

underwriting and dealing to a limited extent in all types of equity securities, other than ownership interest in open-end investment companies; making, acquiring and servicing loans and other extensions of credit, pursuant to § 225.28(b)(1) of Regulation Y; providing investment and financial advisory services, pursuant to § 225.28(b)(6) of Regulation Y; arranging commercial or industrial real estate equity financing, pursuant to § 225.28(b)(2)(ii) of Regulation Y; underwriting and dealing in obligations of the United States and Canada, general obligations of U.S. States, Canadian provinces, and their political subdivisions, and other obligation in which state member banks may underwrite and deal under 12 U.S.C. 24 and 335, pursuant to § 225.28(b)(8) of Regulation Y; and providing securities brokerage, private placement, and riskless principal services, pursuant to § 225.28(b)(7)(i), (ii), and (iii) of Regulation Y. The proposed activities are currently being conducted, directly or indirectly, by the subject entities with Board approval. (See *Bank of Boston Corp.*, 83 Fed. Res. Bull. 42 (1997) and *Bank America Corp.*, 83 Fed. Res. Bull. 1008 (1997)).

Board of Governors of the Federal Reserve System, June 25, 1998.

Robert deV. Frierson,

Associate Secretary of the Board.

[FR Doc. 98-17453 Filed 6-30-98; 8:45 am]

BILLING CODE 6210-01-F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Findings of Scientific Misconduct; Terry D. Reisine, Ph.D.

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: Notice is hereby given that the Office of Research Integrity (ORI) has made a final finding of scientific misconduct in the following case:

Terry D. Reisine, Ph.D., University of Pennsylvania: Based upon "The Dean's Proposed Findings of Fact" and "Memorandum on Issues Not Fully Addressed in Findings of Fact," forwarded to ORI by the University of Pennsylvania, dated October 25, 1996 (Findings and Memorandum), and ORI's oversight review of the evidence provided, ORI finds that Terry D. Reisine, Ph.D., former Professor, Department of Pharmacology, University of Pennsylvania, engaged in scientific misconduct in biomedical

research supported by Public Health Service (PHS) grants.

Specifically, ORI finds that the Respondent falsified results related to the measurement of cyclic AMP in cultured, transfected cells by falsely representing in manuscripts and publications the number of experiments conducted, and by falsifying and/or fabricating some of the substantive data presented in those manuscripts and publications. Moreover, ORI finds that the Respondent attempted to falsify data by directing members of his laboratory to construct figures and tables with false values in the preparation of manuscripts.

Dr. Reisine has entered into a Voluntary Exclusion Agreement with ORI. The settlement is not an admission of liability on the part of the Respondent, and Dr. Reisine denies having committed scientific misconduct. Pursuant to the Agreement, Dr. Reisine has agreed to the following:

(1) Respondent agreed to exclude himself voluntarily for a period of three (3) years beginning on June 11, 1998, 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).

(2) Respondent agreed 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 for a period of three (3) years, beginning on June 11, 1998.

(3) Within 30 days of the effective date of the Agreement, Respondent agreed to submit letters to the following journals requesting correction of the corresponding articles. The corrections are warranted by the following findings of the Findings and Memorandum:

a. The Journal of Biological Chemistry

Kong, H., Raynor, K., Yasuda, K., Moe, S.T., Portoghese, P.S., Bell, G.I., and Reisine, T. "A single residue, aspartic acid 95, in the gamma opioid receptor specifies selective high affinity agonist binding." *J. Biol. Chem.* 268:23055-23058, 1993.

i. The results in Table 1 are stated in the table legend to be based on four (4) experiments with calculated SEM values and Hill coefficients when, in fact, the majority of the listed compounds were tested only once, and a few tested only twice.

ii. Figure 2 data are stated in the figure legend to be the means of three (3) different experiments when, in fact, most of the results were based on a single experiment.

b. The Journal of Pharmacology and Experimental Therapeutics

Raynor, K., Kong, H., Hines, J., Kong, G., Benevoc, J., Yasuda, K., Bell, G.I., and Reisine, T. "Molecular mechanisms of agonist-induced desensitization of the cloned mouse kappa opioid receptor." *J. Pharmacol. Exp. Ther.* 270:1381-1386, 1994.

