St. Anthony Hospital Toxicology Laboratory, 1000 N. Lee St., Oklahoma City, OK 73101, 405–272–7052.
Toxicology & Drug Monitoring Laboratory, University of Missouri Hospital & Clinics, 301 Business Loop 70 West, Suite 208, Columbia, MO 65203, 573–882–1273.
US Army Forensic Toxicology Drug Testing Laboratory, 2490 Wilson St., Fort George G. Meade, MD 20755–5235, 301–677–7085.
The following laboratory voluntarily withdrew from the NLCP on May 30, 2009:
Diagnostic Services, Inc., dba DSL, 12700 Westlinks Drive, Fort Myers, FL 33913, 239–561–8200/800–735–5416.

*The Standards Council of Canada (SCC) voted to end its Laboratory Accreditation Program for Substance Abuse (LAPSA) effective May 12, 1998. Laboratories certified through that program were accredited to conduct forensic urine drug testing as required by U.S. Department of Transportation (DOT) regulations. As of that date, the certification of those accredited Canadian laboratories will continue under DOT authority. The responsibility for conducting quarterly performance testing plus periodic on-site inspections of those LAPSA-accredited laboratories was transferred to the U.S. HHS, with the HHS’ NLCP contractor continuing to have an active role in the performance testing and laboratory inspection processes. Other Canadian laboratories wishing to be considered for the NLCP may apply directly to the NLCP contractor just as U.S. laboratories do.

Upon finding a Canadian laboratory to be qualified, HHS will recommend that DOT certify the laboratory (Federal Register, July 16, 1996) as meeting the minimum standards of the Mandatory Guidelines published in the Federal Register on April 13, 2004 (69 FR 19644). After receiving DOT certification, the laboratory will be included in the monthly list of HHS-certified laboratories and participate in the NLCP certification maintenance program.

Dated: June 8, 2009.
Elaine Parry,
Director, Office of Program Services,
SAMHSA.
[FR Doc. E9–14084 Filed 6–15–09; 8:45 am]
BILLING CODE 4160–30–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket Numbers NIOSH–083 Supplied Air Respirators, NIOSH 148 Air Fed Ensembles, NIOSH–168 Total Inward Leakage for (respirators other than filtering facemasks and halfmasks)]

Notice of Public Meeting To Discuss NIOSH’s Respirator Standards Development Efforts

Authority: 29 U.S.C. 651 et seq.

AGENCY: The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of a public meeting.

SUMMARY: The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and prevention (CDC), will conduct a public meeting to discuss current respirator standards development projects for Supplied Air Respirators (SAR); Air Fed Ensembles; and Total Inward Leakage (TIL) for respirators other than filtering facemasks and halfmasks. There will be an opportunity for discussion following NIOSH’s presentation and an accompanying poster session.

Public Meeting Time and Date: 8:30 a.m. to 5 p.m., September 17, 2009. On-site registration will be held beginning at 7:45 a.m.

Place: Hyatt Regency Pittsburgh International Airport, 1111 Airport Boulevard, Pittsburgh, PA 15231.

Interested parties should make hotel reservations directly with the Hyatt Regency Pittsburgh International Airport by calling (800) 233–1234, before the cut-off date of September 2, 2009. You must reference the NIOSH room block to receive the special group rate of $114.00 per night that has been negotiated for meeting guests.

Status: The meeting will be open to the public, limited only by the space available. The meeting room accommodates approximately 200 people.

Instructions: Requests to make presentations at the public meeting should be mailed to the NIOSH Docket Office, Robert A. Taft Laboratories, MS–C34, 4676 Columbia Parkway, Cincinnati, OH 45226. Requests may also be submitted by telephone (513) 533–8611, facsimile (513) 533–8285, or e-mailed to nioshdocket@cdc.gov. All requests to present should contain the name, address, telephone number, and relevant business affiliations of the presenter, topic of the presentation, and the approximate time requested for the presentation. Oral presentations should be limited to 15 minutes.

After reviewing the requests for presentations, NIOSH will notify the presenter that his/her presentation is scheduled. If a participant is not present when their presentation is scheduled to begin, the remaining participants will be heard in order. At the conclusion of the meeting, an attempt will be made to allow presentations by any scheduled participants who missed their assigned times. Attendees who wish to speak but did not submit a request for the opportunity to make a presentation may be given this opportunity at the conclusion of the meeting, at the discretion of the presiding officer.

