extent are consumers taking advantage of the mechanisms for obtaining approved package labeling in connection with broadcast advertisements; and (3) how risk messages can best be integrated into broadcast advertisements.

This draft guidance represents the agency's current thinking on procedures to fulfill the requirements for the disclosure of product information in connection with consumer-directed broadcast advertisements for prescription human and animal drugs, and human biological products. It does not create or confer any rights for or on any person and does not operate to bind FDA or the public. An alternative approach may be used if such approach satisfies the requirement of the applicable statute, regulations, or both.

## **IV. Request for Comments**

Interested persons may, on or before October 14, 1997 submit written comments on the draft guidance to the Dockets Management Branch (address above). Two copies of any comments are to be submitted, except that individuals may submit one copy. Comments are to be identified with the docket number found in brackets in the heading of this document. The draft guidance and received comments may be seen in the office above between 9 a.m. and 4 p.m., Monday through Friday. An electronic version of this draft guidance is also available on the Internet at http:// www.fda.gov/cder/guidance.htm.

Dated: August 5, 1997.

#### Michael A. Friedman,

Lead Deputy Commissioner for the Food and Drug Administration.

[FR Doc. 97–21291 Filed 8–8–97; 8:45 am] BILLING CODE 4160–01–F

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Health Resources and Services Administration

# Statement of Organization, Functions and Delegations of Authority

This notice amends Part R of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services (DHHS), Health Resources and Services Administration (60 FR 56605 as amended November 6, 1995; as last amended at 62 FR 27613–16 dated May 20, 1997). This notice reflects the establishment of the HIV/AIDS Bureau and the Office of Special Programs.

The changes are as follows:

I. Delete the Bureau of Health Resources Development, and the AIDS Program Office (RAA), Office of the Administrator, in its entirety and replace with the following:

### Section RV-00 Mission

The mission of the HIV/AIDS Bureau is to administer national policies and programs pertaining to HIV infection and acquired immune deficiency syndrome (AIDS) activities.

Section RV-10 Organization. The HIV/AIDS Bureau (HAB) is headed by an Associate Administrator who reports directly to the Administrator, HRSA. The (HAB) includes the following components:

- (A) Associate Administrator for HIV/ AIDS (RV)
- (B) Office of Communications (RV1)
- (C) Office of Program Support (RV2)
- (D) Office of Policy and Program Development (RV3)
- (E) Office of Science & Epidemiology (RV4)
- (F) Division of Service Systems (RV5)
- (G) Division of Community Based Programs (RV6)
- (H) Division of Training and Technical Assistance (RV7)

Section RV-20 Function

A. Associate Administrator, HIV/AIDS Bureau (RV)

Provides leadership and direction for the Agency's HIV/AIDS programs and activities and oversees their relationship with other national health programs. Specifically: (1) Coordinates the formulation of an overall strategy and policy for HRSA AIDS programs; (2) coordinates the internal functions of the Bureau and its relationships with other national health programs; (3) establishes HIV/AIDS program objectives, alternatives, and policy positions consistent with legislation and broad Administration guidelines; (4) administers the Agency's HIV/AIDS grants and contracts programs; (5) reviews HIV/AIDS-related program activities to assure consistency with established policies; (6) represents the Agency and the Department at HIV/ AIDS related meetings, conferences and task forces; (7) serves as principal contact and advisor to the Agency, Department, and other parties concerned with matters relating to planning and development of health delivery systems relating to HIV/AIDS; (8) develops and administers operating policies and procedures for the Bureau; (9) directs and coordinates the Bureau activities in support of the Department/ Agency/Bureau's Affirmative Action and Equal Employment Opportunity

programs by ensuring that all internal employment practices provide an equal opportunity to all qualified persons and its employment practices do not discriminate on the basis of race, color, sex, age, handicapping conditions, national origin, religious or political affiliation, marital status, and that all external benefits and service oriented activities relative to the recipients of Federal funds are likewise addressed in accordance with applicable laws, Executive Orders, DHHS regulations and policies; and (10) provides direction to the Bureau's Civil Rights compliance activities.

