revision of Vaccine Information Statements; and recommending to the Director of the National Vaccine Program research related to vaccine injuries which should be conducted to carry out the VICP.

On July 21, 2016, the ACCV charter was renewed. Renewal of the ACCV charter gives authorization for the Commission to operate until July 21, 2018.

A copy of the ACCV charter is available on the ACCV Web site at *http://www.hrsa.gov/advisorycommittees/childhoodvaccines/index.html.* A copy of the charter also can be obtained by accessing the FACA database that is maintained by the Committee Management Secretariat under the General Services Administration. The Web site address for the FACA database is *http://www.facadatabase.gov/.*

Jason E. Bennett,

Director, Division of the Executive Secretariat.

[FR Doc. 2016–25857 Filed 10–25–16; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Service Administration

Advisory Commission on Childhood Vaccines

AGENCY: Health Resources and Service Administration, HHS.

ACTION: Notice of meeting.

SUMMARY: In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Public Law 92–463), notice is hereby given that a meeting is scheduled for the Advisory Commission on Childhood Vaccines (ACCV). This meeting will be open to the public. Information about the ACCV and the agenda for this meeting can be obtained by accessing the following Web site: *http://www.hrsa.gov/advisorycommittees/childhoodvaccines/index.html.*

DATES: The meeting will be held on December 1 and 2, 2016, at 10:00 a.m. EST.

ADDRESSES: This meeting will be held via Adobe Connect Webinar. The public can join the meeting by:

1. (Audio Portion) Calling the conference phone number 800–779–3561 and providing the following information:

Leader Name: Dr. Narayan Nair.

Password: 8164763.

2. (Visual Portion) Connecting to the ACCV Adobe Connect Pro Meeting using the following URL: *https://hrsa.connectsolutions.com/accv/* (copy and paste the link into your browser if it does not work directly, and enter as a guest). Participants should call and connect 15 minutes prior to the meeting in order for logistics to be set up. If you have never attended an Adobe Connect meeting, please test your connection using the following URL: *https://hrsa.connectsolutions.com/common/help/en/support/meeting_test.htm* and get a quick overview by following URL: *http://www.adobe.com/go/connectpro_overview.*

FOR FURTHER INFORMATION CONTACT: Anyone requesting information regarding the ACCV should contact Annie Herzog, Program Analyst, Division of Injury Compensation Programs (DICP), Health Resources and Services Administration in one of three ways: (1) Send a request to the following address: Annie Herzog, Program Analyst, DICP, Health Resources and Services Administration, 5600 Fishers Lane, 08N146B, Rockville, Maryland 20857; (2) call (301) 443–6593; or (3) send an email to *aherzog@hrsa.gov.*

At this time the meeting is scheduled to be held over 2 days via conference call and Adobe Connect webinar; however, meeting times and locations could change. For the latest information regarding meeting start time and location, please check the ACCV Web site: *http://www.hrsa.gov/advisorycommittees/childhoodvaccines/index.html.*

SUPPLEMENTARY INFORMATION: The ACCV was established by section 2119 of the Public Health Service Act (the Act) (42 U.S.C. 300aa–19), as enacted by Public Law (Pub. L.) 99–660, and as subsequently amended, and advises the Secretary of Health and Human Services (the Secretary) on issues related to implementation of the National Vaccine Injury Compensation Program (VICP).

Other activities of ACCV include: Recommending changes to the Vaccine Injury Table at its own initiative or as the result of the filing of a petition; advising the Secretary in implementing section 2127 of the Act regarding the need for childhood vaccination products that result in fewer or no significant adverse reactions; surveying federal, state, and local programs and activities related to gathering information on injuries associated with the administration of childhood vaccines, including the adverse reaction reporting requirements of section 2125(b) of the Act; advising the Secretary on the methods of obtaining, compiling, publishing, and using credible data related to the frequency and severity of adverse reactions associated with childhood vaccines; consulting on the development or revision of Vaccine Information Statements; and recommending to the Director of the National Vaccine Program research related to vaccine injuries which should be conducted to carry out VICP.

