DIRECTORY

NIH FEDERAL ADVISORY COMMITTEES and HHS ADVISORY COMMITTEES MANAGED BY NIH STAFF



November 2008

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EXPLANATORY NOTES

The Directory describes the structure and function of each National Institutes of Health (NIH) Federal advisory committee and the HHS advisory committees managed by NIH staff members. In addition, information on the authority used to establish the committee and the frequency of meetings is provided. For committees that have a standing membership, links to rosters are located at the bottom of the page.

Additional information regarding nominating procedures and other aspects of NIH advisory committees may be found on the Office of Federal Advisory Committee Policy (OFACP) website: <u>http://www1.od.nih.gov/cmo/</u> or you may use the contact information below.

Office of Federal Advisory Committee Policy National Institutes of Health 6701 Democracy Blvd., Suite 1000 MSC 4875 Bethesda, MD 20892

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DESCRIPTION OF ADVISORY COMMITTEES AT NIH

The National Institutes of Health (NIH) is the steward of medical and behavioral research for the Nation. Its mission is science in pursuit of fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to extend healthy life and reduce the burdens of illness and disability. NIH provides leadership and direction to programs designed to improve the health of the Nation by conducting and supporting research in the causes, diagnosis, prevention, and cure of human diseases; in the processes of human growth and development; in the biological effects of environmental contaminants; in the understanding of mental, addictive and physical disorders; and in directing programs for the collection, dissemination, and exchange of information in medicine and health, including the development and support of medical libraries and the training of medical librarians and other health information specialists.

To advance these programmatic goals, the NIH draws advice from scientists actively engaged in research and non-scientific (public) members with an active interest in the mission or health program areas of a specific Institute or Center. These members provide the broad perspective that is essential to balanced and effective programs.

The HHS Secretary has designated specific program areas at the NIH to provide management and support services for five HHS advisory committees. NIH staff members manage the day-today activities and operations of these committees. A description of each of these committees is located in Section II of this Directory.

DEFINITION

An advisory committee is defined as any committee, board, commission, council, conference, panel, task force, or other similar group, or any subcommittee or other subgroup thereof, which is established by statute, or established or utilized by the President or any agency official for the purpose of obtaining advice or recommendations on issues or policies which are within the scope of his or her responsibilities [Part VI, General Services Administration, Federal Advisory Committee Management: Final Rule (41 CFR Part 101-6)]. This excludes any committee composed entirely of full-time officers or employees of the Federal Government.

TYPES OF NIH ADVISORY COMMITTEES

The NIH utilizes five types of advisory committees:

National Advisory Council (NAC) - Most Institutes and Centers (ICs) establish a national advisory council or board (Council), composed of both scientific and public members. Councils perform the second level of peer review of grant and cooperative agreement applications and provide advice and recommendations on matters of significance to the policies, missions, and goals of the IC they advise, as well as provide oversight of research conducted by each IC's intramural program.

Councils also serve as a forum where interested members of the public, in open session, may both hear and comment on issues relevant to the overall mission of the IC. Council members and

most chairpersons are appointed either by the Secretary or the President and serve as Special Government Employees (SGEs). The term for Chairperson is usually two years and the terms for members are usually four years.

Program Advisory Committee (PAC) - Program advisory committees advise on specific programs, future research needs and opportunities, management policy issues, and identify and evaluate future extramural initiatives.

Members may be appointed by the President, the Secretary, the NIH Director, or an IC Director. Members are usually appointed for four-year terms and serve as Special Government Employees (SGEs). The Chairperson is usually appointed for a two-year term, but this could vary depending on the legislation used to establish the committee.

Board of Scientific Counselors (BSCs) – Boards of Scientific Counselors review and evaluate the research programs, projects and investigators in the intramural laboratories and programs of the NIH. In addition to the scientific merit of a laboratory or intramural program, the personal qualifications and achievements of individual staff members are also reviewed and evaluated. Members are appointed by the NIH Director or an IC Director. Members and Chairpersons usually serve five-year terms as Special Government Employees (SGEs).

