Place: Omni Shoreham Hotel, 2500 Calvert Street, N.W., Washington, D.C. 20008.

Status: Open to the public, limited only by the space available. Preregistration is recommended, and there is no registration fee. Please obtain registration information from the contact person listed below.

Purpose: The agenda will focus on collaborations for health information sharing among the various stakeholders and partners in public health. Papers presented will address the theme, "Partnerships, Technologies, and Communities: Evolving Roles for Health Data." Each day will focus on a public health issue as follows: Day 1, "Health Information Partnerships—National, State, and Local;" Day 2, "Information Technology and Informatics;" and Days 3 and 4, "Communities at Risk." This agenda will cover a broad spectrum of current and future public health concerns. Agenda items are subject to change as priorities dictate.

Contact Person For More Information: Substantive program and registration information for the meeting may be obtained from Barbara Butler, Public Health Conference on Records and Statistics, Office of Data Standards, Program Development, and Extramural Programs, NCHS, CDC, Room 1100, Presidential Building, 6525 Belcrest Road, Hyattsville, Maryland 20782, telephone 301/436–7122, extension 144.

Dated: January 28, 1997.

Carolyn J. Russell,

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

[FR Doc. 97–2580 Filed 1–31–97; 8:45 am]

Food and Drug Administration

[Docket No. 97F-0035]

Ashland Chemical Co.; Filing of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that Ashland Chemical Co. has filed a petition proposing that the food additive regulations be amended to provide for the safe use of polypropylene glycol with a molecular weight of 1,200 to 3,000 as a defoaming agent in water for sliced potatoes.

DATES: Written comments on the petitioner's environmental assessment by March 5, 1997.

ADDRESSES: Submit written comments to the Dockets Management Branch (HFA–305), Food and Drug Administration, 12420 Parklawn Dr., rm. 1–23, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: Vivian M. Gilliam, Center for Food Safety and Applied Nutrition (HFS– 217), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202–418–3167.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sec. 409(b)(5) (21 U.S.C. 348(b)(5))), notice is given that a food additive petition (FAP 6A4490) has been filed by Ashland Chemical Co., One Drew Plaza, Boonton, NJ 07005. The petition proposes to amend the food additive regulations in § 173.340 *Defoaming agents* (21 CFR 173.340) to provide for the use of polypropylene glycol with a molecular weight of 1,200 to 3,000 as a component of defoaming agents in water for sliced potatoes.

The potential environmental impact of this action is being reviewed. To encourage public participation consistent with regulations promulgated under the National Environmental Policy Act (40 CFR 1501.4(b)), the agency is placing the environmental assessment submitted with the original petition that is the subject of this notice on public display at the Dockets Management Branch (address above) for public review and comment. Interested persons may, on or before March 5, 1997, submit to the Dockets Management Branch (address above) written comments. 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. Received comments may be seen in the office above between 9 a.m. and 4 p.m., Monday through Friday. FDA will also place on public display any amendments to, or comments on, the petitioner's environmental assessment without further announcement in the Federal Register. If, based on its review, the agency finds that an environmental impact statement is not required and this petition results in a regulation, the notice of availability of the agency's finding of no significant impact and the evidence supporting that finding will be published with the regulation in the Federal Register in accordance with 21 CFR 25.40(c).

Dated: January 17, 1997.

Alan M. Rulis

Director, Office of Premarket Approval, Center for Food Safety and Applied Nutrition. [FR Doc. 97–2532 Filed 1–31–97; 8:45 am]

BILLING CODE 4160-01-F

[Docket No. 96N-0391]

Review of Infant Formula Nutrient Requirements for Preterm Infants; Announcement of Open Meeting

AGENCY: Food and Drug Administration,

HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) and the Life Sciences Research Office (LSRO) of the Federation of American Societies for Experimental Biology (FASEB) are announcing an open meeting on the review of infant formula nutrient requirements for preterm infants. The LSRO/FASEB has undertaken this review and will prepare a documented scientific report that summarizes the available information. To assist in the preparation of its scientific report, LSRO/FASEB is inviting the submission of scientific data, information, and views bearing on this topic both in writing and orally at the open meeting. DATES: The LSRO will hold a 1-day open meeting on this topic on March 26, 1997. The meeting will begin at 9 a.m. Requests to make oral presentations at the open meeting must be submitted in writing and received by March 7, 1997. To be included in the review process, written presentations of scientific data, information, and views should be submitted on or before June 30, 1997. Written materials arriving at LSRO/ FASEB on or before March 20, 1997, will be part of the official record of the open meeting

ADDRESSES: The open meeting will be held in the Chen Auditorium, Lee Bldg., Federation of American Societies for Experimental Biology, 9650 Rockville Pike, Bethesda, MD. Written requests to make oral presentations of scientific data, information, and views at the open meeting should be submitted to Daniel J. Raiten (address below) and to the Dockets Management Branch (HFA-305), Food and Drug Administration, 12420 Parklawn Dr., rm. 1–23, Rockville, MD 20857. Two copies of the scientific data, information, and views are to be submitted to each office. These two copies are to be identified with the docket number found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT:

Daniel J. Raiten, Life Sciences Research Office, Federation of American Societies for Experimental Biology, 9650 Rockville Pike, Bethesda, MD 20814–3998, 301–530–7030 or Linda H. Tonucci, Center for Food Safety and Applied Nutrition (HFS–456), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202–205–5372.

SUPPLEMENTARY INFORMATION: FDA has a contract (223–92–2185) with FASEB concerning the analysis of scientific issues that bear on the safety of foods and cosmetics. The objectives of this contract are to provide information to FDA on general and specific issues of scientific fact associated with the analysis of human nutrition.

