cases of bad weather or other concurrent emergencies—have delegated such decision making authority to appropriate on-call ORO officials.

OROs may also choose to not include a protective action in the initial message. FEMA guidance at 66 FR 47546, September 12, 2001, permits an initial EAS message that does not contain a protective action but notifies the public of the need to stand by for further information. However, in light of the urgency of a fast-breaking event and the need for immediate response, OROs are strongly encouraged to include a protective action in the initial message. In most fast-breaking events the preferred initial protective action-as described in Supplement 3, "Criteria for Protective Action Recommendations." to NUREG-0654/FEMA-REP-1, Rev. 1, "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants"—is to evacuate immediately about two miles around the plant and about five miles downwind. The exception is a situation where there are other conditions, such as severe weather, that would make evacuation dangerous. In that instance the protective action would be to shelter-inplace.

#### IV. Evaluation Criterion 5.a.2

A. Criterion 5.a.2: In a situation that requires urgent action, responsible OROs demonstrate the capability to initiate public alerting and notification within the plume exposure EPZ within the following timeframes: (1) Notifying State and local officials within approximately 5 minutes of licensee's notification of the offsite communications point or, if in the plan, within approximately 5 minutes of the communication point's verification of the notification and (2) alerting the public and beginning notification of the public within about 15 minutes, but not to exceed 20 minutes, from notification of the State and local official(s). The initial instructional message to the public must include, at a minimum, the elements required by current FEMA REP guidance. (10 CFR part 50, Appendix E.IV.D.3, 44 CFR 350.5(a)(5), and NUREG-0654/FEMA-REP-1, E.5, 6, 7).

B. Demonstration of Fast-breaking Event: Demonstration of the process can be through a biennial exercise or an unannounced drill, separate from the biennial exercises, and will be scheduled within a seven-day window. Responsible parties may be told of the demonstration schedule window, but will not be told of a specific time for the demonstration. Real-life emergencies may preempt the demonstration, and these interruptions will not adversely affect the evaluation. The Extent of Play, shown below, generally establishes the type and level of detail to be demonstrated in the exercise that FEMA will be evaluating for Criterion 5.a.2.

C. Extent of Play: The criterion should be demonstrated using the staff, procedures, and equipment identified in the ORO's plan (for example, the plant notification line, the decision maker's notification system, the actual communications point, and personnel normally assigned to responsible duty locations). Actual activation of the public alerting system or notification system is not necessary. Appropriate simulations may be submitted by the ORO for FEMA's review and approval.

The evaluation begins when the ORO communications point receives the notification in accordance with approved procedures and, if specified in the plan, immediately verifies the notification. The first (approximately 5 minutes) time limit begins. Notification of responsible offsite official(s) should be performed in accordance with approved procedures and evaluated as to its completion within approximately 5 minutes. FEMA will time this period in order to support a judgment as to whether the performance achieved the desired result. The ORO must maintain a duty list showing that appropriate offsite official(s) who are authorized to approve the alerting of the public and broadcast of the EAS message are available at all times. Evaluation as to compliance with the timeframe (about 15 minutes, but no more than 20) begins when the ORO's communications point has completed its notification of the offsite official(s).

Decision making may involve conferring with staff or others, but the amount of time involved must be consistent with achieving the design criterion of about 15 minutes, but not more than 20. The decision making process should result in a decision to alert and notify the public. Activation of the public alerting system and performance of the first sounding cycle should be accomplished in accordance with approved procedures. Completion of the sounding cycle and the beginning of the notification message marks the end of the about 15 minute, but not more than 20, time period. FEMA will time this period in order to support a judgment as to whether the performance achieved the desired result. The information transmitted should be accurate and in accordance with current FEMA guidance.

All activities associated with the response to a fast-breaking event must be based on the ORO's plans and procedures and completed as they would be in an actual emergency, unless noted above or otherwise noted above or indicated in the extent of play agreement.

## V. Frequency of Evaluation

FEMA will evaluate the initial demonstration of the process, using Evaluation Criterion 5.a.2, at every nuclear power plant site over the two years following final publication of this Criterion in the Federal Register. FEMA will assess a Deficiency if the applicable timeframes in the Criterion are not met. FEMA will then evaluate the ORO's capability a minimum of once every two years using Evaluation Criterion 5.a.2. FEMA will assess a Deficiency if the applicable timeframes are not met. In addition, the ORO should conduct a monthly fast-breaker communications drill and provide an annual summary in the Annual Letter of Certification.

Dated: August 12, 2003.

# Michael D. Brown,

Under Secretary, Emergency Preparedness and Response.

[FR Doc. 03–21200 Filed 8–18–03; 8:45 am] BILLING CODE 6718–06–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### National Institutes of Health

# Center for Scientific Review; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), 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/or contract proposals 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 and/or contract proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Center for Scientific Review Special Emphasis Panel Mycoplasma. Date: August 20, 2003.

*Time:* 1 p.m. to 2 p.m.

Agenda: To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call). *Contact Person:* Timothy J. Henry, PhD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 3196, MSC 7848, Bethesda, MD 20892, (301) 435–1147, *henry@csr.nih.gov.* 

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

*Name of Committee:* Center for Scientific Review Special Emphasis Panel Epithelial Protein Review.

*Date:* August 25, 2003.

*Time:* 1 p.m. to 2 p.m.

