## 3. Reporting

You must provide CDC with an original, plus two copies of the following reports:

1. Interim progress report, (PHS 2590, OMB Number 0925–0001, rev. 5/2001) no less than 90 days before the end of the budget period. The progress report will serve as your non-competing continuation application, and must contain the following elements:

a. Current Budget Period Activities Objectives.

b. Current Budget Period Financial Progress.

c. New Budget Period Program Proposed Activity Objectives.

d. Detailed Line-Item Budget and Justification.

e. Additional Requested Information.

2. Financial status report, no more than 90 days after the end of the budget period.

3. Final financial and performance reports, no more than 90 days after the end of the project period.

These reports must be sent to the Grants Management Specialist listed in the "Agency Contacts" section of the announcement.

#### VII. Agency Contacts

For general questions about this announcement, contact: Technical Information Management Section, PA#04062, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341. Telephone: 770– 488–2700.

For scientific/research program technical assistance, contact: William K. Ramsey, Project Officer, Division of Injury and Disability Outcomes and Programs, Centers for Disease Control and Prevention, 4770 Buford Highway, Mail Stop F–41, Chamblee, GA 30341. Telephone: 770–488–1226; e-mail: BRamsey1@cdc.gov.

For questions about peer review, contact: Gwendolyn Cattledge, Scientific Review Administrator, Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, 4770 Buford Highway, NE., MailStop K–02, Atlanta, GA 30341. Telephone: 770–488–1430; email: gxc8@cdc.gov.

For budget assistance, contact: Angie Nation, Grants Management Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341. Telephone: 770–488–2719; email: *aen4@cdc.gov*. Dated: December 4, 2003.

# Edward Schultz,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

[FR Doc. 03–30583 Filed 12–9–03; 8:45 am] BILLING CODE 4163–18–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

## Radiation and Worker Health Advisory Board Meeting; Correction

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following committee meeting:

**AGENCY:** Advisory Board on Radiation and Worker Health (ABRWH), National Institute for Occupational Safety and Health (NIOSH), HHS.

## **ACTION:** Correction.

*Correction:* In the **Federal Register** of November 17, 2003, in DOCID: fr17n003–102, Volume 68, Number 221, Page 64902, concerning the purpose for closing a portion of the meeting of the Advisory Board on Radiation and Worker Health, the notice cited an incorrect reason for the meeting closure. Correct "Matters to be Discussed" to read:

The closed portion of the meeting on the afternoon of December 10th will involve a review and discussion of the Independent Government Cost Estimate (IGCE) for task order contracts and proposals of work for the performance of these task order contracts, which could lead to a revision of the IGCE. These contracts will serve to provide technical support consultation to assist the ABRWH in fulfilling its statutory duty to advise the Secretary of Health and Human Services on the scientific validity and quality of dose estimation and reconstruction efforts under the Energy Employees Occupational Illness Compensation Program Act. These discussions will include reviews of the technical proposals to determine adequacy of the proposed approach, and associated contract cost estimates.

This portion of the meeting will be closed to the public in accordance with provisions set forth regarding subject matter considered confidential under the terms of 5 U.S.C. 552b(c)(9)(B), 48 CFR 5.401(b)(1) and (4), and 48 CFR 7.304(d)., and the Determination of the Director of the Management and Services Office, Centers for Disease Control and Prevention, pursuant to Pub. L. 92–463.

FOR FURTHER INFORMATION CONTACT: Larry Elliott, Executive Secretary, ABRWH, NIOSH, CDC, 4676 Columbia Parkway, Cincinnati, Ohio 45226, telephone (513) 533–6825, fax (513) 533–6826.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: December 5, 2003.

#### Alvin Hall,

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

[FR Doc. 03–30681 Filed 12–9–03; 8:45 am] BILLING CODE 4163–19–P

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Food and Drug Administration

[Docket No. 2002D-0428]

#### Guidance for Industry: An Acceptable Circular of Information for the Use of Human Blood and Blood Components; Availability

**AGENCY:** Food and Drug Administration, HHS.

#### **ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing the availability of a document entitled "Guidance for Industry: An Acceptable Circular of Information for the Use of Human Blood and Blood Components" dated December 2003. The guidance document recognizes the "Circular of Information for the Use of Human Blood and Blood Components" (the circular) dated July 2002 as acceptable for use by manufacturers of blood and blood components intended for transfusion. The circular will assist manufacturers in complying with the labeling requirements under FDA regulations. The guidance announced in this notice finalizes the draft guidance of the same title dated October 2002.

