

assistive listening devices will be provided. Meeting agenda and handout materials will be provided in accessible formats. The meeting site is fully accessible to people using wheelchairs or other mobility aids. Copies of the transcript in other alternative formats (computer diskette, large print, and Braille) are available to persons with disabilities by contacting Brian Millin (202) 418-7426 voice, (202) 418-7365 TTY, or bmillin@fcc.gov.

Send requests for other reasonable accommodations to fcc504@fcc.gov, or contact Helen Chang, Section 504 Officer, 202-418-0424, 202-418-0432 TTY, or hchang@fcc.gov.

Federal Communications Commission.

Martha Contee,

Chief, Consumer Affairs and Outreach Division.

[FR Doc. 02-9640 Filed 4-18-02; 8:45 am]

BILLING CODE 6712-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Agency Information Collection Activities: Submission for OMB Review; Comment Request

The Department of Health and Human Services, Office of the Secretary publishes a list of information collections it has submitted to the Office of Management and Budget (OMB) for clearance in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35) and 5 CFR 1320.5. The following are those information collections recently submitted to OMB.

1. Simplified Federalwide Assurance and IRB Registration System—NEW—

Developed by the Office of Human Research Protections (OHRP), the new assurance and Institutional Review Board (IRB) registration system is designed to satisfy information collection requirements of Section 491 of the Public Health Services Act, the Common Rule for the Protection of Human Subjects (56 FR 28003) and HHS Regulations at 45 CFR Part 46.

Respondents: Not-for Profit Institutions, For-Profits, State, Local or Tribal Governments, Federal Government; *Burden Information for the IRB Registration—Total Annual Responses:* 667; *Average Burden per Response:* one hour; *Annual Burden:* 667 hours. *Burden Information for the assurance process is incorporated under OMB control number 0990-0260, which the information collection request for all reporting and recordkeeping*

requirements contained in the common rule.

OMB Desk Officer: Allison Herron Eydt.

Copies of the information collection packages listed above can be obtained by calling the OS Reports Clearance Officer on (202) 690-6207. Written comments and recommendations for the proposed information collection should be sent directly to the OMB desk officer designated above at the following address: Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, 725 17th Street NW., Washington, DC 20503.

Comments may also be sent to Cynthia Agens Bauer, OS Reports Clearance Officer, Room 503H, Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201. Written comments should be received within 30 days of this notice.

Dated: April 11, 2002.

Kerry Weems,

Acting Deputy Assistant Secretary, Budget.

[FR Doc. 02-9535 Filed 4-18-02; 8:45 am]

BILLING CODE 4160-17-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Findings of Scientific Misconduct

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: Notice is hereby given that the Office of Research Integrity (ORI) and the Assistant Secretary for Health have taken final action in the following case:

Joao Carlos deSales, San Francisco Department of Public Health: Based on the report of an investigation conducted by the San Francisco Department of Public Health (SFDPH) and additional analysis conducted by ORI in its oversight review, the U.S. Public Health Service (PHS) found that Joao Carlos deSales, former study counselor at SFDPH, engaged in scientific misconduct by falsifying data supported under National Institutes of Health subcontract SFP-N01-A1-35176-HMEISTERI-94 to SFDPH under National Institute of Allergy and Infectious Diseases (NIAID), NIH, contract 5-N01-AI35176-019, "Domestic Master Contract for HIV Vaccine Efficacy Trials," awarded to ABT Associates, Inc.

Specifically, from April through September of 1999, Mr. deSales switched randomization assignments on

four pairs of subjects and subsequently altered the research records to conceal his conduct. Mr. deSales' switching of the randomization assignments, if undetected, could have biased the study so as to invalidate the conclusions on the effectiveness of intensive counseling sessions on reducing the rate of new HIV infections.

Mr. deSales has entered into a Voluntary Exclusion Agreement in which he has voluntarily agreed for a period of three (3) years, beginning on April 4, 2002:

(1) to exclude himself from serving in any advisory capacity to PHS, including but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as a consultant; and

(2) that any institution that submits an application for PHS support for a research project on which Mr. deSales' participation is proposed or which uses him in any capacity on PHS supported research, or that submits a report of PHS-funded research in which Mr. deSales is involved, must concurrently submit a plan for supervision of his duties to the funding agency for approval. The supervisory plan must be designed to ensure the scientific integrity of his research contribution. A copy of the supervisory plan must also be submitted to ORI by the institution.

FOR FURTHER INFORMATION CONTACT:

Director, Division of Investigative Oversight, Office of Research Integrity, 5515 Security Lane, Suite 700, Rockville, MD 20852. (301) 443-5330.

Chris B. Pascal,

Director, Office of Research Integrity.

[FR Doc. 02-9620 Filed 4-18-02; 8:45 am]

BILLING CODE 4150-31-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Findings of Scientific Misconduct

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: Notice is hereby given that the Office of Research Integrity (ORI) and the Assistant Secretary for Health have taken final action in the following case:

Atsushi Handa, M.D., Ph.D., National Institutes of Health: Based on the report of an investigation conducted by the National Institutes of Health (NIH) and additional analysis conducted by ORI in its oversight review, the U.S. Public Health Service (PHS) found that Atsushi Handa, M.D., Ph.D., former visiting

fellow in the intramural program of the National Heart, Lung, and Blood Institute (NHLBI), NIH, engaged in scientific misconduct by falsifying and fabricating data published in two publications.

