

(b) The design and plans for such memorial shall be subject to the approval of the Secretary of the Interior, the National Commission of Fine Arts, and the National Capital Planning Commission, and the United States or the District of Columbia shall be put to no expense in the erection thereof.

Approval.

SEC. 3. The authority conferred pursuant to this joint resolution shall lapse unless (1) the erection of such memorial is commenced within five years from the date of enactment of this joint resolution, and (2) prior to its commencement funds are certified available in an amount sufficient, in the judgment of the Secretary of the Interior, to insure completion of the memorial.

Conditions.

SEC. 4. The maintenance and care of the memorial erected under the provisions of this Act shall be the responsibility of the Secretary of the Interior, or, if the memorial is erected upon public grounds belonging to or under the jurisdiction of the District of Columbia, the government of the District of Columbia.

Maintenance and care.

Approved September 18, 1972.

Public Law 92-423

AN ACT

September 19, 1972
[S. 3323]

To amend the Public Health Service Act to enlarge the authority of the National Heart and Lung Institute in order to advance the national attack against diseases of the heart and blood vessels, the lungs, and blood, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

National Heart,
Blood Vessel,
Lung, and Blood
Act of 1972.

SHORT TITLE

SECTION 1. This Act may be cited as the "National Heart, Blood Vessel, Lung, and Blood Act of 1972".

FINDINGS AND DECLARATION OF PURPOSE

SEC. 2. (a) Congress finds and declares that—

(1) diseases of the heart and blood vessels collectively cause more than half of all the deaths each year in the United States and the combined effect of the disabilities and deaths from such diseases is having a major social and economic impact on the Nation;

(2) elimination of heart and blood vessel diseases as significant causes of disability and death could increase the average American's life expectancy by about eleven years and could provide for annual savings to the economy in lost wages, productivity, and costs of medical care of more than \$30,000,000,000 per year;

(3) chronic lung diseases have been gaining steadily in recent years as important causes of disability and death, with emphysema alone being the fastest rising cause of death in the United States;

(4) chronic respiratory diseases affect an estimated ten million Americans, emphysema an estimated one million, chronic bronchitis an estimated four million, and asthma an estimated five million;

(5) thrombosis (the formation of blood clots in the vessels) may cause, directly or in combination with other problems, many deaths and disabilities from heart disease and stroke which can now be prevented;

(6) blood and blood products are essential human resources whose value in saving life and promoting health cannot be assessed in terms of dollars;

(7) the provision of prompt and effective emergency medical services utilizing to the fullest extent possible advances in transportation and communications and other electronic systems and specially trained professional and paraprofessional health care personnel can reduce substantially the number of fatalities and severe disabilities due to critical illnesses in connection with heart, blood vessel, lung, and blood diseases; and

(8) the greatest potential for advancement against heart, blood vessel, lung, and blood diseases lies in the National Heart and Lung Institute, but advancement against such diseases depends not only on the research programs of that Institute but also on the research programs of other research institutes of the National Institutes of Health.

(b) It is the purpose of this Act to enlarge the authority of the National Heart and Lung Institute in order to advance the national attack upon heart, blood vessel, lung, and blood diseases.

HEART, BLOOD VESSEL, LUNG, AND BLOOD DISEASE PROGRAMS

62 Stat. 464.
42 USC 287.

SEC. 3. Part B of title IV of the Public Health Service Act is amended (1) by redesignating section 413 as section 419A, (2) by redesignating section 414 as section 418, and (3) by adding after section 412 the following new sections:

“NATIONAL HEART, BLOOD VESSEL, LUNG, AND BLOOD DISEASE PROGRAM

“SEC. 413. (a) The Director of the Institute, with the advice of the Council, shall develop a plan for a National Heart, Blood Vessel, Lung, and Blood Disease Program (hereafter in this part referred to as the ‘Program’) to expand, intensify, and coordinate the activities of the Institute respecting heart, blood vessel, lung, and blood diseases (including its activities under section 412) and shall carry out the Program in accordance with such plan. The Program shall be coordinated with the other research institutes of the National Institutes of Health to the extent that they have responsibilities respecting such diseases and shall provide for—

“(1) investigation into the epidemiology, etiology, and prevention of all forms and aspects of heart, blood vessel, lung, and blood diseases, including investigations into the social, environmental, behavioral, nutritional, biological, and genetic determinants and influences involved in the epidemiology, etiology, and prevention of such diseases;

“(2) studies and research into the basic biological processes and mechanisms involved in the underlying normal and abnormal heart, blood vessel, lung, and blood phenomena;

“(3) research into the development, trial, and evaluation of techniques, drugs, and devices (including computers) used in, and approaches to, the diagnosis, treatment (including emergency medical service), and prevention of heart, blood vessel, lung, and blood diseases and the rehabilitation of patients suffering from such diseases;

NIH, coordination provisions.