### B. Office of Communications (RV1)

The Office of Communications serves

as the Bureau's clearinghouse on all HIV/AIDS grant and program data and information, directing, coordinating and managing the preparation and dissemination of newsletters, program profiles, and reports on the uses of grant funds and services provided. Specifically: (1) Collects, compiles, and distributes various data and information on HIV/AIDS health care issues and programs related to the activities of the Bureau; (2) develops and provides information materials to HIV/AIDS health program planners, providers, and consumers to assist in decisionmaking and in effective, efficient operations; (3) develops and produces in-house communications to help ensure the understanding of current AIDS issues and Bureau program activities; (4) maintains information about primary sources of data and information on the health industry, disease trends, and public and private programs; (5) fosters and maintains relationships with and provides a referral service to Federal agencies, State and local governmental units, and private health and medical organizations with which the Bureau has mutual interests; (6) provides technical assistance to Bureau program managers and project officers in identifying data and information needs and developing information products; (7) provides technical assistance to Bureau program managers in information and communications product packaging, desktop publishing, and media relations; (8) provides Bureau liaison with HRSA's Office of Communications with respect to information and communications policy and management, product development, and media relations; (9) produces reports, articles, briefings, speeches, and exhibits on Bureau services and on programs directed at the Bureau service and provider populations; and, (10) utilizes automated methods and electronic media in carrying out its

responsibilities including managing and maintaining content of the Bureau's electronic web site, and liaison with the HRSA webmaster for technical support and design; and participation, coordination, and content development in use of technologies such as satellite transmission and distance learning.

### C. Office of Program Support (RV2)

Plans, directs, coordinates, and evaluates Bureau-wide administrative and management support activities. Specifically: (1) Serves as the Associate Administrator's principal source for management and administrative advice and assistance; (2) assists in the development and administration of policies and procedures which govern the review and final recommendation for funding to the Associate Administrator: (3) in cooperation with the Division of Financial Management, Office of Management and Program Support (OMPS), provides guidance to the Bureau on financial management activities; (4) in cooperation with the Office of Human Resources and Development, HRSA, coordinates personnel activities for the Bureau and advises the Associate Administrator on the allocation of the Bureau's personnel resources; (5) in cooperation with the Division of Grants and Procurement Management, OMPS, conducts all business management aspects of the review, negotiation, award, and administration of Bureau grants and cooperative agreements, and coordinates the Bureau's contracts operations; (6) develops and maintains a system that tracks grant funds by program, State and grantee and by purpose of grant award; (7) provides support to field staff as appropriate by program; (8) provides organization and management analysis for the Bureau, develops policies and procedures for internal Bureau requirements, and interprets and implements the Administration's management policies and procedures; (9) coordinates the Bureau's delegations of authority activities; (10) manages the Bureau's performance appraisal and employee performance management systems; (11) provides or arranges for the provision of support services such as supply management, space management, manual issuances, forms, records, reports, and supports civil rights compliance activities; (12) provides direction regarding technological developments in office management activities; and (13) manages the Bureau's executive secretariat functions.

D. Office of Policy and Program Development (RV3)

Serves as the Bureau's focal point for planning, legislation, and related coordination activities including the development and dissemination of program objectives, alternatives, policy statements and the formulation and interpretation of program related policies. Specifically: (1) Advises the Associate Administrator and Division Directors in the development of plans and legislative proposals to support Administration goals, and serves as the primary staff unit on special projects for the Associate Administrator; (2) coordinates with the Office of Planning, Evaluation, and Legislation (OPEL), HRSA, and other appropriate offices in the preparation of HIV/AIDS-related program and legislative proposals, including the preparation of testimony and related information to be presented to the Congress; (3) monitors and analyzes HIV/AIDS-related policy and legislative developments, both within and outside the Department, for their potential impact on HIV/AIDS activities, and advises the Associate Administrator on alternative courses of action for responding to such developments; (4) organizes, guides, and coordinates the Bureau's program planning and development activities, and prepares the Bureau's strategic planning agenda; (5) provides staff services and coordinates activities pertaining to legislative policy and position papers, including the development of legislative proposals and the analysis of existing and pending Federal and State legislation to assure the fullest possible consideration of programmatic requirements in meeting established departmental, and HRSA goals; (6) maintains liaison with the Agency, Department, and other agencies, and distributes legislative materials; (7) participates in the development and coordination of program policies and implementation plans, including the development, clearance, and dissemination of regulations, criteria, guidelines, and operating procedures; (8) serves as the point of contact for the Agency, developing and coordinating working relationships and conducts specific joint activities among programs to assure optimum interaction on related HIV/ AIDS activities and to minimize duplication and overlap; (9) conducts special inquiries and studies with emphasis on coordinating, managing and/or undertaking special projects which cut across Office or Division lines and responsibilities; (10) coordinates Bureau and HRSA comments on HIV/ AIDS-related reports, position papers,