Specifically, PHS found that Dr. Handa:

(1) Fabricated or falsified the following data in a paper published in *J. Gen. Virol.* 81:2077–2084, 2000: (A) Data for the AAV–3 construct for days 2, 5, and 7 and data for the AAV–2 construct for days 5 and 7 in Table 1; (B) day 2 data in Table 2; and (C) Figure 4; and

(2) Falsified the following data in a paper published in *J. Gen. Virol.* 81:2461–2469, 2000: (A) Figure 3; and (B) data in Table 2; retracted at *J. Gen. Virol.* 82:2837, 2000.

These actions were serious because the purported findings on the GV virus C/hepatitis G and AAV–2 viruses could have had major impact in areas such as hepatitis research and gene therapy.

Dr. Handa has entered into a Voluntary Exclusion Agreement in which he has voluntarily agreed:

(1) To exclude himself from any contracting or subcontracting with any agency of the United States Government and from eligibility for, or involvement in, nonprocurement transactions (e.g., grants and cooperative agreements) of the United States Government as defined in 45 CFR part 76 (Debarment Regulations), for a period of five (5) years, beginning on April 4, 2002;

(2) To exclude himself from serving in any advisory capacity to PHS, including but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as a consultant, for a period of five (5) years, beginning on April 4, 2002; and

(3) To submit a letter of retraction to the editor of the *Journal of General Virology* identifying the missing data as well as the falsified or fabricated data in Figure 3A and Table 2 of the paper published in *J. Gen. Virol.* 81:2461–2469, 2000, within 30 days of the effective date of this Agreement. This retraction requirement will remain on the ALERT System until Dr. Handa sends, and ORI receives, a copy of the retraction letter that is consistent with the above language.

FOR FURTHER INFORMATION CONTACT:
Director, Division of Investigative Oversight, Office of Research Integrity, 5515 Security Lane, Suite 700, Rockville, MD 20852. (301) 443–5330.

Chris B. Pascal,

Director, Office of Research Integrity.

[FR Doc. 02–9619 Filed 4–18–02; 8:45 am]

BILLING CODE 4150–31–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality; Notice of Meetings

In accordance with section 10(d) of the Federal Advisory Committee Act as amended (5 U.S.C., appendix 2), the Agency for Healthcare Research and Quality (AHRQ) announces meetings of scientific peer review groups. The subcommittees listed below are part of the Agency's Health Services Research Initial Review Group Committee.

The subcommittee meetings will be closed to the public in accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., appendix 2 and 5 U.S.C. 552b(c)(6). Grant applications are to be reviewed and discussed at these meetings. These discussions are likely to reveal personal information concerning individuals associated with the applications. This information is exempt from mandatory disclosure under the above-cited statutes.

1. *Name of Subcommittee:* Health Care Research Training.
Date: May 16–17, 2002 (Open from 8 a.m. to 8:15 a.m. and closed for remainder of the meeting).
Place: AHRQ, 6010 Executive Boulevard, 4th Floor Conference Center, Rockville, Maryland 20852.
2. *Name of Subcommittee:* Health Care Technology and Decision Sciences.
Date: June 6–7, 2002 (Open from 8 a.m. to 8:15 a.m. and closed for remainder of the meeting).
Place: AHRQ, 6010 Executive Boulevard, 4th Floor Conference Center, Rockville, Maryland 20852.
3. *Name of Subcommittee:* Health Research Dissemination and Implementation.
Date: June 17–18, 2002 (Open from 8 a.m. to 8:15 a.m. and closed for remainder of the meeting).
Place: AHRQ, 6010 Executive Boulevard, 4th Floor Conference Center, Rockville, Maryland 20852.
4. *Name of Subcommittee:* Health Care Quality and Effectiveness Research.
Date: June 20–21, 2002 (Open from 8 a.m. to 8:15 a.m. and closed for remainder of the meeting).
Place: AHRQ, 6010 Executive Boulevard, 4th Floor Conference Center, Rockville, Maryland 20852.
5. *Name of Subcommittee:* Health Systems Research.
Date: June 26–27, 2002 (Open from 8 a.m. to 8:15 a.m. and closed for remainder of the meeting).
Place: AHRQ, 6010 Executive Boulevard, 4th Floor Conference Center, Rockville, Maryland 20852.

Contact Person: Anyone wishing to obtain a roster of members, agenda or minutes of the nonconfidential portions of the meetings should contact Mrs. Bonnie Campbell, Committee Management Officer, Office of Research Review, Education and Policy, AHRQ, 2101 East Jefferson Street, Suite 400, Rockville, Maryland 20852, Telephone (301) 594–1846.

Agenda items for these meetings are subject to change as priorities dictate.

Dated: April 12, 2002.

Carolyn M. Clancy,

Acting Director.

[FR Doc. 02–9605 Filed 4–18–02; 8:45 am]

BILLING CODE 4160–90–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Community-Based Dental Partnership Program Grant Announcement

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of availability of funds.

SUMMARY: The Health Resources and Services Administration (HRSA) announces the availability of fiscal year (FY) 2002 funds to be awarded under the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act Community-Based Dental Partnership Program for grants that support partnerships between dental education programs and community-based dental providers, to provide oral health care to low income, unserved patients with HIV disease. Grants will be awarded for a 3-year period.

Program Purpose

The goals of the Community-Based Dental Partnership Program are to increase access to oral health care for low-income patients with HIV in areas that remain unserved and to increase the number of dental providers capable of managing the oral health needs of patients with HIV, through community-based service-learning experiences. Eligible applicants must work collaboratively with community-based dental providers (such as community-based or faith-based organizations or private practice dental providers that currently provide or plan to provide oral health services) to address unmet oral health needs of unserved populations with HIV. The documentation of unmet HIV oral health needs or unserved HIV positive populations will be based upon data submitted within the application