The agenda items for the December 2016 meeting will include, but are not limited to, updates from the Division of Injury Compensation Programs (DICP), Department of Justice (DOJ), National Vaccine Program Office (NVPO), Immunization Safety Office (Centers for Disease Control and Prevention), National Institute of Allergy and Infectious Diseases (National Institutes of Health) and Center for Biologics, Evaluation and Research (Food and Drug Administration). A draft agenda and additional meeting materials will be posted on the ACCV Web site (*http://www.hrsa.gov/advisorycommittees/childhoodvaccines/index.html*) prior to the meeting. Agenda items are subject to change as priorities dictate.

Members of the public will have the opportunity to provide comments. Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to make oral comments or provide written comments to the ACCV should be sent to Annie Herzog using the address and phone number above by November 29, 2016. Individuals who need special assistance, such as sign language interpretation or other reasonable accommodations, should notify Annie Herzog, using the address and phone number above at least 10 days prior to the meeting.

Jason E. Bennett,

Director, Division of the Executive Secretariat.

[FR Doc. 2016–25875 Filed 10–25–16; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Renewal of Charters for Certain Federal Advisory Committees

AGENCY: Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: As stipulated by the Federal Advisory Committee Act, as amended (5 U.S.C. App), the U.S. Department of Health and Human Services is hereby announcing that the charters have been renewed for the following federal advisory committees for which Office of

the Assistant Secretary for Health provides management support: Chronic Fatigue Syndrome Advisory Committee (CFSAC); President's Council on Fitness, Sports, and Nutrition (PCFSN; the Council); Secretary's Advisory Committee on Human Research Protections (SACHRP); and Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA). Functioning as federal advisory committees, these committees are governed by the provisions of the Federal Advisory Committee Act (FACA). Under FACA, it is stipulated that the charter for a federal advisory committee must be renewed every two years in order for the committee to continue to operate.

FOR FURTHER INFORMATION CONTACT: Olga B. Nelson, Committee Management Officer, Office of the Assistant Secretary for Health; U.S. Department of Health and Human Services; 200 Independence Avenue SW., Room 714B; Washington, DC 20201; (202) 690–5205.

SUPPLEMENTARY INFORMATION: CFSAC was established on September 5, 2002 as a discretionary federal advisory committee. The Committee provides science-based advice and recommendations to the Secretary of Health and Human Services, through the Assistant Secretary for Health, on a broad range of issues and topics pertaining to myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS), including (1) opportunities to improve knowledge and research about the epidemiology, etiologies, biomarkers and risk factors for ME/CFS; (2) research on the diagnosis, treatment, and management of ME/CFS and potential impact of treatment options; (3) strategies to inform the public, health care professionals, and the biomedical academic and research communities about ME/CFS advances; (4) partnerships to improve the quality of life of ME/CFS patients; and (5) strategies to insure that input from ME/CFS patients and care givers is incorporated into HHS policy and research.

The new charter includes the following amendments: (1) The language in the Description of Duties has been simplified. A fifth duty has been added to emphasize the importance of getting stakeholder input on HHS policy and research concerning ME/CFS; (2) authority has been given to the Assistant Secretary for Health (ASH) as an official to whom the Committee will report. Extending this authority to include the ASH gives clear responsibility to the ASH for better monitoring and implementation of the recommendations that are approved by the Secretary; and (3) the Committee structure has been changed to (a) increase the number of voting public members to 13 to give patients and/or caretakers of ME/CFS more representation on the Committee. This amendment has been made to the charter to respond to recent concerns that had been expressed by CFS advocates, (b) remove the Centers for Medicare and Medicaid Services (CMS) as a non-voting *ex-officio* member. A determination was made that there is not much for CMS to contribute to or to seek advice from CFSAC. It would be more beneficial to have CMS involved in the Committee's deliberative process if diagnostics or treatments are developed for ME/CFS. This activity is not projected to take place during the two-year period that the new charter will be in effect, and (c) expand the Committee structure to add two new *ex-officio* positions for the Department of Veterans Affairs (VA) and the Department of Defense (DoD). Expanding the Committee structure to include these two government agencies will provide valuable information on services available to patients with ME/CFS and research being conducted on illnesses with similar symptoms to ME/CFS.

