

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Office of the National Coordinator;
American Health Information
Community Chronic Care Workgroup
Meeting****ACTION:** Announcement of meeting.**SUMMARY:** This notice announces the third meeting of the American Health Information Community Chronic Care Workgroup in accordance with the Federal Advisory Committee Act (Pub. L. 92-463, 5 U.S.C., App.)**DATES:** March 22, 2006 from 1 p.m. to 5 p.m.**ADDRESSES:** Hubert H. Humphrey Building (200 Independence Ave., SW., Washington, DC 20201), Conference Room 705A.**FOR FURTHER INFORMATION CONTACT:** <http://www.hhs.gov/healthit>.**SUPPLEMENTARY INFORMATION:** A web address for the meeting will be available at: <http://www.hhs.gov/healthit>.

Dated: February 10, 2006.

Dana Haza,*Office of Programs and Coordination, Office of the National Coordinator.*

[FR Doc. 06-1552 Filed 2-17-06; 8:45am]

BILLING CODE 4150-24-M**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Office of the National Coordinator;
American Health Information
Community Biosurveillance
Workgroup Meeting****SUMMARY:** This notice announces the third meeting of the American Health Information Community Biosurveillance Workgroup in accordance with the Federal Advisory Committee Act (Pub. L. 92-463, 5 U.S.C., App.)**DATES:** March 23, 2006 from 1 p.m. to 5 p.m.**ADDRESSES:** Hubert H. Humphrey Building (200 Independence Ave., SW., Washington, DC 20201), Conference Room 800.**FOR FURTHER INFORMATION CONTACT:** <http://www.hhs.gov/healthit>.**SUPPLEMENTARY INFORMATION:** A Web address for the meeting will be available at: <http://www.hhs.gov/healthit>.

Dated: February 10, 2006.

Dana Haza,*Office of Programs and Coordination, Office of the National Coordinator.*

[FR Doc. 06-1553 Filed 2-17-06; 8:45am]

BILLING CODE 4150-24-M**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Office of the National Coordinator;
American Health Information
Community Consumer Empowerment
Workgroup Meeting****ACTION:** Announcement of meeting.**SUMMARY:** This notice announces the third meeting of the American Health Information Community Consumer Empowerment Workgroup in accordance with the Federal Advisory Committee Act (Pub. L. 92-463, 5 U.S.C., App.)**DATES:** March 20, 2006 from 1 p.m. to 5 p.m.**ADDRESSES:** Hubert H. Humphrey Building (200 Independence Ave., SW., Washington, DC 20201), Conference Room 705A.**FOR FURTHER INFORMATION CONTACT:** <http://www.hhs.gov/healthit>.**SUPPLEMENTARY INFORMATION:** A Web address for the meeting will be available at: <http://www.hhs.gov/healthit>.

Dated: February 10, 2006.

Dana Haza,*Office of Programs and Coordination, Office of the National Coordinator.*

[FR Doc. 06-1554 Filed 2-17-06 8:45am]

BILLING CODE 4150-24-M**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and
Prevention****Board of Scientific Counselors,
National Institute for Occupational
Safety and Health**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following committee meeting:

Name: Board of Scientific Counselors (BSC), National Institute for Occupational Safety and Health (NIOSH).*Time and Date:* 9 a.m.-3 p.m., March 30, 2006.*Place:* Holiday Inn Capitol, 550 C Street, SW., Washington, DC 20024.*Status:* Open to the public, limited only by the space available. The meeting room accommodates approximately 50 people.*Purpose:* The Secretary, Department of Health and Human Services, the Assistant Secretary for Health, and by delegation the Director, CDC, are authorized under Sections 301 and 308

of the Public Health Service Act to conduct directly or by grants or contracts, research, experiments, and demonstrations relating to occupational safety and health and to mine health. The BSC shall provide guidance to the Director, NIOSH on research and prevention programs. Specifically, the board shall provide guidance on the institute's research activities related to developing and evaluating hypotheses, systematically documenting findings and disseminating results. The board shall evaluate the degree to which the activities of NIOSH: (1) Conform to appropriate scientific standards, (2) address current, relevant needs, and (3) produce intended results.

Matters to be Discussed: Agenda items include a report from the Director, NIOSH; progress report by BSC working group on the health hazard evaluation program; update on revisions to the National Occupational Research Agenda; Research to Practice Strategic Plan; and closing remarks.

Agenda items are subject to change as priorities dictate.

For Further Information Contact: Roger Rosa, Executive Secretary, BSC, NIOSH, CDC, 200 Independence Avenue, SW., Room 715H, Washington, DC 20201, telephone (202) 205-7856, fax (202) 260-4464.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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: February 14, 2006.

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

[FR Doc. 06-1543 Filed 2-17-06; 8:45 am]

BILLING CODE 4163-18-P**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and
Prevention****Request for Information on Waste
Halogenated Anesthetic Agents:
Isoflurane, Desflurane, and
Sevoflurane****SUMMARY:** NIOSH intends to review and evaluate toxicity data for the halogenated anesthetic agents of isoflurane, desflurane, and sevoflurane.

