

has taken final action in the following case:

*Adam C. Savine, Washington University in St. Louis:* Based on the report from Washington University in St. Louis (WUSTL) and Respondent's admission, ORI found that Mr. Adam C. Savine, former doctoral student, Department of Psychology, WUSTL, engaged in research misconduct in research supported by National Institute of Mental Health (NIMH), National Institutes of Health (NIH), grant R56 MH066078, National Institute on Drug Abuse (NIDA), NIH, grants F31 DA032152 and R21 DA027821, and National Institute on Aging (NIA), NIH, grant T32 AG00030.

ORI found that the Respondent engaged in research misconduct by falsifying data that were included in the following three publications and six conference abstracts:

#### Publications

1. Savine, A.C., & Braver, T.S. "Local and global effects of motivation on cognitive control." *Cogn Affect Behav Neurosci.* 12(4):692–718, 2012 Dec. (hereafter referred to as *Cogn Affect Behav Neurosci.* 2012).

2. Savine, A.C., McDaniel, M.A., Shelton, J.T., Scullin, M.K. "A characterization of individual differences in prospective memory monitoring using the Complex Ongoing Serial Task." *J Exp Psychol Gen.* 141(2):337–62, 2012 May (hereafter referred to as *J Exp Psychol Gen.* 2012).

3. Savine, A.C., & Braver, T.S. "Motivated cognitive control: Reward incentives modulate preparatory neural activity during task-switching." *J Neurosci.* 30(31):10294–305, 2010 Aug 4 (hereafter referred to as *J Neurosci.* 2010).

#### Conference Abstracts

1. Savine, A.C., & Braver, T.S. (November 2010) "The contextual and local effects of motivation on cognitive control." Psychonomics Society, St. Louis, MO.

2. Savine, A.C., & Braver, T.S. (November 2010) "A model-based characterization of the individual differences in prospective memory monitoring." Psychonomics Society, St. Louis, MO.

3. Savine, A.C., & Braver, T.S. (November 2010) "Motivated cognitive control: Reward incentives modulate preparatory neural activity during task-switching." Society for Neuroscience, San Diego, CA.

4. Savine, A.C., & Braver, T.S. (June 2010) "Motivated cognitive control: Reward incentives modulate preparatory neural activity during task-switching." Motivation and Cognitive Control Conference, Oxford, England.

5. Savine, A.C., & Braver, T.S. (January 2010) "Neural correlates of the motivation/cognitive control interaction: Activation dynamics and Performance prediction during task-switching." Genetic and Experiential Influences on Executive Function, Boulder, CO.

6. Savine, A.C., & Braver, T.S. (June 2009) "Incentive Induced Changes in Neural

Patterns During Task-Switching." Organization for Human Brain Mapping, San Francisco, CA.

As a result of the Respondent's admission, the senior authors will request that the published papers be retracted or corrected.

ORI finds that Respondent falsified data and related text in *Cogn Affect Behav Neurosci.* 2012, *J Exp Psychol Gen.* 2012, *J Neurosci.* 2010, and in six (6) meeting abstracts, by altering the experimental data to improve the statistical results. Specifically, Respondent:

1. Falsified data in *Cogn Affect Behav Neurosci.* 2012 to show an unambiguous dissociation between local and global motivational effects. Specifically, Respondent exaggerated (1) the effect of incentive context on response times and error rates in Table 1 and Figures 1 and 3 for experiment 1 and (2) the effect of incentive cue timing on response times and error rates in Table 2 and in Figures 6, 9, and S2 for experiment 2.

2. Falsified data in *J Exp Psychol Gen.* 2012 to show that prospective memory is influenced by three dissociable underlying monitoring patterns (attentional focus, secondary memory retrieval, information thresholding), which are stable within individuals over time and are influenced by personality and cognitive differences. Specifically, Respondent modified the data to support the three category model and to show (1) that individuals fitting into each of the three categories exhibited differential patterns of prospective memory performance and ongoing task performance in Tables 1–3; Figures 5–8, and (2) that certain cognitive and personality differences were predictive of distinct monitoring approaches within the three categories in Figure 9.

