(Introduction), Chapter 2 (Dioxin Assay/Appendix A), Chapter 3 (Questionnaire Methodology), Chapter 4 (Physical Examination/Appendix B), Chapter 6 (Quality Control/Appendix D), and Chapter 9 (General Health/Appendix F1), and Chapter 17 (Renal/Appendix F9) of the special study relating to the possible long-term health affects of phenoxy herbicides and contaminants.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by April 23, 2004. Oral presentations from the public will be scheduled on April 30, 2004, between approximately 1:30 p.m. to 2:30 p.m. Time allotted for each presentation may be limited.

Those desiring to make formal oral presentations should notify the contact person before April 19, 2004, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Persons attending FDA's advisory committee meetings are advised that the agency is not responsible for providing access to electrical outlets.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact Leonard Schechtman at least 7 days in advance of the meeting.

FDA regrets that it was unable to publish this notice 15 days prior to the April 30, 2004, Advisory Committee on Special Studies Relating to the Possible Long-Term Health Effects of Phenoxy Herbicides and Contaminants (Ranch Hand Advisory Committee) meeting. Because the agency believes there is some urgency to bring these issues to public discussion and qualified members of the Advisory Committee on Special Studies Relating to the Possible Long-Term Health Effects of Phenoxy Herbicides and Contaminants (Ranch Hand Advisory Committee) meeting were available at this time, the Commissioner of Food and Drugs concluded that it was in the public interest to hold this meeting even if there was not sufficient time for the customary 15-day public notice.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: April 12, 2004.

Peter J. Pitts,

Associate Commissioner for External Relations.

[FR Doc. 04–8720 Filed 4–16–04; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Vaccines and Related Biological Products Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). At least one portion of the meeting will be closed to the public.

Name of Committee: Vaccines and Related Biological Products Advisory Committee.

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held via teleconference on May 6, 2004, from 1:30 p.m. to 3:30 p.m.

Location: National Institute of Health (NIH) Campus, Food and Drug Administration Bldg. 29B, Conference Room C, 8800 Rockville Pike, Bethesda, MD. This meeting will be held by teleconference. The public is welcome to attend the meeting at the above location. A speakerphone will be provided at the specified location for public participation in this meeting. Important information about transportation and directions to the NIH campus, parking, and security procedures is available on the Internet at *http://www.nih.gov/about/visitor/index.htm*. Visitors must show two forms of identification such as a Federal employee badge, driver's license, passport, green card, etc. If you are planning to drive to and park on the NIH campus, you must enter at the South Drive entrance of the campus which is located on Wisconsin Ave. (the medical center metro entrance), and allow extra time for vehicle inspection. Detailed information about security procedures is located at *http://www.nih.gov/about/visitorsecurity.htm*. Due to the limited available parking, visitors are encouraged to use public transportation.

Contact Person: Christine Walsh or Denise Royster, Center for Biologics Evaluation and Research (HFM–71), 1401 Rockville Pike, Rockville, MD 20852, 301–827–0314 or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 3014512391. Please call the Information Line for up-to-date information on this meeting.

Agenda: The committee will hear an overview on the Laboratory of DNA Viruses, Division of Viral Products, Office of Vaccines Research and Review, Center for Biologics and Research (CBER), and in closed session will discuss the report from the laboratory site visit of March 4, 2004.

Procedure: On May 6, 2004, from 1:30 p.m. to 3 p.m., the meeting is open to the public. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by April 29, 2004. Oral presentations from the public will be scheduled between approximately 2 p.m. to 3 p.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before April 30, 2004, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Closed Committee Deliberations: On May 6, 2004, from 3 p.m. to 3:30 p.m. the meeting will be closed to permit discussion where disclosure would constitute a clearly unwarranted invasion of personal privacy (5 U.S.C. 552b(c)(6)). The committee will discuss a review of internal research programs in the Office of Vaccines Research and Review, Division of Viral Products, CBER.

Persons attending FDA's advisory committee meetings are advised that the agency is not responsible for providing access to electrical outlets.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact Christine Walsh or Denise Royster at least 7 days in advance of the meeting.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: April 9, 2004.