legislative proposals, and related issues; (11) coordinates responses to requests for information received from other OPDIVs of the Department and from outside the Department; (12) provides program policy interpretation and technical assistance to other governmental and private organizations and institutions; and (13) develops and coordinates performance measures.

E. Office of Science and Epidemiology (RV4)

Serves as the Associate Administrator's principal source on HIV epidemiologic surveillance, program data collection and evaluation, medical and biometric research, and the development of new models of HIV care. The Office coordinates with all HRSA HIV/AIDS programs on the development and implementation of science and epidemiology activities, specifically: (1) Develops and directs long and short range scientific studies; (2) plans, directs, coordinates with OPEL, and administers the Bureau's annual program evaluation strategy; (3) designs and implements special scientific studies of the impact and outcomes of Bureau health care programs; (4) carries out data collection and analysis activities that document the clients and services of Bureau programs: (5) collects and maintains information on the costs and quality associated with the Bureau's health care programs; (6) directs and manages the implementation and evaluation of priority models of care through the Special Programs of National Significance (Title XXVI, Part F of the PHS Act), including developing **Program Application and Guidance** documents and site visit and evaluation program review protocols; (7) formulates and interprets programrelated policies; (8) coordinates the documentation of all science, evaluation, and new models of care products with HRSA HIV/AIDS programs; (9) coordinates technical assistance plans and activities with the Division of Training and Technical Assistance and manages program specific technical assistance; (10) plans and develops collaborative efforts in the scientific aspects of Bureau programs with other HHS components, Federal departments, universities, and other scientific organizations; (11) organizes, guides and coordinates the Bureau's scientific planning and development activities in epidemiology, research, and demonstrations; (12) plans and coordinates Bureau participation in scientific organizations, including scientific clearance of presentations and articles for publication; (13) studies and

analyzes trends in health care, including availability, access distribution, organization, and financing to determine if the Bureau activities address current and emerging issues and problems in an effective, efficient manner; and (14) coordinates and consults with State and local health departments, other components of the Department, other Federal agencies and/or outside groups on the implementation of Office programs.

### F. Division of Service Systems (RV5)

Administers Bureau programs and activities and manages funds and other resources related to the provision of coordinated comprehensive HIV health care and support services, including reimbursement for treatment with lifeprolonging drugs, for persons with HIV/ AIDS. Specifically: (1) Directs and manages the implementation of Parts A and B of Title XXVI of the PHS Act including Emergency Relief Grants (Title I), HIV CARE Grants (Title II), and State AIDS Drug Assistance programs; (2) provides program implementation proposals and plans, and the interpretation of legislation and regulations; (3) monitors HIV services planning and delivery programs in States and Cities and provides administrative, strategic, and programmatic direction to grantees to encourage efficient, coordinated treatment of persons with HIV infection; (4) prepares site visit program review protocols; (5) develops Program Application and Guidance documents; (6) develops requirements, guidance and monitors State and territorial programs for medical therapies established to ensure that these treatments are integrated into the system of health care services; (7) promotes the development of State treatment program formularies that include classes of drugs necessary for the proper treatment of people with HIV infection; (8) formulates and interprets program-related policies; (9) coordinates technical assistance plans and activities with the Division of Training and Technical Assistance and manages program specific technical assistance; (10) develops and implements a monitoring plan, including periodic on-site program reviews and assessments of grantee compliance with the legislation, including their plans and activities to assure subcontractor compliance; and (11) coordinates and consults with State and local health departments, other components of the Department, other Federal agencies and/or outside groups on the implementation of Division programs.