**DATES:** Submit written or electronic comments on agency guidances at any time.

**ADDRESSES:** Submit written requests for single copies of the guidance to the Office of Communication, Training, and Manufacturers Assistance (HFM–40),

Center for Biologics Evaluation and Research (CBER), Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852–1448. Send one self-addressed adhesive label to assist the office in processing your requests. The guidance may also be obtained by mail by calling the CBER Voice Information System at 1–800–835–4709 or 301–827–1800. See the

**SUPPLEMENTARY INFORMATION** section for electronic access to the guidance document.

Submit written comments on the guidance to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. Submit electronic comments to *http:// www.fda.gov/dockets/ecomments*.

FOR FURTHER INFORMATION CONTACT: Valerie A. Butler, Center for Biologics Evaluation and Research (HFM–17), Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852– 1448, 301–827–6210.

# SUPPLEMENTARY INFORMATION:

#### I. Background

FDA is announcing the availability of a document entitled "Guidance for Industry: An Acceptable Circular of Information for the Use of Human Blood and Blood Components" dated December 2003. The guidance recognizes that the circular dated July 2002 meets the labeling requirements in § 606.122 (21 CFR 606.122) and is acceptable for use by manufacturers of blood and blood components intended for transfusion that are subject to U.S. statutes and regulations. The circular was prepared jointly by the American Association of Blood Banks, America's Blood Centers, and the American National Red Cross. A copy of the circular is included as an attachment in

the guidance document. The guidance announced in this notice finalizes the draft guidance of the same title, dated October 2002 (67 FR 64402, October 18, 2002).

The guidance is being issued consistent with FDA's good guidance practices regulation (21 CFR 10.115). The guidance document represents the agency's current thinking on this topic. 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 statutes and regulations.

#### **II. Comments**

Interested persons may submit to the Division of Dockets Management (see **ADDRESSES**) written or electronic comments regarding this guidance. Submit a single copy of electronic comments or two paper copies of any mailed comments, except individuals may submit one paper copy. Comments should be identified with the docket number found in brackets in the heading of this document. A copy of the guidance and received comments are available for public examination in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday.

#### **III. Electronic Access**

Persons with access to the Internet may obtain the guidance and the circular at either http://www.fda.gov/ cber/guidelines.htm or http:// www.fda.gov/ohrms/dockets/ default.htm. The circular may also be obtained at http://www.aabb.org. (FDA has verified the Web site address, but we are not responsible for subsequent changes to the Web site after this document publishes in the **Federal Register**.)

Dated: December 1, 2003.

# Jeffrey Shuren,

Assistant Commissioner for Policy. [FR Doc. 03–30644 Filed 12–9–03; 8:45 am] BILLING CODE 4160–01–S

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Office of Inspector General

#### **Program Exclusions: November 2003**

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

**ACTION:** Notice of program exclusions.

During the month of November 2003, 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, and all Federal Health Care 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.

OFFICE OF INVESTIGATION, OFFICE OF INSPECTOR GENERAL—DHHS, CASE INVESTIGATION MANAGEMENT SYSTEM [For Press Release From 11/01/2003—11/30/2003]

Subject name	Address	Effective date
PROGRAM-RELATED CONVICTIONS:		
ALLEN, KENNETH	JUNCTION, UT	12/18/2003
ALMO, JENNIFER		12/18/2003
ALVARENGA, MARIA		12/18/2003
ARRIOLA, ALÍCIA		12/18/2003
ATTIKIAN, ARMEN	VAN NUYS, CA	12/18/2003
BARMORE, BURTON	GOLDSBORO, NC	12/18/2003
BELL, DIANE		12/18/2003
BIRMINGHAM REHABILITATION & PHYSICAL THERAPY CTR, INC	BLOOMFIELD, MI	12/18/2003
BRADLEE PHARMACY, INC	LAS VEGAS, NV	12/18/2003
BURDEN, MARGARET		12/18/2003
CORE, NICKLAUS		12/18/2003
EMMONS, ROSLYN		12/18/2003
GAZO, MARIA	NORWALK, CA	12/18/2003
GOFF, ELBERT		12/18/2003
GRAHAM, CARLIN		12/18/2003
HEWETT, NANCY		12/18/2003
ISMAIL, MOHAMED		12/18/2003