Peter J. Pitts,

Associate Commissioner for External Relations.

[FR Doc. 04–8721 Filed 4–16–04; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Proposed Information Collection: Request for Public Comment: 60-Day Notice

AGENCY: Indian Health Service, HHS.

ACTION: Request for public comment: 60-day proposed collection; IHS Urban Indian Health Program common reporting requirements.

SUMMARY: The Indian Health Service, as part of its continuing effort to reduce paperwork and respondent burden, conducts a pre-clearance consultation program to provide the general public and Federal agencies with an opportunity to comment on proposed and/or continuing collections of information in accordance with the Paperwork Reduction Act of 1995 (PRA95) (44 U.S.C. 3506(c)(2)(A)). This program helps to ensure that requested data can be provided in the desired format, reporting burden (time and financial resources) is minimized, collection instruments are clearly understood, and the impact of collection requirements on respondents can be properly assessed. Currently, the Indian Health Service (IHS) is providing a 60-day advance opportunity for public comment on a proposed extension of current information collection activity to be submitted to the Office of Management and Budget for review.

Proposed Collection

Title: 09–17–0007, ''IHS Urban Indian Health Program Common Reporting Requirements''.

Type of Information Collection Request: Revision of a currently approved collection.

Form Number: Reporting formats contained in the Indian Health Service Urban Indian Health Program Common Reporting Requirements Instruction Manual.

Need and Use of Information Collection: American Indian/Alaska Native (AI/AN) urban health organizations contracting with the IHS provide the information collected. The information is collected annually and is used to monitor contractor performance, prepare budget reports, allocate resources, and evaluate the urban health contract program.

Affected Public: Businesses or other for-profit organizations, individuals, not-for-profit institutions, and State, local, or tribal government.

Type of Respondents: Health care providers.

The table below summarizes the annual burden hour for this collection.

ESTIMATED BURDEN RESPONSE TABLE

Data collection instruments	Estimated number of respondents	Responses per respondent	Annual number of responses	Average burden hr per response [1]	Total annual burden hrs
Face Sheet	34	1	34	0.50 (30 mins)	17.0
Table 1	34	1	34	2.00 (120 mins)	68.0
Table 2	34	1	34	0.75 (45 mins)	25.5
Table 3	34	1	34	2.25 (135 mins)	76.5
Table 3A	34	1	34	1.05 (65 mins)	36.0
Table 3B	34	1	34	0.25 (15 mins)	8.5
Table 3C	34	1	34	0.33 (20 mins)	11.0
Table 3D	34	1	34	1.25 (75 mins)	42.5
Table 4	(2)	1	(2)	0.50 (30 mins)	17.0
Table 5	34	1	34	2.00 (120 mins)	68.0
Table 6	34	1	34	2.00 (120 mins)	68.0
Table 7	34	1	34	1.00 (60 mins)	34.0
Table 8	34	1	34	1.25 (75 mins)	42.5
Total	480	14	480	15.13 (910 mins)	514.5

[1] For ease of understanding, burden hours are also provided in actual minutes.
[2] Excludes urban Indian health projects with no medical component.

There are no Capital Costs, Operating Costs, and/or Maintenance Costs to report.

Request for Comments: Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the agency processes the information collection in a useful and timely fashion; (c) the accuracy of public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimate are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Send Comments and Requests for Information: Send your written comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time, and send requests for more information on the proposed collection or to obtain a copy of the data collection instrument(s) and instructions to: Ms. Christine Ingersoll, IHS Reports Clearance Office, 12300 Twinbrook Parkway, Suite 450, Rockville, MD 20852–1601, call non-toll free (301) 443–5938, send via facsimile to (301) 443–2316, or send your e-mail requests, comments, and return address to: *cingerso@hqe.ihs.gov.*

For Further Information directly pertaining to the proposed data reporting formats contained in the Indian Health Service Urban Indian Health Programs Common Reporting Requirements Instruction Manual and/or the process for handling such formats, please contact Karen Boyle, Reyes Building, Suite 200, 801