# G. Division of Community Based Programs (RV6)

Administers Bureau programs and activities related to: the provision of comprehensive health services to persons infected with HIV in medically underserved areas; demonstrating strategies and innovative models for organizing and coordinating community based services linked to research for children, youth and women; coordinating services for children, youth and women of child-bearing age with HIV infection, HIV/AIDS; and, assisting dental schools and other eligible institutions with respect to oral health care to patients with HIV. Specifically: (1) directs and manages the implementation of Parts C and D of Title XXVI of the PHS Act including HIV Early Intervention Services Program (Title III). Grants for Coordinated Services and Access to Research for Women, Infants, Children, and Youth Program (Title IV), and Part F Dental Reimbursement; (2) provides program implementation proposals and plans, and the interpretation of legislation and regulations; (3) prepares site visit program review protocols; (4) formulates and interprets programrelated policies; (5) develops Program Application and Implementation Guidance including application kits; (6) coordinates and consults with State and local health departments, other components of the Department, other Federal agencies and/or outside groups on the implementation of Division programs; (7) coordinates technical assistance plans and activities with the Division of Training and Technical Assistance and manages program specific technical assistance; and (8) develops and implements a monitoring plan, including periodic on-site program reviews and assessments of grantee compliance with the legislation, including their plans and activities.

# H. Division of Training and Technical Assistance (RV7)

Coordinates, designs, directs and administers HIV/AIDS-related planning, training, technical assistance and extramural authorities and activities within the Agency. Advises the Associate Administrator on training and educational activities, pertaining to the administration of HRSA's HIV/AIDS program. Specifically: (1) Directs and manages the implementation of the **AIDS Education and Training Centers** (AETC) program of the CARE Act, Title XXVI, Part F of the PHS Act; (2) identifies technical assistance needs and develops technical assistance packages, conducts programs, meetings and

activities to meet such needs; (3) convenes consultation meetings with grantees, providers, representatives of professional and political organizations, and advocacy groups; (4) develops Program Application and Guidance documents for the AETC program; (5) develops and manages mechanisms and resources to address technical assistance needs and support Division/Bureau technical assistance plans and programs; (6) provides logistical support to the objective review process; (7) prepares site visit program review protocols; (8) formulates and interprets program-related policies; (9) coordinates and manages the Bureau's HIV-related managed care activities; (10) serves as the Bureau's focal point for advising and coordinating with advisory committees and other external organizations on policies regarding health care delivery and HIV/AIDS prevention, treatment, education and technical assistance; (11) develops outreach activities to assure that target populations are aware of the benefits and availability of HRSA HIV/ AIDS programs; (12) provides program implementation proposals and plans, and the interpretation of legislation and regulations; (13) coordinates and consults with State and local health departments, other components of the Department, other Federal agencies and/ or outside groups on the implementation of Division programs; and (14) develops and implements a monitoring plan, including periodic onsite program reviews and assessments of grantee compliance with the legislation, including their plans and activities.

II. Establish the Office of Special Programs (RR) as follows:

Section RR-00 Mission Section RR-10 Organization

### Section RR-00 Mission

Section RR-20

The Office of Special Programs (OSP) serves as the Agency's principal focal point for administering Federal policy and programs pertaining to health care facilities, and activities associated with organ donations, procurements, and transplantation.

Function

### Section RR-10 Organization

The OSP is headed by the Director, who reports directly to the Administrator, HRSA, and includes the following components:

- (A) Director, Office of Special Programs (RR)
- (B) Division of Transplantation (RR1)
- (C) Division of Facilities Compliance and Recovery (RR2)
- (D) Division of Facilities and Loans (RR3)

Section RR-20 Function

A. Director, Office of Special Programs (RR)

Provides the overall leadership and direction for programs related to the procurement and transplantation of organs, facilities' compliance with the reasonable volume of uncompensated care assurance and the administration of loan, loan guarantee and interest subsidy programs for health care facilities.