The current NIOSH recommended exposure limit (REL) of 2 parts per million (ppm) as a 60-minute ceiling for

the halogenated gases (chloroform, trichloroethylene, halothane, methoxyflurane, fluoroene, and enflurane) was established in 1977 [NIOSH 1977]. The halogenated anesthetic agents, isoflurane, desflurane, and sevoflurane, were subsequently introduced and are not included in the 1977 NIOSH recommendation. Isoflurane, desflurane, and sevoflurane are commonly used for anesthesia in modern hospitals; however, no occupational exposure limits exist for these agents. NIOSH is requesting: (1) Comments and information relevant to the evaluation of health risks associated with occupational exposure to isoflurane, desflurane, and sevoflurane, (2) reports or other data that demonstrate adverse health effects in workers exposed to isoflurane, desflurane, and sevoflurane, and (3) information pertinent to establishing a REL for isoflurane, desflurane, and sevoflurane.

ADDRESSES: Comments should be transmitted to the NIOSH Docket Office, M/S C-34, Robert A. Taft Laboratories, 4676 Columbia Parkway, Cincinnati, Ohio 45226, telephone 513/533-8303, fax: 513/533-8285.

Comments may also be submitted directly through the Web site (<http://www.cdc.gov/niosh/review/public/Waste-Anesthetic-Gases/>), by e-mail to nioshdocket@cdc.gov, or by fax to 513/533-8285. E-mail attachments should be formatted as Microsoft Word. Comments concerning this notice must be received on or before April 18, 2006 and should reference docket number NIOSH-064.

All information received in response to this notice will be available for public examination and copying at the NIOSH Docket Office, Room 111, 4676 Columbia Parkway, Cincinnati, Ohio 45226.

FOR FURTHER INFORMATION CONTACT: Henryka Nagy, Ph.D., M/S C-32, Robert A. Taft Laboratories, 4676 Columbia Parkway, Cincinnati, Ohio 45226, telephone 513/533-8369, e-mail HUB1@cdc.gov.

SUPPLEMENTARY INFORMATION: During patient anesthetization, small amounts of anesthetic gases can escape from the anesthetic delivery system and the patient's respiratory system. Waste anesthetic gases may become a source of harmful exposures for operating room personnel.

Anesthesiologists, veterinarians, dentists, anesthetic nurses, operating room nurses, surgeons, operating room technicians, and other operating room personnel are at risk of exposure to waste anesthetic gases. A concern about

harm to the reproductive system, central nervous system, liver, and kidneys prompted NIOSH to develop RELs for waste anesthetic gases [NIOSH 1977]. In 1977, the current NIOSH REL of 2 parts per million (ppm) as a 60-minute ceiling was established for the halogenated gases chloroform, trichloroethylene, halothane, methoxyflurane, fluoroene, and enflurane [NIOSH 1977]. Isoflurane, desflurane, and sevoflurane were subsequently introduced and are not included in the 1977 NIOSH recommendation.

NIOSH has not yet developed RELs for isoflurane, desflurane, and sevoflurane. Furthermore, the Occupational Safety and Health Administration (OSHA) has no permissible exposure limits (PELs) for these agents. The Netherlands' 1998 Dutch Expert Committee on Occupational Standards (DECOS) derived an occupational exposure limit of 20 ppm for enflurane on the basis of reproductive toxicologic data [DECOS 1998]. For isoflurane (an isomer of enflurane), DECOS also recommended an occupational exposure limit of 20 ppm on the basis of assumed structure-related activity [DECOS 1998]. No epidemiologic studies are available on the health effects of the halogenated agents, isoflurane, desflurane, and sevoflurane.

NIOSH seeks to obtain materials, including published and unpublished reports and research findings, to evaluate the possible health risks of occupational exposure to these gases. Examples of requested information include, but are not limited to, the following: (1) Identification of industries or occupations in which exposures to isoflurane, desflurane, or sevoflurane may occur; (2) trends in production and use of isoflurane, desflurane, or sevoflurane over the past 10 years; (3) descriptions of procedures with a potential for exposure to isoflurane, desflurane, or sevoflurane; (4) current occupational exposure concentrations of isoflurane, desflurane, or sevoflurane in various types of occupational scenarios and, if available, data to document these concentrations; (5) case reports or other health data that demonstrate adverse health effects in workers exposed to isoflurane, desflurane, or sevoflurane, or animal data (published or peer-reviewed data are preferred); (6) descriptions of work practices and engineering controls used to reduce or prevent workplace exposure; (7) educational materials for worker safety or training on the safe handling of these halogenated agents; (8) data pertaining to the technical feasibility of establishing a more

protective REL for isoflurane, desflurane, and sevoflurane.

NIOSH will use this information to determine the need for developing recommendations for reducing occupational exposure to isoflurane, desflurane, and sevoflurane.

References: DECOS [1998]. Enflurane, isoflurane and cyclopropane: health-based recommended occupational exposure limits. Report of the Dutch Expert Committee on Occupational Standards, a committee of the Health Council of the Netherlands.

NIOSH [1977]. Criteria for a recommended standard * * * occupational exposure to waste anesthetic gases and vapors. Cincinnati, OH: U.S. Department of Health, Education, and Welfare, Public Health Service, Center for Disease Control, National Institute for Occupational Safety and Health, DHEW (NIOSH) Publication No. 77-140.

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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: February 14, 2006.

Alvin Hall,

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

[FR Doc. 06-1542 Filed 2-17-06; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 2005N-0488]

Animal Drug User Fee Act; Public Meeting; Cancellation

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is canceling the meeting on the Animal Drug User Fee Act scheduled for February 24, 2006. This meeting was announced in the **Federal Register** of December 28, 2005 (70 FR 76851). FDA will continue to seek public comments relative to the program's overall performance and reauthorization as directed by Congress. FDA will publish another notice in the **Federal Register** announcing any plans for rescheduling the public meeting.

DATES: Written comments may be submitted at any time.