This meeting will also be using Audio/LiveMeeting Conferencing, remote access capabilities where interested parties may listen in and review the presentations over the internet simultaneously. Parties remotely accessing the meeting will have the opportunity to ask questions during the open comment period. To register to use this capability, please contact the National Personal Protective Technology Laboratory (NPPTL), Policy and Standards Development Branch, Post Office Box 18070, 626 Cochrans Mill Road, Pittsburgh, PA 15236, telephone (412) 386–5200, facsimile (412) 386–4089. This option will be available to participants on a first come, first serve basis and is limited to the first 50 participants.

Background: NIOSH, National Personal Protective Technology Laboratory (NPPTL), will present information to attendees concerning the development of the concepts being considered regarding updated performance criteria for the various classes of respirators in 42 Code of Federal Regulations, Part 84. Participants will be given an opportunity to ask questions and to present individual comments that they may wish to have considered.

FOR FURTHER INFORMATION CONTACT: Jonathan Szalajda, NPPTL, Policy and Standards Development Branch, Post Office Box 18070, 626 Cochrans Mill Road, Pittsburgh, PA 15236, telephone
DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Aging; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meetings. The meetings will be closed to the public in accordance with the provisions set forth in sections 552(b)(c)(4) and 552(b)(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 Institute on Aging Special Emphasis Panel; Einstein Aging Study.
Date: July 15, 2009.
Time: 1 p.m. to 4 p.m.
Agenda: To review and evaluate grant applications.
Place: National Institute on Aging, Gateway Building, 7201 Wisconsin Avenue, Room 2C212, Bethesda, MD 20892, (Telephone Conference Call).

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Health Promotion and Disease Prevention Announcement Type: New Cooperative Agreement Funding Opportunity Number: HHS–2009–IHS–HPDP–0001 Catalog of Federal Domestic Assistance Number: 93.443

Key Dates:
Application Deadline Date: July 17, 2009.
Application Review Date: July 27, 2009.
Application Notification: July 28, 2009.
Earliest Anticipated Start Date: August 3, 2009.

I. Funding Opportunity Description

The Indian Health Service (IHS) announces a cooperative agreement for Health Promotion and Disease Prevention (HP/DP). This Program is authorized under the authority of the Public Health Service Act section 301(a); Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001; and the Indian Health Care Improvement Act, 25 U.S.C. 1521(b), et seq., as amended. This Program is described under 93.443 in the Catalog of Federal Domestic Assistance (CFDA).

The purpose of the program is to enable American Indian/Alaska Native (AI/AN) communities to enhance and expand health promotion and reduce chronic disease by: increasing physical activity, avoiding the use of tobacco and alcohol, and improving nutrition to support healthier AI/AN communities through innovative and effective community, school, clinic and work site health promotion and chronic disease prevention programs. The IHS HP/DP Initiative focuses on enhancing and expanding health promotion and chronic disease prevention to reduce health disparities among AI/AN populations. The Initiative is fully integrated with the Department of Health and Human Services (HHS) Initiatives “Healthy People 2010.” Potential applicants may obtain a printed copy of Healthy People 2010, (Summary Report No. 017–001–00549–5) or CD–ROM, Stock No. 017–001–00549–5, through the Superintendent of Documents, Government Printing Office, P.O. Box 371954, Pittsburgh, PA 15250–7945, (202) 512–1800. You may also access this information at the following Web sites: http://www.healthypeople.gov/Publications and http://www.healthierus.gov/.

The HP/DP Initiative targets cardiovascular disease, cancer, obesity, and underage drinking prevention and intervention efforts in AI/AN communities. Focus efforts include enhancing and maintaining personal and behavioral factors that support healthy lifestyles such as making healthier food choices, avoiding the use of tobacco and alcohol, being physically active, and demonstrating other positive behaviors to achieve and maintain good health. Major focus areas include preventing and controlling obesity by developing and implementing science-based nutrition and physical activity interventions (i.e., increase consumption of fruit and vegetables, reduce consumption of foods that are high in fat, increase breast feeding, reduce television time, and increase opportunities for physical activity). Other focal areas include preventing the consumption of alcohol and tobacco use among youth, increasing accessibility to tobacco cessation programs, and reducing exposure to second-hand smoke.

The HP/DP initiative encourages Tribal applicants to fully engage their local schools, communities, health care providers, health educators, faith-based/spiritual communities, elderly centers, youth programs, local governments, academia, non-profit organizations, and many other community sectors to work together to enhance and promote health and prevent chronic disease in their communities. The Initiative is described in the Catalog of Federal Domestic