementation of programs to inform the public, health care professionals, and the biomedical, academic, and research communities about chronic fatigue syndrome advances.

The agenda for this meeting is being developed. The agenda will be posted on the CFSAC Web site, *http://www.hhs.gov/advcomcfs*, when it is finalized.

Public attendance at the meeting is limited to space available. Individuals must provide a photo ID for entry into the meeting. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the designated contact person. Members of the public will have the opportunity to provide comments at the meeting. Pre-registration is required for public comment by March 28, 2005. Any individual who wishes to participate in the public comment session should call the telephone number listed in the contact information to register. Public comment will be limited to five minutes per speaker. Any members of the public who wish to have printed material distributed to CFSAC members should submit materials to the Executive Secretary, CFSAC, whose contact information is listed above prior to close of business March 28, 2005.

Dated: March 4, 2005.

Howard A. Zucker,

Executive Secretary, Chronic Fatigue Syndrome Advisory Committee. [FR Doc. 05–4948 Filed 3–11–05; 8:45 am] BILLING CODE 4150-28-P

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:

Gary M. Kammer, M.D., Wake Forest University: Based on the Wake Forest University (WFU) Investigation Report, the respondent's admission, and additional analysis conducted by ORI in its oversight review, the U.S. Public Health Service (PHS) found that Gary M. Kammer, M.D., former Professor, Division of Rheumatology, Department of Internal Medicine, and Department of Microbiology and Immunology at the WFU School of Medicine, engaged in scientific misconduct by falsification and fabrication of research in grant application 2 R01 AR39501-12A1, "T Lymphocyte Dysfunction in Lupus Erythematosus," submitted to the National Institute of Arthritis and Musculoskeletal Skin Diseases (NIAMS), National Institutes of Health (NIH), and in 1 R01 AI46526-01A2, "Protein Kinase A-II in the Pathogenesis of Lupus," submitted to the National Institute of Allergy and Infectious Diseases (NIAID), NIH. Specifically, PHS found that:

• The respondent fabricated Families 2 and 3 in Figure 6 and related text in application 2 R01 AR39501–12A1 (pp. 29–30), entitled ("T Lymphocyte Dysfunction in Lupus Erythematosus") by:

a. Making up both of the pedigrees, b. Fabricating 13 PKA–I and 13 PKA– II values for these non-existent affected and unaffected family members, and

c. Composing the false text describing these two fabricated families.