i. The figure legend for Figures 3A, 3C, and 3D claimed that the values shown were the average of three (3) different experiments when, in fact, the results were from only one (1) experiment.

ii. The figure legend for Figure 4B claimed that the values shown were the average of four (4) different experiments when, in fact, the results were from only three (3) experiments.

iii. Figures 3A, 3C, and 3D each show several levels of adenylyl cyclase inhibition that do not reflect the actual results obtained in duplicate cyclic AMP assays.

c. Molecular Pharmacology

Reisine, T., Kong, H., Raynor, K., Yano, H., Takeda, J., Yasuda, K., and Bell, G.I. "Splice variant of the somatostatin receptor 2 subtype, somatostatin receptor 2B, couples to adenylyl cyclase." *Mol. Pharmacol.* 44:1016-1020, 1994.

i. The legend for Figure 3A claims that three (3) experiments were performed when, in fact, only two (2) experiments were performed for the SSTR2B mutants.

ii. The legend for Figure 3B claims that the values presented are the average of two (2) different experiments when, in fact, the inhibition curve shown was based on a single experiment.

FOR FURTHER INFORMATION CONTACT:

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

Dorothy K. Macfarlane,

Acting Director, Office of Research Integrity.

[FR Doc. 98-17411 Filed 6-30-98; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

[Program Announcement 98095]

Enhancement of Local Public Health Departments Participation in Brownfields Decisions and Actions; Notice of Availability of Funds

Introduction

The Agency for Toxic Substances and Disease Registry (ATSDR) announces the availability of fiscal year (FY) 1998 funds for a cooperative agreement program for a pilot activity with a select number of local health departments to demonstrate effective public health

interventions around Brownfields properties.

ATSDR is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority area of Environmental Health. (For ordering a copy of Healthy People 2000, see the section Where to Obtain Additional Information.)

ATSDR is also fully committed to implementing the President's Executive Order 12898 on Environmental Justice to ensure the full representation and participation on all levels, of minority and low-income population groups.

Authority

This program is authorized under Sections 104 (i) (4), (6), (7), (14), and (15) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA), as amended by the Superfund Amendments and Reauthorization Act of 1986 (SARA) [42 U.S.C. 9604 (i)(4), (6), (7), (14), and (15)].

Smoke-Free Workplace

ATSDR strongly encourages all grant and cooperative agreement recipients to provide a smoke-free workplace and promote the non-use of all tobacco products, and Public Law 103-227, the Pro Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.

Eligible Applicants

Applicants will be limited to the official county, city and other local public health agencies of local communities (with the exception of Rhode Island where the State Health Department is the eligible applicant) located in the sixteen (16) Brownfields Showcase Communities as designated by the Environmental Protection Agency (EPA) (62 FR 44274). The Brownfields Showcase Communities are:

1. Portland, Oregon
2. Chicago, Illinois
3. Southeast Florida (Eastward Ho!)
4. Trenton, New Jersey
5. Kansas City, Kansas & Missouri
6. Dallas, Texas
7. Baltimore, Maryland
8. Lowell, Massachusetts
9. Salt Lake City, Utah
10. Seattle/King County, Washington
11. St. Paul, Minnesota
12. Los Angeles, California

13. State of Rhode Island
14. East Palo Alto, California
15. Stamford, Connecticut
16. Glen Cove, New York

Only one application will be accepted from each of the 16 Brownfields Showcase Communities. Each Brownfields Showcase community should coordinate between appropriate county, city and other local public health departments to ensure only one application is received from each showcase community. If more than one application is received from the same showcase community, all applications from that showcase community will be returned as unresponsive. See also Executive Order 12372 referenced later in this announcement.

Availability of Funds

Approximately \$350,000 is available in FY 1998 to fund an estimated five to seven awards. The average award is expected to be approximately \$60,000, ranging from \$50,000 to \$70,000. It is expected that the awards will begin on or about September 30, 1998, and will be made for a 12-month budget and project period. There is currently no expectation that projects will be continued for more than one year. Funding estimates may vary and are subject to change.

