

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Heart, Lung, and Blood Institute; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), 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, NHLBI Patient-Oriented Research and Career Enhancement Award for Stem Cell Research.

Date: December 21, 2007.

Time: 9 a.m. to 11 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, 7192, Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Mark Roltsch, PhD, Scientific Review Administrator, Review Branch/DERA, National Heart, Lung, and Blood Institute, 6701 Rockledge Drive, Room 7192, Bethesda, MD 20892-7924, 301-435-0287, roltschm@nhlbi.nih.gov.

This notice is being published less than 15 days prior to meeting due to the timing limitations imposed by the review and funding cycle.

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

In the interest of security, NIH has instituted stringent procedures for entrance onto the NIH campus. All visitor vehicles, including taxicabs, hotel, and airport shuttles will be inspected before being allowed on campus. Visitors will be asked to show one form of identification (for example, a government-issued photo ID, driver's license, or passport) and to state the purpose of their visit.

(Catalogue 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: December 10, 2007.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Additional Consolidated Health Information (CHI) Health Information Technology Standards

AGENCY: Federal Health Architecture (FHA), Office of the National Coordinator for Health Information Technology (ONC).

ACTION: Notice: Additional Consolidated Health Informatics (CHI) Health Information Technology Standards.

SUMMARY: This notice identifies three (3) additional Consolidated Health Informatics (CHI) messaging and vocabulary standards (Multimedia, Allergy, and Disability and Assessments) adopted for use in Federal government health information technology systems. This work supplements the work to further the adoption of the first set of 5 standards adopted on March 21, 2003 and second set of 15 standards adopted on May 6, 2004, as published in the December 23, 2005 **Federal Register** (70 FR 76287).

The CHI initiative began in October 2001 as one of 24 E-Government initiatives included in the President's Management Agenda (PMA). The CHI collaborative worked to adopt Federal government-wide health information interoperability standards to be implemented by Federal agencies in order to enable the Federal government to exchange electronic health information. By publication of this document, we are informing the public of the adoption of three new CHI standards, Multimedia, Allergy and Disability and Assessment (adoption reports available at: <http://www.hhs.gov/healthit/chiinitiative.html>).

CHI Adopted Standards

As a result of work completed in furtherance of CHI, the three new domain areas and associated clinical standards that have been adopted are noted in the individual standards adoption reports found at <http://www.hhs.gov/healthit/chiinitiative.html> and are summarized below:

1. **Multimedia Messaging Standard:**
 - National Electrical Manufacturer's Association (NEMA) Digital Imaging and Communications in Medicine (DICOMSM) 2004 Standard and higher.

2. *Allergy Messaging and Vocabulary Standard:*

- Health Level Seven (HL7[®]) HL7[®] 2.4 and higher messaging standard allergy information segments.

- College of American Pathologists (CAP) Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT[®]) for allergy type, severity and reaction codes.

- National Library of Medicine (NLM) RxNorm for brand name allergen code.

- Food and Drug Administration (FDA) Unique Ingredient Identifier (UNII) codes for ingredient name allergen code.

- Department of Veteran Affairs (VA) National Drug File-Reference Terminology (NDF-RT) for drug class allergen code.

- 3. *Disability and Assessments:*

- Regenstrief Institute, Inc LOINC[®] (Logical Observation Identifiers Names and Codes[®]) representation and codes for questions and answers on federally-required assessment forms;

- CHI-endorsed semantic vocabulary matches linked with the LOINC[®] assessment questions and answers; and
- HL7[®] v2.4 and higher messaging standard and the HL7[®] CDA (Clinical Document Architecture (CDA)) for exchanging standardized federally-required assessment content.

SUPPLEMENTARY INFORMATION: In 2006, the CHI initiative was transitioned to the Federal Health Architecture (FHA) under the Office of the National Coordinator for Health IT (ONC). Currently, the CHI standards are being coordinated with the public/private processes of Healthcare Information Technology Standards Panel (HITSP).

HITSP serves as a cooperative partnership between the public and private sectors for the purpose of achieving a widely accepted and useful set of standards specifically to enable and support widespread interoperability among healthcare software systems, as they will interact in a local, regional, and nationwide health information network.

CHI endorsement has been identified as one of the HITSP standards adoption criteria employed to adopt standards for the HITSP Interoperability Specifications. The HITSP Interoperability Specifications are developed to advance the national agenda for secure, interoperable health information systems. (Notice of Availability, 72 FR. 9339 (March 1, 2007).

Collection of Information Requirements

This notice does not impose information collection and recordkeeping requirements subject to