3. Falsified data in *J Neurosci.* 2010 and mislabeled brain images to show that motivational incentives enhance task-switching performance and are associated with activation of reward-related brain regions, behavioral performance, and trial outcomes. Specifically, Respondent modified the data so that he could show a stronger relationship between brain activity and behavior in Table 2 and Figure 4 and used brain images that fit the data rather than the images that corresponded to the actual Talairach coordinates in Figure 3.

Mr. Savine has entered into a Voluntary Settlement Agreement and has voluntarily agreed for a period of three (3) years, beginning on February 22, 2013:

(1) To have his research supervised; Respondent agreed that prior to the submission of an application for U.S.

Public Health Service (PHS) support for a research project on which his participation is proposed and prior to his participation in any capacity on PHS-supported research, Respondent shall ensure that a plan for supervision of his duties is submitted to ORI for approval; the supervision plan must be designed to ensure the scientific integrity of his research contribution; he agreed that he shall not participate in any PHS-supported research until such a supervision plan is submitted to and approved by ORI; Respondent agreed to maintain responsibility for compliance with the agreed upon supervision plan;

(2) That any institution employing him shall submit, in conjunction with each application for PHS funds, or report, manuscript, or abstract involving PHS-supported research in which Respondent is involved, a certification to ORI that the data provided by Respondent are based on actual experiments or are otherwise legitimately derived and that the data, procedures, and methodology are accurately reported in the application, report, manuscript, or abstract;

(3) To exclude himself voluntarily 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

(4) That the senior authors will request that the following papers be retracted or corrected: *Cogn Affect Behav Neurosci.* 2012, *J Exp Psychol Gen.* 2012, and *J Neurosci.* 2010.

**FOR FURTHER INFORMATION CONTACT:** Director, Office of Research Integrity, 1101 Wootton Parkway, Suite 750, Rockville, MD 20852, (240) 453–8200.

**David E. Wright,**

*Director, Office of Research Integrity.*

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**BILLING CODE 4150–31–P**

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

##### Meeting of the Advisory Group on Prevention, Health Promotion, and Integrative and Public Health

**AGENCY:** Department of Health and Human Services, Office of the Secretary, Office of the Assistant Secretary for Health, Office of the Surgeon General of the United States Public Health Service.

**ACTION:** Notice.

**SUMMARY:** In accordance with Section 10(a) of the Federal Advisory Committee Act, Public Law 92–463, as amended (5 U.S.C. App.), notice is hereby given that a meeting is scheduled to be held for the

Advisory Group on Prevention, Health Promotion, and Integrative and Public Health (the "Advisory Group"). The meeting will be open to the public. Information about the Advisory Group and the agenda for this meeting can be obtained by accessing the following Web site: <http://www.surgeongeneral.gov/initiatives/prevention/advisorygrp/index.html>

**DATES:** The meeting will be held on March 28–29, 2013. Exact start and end times will be published closer to the meeting date at: <http://www.surgeongeneral.gov/initiatives/prevention/advisorygrp/index.html>.

**ADDRESSES:** 200 Independence Ave., SW., Room 505A, Washington, DC 20201.

**FOR FURTHER INFORMATION CONTACT:**

Office of the Surgeon General, 200 Independence Ave., SW.; Hubert H. Humphrey Building, Room 701H; Washington, DC 20201; 202–205–9517; [prevention.council@hhs.gov](mailto:prevention.council@hhs.gov).

**SUPPLEMENTARY INFORMATION:** On June 10, 2010, the President issued Executive Order 13544 to comply with the statutes under Section 4001 of the Patient Protection and Affordable Care Act, Public Law 111–148. This legislation mandated that the Advisory Group was to be established within the Department of Health and Human Services. The charter for the Advisory Group was approved by the Secretary of Health and Human Services on June 23, 2010; the charter was filed with the appropriate Congressional committees and the Library of Congress on June 24, 2010. The Advisory Group was established as a non-discretionary federal advisory committee. The Advisory Group was authorized to operate until June 10, 2012. Because the Advisory Group had been established by Presidential directive, it was necessary for appropriate action to be taken by the President or agency head to give authorization for the Advisory Group to be continued. The President issued Executive Order 13591, dated November 23, 2011, to give authorization for the Advisory Group to continue to operate until September 30, 2012. No action was taken to continue the Advisory Group after the designated date. Therefore, the Advisory Group was terminated on September 30, 2012. On December 7, 2012, the President issued Executive Order 13631 to re-establish the Advisory Group. A charter was developed for this purpose. The charter was approved by the Secretary of Health and Human Services and filed with the appropriate Congressional committees, the Library of Congress, and the Committee

Management Secretariat under the General Services Administration on February 6, 2013. The Advisory Group has been re-established as a non-discretionary federal advisory committee.