Use of Funds

Funds may be expended for reasonable program purposes, such as personnel, travel, supplies, and services. Funds for contractual services may be requested; however, the grantee, as the direct and primary recipient of ATSDR grant funds, must perform a substantive role in carrying out project activities and not merely serve as a conduit for an award to another party or provide funds to an ineligible party. Equipment may be purchased with grant funds. The equipment proposed should be appropriate and reasonable for the activities to be conducted. The applicant, as part of the application process, should provide: (1) a justification for the need to acquire the equipment, (2) the description of the equipment, (3) the intended use of the equipment, and (4) the advantages/disadvantages of leasing versus purchase of the equipment.

Background

Brownfields are abandoned, idled or under-utilized industrial and commercial properties where expansion or redevelopment is complicated by real or perceived contamination. The Brownfields Initiative was launched by the Environmental Protection Agency (EPA) to empower States, local

governments, and other stakeholders in community redevelopment to work together to assess, clean up, and sustainably reuse Brownfields. In May 1997, Vice President Gore announced a Brownfields National Partnership to bring together the resources of 17 Federal agencies to address local cleanup and reuse issues in a more coordinated manner. ATSDR is among the agencies participating in the partnership. This multi-agency partnership has pledged support to sixteen "Brownfields Showcase Communities"—models demonstrating the benefits of collaborative activity on Brownfields. The designated Brownfields Showcase Communities are distributed across the country and vary by size, resources, and community type. It is expected that because of their location, Brownfields property redevelopment will disproportionately impact low-income minority communities; therefore, the President's Executive Order 12898 on Environmental Justice should be fully implemented.

While the full magnitude of the Brownfields problem is not known, it has been estimated that there are as many as 600,000 Brownfields properties in the United States and its territories, affecting virtually every community in the Nation. Whereas environmental clean up is a building block to economic redevelopment, public health should be the cornerstone. Public health concerns must go hand-in-hand with restoration of contaminated properties and bringing life and economic vitality back to a community.

ATSDR's role in the National Brownfields Initiative is to develop strategies and methods to protect the health and quality of life of people living around brownfields properties by focusing on public health issues related to previous environmental degradation.

Purpose

The purpose of this project is to assist the local public health departments (LHDs) with jurisdiction in the 16 Brownfields Showcase Communities to develop and implement strategies to ensure that efforts to remediate and redevelop properties do not present environmental public health hazards to current and future community residents. It is expected that this program will stimulate LHDs to enlist the cooperation of local governing officials, community-based organizations, and State governments to work together in a timely manner to ensure that public health issues are considered in the earliest phases of remediation and

redevelopment of the Brownfields properties.

ATSDR and local stakeholders have identified the need to develop public health science, build environmental health capacity in State and local health departments, assure principles of environmental justice, and implement communication and empowerment strategies to enhance community support for and participation in the Brownfields Redevelopment Initiative. A goal for ATSDR is to assist in empowering local community stakeholders by providing them with the tools to monitor the health of Brownfields workers and community residents during assessment, clean up, and redevelopment of Brownfields. It is expected that by using this comprehensive public health approach to Brownfields redevelopment, the health and quality of life of persons working or living on or near Brownfields properties will be adequately protected. The incorporation of the President's Executive Order 12898 on Environmental Justice is essential for successful Brownfields redevelopment. Therefore, recipients will be expected to fully implement the Executive Order. In addition, it is expected that this strategy will encourage open lines of communication among local stakeholders, particularly local officials and residents living on or near Brownfields properties and promote the development of working partnerships with these groups. This program highlights the 16 Brownfields Showcase Communities as examples of how public health activities can be implemented. The examples will serve as models which can be generalized to other communities throughout the Nation.

Program Requirements

ATSDR will assist or work jointly with the recipients in conducting the activities of this cooperative agreement program. The application should be presented in a manner that demonstrates the applicant's ability to address the health issues in a collaborative manner with local community stakeholders and with ATSDR in adherence with the Executive Order on Environmental Justice to ensure the full participation of minority and low-income population groups. Recipient and ATSDR activities are listed below:

A. Recipient Activities

The recipient will have primary responsibility for:

1. Obtaining an inventory of Brownfields properties in the local

community and analyzing existing contaminant data.

2. In collaboration with ATSDR, State health departments, and EPA, using environmental data, community health concerns, medical and other public health data, and other relevant information to evaluate Brownfields properties for property-specific environmental public health issues.

3. Assuring relevant health data, including perceived or real affected community concerns is collected and used in decision-making.