#### B. Division of Transplantation (RR1)

Plans, directs, coordinates, and monitors a broad range of activities relating to the field of organ procurement and transplantation. Specifically: (1) Develops, implements, and maintains a program of grants to organ procurement organizations (OPO's); (2) provides technical assistance to OPO's receiving Federal funds; (3) establishes and maintains an Organ Procurement and Transplantation Network; (4) establishes and maintains a scientific registry for organ transplantation recipients; (5) administers and monitors the contracts governing the National Marrow Donor Program; (6) conducts a program of public information to inform the public of the need for organ donations; (7) monitors trends and analyzes data on the efficiency and effectiveness of organ procurement, bone marrow donation, the allocation of organs among transplant centers and transplant patients, and on other aspects of organ transplantation, and prepare reports as needed; (8) coordinates collection of information with other units of the Federal Government concerned with organ and bone marrow recovery and transplantation (e.g., the National Center for Health Services Research and Health Care Technology Assessment, the Health Care Financing Administration, the National Institutes of Health, the Department of the Navy, the Food and Drug Administration, and the Centers for Disease Control and Prevention); (9) maintains working relationships with State activities and professional organizations in the field of organ transplantation; (10) maintains and fosters new relationships with public and private organizations (e.g., the North American Transplant Coordination Organization, the American Hospital Association, the American Society of Transplant Surgeons, and the American Society of Transplant Physicians) to promote the concepts of organ and bone marrow donation, to follow trends in organ procurement, and to maintain working knowledge of clinical status of organ

and bone marrow transplantation; (11) develops and provides information on organ and bone marrow recovery and transplantation for professional associations, health providers, consumers, health insurers, medical societies, State health departments, and the general public; and, (12) provides program policy interpretation and technical assistance to other governmental and private organizations and institutions.

# C. Division of Facilities Compliance and Recovery (RR2)

The Division substantiates health facilities' compliance with the reasonable volume of uncompensated care assurance. Specifically: (1) Establishes, develops, and monitors the implementation of regulations, policies, procedures, and guidelines for use by regional staff and health care facilities in ascertaining that assurances are met; (2) plans and directs the development of regulations and program guidelines for administering grant support for health care, health professions education, and nurse training facilities; (3) provides technical assistance and training, and conducts evaluations to ensure nationwide consistency in program administration; (4) maintains a system for receipt, analysis and disposition of audit appeals by obligated facilities; (5) maintains a system for receiving and responding to patient complaints and for their analysis, evaluation and disposition; (6) develops and initiates monitoring activities necessary to ensure enforcement of provisions regarding the reasonable volume assurance; (7) coordinates its activities with other components of the Bureau, HRSA, and other departmental components; and (8) provides program policy interpretation and technical assistance to other governmental and private organizations and institutions.

## D. Division of Facilities and Loans (RR3)

The Division plans and directs the development of regulations and program guidelines for administering loan, loan guarantee and interest subsidy program for health care facilities. Specifically: (1) Develops regulations, policy and procedures for administering loan and loan guarantee with interest subsidy programs; (2) administers the HHS responsibility for facility construction, renovation, and modification as described in interagency memoranda of agreement; (3) provides overall consultation and guidance on factors affecting future national requirements in specific types of facilities, geographic distribution and facilities utilization; (4) maintains an automated data system for

the issuance of periodic and special reports and for the manipulation of institution specific data in performing tests for financial feasibility; (5) assists in the evaluation and analysis of applications for construction under assigned grant programs; (6) reviews and recommends action on: (a) proposals for new health facilities or additions to or modernization of existing facilities under loan programs assigned to the Division, (b) requests for mortgage relief, such as forbearance of principal and/or interest payment, suspension of sinking fund deposits, modifications of loan terms, etc., and (c) requests for recovery and/or waiver of repayment of Federal loan funds; (7) provides advice and guidance to regional staff on statutory and regulatory provisions and policy and procedures for administering programs assigned to the Division; (8) maintains liaison with and coordinates its activities and jointly develops pertinent programmatic materials with other components of the Bureau, HRSA, HHS, other concerned Federal agencies, and with private lending institutions and associations; and (9) provides program policy interpretation and technical assistance to other governmental and private organizations and institutions.

