as well as summaries of the meeting and a roster of committee members may be obtained from James Scanlon, NCVHS Executive Staff Director, Office of the Assistant Secretary for Planning and Evaluation, DHHS, Room 444–D. Humphrey Building, 200 Independence Avenue S.W., Washington, D.C. 20201, telephone (202) 690–7100, or Marjorie S. Greenberg, Acting Executive Secretary, NCVHS, NCHS, CDC, Room 1100, Presidential Building, 6525 Belcrest Road, Hyattsville, Maryland 20782, telephone (301) 436–7050. Information also is available on the NCVHS homepage: http://aspe.os.dhhs.gov/ncvhs/index.htm.

Dated: January 2, 1997.

James Scanlon,

Director, Division of Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 97–434 Filed 1–8–97; 8:45 am]

BILLING CODE 4151–04–M

Centers for Disease Control and Prevention

Epidemiology Program Office, Office of the Director, Centers for Disease Control and Prevention (CDC), Notice of Meeting

Name: Guide to Community Preventive Services Task Force Meeting.

Times and Dates: 8:30 a.m.–5 p.m., January 27, 1997; 8:30 a.m.–5 p.m., January 28, 1997.

Place: Terrace Garden Inn, 3405 Lenox Road, NE, Atlanta, Georgia 30326.

Status: Open to the public, limited only by the space available.

Purpose: The mission of the Task Force is to develop and publish a Guide to Community Preventive Services, which is based on the best available scientific evidence and current expertise regarding essential public health services and what works in the delivery of those services. The primary purpose of this second meeting is to continue in the development of a shared vision for the Guide; review and assess the methods used in the initial development of the first two chapters; and to select additional topics to be included in the Guide.

Matters to be Discussed: Agenda items include the definition of ''community'' for the Guide; defining target audiences of the Guide; process for selection of topics to be included in the Guide; updates on current chapters in progress: the prevention of (a) motor vehicle injuries and (b) vaccine preventable diseases; and selection of new topics for upcoming chapters.

Agenda items are subject to change as priorities dictate.

FOR ADDITIONAL INFORMATION CONTACT: Marguerite Pappaioanou, Chief, Community Preventive Service Guide Development Activity, Division of Prevention Research and Analytic Methods, Epidemiology Program Office, CDC, 1600 Clifton Road, NE, M/S D–01, Atlanta, Georgia 30333, telephone 404/639–4301.

Persons wishing to reserve a space for this meeting should call 404/639–4311 by close of business on January 21, 1997.

Dated: January 3, 1997.

Joseph E. Salter

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

[FR Doc. 97–467 Filed 1–8–97; 8:45 am]

BILLING CODE 4163–18–P

National Center for Environmental Health (NCEH) of the Centers for Disease Control and Prevention (CDC); Notice of Meeting

Name: Translating Advances in Genetics into Public Health Action.

Times and Dates: 10 a.m.–5:30 p.m., January 27, 1997; 8 a.m.–3 p.m., January 28, 1997.

Place: Terrace Garden Hotel, 3405 Lenox Road, NE, Atlanta, Georgia 30326.

Status: Open to the public, limited only by the space available.

Purpose: CDC has established a Task Force on Genetics in Disease Prevention to: (1) develop a strategic plan for CDC-wide genetics programs, (2) coordinate and support program efforts, and (3) convene constituents and consultants for their individual advice on strategic planning, priorities for CDC activities, and policy development. This Task Force was formed in October, and is in the process of collecting and summarizing information about CDC efforts related to genetics that will be used during strategic planning.

This meeting will enable invited participants (individuals from academia, public health, professional organizations, consumer groups, and industry) to provide input and discuss strategic planning issues and needs associated with the translation of advances in genetics into public health action. Information gained from this meeting will be considered, along with that previously received, in drafting strategic planning documents. These documents will then be distributed for further comment.

Matters to be Discussed: Agenda items include discussions on population-based assessment functions, development of public health policies and guidelines, quality assurance and prevention effectiveness functions, and needs for professional education and information dissemination efforts.

Agenda items are subject to change as priorities dictate.

FOR FURTHER INFORMATION CONTACT: Dometa Williams, Genetics Task Force, NCEH, CDC, 4770 Buford Highway, NE, Atlanta, Georgia 30341, telephone 770/488–7120, FAX 770/488–7197.

Dated: January 3, 1997.

Joseph E. Salter,

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

[FR Doc. 97–460 Filed 1–8–97; 8:45 am]

BILLING CODE 4163–18–P

Food and Drug Administration

[Docket No. 97N–0003]

Hoffman-LaRoche, Inc., et al.; Withdrawal of Approval of 11 New Drug Applications, 1 Abbreviated Antibiotic Application, and 20 Abbreviated New Drug Applications

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is withdrawing approval of 11 new drug applications (NDA's), 1 abbreviated antibiotic application (AADA), and 20 abbreviated new drug applications (ANDA's). The holders of the applications notified the agency in writing that the drug products were no longer marketed and requested that the approval of the applications be withdrawn.

EFFECTIVE DATE: February 10, 1997.

FOR FURTHER INFORMATION CONTACT: Olivia A. Vieira, Center for Drug Evaluation and Research (HFD–7), Food and Drug Administration, 7500 Standish Pl., Rockville, MD 20855, 301–594–1046.

SUPPLEMENTARY INFORMATION: The holders of the applications listed in the table in this document have informed FDA that these drug products are no longer marketed and have requested that FDA withdraw approval of the applications. The applicants have also, by their request, waived their opportunity for a hearing.