“(4) establishment of programs that will focus and apply scientific and technological efforts involving biological, physical, and engineering sciences to all facets of heart, blood vessel, lung, and blood diseases with emphasis on refinement, development, and evaluation of technological devices that will assist, replace, or monitor vital organs and improve instrumentation for detection, diagnosis, and treatment of those diseases;

“(5) establishment of programs for the conduct and direction of field studies, large-scale testing and evaluation, and demonstration of preventive, diagnostic, therapeutic, and rehabilitative approaches to, and emergency medical services for, such diseases;

“(6) studies and research into blood diseases and blood, and into the use of blood for clinical purposes and all aspects of the management of its resources in this country, including the collection, preservation, fractionalization, and distribution of it and its products;

“(7) the education and training of scientists, clinicians, and educators, in fields and specialties (including computer sciences) requisite to the conduct of programs respecting heart, blood vessel, lung, and blood diseases;

“(8) public and professional education relating to all aspects of such diseases and the use of blood and blood products and the management of blood resources;

“(9) establishment of programs for study and research into heart, blood vessel, lung, and blood diseases of children (including cystic fibrosis, hyaline membrane, and hemolytic and hemophilic diseases) and for the development and demonstration of diagnostic, treatment, and preventive approaches to these diseases; and

“(10) establishment of programs for study, research, development, demonstrations and evaluation of emergency medical services for people who become critically ill in connection with heart, blood vessel, lung, or blood diseases, which programs shall include programs for (A) the training of paraprofessionals in (i) emergency treatment procedures, and (ii) utilization and operation of emergency medical equipment, (B) the development and operation of (i) mobile critical care units (including helicopters and other airborne units where appropriate), (ii) radio, telecommunications, and other means of communications, and (iii) electronic monitoring systems, and (C) the coordination with other community services and agencies in the joint use of all forms of emergency vehicles, communications systems, and other appropriate services.

The Program shall give special emphasis to the continued development in the Institute of programs relating to atherosclerosis, hypertension, thrombosis, and congenital abnormalities of the blood vessels as causes of stroke, and to effective coordination of such programs with related stroke programs in the National Institute of Neurological Diseases and Stroke.

“(b) (1) The plan required by subsection (a) of this section shall (A) be developed within one hundred and eighty days after the effective date of this section, (B) be transmitted to the Congress, and (C) set out the Institute’s staff requirements to carry out the Program and recommendations for appropriations for the Program.

National Institute of Neurological Diseases and Stroke, coordination.

Plan development; transmittal to Congress.

Report to President, transmittal to Congress.

“(2) The Director of the Institute shall, as soon as practicable after the end of each calendar year, prepare in consultation with the Council and submit to the President for transmittal to the Congress a report on the activities, progress, and accomplishments under the Program during the preceding calendar year and a plan for the Program during the next five years.

Director, functions.

“(c) In carrying out the Program, the Director of the Institute, under policies established by the Director of the National Institutes of Health and after consultation with the Council and without regard to any other provision of this Act, may—

80 Stat. 416.

“(1) if authorized by the Council, obtain (in accordance with section 3109 of title 5, United States Code, but without regard to the limitation in such section on the number of days or the period of such service) the services of not more than fifty experts or consultants who have scientific or professional qualifications;

19 Stat. 370.

“(2) acquire, construct, improve, repair, operate, and maintain heart, blood vessel, lung, and blood disease laboratory, research, training, and other necessary facilities and equipment, and related accommodations as may be necessary, and such other real or personal property (including patents) as the Director deems necessary; and acquire, without regard to the Act of March 3, 1877 (40 U.S.C. 34), by lease or otherwise, through the Administrator of General Services, buildings or parts of buildings in the District of Columbia or communities located adjacent to the District of Columbia for the use of the Institute for a period not to exceed ten years; and

“(3) enter into such contracts, leases, cooperative agreements, or other transactions, without regard to sections 3648 and 3709 of the Revised Statutes of the United States (31 U.S.C. 529, 41 U.S.C. 5), as may be necessary in the conduct of his functions, with any public agency, or with any person, firm, association, corporation, or educational institution.

Assistant Director for Health Information Programs.

Cardiovascular and pulmonary diseases, information.

