

government-issued photo ID, driver's license, or passport) and to state the purpose of their visit.

Information is also available on the Institute's/Center's home page: <http://www.nlm.nih.gov/od/bor/bor.html>, where an agenda and any additional information for the meeting will be posted when available. (Catalogue of Federal Domestic Assistance Program Nos. 93.879, Medical Library Assistance, National Institutes of Health, HHS)

Dated: March 9, 2010.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2010-5676 Filed 3-17-10; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Center For Complementary and Alternative Medicine; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting 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 the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Center for Complementary and Alternative Medicine Special Emphasis Panel; International Center for Research in CAM.

Date: April 12, 2010.

Time: 1 p.m. to 4 p.m.

Agenda: To review and evaluate grant applications.

Place: CCAM/NIH, Democracy Two, 6707 Democracy Boulevard, 401, Bethesda, MD 20892, (Telephone Conference Call)

Contact Person: Dale L. Birkle, PhD, Scientific Review Administrator, Office of Scientific Review, National Center for Complementary and Alternative Medicine, NIH, 6707 Democracy Blvd., Suite 401, Bethesda, MD 20892, (301) 451-6570, birkled@mail.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.213, Research and Training in Complementary and Alternative Medicine, National Institutes of Health, HHS)

Dated: March 10, 2010.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2010-6001 Filed 3-17-10; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institutes of Health Guidelines for Human Stem Cell Research

SUMMARY: The National Institutes of Health (NIH) is extending the public comment period on a revision to the definition of human embryonic stem cells (hESCs) in the "National Institutes of Health Guidelines for Human Stem Cell Research" (Guidelines). Due to a technical problem, comments entered in the Web site between 11:59 p.m. EST on February 28, 2010, through 8 a.m. EST on March 2, 2010, were not received by the agency and should be re-entered in order to be considered.

On February 23, 2010, NIH issued a **Federal Register** notice (<http://edocket.access.gpo.gov/2010/pdf/2010-3527.pdf>) requesting public comment on a proposed change to the Guidelines. Due to a technical problem, comments entered in the Web site between 11:59 p.m. EST on February 28, 2010, through 8 a.m. EST on March 2, 2010, were not received by the agency and should be re-entered in order to be considered.

DATES: Written comments on this proposed change must be received by NIH on or before March 26, 2010, in order to be considered.

ADDRESSES: Public comments may be entered at: <http://hescregapp.od.nih.gov/comments/add.htm>.

Comments may also be mailed to: NIH Stem Cell Guidelines, MSC 7997, 9000 Rockville Pike, Bethesda, Maryland 20892-7997. Comments will be made publicly available. Personally identifiable information (except for organizational affiliations) will be removed prior to making comments publicly available.

Dated: March 10, 2010.

Francis S. Collins,

Director, National Institutes of Health.

[FR Doc. 2010-5948 Filed 3-17-10; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Regional Collaborative for the Pacific Basin (RCPB) Cooperative Agreement

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: Notice of Non-competitive Supplemental Funding Award.

SUMMARY: HRSA will be providing supplemental funds to support activities for a regional Pacific Primary Care Organization to represent the six U.S.-affiliated Pacific Basin jurisdictions. The supplemental funds will be used to augment the grantee's current activities to improve data strategies and address the health workforce needs in the region.

SUPPLEMENTARY INFORMATION:

Intended recipient of the award: Research Corporation of the University of Hawaii Direct Project Pacific Islands Health Officers Association, Honolulu, Hawaii.

Amount of the award: \$150,000 to improve the public health data capacity and health workforce capacity for the Pacific Basin jurisdictions.

Authority: Sections 241 and 301 of the Public Health Service Act, as amended (42 U.S.C. 238J and 241 respectively); Title 3 Section 330(k), 330(m), 333(d) of the Public Health Service Act, as amended (42 U.S.C. 254b and 254c respectively).

CFDA Number: 93.110.

Project period: The period of the supplemental support is from March 1, 2010 to August 31, 2010.

Justification for the Exception to Competition

The public health data systems in the U.S.-affiliated Pacific Islands (USAPI) are inadequate as a result of poor infrastructure capacity. There is inconsistency in data collection and analysis among the jurisdictions. The result is that the prevalence of disease conditions in the USAPI is underestimated. In addition, the lack of data increases the communicable disease threats to USAPI populations and to the U.S. communities which experience high migration of residents from these jurisdictions. Furthermore, the current health workforce in the USAPI is impacted by chronic health worker shortages and under-training of its current workforce. The workforce problems are serious, chronic, and unique to insular areas which have fewer resources to address them. A Pacific PCO will provide regional