Application no.	Drug	Applicant
NDA 6–525	Gantrisin (sulfisoxazole) Tablets	Hoffman-La Roche, Inc., 340 Kingsland St., Bldg. 719–4, Nutley, NJ 07110.
NDA 12–486	Taractan (chlorprothixene) Tablets	Do.
NDA 12–772	Haldrone (paramethasone acetate) Tablets	Eli Lilly and Co., Lilly Corporate Center, Indianapolis, IN 46285.

Application no.	Drug	Applicant
NDA 12–966	Masterone (dromostanolone propionate)	Hoffman-La Roche, Inc.
NDA 13–071	Libritabs (chlordiazepoxide) Tablets, 5, 10, 25 milligrams (mg).	Do.
NDA 13–664	GANTANOL (sulfamethoxazole) Suspension	Do.
NDA 16–109	Sinubid (acetaminophen, phenylpropanolamine HCl, and phenyltoloxamine citrate) Extended Release Tablets.	Parke-Davis, 2800 Plymouth Rd., Ann Arbor, MI 48105.
NDA 16–943	Halotex (haloprogin) 1% Solution	Westwood-Squibb Pharmaceuticals, Inc.,100 Forest Ave., Buffalo, NY 14213–1091.
NDA 17–914	OTIC–TRIDESILON (desonide-acetic acid) Solution 0.05%	Bayer Corp., 400 Morgan Ln., West Haven, CT 06516–4175.
NDA 18–366	Chymex (bentiromide) Solution	Savage Laboratories, Division of Altana, Inc., 60 Baylis Rd., Melville, NY 11747.
NDA 18–470	Cibacalcin (calcitonin-human, for injection)	Ciba-Geigy Corp., Summit, NJ 07901.
AADA 62–078	Ampicillin Trihydrate (bulk)	Sandoz Pharmaceuticals, 59 Route 10, East Hanover, NJ07936–1080.
ANDA 70–120	Propranolol Hydrochloride Tablets, 10 mg	Schering Corp., 2000 Galloping Hill Rd., Kenilworth, NJ 07033.
ANDA 70–121	Propranolol Hydrochloride Tablets, 20 mg	Do.
ANDA 70–122	Propranolol Hydrochloride Tablets, 40 mg	Do.
ANDA 70–123	Propranolol Hydrochloride Tablets, 60 mg	Do.
ANDA 70–124	Propranolol Hydrochloride Tablets, 80 mg	Do.
ANDA 85–288	Acetaminophen and Codeine Phosphate Tablets USP, 300 mg/30 mg.	KV Pharmaceutical Co., 2503 South Hanley Rd., St. Louis, MO 63144–2555.
ANDA 85–484	Chlorpromazine Hydrochloride Tablets, USP, 50 mg	Do.
ANDA 85–748	Chlorpromazine Hydrochloride Tablets, USP, 200 mg	Do.
ANDA 85–750	Chlorpromazine Hydrochloride Tablets, USP, 10 mg	Do.
ANDA 85–751	Chlorpromazine Hydrochloride Tablets, USP, 25 mg	Do.
ANDA 85–752	Chlorpromazine Hydrochloride Tablets, USP, 100 mg	Do.
ANDA 87–819	Hydroxyzine Hydrochloride Tablets, USP, 10 mg	Do.
ANDA 87–820	Hydroxyzine Hydrochloride Tablets, USP, 25 mg	Do.
ANDA 87–821	Hydroxyzine Hydrochloride Tablets, USP, 50 mg	Do.
ANDA 87–822	Hydroxyzine Hydrochloride Tablets, USP, 100 mg	Do.
ANDA 88–344	Triprolidine Hydrochloride Pseudoephedrine Hydrochloride Syrup, 1.25 mg/30 mg per 5 milliliters (mL).	H. R. Cenci Laboratories, Inc., P.O. Box 12524, Fresno, CA 93778–2524.
ANDA 88–814	Promethazine with Codeine Syrup (Promethazine Hydrochloride and Codeine Phosphate Oral Solution, 6.25 mg/10 mg/5 mL).	Do.
ANDA 88–815	Promethazine VC Plain Syrup (Promethazine Hydrochloride and Phenylephrine Hydrochloride Oral Solution, 6.25 mg/5 mg/5 mL).	Do.
ANDA 88–816	Promethazine Hydrochloride, Phenylephrine Hydrochloride, Codeine Phospate Syrup, 6.25 mg/5 mg/10 mg per 5 mL.	Do.
ANDA 89–018	Triprolidine Hydrochloride Pseudoephedrine Hydrochloride and Codeine Phosphate Cough Syrup, 1.25 mg/30 mg/10 mg per 5 mL.	Do.

Therefore, under section 505(e) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(e)) and under authority delegated to the Director, Center for Drug Evaluation and Research (21 CFR 5.82), approval of the applications listed in the table in this document, and all amendments and supplements thereto, is hereby withdrawn, effective February 10, 1997.

Dated: December 30, 1996.

Janet Woodcock,

Director, Center for Drug Evaluation and Research.

[FR Doc. 97–524 Filed 1–8–97; 8:45 am]

BILLING CODE 4160–01–F

Health Care Financing Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, has submitted to the Office of Management and Budget (OMB) the following proposals for the collection of information. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

1. *Type of Request:* Revision of a currently approved collection; *Title of Information Collection:* Statistical Report on Medical Care: Eligibles, Recipients, Payments and Services; *Form No.:* HCFA–2082; *Use:* The data reported in the HCFA–2082 are the basis of actuarial forecasts for Medicaid service utilization and costs; of analysis and cost savings estimates required for legislative initiatives relating to