4. Developing Brownfields Showcase Public Health teams composed of representatives from the LHD and local stakeholders, e.g., particularly those from affected Brownfields communities to include minorities and low-income population groups in accordance with Executive Order 12898. Co-host with local stakeholders on community workshops on the types of health considerations necessary for land use planning. Work with the local Brownfields Public Health Teams to provide information on sensitive populations to be input into the local development agency's Geographical Information System.

5. Assuring public health concerns are integrated into the Brownfields Showcase decision-making related to assessment, clean up, and redevelopment.

B. ATSDR Activities

ATSDR will have primary responsibilities for:

1. Collaborating with and assisting the recipient in the collection of environmental data, medical and other public health data and other relevant information to evaluate Brownfields properties for property-specific public health issues.

2. Convening a Public Health Empowerment Workshop for recipients to discuss mechanisms for community-based organizations and local health departments to implement public health strategies in their communities.

3. Evaluating recommendations prepared by the recipient and providing timely advice and assistance to further the objectives of this program.

4. Providing the recipient with an exposure assessment algorithm (EAA) for addressing the public health impacts on Brownfields properties. The EAA is an environmental differential diagnosis that local public health professionals may use to help focus in on the possible risks from Brownfields properties.

5. Ensuring compliance with the requirements for peer and technical reviews as identified below under "Technical Reporting Requirements".

Technical Reporting Requirements

A final financial status and performance report is required 90 days after the end of the 12-month budget and project period. All reports are to be submitted to Ron Van Duyne, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Mailstop E-13, Atlanta, GA 30305-2209. The final performance report must include the following for the program, function, or activity involved: (1) a comparison of actual accomplishments to the goals established for the period; (2) the reasons for slippage if established goals are not met; and (3) other pertinent information.

Peer and Technical Reviews

A. CERCLA, as amended by SARA, Section 104(i)(13), and [42 U.S.C. 9604(i)] requires all studies and results of research (other than public health assessments) that ATSDR carries out or funds in whole or in part will be peer reviewed by ATSDR. The ATSDR peer review process for final reports requires that:

1. Studies must be reported or adopted only after appropriate peer review.

2. Studies shall be peer reviewed within a period of 60 days to the maximum extent practical.

3. Studies shall be reviewed by no fewer than three or more than seven reviewers who (1) are selected by the Administrator, ATSDR; (2) are disinterested Scientific experts; (3) have a reputation for scientific objectivity; and (4) who lack institutional ties with any person involved in the conduct of the study or research under review.

B. ATSDR encourages the rapid reporting and interpretation of laboratory results and references back to individual participants. However, if summary tables or distribution of laboratory results are prepared using the study data, this is considered a preliminary finding and will require ATSDR technical and peer review prior to release.

C. When, in the opinion of the investigator(s), a public health concern exists requiring the release of summary study statistics prior to the completion of the study, the investigator must obtain concurrence from ATSDR prior to releasing the summary statistics. A request for ATSDR concurrence for the release of information must be documented in a letter to ATSDR and should outline the public health concern, and recommended response,

and the draft document proposed for release by the investigator. ATSDR will provide a technical review and peer review within ten (10) working days to the maximum extent possible. Summary statistics may be released only after peer review. The release of summary statistics does not preclude the requirement for a final report.

D. By statute, the reporting of preliminary studies and preliminary research results to the public is not acceptable without prior review by ATSDR. This includes manuscripts prepared for publication, presentations at scientific meetings, and reporting of preliminary findings to the community or the media.

E. The final report for every study should include a detailed description of the problem, hypothesis, methods, results, conclusions, and recommendations that constitute a complete performance record of the study.

F. ATSDR is responsible for the technical and peer review of draft final reports of any study that it funds prior to the submission of the final report. This will allow for the recipient to incorporate all technical and peer review comments into the final report. Responses to all ATSDR required technical and peer review comments should be summarized in a letter to ATSDR. This letter should also include the investigator's response to each comment and a rationale for those responses. Based upon the comments of the technical and peer reviewers, modifications in the study report may result. The modified study report should accompany the letter to ATSDR.

