information: 1 (866) 659–0537, Participant Pass Code 9933701.

Background: The Advisory Board was established under the Energy Employees Occupational Illness Compensation Program Act of 2000 to advise the President on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Advisory Board include providing advice on the development of probability of causation guidelines that have been promulgated by the Department of Health and Human Services (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.

In December 2000, the President delegated responsibility for funding, staffing, and operating the Advisory Board to HHS, which subsequently delegated this authority to CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, and will expire on August 3, 2013.

Purpose: The Advisory 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. The Subcommittee for Dose Reconstruction Reviews was established to aid the Advisory Board in carrying out its duty to advise the Secretary, HHS, on dose reconstruction.

Matters to be Discussed: The agenda for the Subcommittee meeting includes: discussion of dose reconstruction cases under review (sets 7–10); DCAS dose reconstruction quality management and assurance activities; and dose reconstruction issues from NIOSH 10-year review.

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: Theodore Katz, Executive Secretary, NIOSH, CDC, 1600 Clifton Road, Mailstop E–20, Atlanta, Georgia 30333, *Telephone:* (513) 533–6800, *Toll Free:* 1 (800) CDC–INFO, *Email:* ocas@cdc.gov.

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 the Centers for Disease Control and Prevention, and the Agency for Toxic Substances and Disease Registry.

Dated: November 17, 2011.

Elaine L. Baker,

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

[FR Doc. 2011–30233 Filed 11–22–11; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Health and Nutrition Examination Survey (NHANES) DNA Samples

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (DHHS).

ACTION: Notice.

SUMMARY: The National Health and Nutrition Examination Survey (NHANES) will not be receiving DNA proposals in 2012. NHANES is changing its plan for making DNA available for genetic research and its proposal guidelines. NHANES anticipates that the DNA Bank will be open for proposals approximately January 2013.

DATES: Effective date is date of publication in the **Federal Register.**

ADDRESSES: Geraldine McQuillan, PhD, Division of Health and Nutrition Examination Surveys, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Room 4204, Hyattsville, MD 20782, *Phone:* (301) 458–4371, *Fax:* (301) 458–4028, *E–Mail: NHANESgenetics@cdc.gov.*

FOR FURTHER INFORMATION CONTACT: Dr. Geraldine McQuillan, Division of Health and Nutrition Examination Surveys, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Room 4204, Hyattsville, MD 20782,

Phone: (301) 458–4371,

Fax: (301) 458–4028,

E-Mail: NHANESgenetics@cdc.gov.

Juliana K. Cyril,

Deputy Director, Office of Science Quality, Office of the Associate Director for Science, Centers for Disease Control and Prevention.

[FR Doc. 2011–30204 Filed 11–22–11; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC–2011–0011]

Public Health Service Guideline for Reducing Transmission of Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), and Hepatitis C Virus (HCV) Through Solid Organ Transplantation

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (DHHS).

ACTION: Extension of the public comment period.

SUMMARY: On September 21, 2011, the Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), published a notice in the **Federal Register** requesting public comment on the draft ''Public Health Service (PHS) Guideline for Reducing Transmission of Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), and Hepatitis C Virus (HCV) through Solid Organ Transplantation'' (76 FR 58517). Written and electronic comments were to be received on or before November 21, 2011. However, HHS/CDC has received requests for a 30 day extension of the comment period. In consideration of those requests, HHS/CDC is extending the comment period by 30 days to December 23, 2011.

CDC also published a supporting document for reference, the *Evidence Report.* The *Evidence Report* includes primary evidence, studies, and data tables that were used by the *Guideline* authors in developing the recommendations in the *Guideline.*

The draft *Guideline* is for use by organ procurement organizations (OPOs); transplant centers, including physicians, nurses, administrators, and clinical coordinators; laboratory personnel responsible for testing and storing donor and recipient specimens; and persons responsible for developing, implementing, and evaluating infection prevention and control programs for OPOs and transplant centers. This *Guideline* provides evidence-based recommendations for reducing unexpected transmission of HIV, HBV and HCV from deceased and living organ donors.

DATES: Written comments must be received on or before December 23, 2011.

ADDRESSES: Written comments may be submitted electronically or by mail. To

download an electronic version of the Guideline, go to *http://www.regulations.gov, Docket CDC–2011–0011.* You may submit written comments electronically at this Web site. Please follow directions at *http://www.regulations.gov* to submit comments.

You may also submit written comments to the following *address:* Office of Blood, Organ and Other Tissue Safety, Division of Healthcare Promotion, National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, (CDC), *Attn: Public Health Service Guideline for Reducing Transmission of Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV) and Hepatitis C Virus (HCV) through Solid Organ Transplantation,* Docket No. CDC–2011–0011, 1600 Clifton Rd, NE., Mailstop A–07, Atlanta, Georgia, 30333. All written materials identified will be available for public inspection Monday through Friday, except for legal holidays, from 9 a.m. until 5 p.m., Eastern Standard Time, at 1600 Clifton Road, NE., Atlanta, Georgia 30333. Please call ahead to (404) 639–4000 and ask for a representative from the Office of Blood, Organ and Other Tissue Safety to schedule your visit. All relevant comments received will be posted publicly at this Web site without change, including any personal or proprietary information.