“(d) There shall be in the Institute an Assistant Director for Health Information Programs who shall be appointed by the Director of the Institute. The Director of the Institute, acting through the Assistant Director for Health Information Programs, shall conduct a program to provide the public and the health professions with health information with regard to cardiovascular and pulmonary diseases. In the conduct of such program, special emphasis shall be placed upon dissemination of information regarding diet, exercise, stress, hypertension, cigarette smoking, weight control, and other factors affecting the prevention of arteriosclerosis and other cardiovascular diseases and of pulmonary diseases.

“HEART, BLOOD VESSEL, LUNG, AND BLOOD DISEASE PREVENTION AND CONTROL PROGRAMS

“SEC. 414. (a) The Director of the Institute, under policies established by the Director of the National Institutes of Health and after consultation with the Council, shall establish programs as necessary for cooperation with other Federal Health agencies, State, local, and regional public health agencies, and nonprofit private health agencies in the diagnosis, prevention, and treatment (including the provision of emergency medical services) of heart, blood vessel, lung, and blood

diseases, appropriately emphasizing the prevention, diagnosis, and treatment of such diseases of children.

“(b) There is authorized to be appropriated to carry out this section \$25,000,000 for the fiscal year ending June 30, 1973, \$35,000,000 for the fiscal year ending June 30, 1974, and \$45,000,000 for the fiscal year ending June 30, 1975.

Appropriations.

“NATIONAL RESEARCH AND DEMONSTRATION CENTERS FOR HEART, BLOOD VESSEL, LUNG, AND BLOOD DISEASES

“SEC. 415. (a) (1) The Director of the Institute may provide for the development of—

“(A) fifteen new centers for basic and clinical research into, training in, and demonstration of, advanced diagnostic, prevention, and treatment methods (including methods of providing emergency medical services) for heart, blood vessel, and blood diseases; and

“(B) fifteen new centers for basic and clinical research into, training in, and demonstration of, advanced diagnostic, prevention, and treatment methods (including methods of providing emergency medical services) for chronic lung diseases (including bronchitis, emphysema, asthma, cystic fibrosis, and other lung diseases of children).

“(2) The centers developed under paragraph (1)(A) shall, in addition to being utilized for research, training, and demonstrations, be utilized for the following prevention programs for cardiovascular diseases:

“(A) Programs to develop improved methods of detecting individuals with a high risk of developing cardiovascular disease.

“(B) Programs to develop improved methods of intervention against those factors which cause individuals to have a high risk of developing such disease.

“(C) Programs to develop health professions and allied health professions personnel highly skilled in the prevention of such disease.

“(D) Programs to develop improved methods of providing emergency medical services for persons with such disease.

“(3) Centers developed under this subsection may be supported under subsection (b) or under any other applicable provision of law. The research, training, and demonstration activities carried out through any such center may relate to any one or more of the diseases referred to in paragraph (1) of this subsection.

“(b) The Director of the Institute, under policies established by the Director of the National Institutes of Health and after consultation with the Council, may enter into cooperative agreements with public or nonprofit private agencies or institutions to pay all or part of the cost of planning, establishing, or strengthening, and providing basic operating support for, existing or new centers (including centers established under subsection (a)) for basic or clinical research into, training in, and demonstration of, advanced diagnostic, prevention, and treatment methods for heart, blood vessel, lung, or blood diseases. Funds paid to centers under cooperative agreements under this subsection may be used for—

Public or non-profit agencies, cooperative agreements.

Use of funds.

“(1) construction, notwithstanding section 405,

“(2) staffing and other basic operating costs, including such patient care costs as are required for research,

58 Stat. 708.
42 USC 285.

“(3) training, including training for allied health professions personnel, and

“(4) demonstration purposes.

Limitations.

The aggregate of payments (other than payments for construction) made to any center under such an agreement may not exceed \$5,000,000 in any year. Support of a center under this subsection may be for a period of not to exceed five years and may be extended by the Director of the Institute for additional periods of not more than five years each, after review of the operations of such center by an appropriate scientific review group established by the Director. As used in this section, the term ‘construction’ does not include the acquisition of land.

“Construction.”

“INTERAGENCY TECHNICAL COMMITTEE

Establishment.

“SEC. 416. (a) The Secretary shall establish an Interagency Technical Committee on Heart, Blood Vessel, Lung and Blood Diseases and Blood Resources which shall be responsible for coordinating those aspects of all Federal health programs and activities relating to heart, blood vessel, lung, and blood diseases and to blood resources to assure the adequacy and technical soundness of such programs and activities and to provide for the full communication and exchange of information necessary to maintain adequate coordination of such programs and activities.

“(b) The Director of the Institute shall serve as Chairman of the Committee and the Committee shall include representation from all Federal departments and agencies whose programs involve health functions or responsibilities as determined by the Secretary.