G. ATSDR will make available assistance to investigators in formatting and copy editing draft final reports, should the investigator request this assistance. Editing will be conducted by ATSDR staff and an edited copy of the draft final report will be supplied to the investigator for review and concurrence. Editing will occur DURING the conduct of the peer review. It is requested that the report be furnished in WordPerfect 5.1 on a disk with the hard copy double-spaced, with clearly numbered pages, unbound and unstapled, and printed on one side only. All appendices, including maps and reproduced forms used in this study, should be furnished to ATSDR by the investigator.

H. Following the steps outlined above, a final report of all studies and results of research carried out or supported by ATSDR must be submitted to the Procurement and Grants Office with a copy furnished to ATSDR.

I. If assistance in printing the final report is needed, the Principal

Investigator can submit a hard copy of the final report to the Procurement and Grants Office with a copy furnished to ATSDR.

Application Content

In a narrative format, the applicant should include discussion of areas listed under the EVALUATION CRITERIA section of this announcement as they relate to the proposed program. Because these criteria will serve as the basis for evaluation of the application, omissions or incomplete information may affect the rating of the application. Although this program does not require in-kind or matching funds, the applicant should describe any in-kind support in the formal application. For example, if the in-kind support includes personnel, the applicant should provide the qualifying experience of the personnel and clearly state the type of activity to be performed.

Evaluation Criteria

The application will be reviewed and evaluated according to the following criteria:

1. Proposed Program (60 percent)
 - A. Applicants ability to address the following:
 1. Identification of relevant Brownfields properties in the area including but not limited to those identified in the Brownfields Showcase award.
 2. Identification of all local Brownfields stakeholder groups, particularly minority and low-income local residents from affected communities. These groups should be developed into Brownfields Showcase Public Health Teams with public health making authority.
 3. Demonstrate how they will effectively use local health data in Brownfields public health evaluation and assurance.
 4. Demonstrate how they will effectively implement the Executive Order on Environmental Justice, by demonstrating working partnerships with community-based organizations of targeted populations in Brownfields communities.
 5. Describe how they will evaluate and sustain the public health activities after the project period.
 2. Program Evaluation (20 percent)

The adequacy of the proposal relative to the extent to which evaluation plan includes measures of program outcome (e.g., effect on participant's knowledge, attitudes, skills, and behaviors).
 3. Applicant Capability (20 percent)
 - a. Applicant's basic knowledge/experience required to perform the applicant's responsibilities in the project;

b. Description of the adequacy and commitment of institutional resources to administer the program and the adequacy of the facilities.

4. Program Budget (not scored)

The extent to which the budget is reasonable, clearly justified, and consistent with the intended use of cooperative agreement funds.

Executive Order 12372 Review

The application is subject to Intergovernmental Review of Federal Programs as governed by Executive Order (E.O.) 12372, which sets up a system for State and local government review of proposed Federal assistance applications. The applicant should contact their Single Point of Contact (SPOC) as early as possible to alert them to the prospective application and receive any necessary instructions on the State process. For proposed projects serving more than one State, the applicant is advised to contact the SPOC for each affected State. A current list of SPOCs is included in the application kit. If SPOCs have any State process recommendations on applications submitted to CDC, they should forward them to Ron Van Duyn, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Atlanta, GA 30305-2209, no later than 45 days after the application deadline date. The requirement for a 60-day State Process period has been waived under governing regulations 45 CFR 100. The granting agency does not guarantee to "accommodate or explain" State process recommendations it receives after that date.

Public Health System Reporting Requirements

This program is not subject to the Public Health System Reporting Requirements.

Catalog of Federal Domestic Assistance Number

The catalog of Federal Assistance Number is 93.161.

Other Requirements

A. Paperwork Reduction Act

Projects that involve the collection of information from ten or more individuals and funded by cooperative agreement will be subject to review by the Office of Management and Budget (OMB) under the Paperwork Reduction Act.

B. Cost Recovery

CERCLA, as amended by SARA, provides for the recovery of costs incurred for response actions at each Superfund site from potentially responsible parties. The recipient would agree to maintain an accounting system that will keep an accurate, complete, and current accounting of all financial transactions on a site-specific basis, i.e., individual time, travel, and associated cost including direct cost, as appropriate for the site. The recipient would also maintain documentation that describes the site-specific response actions taken with respect to the site, e.g., contracts, work assignments, progress reports, and other documents that describe the work performed at a site. The recipient will retain the documents and records to support these financial transactions and documentation of work performed, for possible use in a cost recovery case, for a minimum of ten years after submission of a final financial status report, unless there is litigation, claim, negotiation, audit or other action involving the specific site, then the records will be maintained until resolution of all issues on the specific site.