Initial/Integrated Review Group (IRG) - IRGs engage in the first level of scientific and technical peer review of grant applications, cooperative agreements, or contract proposals. Members serve for fixed-terms up to four years and the Chair may serve a fifth year. Members are appointed by the NIH Director or an IC Director. No more than one-fourth of the members of any IRG may be Federal employees.

Special Emphasis Panel (SEP) - SEPs function both as an IRG performing the first level of scientific and technical peer review of research grant applications, cooperative agreement applications or contract proposals and program advisory committees performing concept reviews. SEPs have a fluid membership and individuals are designated to serve for only the meeting they are invited to attend. Unlike other NIH advisory committees that have a formal appointment process, individuals who serve on a SEP are designated to serve by the Designated Federal Official (DFO) in charge of the meeting. The DFO sends these individuals invitation letters requesting their participation on a particular panel meeting.

SELECTION OF MEMBERS

The basic criterion for membership on NIH committees is excellence in biomedical and behavioral research and, for public members, a demonstrated, active interest in the mission of the committee. The Federal Advisory Committee Act (FACA), under which NIH Federal advisory committees operate, requires that membership must be fairly balanced in terms of points of view represented and the functions to be performed by the advisory committee. Measures are taken to ensure representation of women and minorities as well as broad representation of geographic regions of the United States. There are other requirements, based on legislation, regulations, or policies.

Members of Initial/Integrated Review Groups, Special Emphasis Panels, and Boards of Scientific Counselors are selected on the basis of the scientific and technical needs of specific committees. Members of scientific and technical peer review committees are primarily non-Federal scientists

selected by the NIH for their training, experience, and expertise in the particular scientific areas for which the pertinent committee has review responsibilities. A principal requirement for serving on a scientific and technical peer review committee is competence as an independent investigator in a scientific or clinical discipline or research specialty. Assessment of that competence is based on the quality of research accomplishments, publications in refereed scientific journals, and other significant scientific activities, achievements, and honors. Usually a doctoral degree or its equivalent is required. Nonscientific members of the public may serve on scientific and technical review committees when their expertise is appropriate. Service also demands mature judgment, balanced perspective, objectivity, ability to work effectively in a group, commitment to accomplish work assignments, and assurance that the confidentiality of applications, proposals, discussions, and recommendations will be protected.

Members of councils and program advisory committees are selected for their competence, interest, and knowledge of the specific Institute or Center's mission. The membership of most councils is required by law to be two-thirds scientists and one-third representatives of the public. In addition, councils are composed of outstanding scientists and community leaders, and other members of the public, with demonstrated interests in the health program areas of the particular Institute or Center. They include not only biomedical, behavioral, social and public health scientists but also leaders in such fields as law, economics, management, health policy, and public policy. Patients, relatives of patients, and advocates who represent the concerns of the review and award process diverse knowledge and expertise in the relevant programmatic areas. Councils provide the broad perspective that is essential to balanced and effective programs, including awareness of and insight into the roles of various institutions engaged in biomedical research and knowledge of what may best serve the health needs of the American people.

NIH PEER REVIEW SYSTEM

REVIEW OF BIOMEDICAL AND BEHAVIORAL RESEARCH AND TRAINING GRANT AND COOPERATIVE AGREEMENT APPLICATIONS

NIH peer review of research grant and cooperative agreement applications involves two separate phases: the evaluation of scientific and technical merit by Initial/Integrated Review Groups (IRGs) and Special Emphasis Panels (SEPs) consisting of knowledgeable experts who are, for the most part, non-Federal scientists; and the review for significance, relevance, and impact of the proposed research on the mission of the funding Institutes or Centers by advisory councils or boards that include scientists, health care practitioners, and members of the public concerned with health.

Most IRGs and SEPs are managed by the Center for Scientific Review, where the IRGs are referred to as study sections. Other IRGs and SEPs are managed by other Institutes and Centers, where the IRGs are called review committees and are responsible for the review of a variety of specialized research and research training applications, including applications involving multidisciplinary research.

IRGs review applications for scientific and technical merit, including consideration of the scientific significance and originality of the research; the adequacy of the experimental approach and methodology; the qualifications and research experience of the principal investigator and staff; the scientific environment, subject populations, or collaborative arrangements; and the

appropriateness of the budget and timetable. Where appropriate evaluations include the adequacy of protection of human subjects, vertebrate animals, and the environment; and for clinical research, the adequacy of plans for the inclusion of children, women, and minorities as research subjects in the study design.