III. Delete the following functions: A. In the Maternal and Child Health Bureau, in item #7 of the mission statement, delete the words "Pediatric AIDS"; this function has been placed in the HIV/AIDS Bureau. In the functional statement for the Office of the Director, in item #7. delete the statement "a demonstration program in Pediatric AIDS, and a national service demonstration program for the treatment and prevention of AIDS in persons with hemophilia"; these functions have been placed in the HIV/ AIDS Bureau. Under the Division of Services for Children with Special Needs, delete item #10, and renumber the remaining items in sequence;

B. In the Bureau of Health Professions, Division of Medicine, delete item #12 and place the word "and" before the number 11; this function has been placed in the HIV/ AIDS Bureau; and,

C. In the Bureau of Primary Health Care, Division of Programs for Special Populations, in item #1 of the functional statement, delete the word "AIDS"; this function has been placed in the HIV/ AIDS Bureau.

Section RV-30 Delegation of Authority

All delegations and redelegations of authority which were in effect immediately prior to the effective date hereof have been continued in effect in them or their successors pending further redelegations.

This reorganization is effective upon date of signature.

Dated: August 7, 1997.

### Claude Earl Fox,

Acting Administrator.

[FR Doc. 97-21290 Filed 8-11-97; 8:45 am]

BILLING CODE 4160-15-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Office of Inspector General

**Program Exclusions: July 1997** 

**AGENCY:** Office of Inspector General, HHS.

**ACTION:** Notice of program exclusions.

During the month of July 1997, the HHS Office of Inspector General imposed exclusions in the cases set forth below. When an exclusion is imposed, no program payment is made to anyone for any items or services (other than an emergency item or service not provided in a hospital emergency room) furnished, ordered or prescribed by an excluded party under the Medicare, Medicaid, Maternal and Child Health Services Block Grant and Block Grants to States for Social Services programs. In addition, no program payment is made to any business or facility, e.g., a hospital, that submits bills for payment for items or services provided by an excluded party. Program beneficiaries remain free to decide for themselves whether they will continue to use the services of an excluded party even though no program payments will be made for items and services provided by that excluded party. The exclusions have national effect and also apply to all Executive Branch procurement and nonprocurement programs and activities.

	JOHNSO	
Subject, city, state	Effective date	LUMBU JONES, OH
Program-Related Convidence	KASTSA WHITE	
A & M CARE, INC., OSSINING,		KATZ, CI
NY	07/28/97	GELES
ALDRICH, TERRY L., LACO-	07/04/07	KAYE, L
NIA, NHANGSORI. HADI. TEMPLE	07/31/97	MAYFI KILGORE
CITY, CA	08/06/97	DENCE
ARIF, MOHAMMED,		KRIEST,
WHITESTONE, NY	08/11/97	GOME
ASKEW, CONNIE, SYRA- CUSE, NY	08/11/97	LANDRE BRYAN
BAPACK, PAULINE D., ALEX-	00/11/97	LIPSITZ,
ANDRIA, VA	08/18/97	PHIA,
BARNEY, SUE A., COLUM-		MARTIŃ,

BUS, OH .....