*Agenda:* To review and evaluate grant applications and/or proposals.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Shirley Hilden, PhD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4218, MSC 7814, Bethesda, MD 20892, (301) 435–1198.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

Name of Committee: Surgery, Radiology and Bioengineering Integrated Review Group, Surgery and Bioengineering Study Section.

Date: October 6–7, 2003.

Time: 8 a.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Holiday Inn Select Bethesda, 8120 Wisconsin Ave, Bethesda, MD 20814.

Contact Person: Dharam S. Dhindsa, DVM, PhD, Scientific Review Administrator, Surgery and Bioengineering Study Section, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5110, MSC 7854, Bethesda, MD 20892, (301) 435–1174, dhindsad@csr.nih.gov.

Name of Committee: Biophysical and Chemical Sciences Integrated Review Group Medicinal Chemistry Study Section.

Date: October 8-9, 2003.

*Time:* 8 p.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications and/or proposals.

*Place:* Holiday Inn Select Bethesda, 8120 Wisconsin Ave, Bethesda, MD 20814.

*Contact Person:* Robert Lees, PHD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4182, MSC 7806, Bethesda, MD 20892, (301) 435– 2684, *leesro@csr.nih.gov.* 

*Name of Committee:* Oncological Sciences Integrated Review Group Tumor Progression and Metastasis Study Section.

*Date:* October 8–10, 2003.

*Time:* 8 a.m. to 6 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Holiday Inn Georgetown, 2101 Wisconsin Avenue, NW, Washington, DC 20007.

*Contact Person:* Martin L. Padarathsingh, PHD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 6212, MSC 7804, Bethesda, MD 20892, (301) 435–1717, padaratm@csr.nih.gov.

Name of Committee: Center for Scientific Review Special Emphasis Panel Fogarty International Clinical Research.

*Date:* October 9–10, 2003.

*Time:* 8 a.m. to 6 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Omni Shoreham Hotel, 2500 Calvert Street, NW, Washington, DC 20008.

Contact Person: Hilary Sigmon, PHD, RN, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5216, MSC 7852, Bethesda, MD 20892, 301–594– 6377, sigmonh@csr.nih.gov.

*Name of Committee:* Molecular, Cellular and Developmental Neuroscience Integrated Review Group Neurodegeneration and Biology of Glia Study Section.

Date: October 9-10, 2003.

*Time:* 8 a.m. to 4 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Latham Hotel, 3000 M Street, NW, Washington, DC 20007.

*Contact Person:* Gillian Einstein, PHD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4148, MSC 7850, Bethesda, MD 20817, (301) 435– 4433, *einsteig@csr.nih.gov.* 

*Name of Committee:* Endocrinology and Reproductive Sciences Integrated Review Group Biochemical Endocrinology Study Section.

Date: October 9, 2003.

*Time:* 8 a.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Holiday Inn Select Bethesda, 8120 Wisconsin Ave, Bethesda, MD 20814.

*Contact Person:* Michael Knecht, PHD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 6176, MSC 7892, Bethesda, MD 20892, (301) 435– 1046.

*Name of Committee:* Biophysical and Chemical Sciences Integrated Review Group Metallobiochemistry Study Section.

Date: October 9–10, 2003.

*Time:* 8:30 a.m. to 4 p.m. *Agenda:* To review and evaluate grant

applications.

*Place:* Churchill Hotel, 1914 Connecticut Avenue, NW, Washington, DC 20009.

*Contact Person:* Janet Nelson, PHD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4168, MSC 7806, Bethesda, MD 20892, 301–435– 1723, *nelsonja@csr.nih.gov*.

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93,846–93.878, 93.892, 93.893, National Institutes of Health, HHS) Dated: August 12, 2003. **LaVerne Y. Stringfield,** Director, Office of Federal Advisory Committee Policy. [FR Doc. 03–21212 Filed 8–18–03; 8:45 am] **BILLING CODE 4140–01–M** 

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## **National Institutes of Health**

## Consensus Development Conference on Total Knee Replacement

Notice is hereby given of the National Institutes of Health (NIH) Consensus Development Conference on "Total Knee Replacement" to be held December 8–10, 2003, in the NIH Natcher Conference Center, 45 Center Drive, Bethesda, Maryland 20892. The conference will begin at 8:30 a.m. on December 8 and 9, and at 9 a.m. on December 10, and will be open to the public.

Total knee replacement (TKR) has shown increasing success in relieving knee pain and improving joint function for patients suffering from knee problems due to injury, degenerative disease, and inflammation. Each year, approximately 300,000 TKR surgeries are performed in the United States for end-stage arthritis of the knee joint. As the number of TKR surgeries performed each year increases and the indications for TKR extend to younger patients, a review of available scientific information is necessary to enhance clinical decision making and stimulate further research.

Despite the increased success of TKR. questions remain concerning which materials and implant designs are most effective for specific patient populations and which surgical approach is optimal for a successful outcome. Physical, social, and psychological issues may influence the success of TKR, and understanding patient differences could facilitate the decision making process before, during, and after surgery, thereby achieving the greatest benefit from TKR. Particular attention also must be given to the treatment and timing options related to the revision of failed TKR surgery.

This two-and-a-half-day conference will examine the current state of knowledge regarding total knee replacement and identify directions for future research.

During the first day-and-a-half of the conference, experts will present the latest research findings on total knee replacement to an independent panel. After weighing all of the scientific