IRGs usually meet three times a year, each meeting generally requiring approximately two days of intensive review of research grant applications. Six to eight weeks before the meeting date the Scientific Review Officer (SRO) distributes copies of all the applications to members (with the exception of those, which may involve a conflict of interest).

The SRA also assigns specific applications to each member to prepare detailed critiques prior to the meeting and to lead the discussion on these applications at the meeting. With the exception of applications where a conflict of interest may exist, all members contribute to the discussion on all applications reviewed at the meeting. Members may also participate in SEP meetings and project site visits when these are deemed necessary for adequate review of specific applications.

Each application which the majority of IRG or SEP members believes has significant and substantial merit receives a numerical rating. Applications which do not meet this criterion are "not recommended for further consideration." Members may defer their consideration of an application when additional information is needed for the evaluation of its merit.

Following the meetings, the SRO prepares summary statements. The summaries contain the recommendations, reasons for the recommendations, and priority scores for applications that are scored. These statements are forwarded to the appropriate Institutes or Centers for the next level, consideration by the appropriate advisory councils. The summary statement is automatically sent to each applicant principal investigator following the meeting.

For the second phase of review, the National Advisory Councils generally meet three times a year. Before the meeting, each council member review the summary statements for scientific merit, and, against a broad background of considerations that include the total pattern of biomedical and behavioral research that is being supported by the Institute or Center, the adequacy and appropriateness of peer review as performed by the IRGs, the need for research to be initiated in new areas, the relevance of the proposed research to the Institute or Center's mission and programmatic priorities, the potential public health or categorical disease impact, and other matters. If there is a question about the adequacy of an initial review, councils may request another review of scientific/technical merit by an IRG/SEP, or modify the recommendations with regard to the amount or length of funding.

REVIEW OF RESEARCH AND DEVELOPMENT CONTRACT PROJECTS

NIH Research and Development (R&D) contract projects generally are subjected to a many-stage review process prior to award. For solicited contracts, Institute or Center scientific program advisory peer review committees suggest types of projects that should be undertaken by the NIH. Recommendations for types of projects are provided also through workshops, conferences, and similar activities. The basic concepts for the planned projects are then translated by NIH program staff into specific requests for proposals that define the project work requirements and describe the criteria by which subsequent proposals will be evaluated.

Proposals submitted in response to these requests are reviewed and rated against the announced criteria by peer review Technical Evaluation Groups, referred to as TEGs. Evaluations and ratings are used to establish a competitive range of proposals that have a reasonable chance for award. Discussions are held with the organizations that submitted those proposals. Best-and-final offers from those offerors are reviewed further by appropriate Institute and Center senior staff groups, with outside consultation as needed, to provide final recommendations to the Institute and Center Directors. Variations on these processes are employed for the evaluation of unsolicited contract proposals.

REVIEW OF INTRAMURAL RESEARCH

The review and evaluation of research programs, projects and investigators in the NIH Intramural Laboratories and Branches is performed by Boards of Scientific Counselors that assess the research in progress, proposed research, and the productivity and performance of staff scientists. These committees are primarily composed of non-Federal scientists with outstanding achievement and expertise in areas of research pertinent to that NIH Institute or Center.

The Boards of Scientific Counselors carry out a function that is parallel in scope and intent to that of the initial peer review groups of the NIH extramural program.

Each laboratory/branch and permanent independent investigator, including junior staff being considered for conversion to permanent positions, is reviewed at least every four years. A written report covering the review of an organizational component and staff is submitted to the Institute or Center Scientific Director, the Institute Director, and the Deputy Director for Intramural Research, NIH, for consideration of possible action based on the recommendations of its board. Subsequently these recommendations are discussed by the internal NIH Board of Scientific Directors at one of its regular semi-monthly meetings and, at least annually, at appropriate council meetings. Thus, Boards of Scientific Counselors serve a dual function in providing expert scientific advice to Scientific Directors regarding particular employees and projects, and providing the NIH as a whole with an assessment of the overall quality of its intramural efforts.