Under Executive Order 13631, authorization is given for the Advisory Group to continue to operate as if the Committee had not been terminated on September 30, 2012. The Advisory Group will continue to provide recommendations and advice to the National Prevention, Health Promotion and Public Health Council (the "Council"). The Advisory Group will continue to provide assistance to the Council in carrying out its mission. Under the existing directive, the Advisory Group is authorized to continue to operate until September 30, 2013.

The Advisory Group membership shall consist of not more than 25 non-federal members to be appointed by the President. The membership shall include a diverse group of licensed health professionals, including integrative health practitioners who have expertise in (1) Worksite health promotion; (2) community services, including community health centers; (3) preventive medicine; (4) health coaching; (5) public health education; (6) geriatrics; and (7) rehabilitation medicine. There are currently 22 members of the Advisory Group appointed by the President. This will be the seventh meeting of the Advisory Group.

Public attendance at the meeting is limited to the space available. Members of the public who wish to attend must register by 12:00 p.m. EST on March 18, 2013. Individuals should register for public attendance at [prevention.council@hhs.gov](mailto:prevention.council@hhs.gov) by providing your full name and affiliation. Individuals who plan to attend the meeting and need special assistance and/or accommodations, i.e., sign language interpretation or other reasonable accommodations, should indicate so when they register. The public will have the opportunity to provide comments to the Advisory Group on March 29, 2013; public comment will be limited to 3 minutes per speaker. Registration through the designated contact for the public comment session is also required. Any member of the public who wishes to have printed materials distributed to the Advisory Group for this scheduled meeting should submit material to the designated point of contact no later than 12:00 p.m. EST on March 18, 2013.

Dated: February 20, 2013.

**Corinne M. Graffunder,**

*Designated Federal Officer, Advisory Group on Prevention, Health Promotion, and Integrative and Public Health, Office of the Surgeon General.*

[FR Doc. 2013–05212 Filed 3–6–13; 8:45 am]

**BILLING CODE 4163–18–P**

## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **Solicitation of Nominations to the Presidential Advisory Council on HIV/AIDS**

**AGENCY:** Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice.

**AUTHORITY:** Executive Order 12963, dated June 14, 1995, as amended by Executive Order 13009, dated June 14, 1996; and Section 222 of the Public Health Service Act (42 U.S.C. 217a). The Presidential Advisory Council on HIV/AIDS (referred to as PACHA and/or the Council) is governed by provisions of Public Law 92–463, as amended (5 U.S.C. App.), which sets forth standards for the formation and use of advisory committees.

**SUMMARY:** The Office of the Assistant Secretary for Health (OASH) is seeking nominations of qualified individuals to be considered for appointment as members of the Presidential Advisory Council on HIV/AIDS (PACHA). The PACHA is a federal advisory committee within the Department of Health and Human Services (HHS). Management support for the activities of the Council is the responsibility of the OASH. The qualified individuals will be nominated to the Secretary of Health and Human Services for consideration for appointment as members of the PACHA. Members of the Council, including the Chair, are appointed by the Secretary. Members are invited to serve on the Council for up to four-year terms. The Council was established to provide advice, information, and recommendations to the Secretary regarding programs and policies intended to promote effective prevention of HIV disease and AIDS. The functions of the Council are solely advisory in nature.

**DATES:** All nominations must be received no later than 5:00 p.m. EDT on April 1, 2013 at the address listed below.

**ADDRESSES:** All nominations should be mailed or delivered to Ms. B. Kaye Hayes, Executive Director, PACHA,