Infant formulas for infants with low birthweight are regulated as exempt infant formulas under the Infant Formula Act of 1980 and its 1986 amendments (21 U.S.C. 350a). Exempt infant formulas may have nutrients or nutrient levels that are different from those that are codified in 21 CFR 107.100, if the manufacturer of the infant formula can justify the nutrient deviation. LSRO will perform a review to consider the scientific basis for having different recommendations for energy and macronutrients (protein, fat, including long-chain polyunsaturated fatty acids (LCPUFA's), and carbohydrates) in formulas for low birthweight preterm infants.

In the Federal Register of November 15, 1996 (61 FR 58566), FDA announced that it asked FASEB, as a task under contract 223-92-2185, to provide FDA's Center for Food Safety and Applied Nutrition with both an up-to-date review of nutrient requirements of preterm infants and of the effects of new information about nutritional needs of preterm infants on recommendations for levels of nutrients in formulas for preterm infants. In response to this request, FASEB has directed LSRO to obtain state-of-the-art scientific information on infant nutrient requirements and related scientific questions on specifications for preterm infant formula. The LSRO/FASEB has undertaken a study and will prepare a documented scientific report that summarizes the available information related to these questions.

LSRO is performing a review of the scientific and medical literature with a particular emphasis on studies published since 1986, when 21 U.S.C. 350a was last amended. Requirements of other governmental bodies are also being considered in this review. Specifically, LSRO will address the following issues in its review:

(1) What scientific basis is there to support requirements for energy and macronutrients (protein, fat, and carbohydrates) in infant formulas intended for use by preterm infants as distinct from the requirements for energy and macronutrients in formulas for term infants? The American Academy of Pediatrics, the European Society for Pediatric Gastroenterology and Nutrition, and the Canadian

Pediatric Society have proposed some nutrient requirements for preterm infants distinct from those for term infants.

(2) Has scientific knowledge advanced to the point that distinct composition standards for energy and macronutrients in formulas for these preterm infants are warranted?

(3) Nutrient requirements of hospitalized preterm infants who are fed enteral formulas are sometimes described according to stages, such as a first or transition stage (between birth and 10 days of age), a stable growing stage (from about 10 days until discharge from hospital, 6 to 8 weeks after birth), and a post-discharge stage (from discharge home to approximately 1 year of age). Is there scientific evidence to support more than one set of energy and macronutrient requirements to support growth and development of the hospitalized preterm infant at the different stages of development? If so, how should the stages be defined?

(4) Are the energy and macronutrient requirements for infant formulas for term infants sufficient for healthy post-

discharge preterm infants?

(5) Is there scientific evidence to support specific deviations from current nutrient standards for healthy post-discharge preterm infants, and if so, what would they be, and to what stage (age/weight) should these special formulas be given?

(6) Does available evidence establish the essentiality of addition of subcomponents of the macronutrients (specifically, taurine, carnitine, and LCPUFA's) to formulas for preterm infants, and if so, does the evidence establish what the amount and ratios of these compounds should be in the formula? For example, the Canadian Guidelines for the Composition and Clinical Testing for Formulas for Preterm Infants (p. 17) finds that term infant formulas that contain adequate and balanced 18:2n-6 and 18:3n-3 fatty acids do not require addition of the 20 and 22 carbon n-6 and n-3 fatty acids.

(7) Is there available evidence to suggest that this result also applies to preterm infant formulas? If so, is there an optimum level and ratio of 18:2n-6 and 18:3n-3 fatty acids in formulas for preterm infants?

(8) Does the available evidence address the issue of safety of various sources of these LCPUFA's for use in preterm infant formulas? If so, is there a safe source of LCPUFA's?

(9) Does available evidence establish the essentiality of the addition of nucleotides to formulas for preterm infants, and if so, does the evidence establish what the amounts should be in the formulas?

LSRO will use these questions as a guide in the drafting of its report. LSRO notes that, in arriving at answers to the above questions, it will consult with the American Academy of Pediatrics' Committee on Nutrition and, to the extent possible, the Institute of Medicine's Food and Nutrition Board. LSRO will prepare a comprehensive final report that documents and summarizes the results of its evaluation.

Under its contract with FDA, FASEB will provide the agency with its scientific report on or about September 30, 1997.

Dated: January 24, 1997.
William K. Hubbard,
Associate Commissioner for Policy
Coordination.
[FR Doc. 97–2493 Filed 1–31–97; 8:45 am]
BILLING CODE 4160–01–F

Health Resources and Services Administration

Ryan White Title IV; Grants for Coordinated HIV Services and Access to Research for Children, Youth, Women, and Families

AGENCY: Health Resources and Services Administration, HRSA.

ACTION: Notice of availability of funds.

SUMMARY: The HRSA announces that approximately \$15.5 million in fiscal year (FY) 1997 funds will be available for project grants that enhance access to clinical research trials and other research, and develop and support the provision of coordinated comprehensive services and activities for children, youth, women and families infected/ affected by the Human Immunodeficiency Virus (HIV). Grants will be funded that link clinical research and other research activities with comprehensive care systems, and improve and expand the coordination of a system of comprehensive care for children, youth, women, and families who are infected/affected by HIV. These projects are authorized under Section 2671 of the Public Health Service Act, as amended by the Ryan White Comprehensive AIDS Resource Emergency (CARE) Act Amendments of 1996, Public Law 104-146 (42 U.S.C. 300f–71). Within the HRSA, Ryan White Title IV projects are administered by the Maternal and Child Health Bureau (MCHB)

The PHS is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS national activity for setting