ADVISORY COMMITTEE TO THE DIRECTOR, NATIONAL INSITUTES OF HEALTH

AUTHORITY

Established pursuant to 42 U.S.C. 217a, section 222 of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of the Secretary, or designee as Chair, and 20 members selected by the Secretary. The appointed members shall consist of authorities who are knowledgeable in the fields of research pertinent to the National Institutes of Health (NIH) mission and individuals who represent the academic and private sector research community, as well as representatives of the general public. Members are invited to serve for overlapping terms of up to four years. Members may serve after the expiration of their term until successors have been appointed.

FUNCTION

Advises the Secretary of Health and Human Services, the Assistant Secretary for Health, and the Director, NIH, on policy matters pertinent to NIH mission responsibilities in the conduct and support of biomedical research, medical science, and biomedical communications. The Committee may make recommendations concerning program development, resource allocation, NIH administrative regulations and policy, and other specific or general aspects of NIH policy. In addition, the committee may review and make recommendations on applications for grants and cooperative agreements for research and training for projects that show promise of making valuable contributions to human knowledge.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

ADVISORY COMMITTEE ON RESEARCH ON WOMEN'S HEALTH

AUTHORITY

Established pursuant to 42 U.S.C. 287d(d), section 486(d) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 non-Federal members appointed by the Director, National Institutes of Health (NIH), from among physicians, practitioners, scientists, and other health professionals, whose clinical practice, research specialization, or professional expertise includes a significant focus on research on women's health. A majority of the members are women. The Director of the Office of Research on Women's Health (ORWH) serves as Chair. Members are invited to serve for overlapping terms of up to four years. Members may serve after the expiration of their terms until successors have been appointed.

FUNCTION

Advises the Director, ORWH, on appropriate research activities to be undertaken by the national research institutes with respect to research on women's health; research on gender differences in clinical trials, including responses to pharmacological drugs; research on gender differences in disease etiology, course, and treatment; research on obstetrical and gynecological health conditions, disease and treatments; and research on women's health conditions which require a multi-disciplinary approach and report to the Director, ORWH, on this research. The Committee provides recommendations to the Director regarding activities of the ORWH including the development of methodologies to determine the circumstances in which obtaining data specific to women is an appropriate function for clinical trials of treatments and therapies and priorities in carrying out the described research. The Committee may also provide recommendations regarding the inclusion of women in clinical trials and opportunities for women in biomedical careers.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

COUNCIL OF COUNCILS

AUTHORITY

Established pursuant to 42 U.S.C, section 402(k) of the Pubic Health Service (PHS) Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2.

STRUCTURE

The Council shall consist of 27 members appointed by the Director, NIH. The members shall be appointed with the approval of the Secretary from among the list of individuals who have been nominated to serve on the Council. The list of nominees shall contain: (1) For each national research institute and national center, three individuals nominated by the head of such institute or center from among the members of the advisory council of the institute or center, of which two shall be scientists and one shall be from the general public or a leader in the field of public policy, law, health policy, economics or management; (2) For each office within the Division of Program Coordination, Planning, and Strategic Initiatives, one individual nominated by the head of such office and (3) Members of the Council of Public Representatives.

In selecting the members of the Council, the Director, NIH, shall ensure (1) the representation of a broad range of disciplines and perspectives; and (2) the ongoing inclusion of at least one representative from each national research institute whose budget is substantial relative to a majority of the other institutes. Members shall be invited to serve for a term of six years. The Chair shall be the Director, Division of Program Coordination, Planning, and Strategic Initiatives. Non-voting ex officio members shall be the Deputy Director, NIH, and any additional officers or employees of the United States as the Director, NIH, determines necessary for the Council to effectively carry out its function.

FUNCTION

The Council shall provide advice and recommendations to the Director, NIH, or other appropriate delegated officials on matters related to the policies and activities of the Division of Program Coordination, Planning, and Strategic Initiatives including making recommendations with respect to the conduct and support of research that represents important areas of emerging scientific opportunities, rising public health challenges, or knowledge gaps that deserve special emphasis and would benefit from conducting or supporting additional research that involves collaboration between two or more national research institutes or national centers, or would otherwise benefit from strategic coordination and planning.