“NATIONAL HEART AND LUNG ADVISORY COUNCIL

Establishment;
membership.

“SEC. 417. (a) There is established in the Institute a National Heart and Lung Advisory Council to be composed of twenty-three members as follows:

“(1) The Secretary, the Director of the National Institutes of Health, the Director of the Office of Science and Technology, and the chief medical officer of the Veterans’ Administration (or their designees), and a medical officer designated by the Secretary of Defense, shall be ex officio members of the Council.

“(2) Eighteen members appointed by the Secretary.

Eleven of the appointed members shall be selected from among the leading medical or scientific authorities who are skilled in the sciences relating to diseases of the heart, blood vessels, lungs, and blood; two of the appointed members shall be selected from persons enrolled in residency programs providing training in heart, blood vessel, lung, or blood diseases; and five of the appointed members shall be selected from members of the general public who are leaders in the fields of fundamental or medical sciences or in public affairs.

Terms.

“(b) (1) Each appointed member of the Council shall be appointed for a term of four years, except that—

“(A) any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was

appointed shall be appointed for the remainder of such term; and
“(B) of the members first appointed after the effective date of this section, five shall be appointed for a term of four years, five shall be appointed for a term of three years, five shall be appointed for a term of two years, and three shall be appointed for a term of one year, as designated by the Secretary at the time of appointment.

Appointed members may serve after the expiration of their terms until their successors have taken office.

Extension.

“(2) A vacancy in the Council shall not affect its activities, and twelve members of the Council shall constitute a quorum.

“(3) The Council shall supersede the existing National Advisory Heart Council appointed under section 217, and the appointed members of the National Advisory Heart Council serving on the effective date of this section shall serve as additional members of the National Heart and Lung Advisory Council for the duration of their terms then existing, or for such shorter time as the Secretary may prescribe.

National Advisory Heart Council, replacement provisions.
64 Stat. 446.
42 USC 218.

“(4) Members of the Council who are not officers or employees of the United States shall receive for each day they are engaged in the performance of the functions of the Council compensation at rates not to exceed the daily equivalent of the annual rate in effect for grade GS-18 of the General Schedule, including traveltime; and all members, while so serving away from their homes or regular places of business, may be allowed travel expenses, including per diem in lieu of subsistence, in the same manner as such expenses are authorized by section 5703 of title 5, United States Code, for persons in the Government service employed intermittently.

5 USC 5332 note.

80 Stat. 499;
83 Stat. 190.

“(c) The Secretary (or his designee) shall be the Chairman of the Council.

“(d) The Director of the Institute shall (1) designate a member of the staff of the Institute to act as Executive Secretary of the Council, and (2) make available to the Council such staff, information, and other assistance as it may require to carry out its functions.

Executive Secretary.

“(e) The Council shall meet at the call of the Chairman, but not less often than four times a year.”

AUTHORIZATION OF APPROPRIATIONS FOR PART B OF TITLE IV OF THE PUBLIC HEALTH SERVICE ACT

SEC. 4. Part B of title IV of the Public Health Service Act is amended by adding at the end thereof the following new section:

Ante, p. 680.

“AUTHORIZATION OF APPROPRIATIONS

“SEC. 419B. For the purpose of carrying out this part (other than section 414), there is authorized to be appropriated \$375,000,000 for the fiscal year ending June 30, 1973, \$425,000,000 for the fiscal year ending June 30, 1974, and \$475,000,000 for the fiscal year ending June 30, 1975. Of the sums appropriated under this section for any fiscal year, not less than 15 per centum of such sums shall be reserved

Ante, p. 682.

for programs under this part respecting diseases of the lung and not less than 15 per centum of such sums shall be reserved for programs under this part for programs respecting diseases of the blood.”

AUTHORITY OF THE DIRECTOR OF THE NATIONAL HEART AND LUNG
INSTITUTE TO APPROVE GRANTS

SEC. 5. Section 419A of the Public Health Service Act (as so redesignated by section 3 of this Act) is amended—

(1) by striking out “grants-in-aid” in subsection (a) and inserting in lieu thereof “except as provided in subsection (c), grants-in-aid”; and

(2) by adding after subsection (b) the following new subsection:

“(c) Under procedures approved by the Director of the National Institutes of Health, the Director of the National Heart and Lung Institute may approve grants under this Act for research and training in heart, blood vessel, lung, and blood diseases—

Limitations.

“(1) in amounts not to exceed \$35,000 after appropriate review for scientific merit but without review and recommendation by the Council, and

“(2) in amounts exceeding \$35,000 after appropriate review for scientific merit and recommendation for approval by the Council.”