FOR FURTHER INFORMATION CONTACT: Debbie Seem, Division of Healthcare Quality Promotion, National Center for Emerging and Zoonotic Diseases, Centers for Disease Control and Prevention, 1600 Clifton Road NE., Mailstop A–07, Atlanta, Georgia, 30329–4018; *Telephone:* (404) 639–4000.

SUPPLEMENTARY INFORMATION: Since 2008, HHS/CDC has collaborated with state and federal agencies, national partners, academicians, public and private health professionals, the transplant field, public health organizations, and other partners to revise and expand the 1994 *Guidelines for Preventing Transmission of Human Immunodeficiency Virus (HIV) through Transplantation of Human Tissue and Organs.* The 2011 draft Guideline updates the previous recommendations about HIV and also includes recommendations to reduce disease transmission of HBV and HCV, and addresses issues such as donor risk assessment, donor screening, HBV- and HCV-infected donors and transplantation, recipient informed consent, recipient screening, donor and recipient specimen collection and storage, and tracking and reporting of HIV, HBV, and HCV.

As with the 1994 *Guideline,* the recommendations address adult and pediatric donors who are living or deceased, as well as transplant candidates and recipients. In addition to summarizing current scientific knowledge about solid organ transplant safety, the draft 2011 *Guideline* also identifies important gaps in the literature where further research is needed.

HHS/CDC worked with the University of Pennsylvania's Health System Center for Evidence-based Practice (CEP) and sought input in each phase of the *Guideline's* development from subject matter experts in HIV and hepatitis through formation of a *Guideline* Expert Panel to develop the new *Guideline.* HHS/CDC also formed a *Guideline* Review Committee to provide feedback on the draft *Guideline* recommendations. Members of the Review Committee included representation from public health, regulatory, transplant infectious disease and other stakeholders. This new Draft Guideline will not be a federal rule or regulation.

Juliana K. Cyril,

Deputy Director, Office of Science Quality, Office of the Associate Director for Science, Centers for Disease Control and Prevention.

[FR Doc. 2011–30205 Filed 11–22–11; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Statement of Organization, Functions, and Delegations of Authority; Administration on Developmental Disabilities

AGENCY: Administration for Children and Families, HHS.

ACTION: Notice.

SUMMARY: Statement of Organization, Functions, and Delegations of Authority. The Administration for Children and Families (ACF) has reorganized the Office of the Assistant Secretary (OAS) and the Administration on Developmental Disabilities (ADD). This reorganization realigns the President's Committee for People with Intellectual Disabilities Staff within the OAS and moves the function to ADD as a result of the Charter Amendment for PCPID governed by Public Law 92–463 signed by the Secretary, HHS, on May 9, 2011.

FOR FURTHER INFORMATION CONTACT: Sharon Lewis, Commissioner, Administration on Developmental Disabilities, 200 Independence Avenue SW., Washington, DC 20201, (202) 690–6590.

This notice amends Part K of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services (HHS), Administration for Children and Families (ACF) as follows: Chapter KA, Office of the Assistant Secretary (OAS) last amended, 75 FR 60471–60473, September 30, 2010, and Chapter KC, Administration on Developmental Disabilities (ADD) last amended 75 FR 63186–63187, October 14, 2010.

I. Under Chapter, KA, Amend the Office of the Assistant Secretary as Follows

A. Delete KA.10 Organization in its entirety and replace with the following: KA.10 Organization. The Office of the Assistant Secretary for Children and Families is headed by the Assistant Secretary for Children and Families who reports directly to the Secretary and consists of:

Office of the Assistant Secretary for Children and Families (KA)
Executive Secretariat Office (KAF)
Office of Human Services Emergency Preparedness and Response (KAG)
Office of the Deputy Assistant Secretary and Inter-Departmental Liaison for Early Childhood Development (KAH)

B. Delete KA.20 Functions B in Its entirety.

II. Under Chapter, KC, Administration on Developmental Disabilities, Delete in Its Entirety and Replace With the Following

KC.00 Mission. The Administration on Developmental Disabilities (ADD) advises the Secretary, through the Assistant Secretary for Children and Families, on matters relating to individuals with developmental disabilities and their families. ADD serves as the focal point in the Department to support and encourage the provision of quality services to individuals with developmental disabilities and their families. ADD assists states, through the design and implementation of a comprehensive and continuing state plan, in increasing the independence, productivity and community inclusion of individuals with developmental disabilities. These state plans make optimal use of existing Federal and state resources for the provision of services and supports to these individuals and their families to achieve these outcomes. ADD works