On September 5, 2016, the Secretary of Health and Human Services approved for the CFSAC charter with the proposed amendments to be renewed. The new charter has been made effective; the charter was filed with the appropriate Congressional committees and the Library of Congress on September 5, 2016. Renewal of the CFSAC charter provides authorization for the Committee to continue to operate until September 5, 2018. A copy of the Committee charter is available on the CFSAC Web site at *http://www.hhs.gov/advcomcfs.*

The PCFSN is a non-discretionary federal advisory committee. The PCFSN was established under Executive Order 13545, dated June 22, 2010. This authorizing directive was issued to amend the purpose, function, and name of the Council, which formerly operated as the President's Council on Physical Fitness and Sports (PCPFS). The scope of the Council was changed to include nutrition to bring attention to the importance of good nutritional habits with regular physical activity for maintaining a healthy lifestyle. The PCFSN is the only federal advisory committee that is focused solely on the promotion of physical activity, fitness, sports, and nutrition. Since the PCFSN was established by Presidential directive, appropriate action had to be taken by the President or agency head to authorize continuation of the PCFSN. The President issued Executive Order 13708, dated September 30, 2015. Under the authority given in this directive, the Council can continue to operate until September 30, 2017.

No amendments were recommended for the PCFSN charter. The charter was approved by the Secretary of Health and Human Services on September 8, 2016, and it was filed with the appropriate Congressional committees and the Library of Congress on September 10, 2016. A copy of the Council charter is available on the PCFSN Web site at *http://fitness.gov.*

SACHRP is a discretionary federal advisory committee. SACHRP provides advice to the Secretary, through the Assistant Secretary for Health, on matters pertaining to the continuance and improvement of functions within the authority of the Department of Health and Human Services concerning protections for human subjects in research.

There was one amendment recommended and approved for the SACHRP charter. The charter stipulated that appointment of the Designated Federal Officer (DFO) was restricted to the Director of the Office for Human Research Protections. This restriction has been removed to allow for other senior level program and management OHRP staff to be considered for appointment as the DFO. On September 30, 2016, the Secretary of Health and Human Services approved for the SACHRP charter to be renewed. The new charter was filed with the appropriate Congressional committees and the Library of Congress on October 1, 2016. SACHRP is authorized to continue to operate until October 1, 2018. A copy of the charter is available on the Committee Web site at *http://www.hhs.gov/ohrp/sachrp/.*

The ACBTSA is a discretionary federal advisory committee. The Committee provides advice to the Secretary, through the Assistant Secretary for Health, on a range of policy issues related to the safety of blood, blood products, organs and tissues. For organs and blood stem cells, the Committee's work is limited to policy issues related to donor derived infectious disease complications of transplantation around the safety and availability of the blood supply and blood products.

There were two minor amendments recommended and approved for the ACBTSA charter. The charter has been amended to include the option for a Vice Chair and/or Co-Chairs to be

appointed for the Committee leadership. The Committee structure has been expanded to include *ex-officio* representation from the Department of Veterans Affairs (VA). The VA has the largest conglomerate of hospitals in the United States. The agency has responsibility for the largest patient population that uses the largest quantity of blood and tissue products in the United States. Therefore, it was determined that involvement of the VA would be beneficial to the ACBTSA for ensuring that the Committee properly addresses current issues and concerns regarding blood and tissue safety and availability.

On October 5, 2016, the new charter for the ACBTSA was approved by the Secretary of Health and Human Services, and it was filed with the appropriate Congressional committees and the Library of Congress on October 9, 2016. ACBTSA is authorized to operate until October 9, 2018. A copy of the charter can be obtained on the ACBTSA Web site at *http://www.hhs.gov/ash/bloodsafety.*

Copies of the charters for the designated committees also can be obtained by accessing the FACA database that is maintained by the Committee Management Secretariat under the General Services Administration. The Web site address for the FACA database is *http://facadatabase.gov/.*

Dated: October 20, 2016.