C. Third Party Agreements

Project activities which are approved for contracting pursuant to the prior approval provisions shall be formalized in a written agreement that clearly establishes the relationship between the grantee and the third party. The written agreement shall at a minimum:

1. State or incorporate by reference all applicable requirements imposed on the contractors under the grant by the terms of the grant, including requirements concerning technical review (ATSDR selected reviewers), release of data, ownership of data, and the arrangement for copyright when publications, data or other copyrightable works are developed under or in the course of work under a PHS grant supported project or activity.

2. State that any copyrighted or copyrightable works shall be subject to a royalty-free, non-exclusive, and irrevocable license to the Government to reproduce, publish, or otherwise use them, and to authorize others to do so for Federal Government purposes.

3. State that whenever any work subject to this copyright policy may be developed in the course of a grant by a contractor under a grant, the written agreement (contract) must require the contractor to comply with these requirements and can in no way diminish the Government's right in that work.

4. State the activities to be performed, the time schedule for those activities, the policies and procedures to be followed in carrying out the agreement, and the maximum amount of money for which the grantee may become liable to the third party under the agreement.

The written agreement required shall not relieve the grantee of any part of its responsibility or accountability to ATSDR under the cooperative agreement. The written agreement shall, therefore, retain sufficient rights and control to the grantee to enable it to fulfill this responsibility and accountability.

Application Submission and Deadline

The original and two copies of application PHS Form 5161-1 (OMB Number 0937-0189) should be submitted to Ron Van Duyne, Grants Management Officer, Attn: Patrick A. Smith, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 225 East Paces Ferry Road, NE., Room 300, Mailstop E-13, Atlanta, GA 30305-2209, on or before August 10, 1998. (By formal agreement, the CDC Procurement and Grants Office will act for and on behalf of ATSDR on this matter.)

A. Deadline: Applications shall be considered as meeting the deadline if they are either:

1. Received on or before the deadline date, or

2. Sent on or before the deadline date and received in time for submission to the objective review group. (Applicants must request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.)

B. Late Applications: Applications which do not meet the criteria in A.1. or 2. above are considered late applications. Late applications will not be considered.

Where to Obtain Additional Information

To receive additional written information call 1-888-GRANTS4. You will be asked to leave your name, address, and phone number and will need to refer to ATSDR Announcement Number 98095. You will receive a complete program description, information on application procedures, and application forms. CDC will not send application kits by facsimile or express mail.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from Patrick

A. Smith, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 300, Mail Stop E-13, Atlanta, GA 30305-2209, telephone (404) 842-6803, Internet: pbs3@cdc.gov.

Programmatic technical assistance may be obtained from Rueben C. Warren, DDS, MPH, DrPH, Associate Administrator for Urban Affairs, Agency for Toxic Substances and Disease Registry, 1600 Clifton Road, N.E., Mail Stop E-29, Atlanta, GA 30333 or by calling (404) 639-5060, Internet: rcw4@cdc.gov.

Please refer to announcement number 98095 when requesting information and submitting an application.

Potential applicants may obtain a copy of Healthy People 2000 (Full Report, Stock No. 017-001-00474-0) or Healthy People 2000 (Summary Report, Stock No. 017-001-00473-1) referenced in the INTRODUCTION through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (Telephone 202-783-3238).

This and other CDC announcements are available through the CDC homepage on the Internet. The address for the CDC homepage is: <http://www.cdc.gov>.

Dated: June 25, 1998.

Georgi Jones,

Director, Office of Policy and External Affairs
Agency for Toxic Substances and Disease
Registry.

[FR Doc. 98-17459 Filed 6-30-98; 8:45 am]

BILLING CODE 4163-70-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 97D-0525]

**Draft Guidance for Industry:
"Promoting Medical Products in a
Changing Healthcare Environment; I.
Medical Product Promotion by
Healthcare Organizations or Pharmacy
Benefits Management Companies
(PBMs);" Reopening of Comment
Period**

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; reopening of comment period.

SUMMARY: The Food and Drug Administration (FDA) is reopening until July 31, 1998, the comment period for