CONFORMING AMENDMENTS TO PART B OF TITLE IV OF THE PUBLIC HEALTH
SERVICE ACT

62 Stat. 465.
42 USC 287.

SEC. 6. (a) Section 411 of the Public Health Service Act is amended by striking out “National Heart Institute” and inserting in lieu thereof “National Heart and Lung Institute”.

42 USC 287a.

(b) Section 412 of such Act is amended—

(1) by striking out “heart” each place it occurs (except in the heading) and inserting in lieu thereof “heart, blood vessel, lung, and blood”;

(2) by striking out “Surgeon General” and inserting in lieu thereof “Secretary”;

(3) by striking out “National Advisory Heart Council” and inserting in lieu thereof “National Heart and Lung Advisory Council”;

(4) by redesignating paragraphs (a), (b), (c), (d), (e), (f), and (g) as paragraphs (1), (2), (3), (4), (5), (6), and (7), respectively; and

(5) by amending the section heading to read as follows:

“RESEARCH AND TRAINING IN DISEASES OF THE HEART, BLOOD VESSELS,
LUNG, AND BLOOD”

(c) Section 418 of such Act (as so redesignated by section 3 of this Act) is amended—

(1) by inserting “(a)” immediately after “SEC. 418.” and by adding at the end thereof the following new subsection:

Ante, p. 680.

“(b) (1) The Council shall advise and assist the Director of the Institute with respect to the Program established under section 413. The Council may hold such hearings, take such testimony, and sit and act at such times and places, as the Council deems advisable to investigate programs and activities of the Program.

Report to President, transmittal to Congress.

“(2) The Council shall submit a report to the President for transmittal to the Congress not later than January 31 of each year on the progress of the Program toward the accomplishment of its objectives.”

(2) by striking out "Surgeon General" each place it occurs (except paragraph (f)) and inserting in lieu thereof "Secretary";

(3) by striking out "heart" each place it occurs and inserting in lieu thereof "heart, blood vessel, lung, and blood";

(4) by striking out "Surgeon General" in paragraph (f) and inserting in lieu thereof "Secretary, the Director of the National Institutes of Health, and the Director of the National Heart and Lung Institute"; and

(5) by redesignating paragraphs (a), (b), (c), (d), (e), and (f) as paragraphs (1), (2), (3), (4), (5), and (6), respectively.

(d) Section 419A of such Act (as so redesignated by section 3 of this Act) is amended—

(1) in subsection (a), by (A) striking out "Surgeon General" and inserting in lieu thereof "Secretary", and (B) striking out "heart" and inserting in lieu thereof "heart, blood vessel, lung, and blood"; and

(2) in subsection (b), by (A) striking out "The Surgeon General shall recommend to the Secretary acceptance of conditional gifts, pursuant to section 501," and inserting in lieu thereof "The Secretary may, in accordance with section 501, accept conditional gifts", and (B) striking out "heart" and inserting in lieu thereof "heart, blood vessel, lung, and blood".

58 Stat. 709.
42 USC 219.

(e) The heading for part B of such Act is amended to read as follows:

"PART B—NATIONAL HEART AND LUNG INSTITUTE".

CONFORMING AMENDMENTS TO OTHER PROVISIONS OF THE PUBLIC HEALTH SERVICE ACT

SEC. 7. (a) Section 217 of such Act is amended—

64 Stat. 446.
42 USC 218.

(1) by striking out "the National Advisory Heart Council," each place it occurs in subsection (a);

(2) by striking out "heart diseases," in subsection (a) and by striking out "heart," in subsection (b).

(b) Sections 301(d) and 301(i) of such Act are each amended by striking out "National Advisory Heart Council" and inserting in lieu thereof "National Heart and Lung Advisory Council".

58 Stat. 692;
62 Stat. 601;
79 Stat. 448.
42 USC 241.

REPORT TO CONGRESS

SEC. 8. The Secretary of Health, Education, and Welfare shall carry out a review of all administrative processes under which the National Heart, Blood Vessel, Lung, and Blood Disease Program, established under part B of title IV of the Public Health Service Act, will operate, including the processes of advisory council and peer group reviews, in order to assure the most expeditious accomplishment of the objectives of the Program. Within one year of the date of enactment of this Act, the Secretary shall submit a report to the Congress of the findings of such review and the actions taken to facilitate the conduct of the Program, together with recommendations for any needed legislative changes.

Review.

Ante, p. 680.

EFFECTIVE DATE

SEC. 9. This Act and the amendments made by this Act shall take effect sixty days after the date of enactment of this Act or on such prior date after the date of enactment of this Act as the President shall prescribe and publish in the Federal Register.

Publication in
Federal Register.

Approved September 19, 1972.