Karen B. DeSalvo,

Acting Assistant Secretary for Health.

[FR Doc. 2016–25916 Filed 10–25–16; 8:45 am]

BILLING CODE 4150–28–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Short-Term Alternative Animal Models or In Vitro Tests Used To Identify Substances With the Potential To Cause Excessive Inflammation or Exaggerated Immune Responses; Request for Information

SUMMARY: The National Toxicology Program (NTP) at the National Institute of Environmental Health Sciences (NIEHS) requests available data and information on approaches and/or technologies currently used to identify substances with the potential to cause excessive inflammation or exaggerated immune responses leading to tissue injury when swallowed, inhaled, or absorbed through the skin. Submitted information will be used to assess the state of the science and determine technical needs for non-animal test methods that could be used to evaluate the potential of chemicals to induce inflammation and immune-related conditions.

DATES: Receipt of information: Deadline is December 12, 2016.

ADDRESSES: Data and information should be submitted electronically at *http://ntp.niehs.nih.gov/go/input.*

FOR FURTHER INFORMATION CONTACT: Dr. Dori Germolec, Toxicology Branch, Division of NTP, NIEHS; email: *germolec@niehs.nih.gov;* telephone: (919) 541–3230.

SUPPLEMENTARY INFORMATION:

Background: NTP has an interest in developing more efficient and scalable test platforms to provide the scientific basis for predictive models of chemical effects on human disease. Short-term toxicity tests may be conducted to determine the potential for a single or short-term dose of a substance to cause inflammation-related responses or impact local and systemic immune function when inhaled (inhalation toxicity testing), swallowed (oral toxicity testing), or absorbed through the skin (dermal toxicity testing). A number of observations support a role for environmental influences on inflammatory and immune-related diseases such as diabetes. One specific use of information received in response to this request is to assist NTP in identifying *in vitro* or alternative animal model screens that might be used to assess the potential for chemicals to cause outcomes related to Type 1 diabetes. In addition, information received from this request will provide fundamental knowledge on the use of these *in vitro* platforms for identifying environmental triggers of excessive inflammation and exaggerated immune responses that could lead to tissue injury.

Request for Information: NTP requests available data and information on approaches and/or technologies currently used to identify substances with the potential to cause excessive inflammation or exaggerated immune responses leading to tissue injury. Respondents should provide information on any activities relevant to the development or validation of alternatives to *in vivo* tests currently used in the assessment of immune toxicity and autoimmunity.

Respondents to this request for information should include their name, affiliation (if applicable), mailing address, telephone, email, and sponsoring organization (if any) with their communications. The deadline for receipt of the requested information is December 12, 2016.

Responses to this request are voluntary. No proprietary, classified, confidential, or sensitive information should be included in responses. This request for information is for planning purposes only and is not a solicitation for applications or an obligation on the part of the U.S. Government to provide support for any ideas identified in response to the request. Please note that the U.S. Government will not pay for the preparation of any information submitted or for its use of that information.

Background Information on NTP: NTP is an interagency program established in 1978 (43 FR 53060) to strengthen the Department's activities in toxicology research and testing and to develop and validate new and better testing methods. Other activities of the program focus on strengthening the science base in toxicology and providing information about potentially toxic chemicals to health-regulatory and research agencies, scientific and medical communities, and the public. NTP is located administratively at the NIEHS. Information about NIEHS and NTP is available at *http://www.niehs.nih.gov* and *http://ntp.niehs.nih.gov,* respectively.

Dated: October 20, 2016.

John R. Bucher,

Associate Director, National Toxicology Program.

[FR Doc. 2016–25924 Filed 10–25–16; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Allergy and Infectious Diseases; 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 552b(c)(4) and 552b(c)(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.