07/30/97

Subject, city, state	Effective date	Subject, city, state	Effective date
BEIERLE, KATHLEEN J., WILKES-BARRE, PA	07/31/97	MCDANIEL, MICHAEL SHAUN, ANTHONY, TX	08/10/97
BELISLE, BRIAN CHARLES JR., ATLANTA, GA	08/07/97	MCDANIEL, DARLENE POW- ELL, BALLINGER, TX	08/10/97
BROOKS, ERNEST, PETERS- BURG, VA	07/31/97	MCDANIELS, MATTIE, AT- LANTA, GA	07/31/97
BUSH, KAREN, MARIANNA, FL	08/03/97	MURPHY, DEBRA HAYES, DANBURY, CT	07/29/97
BUSH, JESSE, ATLANTA, GA BYFIELD, MICHAEL,	08/03/97	NIEWISCH, CAREN, SAN DIMAS, CA	08/06/97
OSSINING, NYCAPITAL CITY TRANS. SERV.	07/28/97	PAK, JIM SU, COLUMBIA, MD PARK MEDICAL CLINIC,	07/31/97
INC., COLUMBUS, OH CASSVAN, RICARDO, CORAL	07/30/97	TROY, MIPAYTON, DE ETTA, ON-	07/30/97
GABLES, FL CAUGHMAN, ROSANNE	08/03/97	TARIO, CAPELINO, CARL JOSEPH,	07/30/97
DENISE, O'FALLON, IL CHILD, BEVERLY, E. PROVI-	08/07/97	TROY, MIPELINO, MILDRED PATRICIA,	08/07/97
DENCE, RI DEATON, JOANN,	07/31/97	TROY, MIPUGH, VERNON D., EGLIN	08/07/97
SHADYSIDE, OH EMERY, DEANE M., WAR-	08/07/97	AFB, FL	07/31/97
NER, NHFARLEY, PATRICK, PRINCE-	08/07/97	RAY, DON A., IRMO, SC REINERT, PAMELA A., MAPLE	08/03/97
TON, WVFETT, DAVID EDEN, TEX-	08/03/97	GROVE, MNREYES, ALEJANDRO	08/07/97
ARKANA, ARFLORES, ROSARIO A., NEW	08/10/97	CONTRERAS, LOS ANGE- LES, CA	07/30/97
YORK, NYFONTAINE, MARCUS AR-	07/28/97	SONI, CHANDRAKANTA, WISE, VA	08/10/97
THUR, TERMINAL ISLAND,	08/06/97	SORIANO, TONY ESTRELLA, LOS ANGELES, CA	08/06/97
GADEGBEKU, POLYCARP K., FLORENCE, SC	08/03/97	TYUS, LAMAN J., COLUM- BUS, OH	07/30/97
GAJENDRAGADKAR, SUBHASH, BECKLEY, WV	07/29/97	VASSALLO, DEBORAH ALICE, HENDERSON, NV	07/30/97
GILES, JACQUELINE LEYA, ONTARIO, CA	07/29/97	VIVAR, GRACIELA GRIMACEZAR, PEMBROKE	
GILLIARD, FRED EMERSON, ESTILL, SC	07/30/97	PINES, FL	08/07/97
HARRIS, ARTHUR, JACKSON,	07/29/97	JEAN, TACOMA, WAYORK, WILLIAM DAVID,	08/18/97
GA HAYES, JAMES E., UKIAH, CA HOLLOWAY, NATHANIEL, JR.,	08/11/97	HIGHLAND PARK, MI YOUNG, LARHONDA K., NEW	08/07/97
DETROIT, MI	08/07/97	ALBANY, MSZETLIN, VALENTIN, NEW	08/07/97
DEER, PA JACKSON, DIARIS, VIRGINIA	07/28/97	YORK, NY	07/28/97
BEACH, VAJACOBS, ERIC FRANK,	08/10/97	Patient Abuse/Neglect Cor	victions
METAIRIE, LA JERKINS, WAYMON DAVID,	07/29/97	ANDERSON, LADORA, EAST CLEVELAND, OH BERANEK, JOSELYN J.,	08/06/97
JOHNSON, MAURICE T., CO-	07/30/97	ROTHSCHILD, WI BERGMAN, SANDER E.,	08/06/97
JONES, REGINALD, DAYTON,	07/30/97	SHELTON, WA BEST, ERIC R., COLUMBUS,	08/11/97
OHKASTSARIDIS, NICHOLAS,	08/06/97	OHBUSEMAN, EDITH, LENNOX,	08/06/97
WHITE PLAINS, NYKATZ, CHESTER S., LOS AN-	07/31/97	SD	08/10/97
GELES, CAKAYE, LARRY CARL,	08/18/97	DAVIS, JEANETTE, LORAINE, OH DESROSIERS, STEVEN, NEW	08/06/97
MAYFIELD HEIGHTS, OH KILGORE, MELISSA, PROVI-	08/06/97	BEDFORD, MA	08/06/97
DENCE, RI KRIEST, DONALD E., MONT-	08/06/97	TUCKET, RI	07/31/97
GOMERY, ALLANDRENEAU, PATRICK	08/07/97	EDWARDS, PAULINE, SPRINGFIELD, MA FEATHERSTON, MARCIA	08/06/97
BRYAN, TALLAHASSEE, FL LIPSITZ, FAYNE, PHILADEL- PHIA, PA	07/30/97	ELLEN, MADISON HEIGHTS, MI	08/06/97
MARTIN, HOLLY PATRICIA,	08/03/97	FERREIRA, JOSE V., EVER- ETT, MA	08/07/97
MOUNT SOLON, VA	07/29/97	L11, WA	00/07/97