MEETINGS

Meetings of the Council shall be held approximately three times a year at the call of the Executive Secretary or other designated government official who approves the agenda and shall be present at all meetings of the Council and its subcommittees.

COMMITTEE ROSTER

DIRECTOR'S COUNCIL OF PUBLIC REPRESENTATIVES

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of up to 21 members appointed by the Director, National Institutes of Health (NIH) who also serves as Chair. Members represent the various publics interested in NIH and may include patients and family members of patients, health professionals, members of patient advocacy groups, individuals who work as volunteers in the health care field, scientists and students of science, communicators in health, medicine and science, individuals in public service, academia, and professional societies relating to the medical field. Members are invited to serve for overlapping terms of up to three years. Members may serve after the expiration of their terms until successors have been appointed.

FUNCTION

Advises and makes recommendations to the Director, NIH, on issues and concerns that are important to the broad development of NIH programmatic and research priorities. The Committee also assists the NIH in enhancing the participation of the public in NIH activities that have an impact upon the public, in increasing public understanding of the NIH and its programs, and in bringing important matters of public interest forward for discussion in public settings.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, who also approves the agenda. A Government official shall be present at all meetings.

COMMITTEE ROSTER

OFFICE OF AIDS RESEARCH ADVISORY COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 300cc-40a(a), section 2352(a) of the Public Health Service Act, as amended. The Committee (OARAC) is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and six nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, Office of AIDS Research (OAR), the Chief Medical Director, Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs, the Director, Centers for Disease Control and Prevention (or their designees), a representative from the National Advisory Allergy and Infectious Disease Council, a representative from the National Cancer Advisory Board, a representative from each of advisory councils of the two national research institutes (excluding the National Institute of Allergy and Infectious Diseases and the National Cancer Institute) that receive the greatest funding for AIDS activities. Twelve of the members (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) are appointed from the health and scientific disciplines relevant to AIDS research. Six of the members are appointed from the general public and include leaders in fields of public policy, law, health policy, economics, and management. Persons with HIV and their advocates are represented on the OARAC, either from the general public or from the scientific community. Members are invited to serve for overlapping four year terms. The Chair of the OARAC is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, OAR, to be the Chair. The term of office of the Chair is two years.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, Office of AIDS Research, on AIDS research programs, the development and annual review of a comprehensive plan for the conduct and support of all AIDS activities of the agencies of NIH, including direct involvement in budget projections for carrying out the plan which will include an estimate of the number and type of personnel needed for OAR. The Committee may also advise on the expenditure of funds from the emergency discretionary fund.

MEETINGS

Meetings are held at the call of the Chair or upon the request of the Director, OAR, at least three times each fiscal year. A Government official approves the agenda and is present at all meetings.

COMMITTEE ROSTER

RECOMBINANT DNA ADVISORY COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of up to 21 voting members, including the Chair, appointed by the Director, National Institutes of Health (NIH), at least eight of whom are selected from authorities knowledgeable in relevant scientific fields, e.g., molecular genetics, molecular biology, recombinant DNA research, including gene transfer research, and at least 4 of whom are persons knowledgeable in applicable law, ethics standards of professional conduct and practice, public attitudes, the environment, public health, laboratory safety, occupational health, protection of human subjects, or related fields. Members may be invited to serve for overlapping terms of two to four years. In addition, there are nonvoting representatives from each of the following Federal agencies: Department of Agriculture; Department of Commerce, Department of Defense, Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, Food and Drug Administration, Center for Biologics Evaluation and Research and the Office for Human Research Protections, Department of Energy, Department of Interior, Department of Justice, Department of Labor, Department of State, Department of Transportation, Environmental Protection Agency, Executive Office of the President (Office of Science and Technology Policy and Council on Environmental Quality), National Aeronautics and Space Administration, National Science Foundation, Nuclear Regulatory Commission, U.S. Arms Control and Disarmament Agency, and the Department of Veterans Affairs.

FUNCTION

Advises the Director, NIH, concerning the current state of knowledge and technology regarding DNA recombinants, and recommends guidelines to be followed by investigators working with recombinant DNA.

MEETINGS

Meetings are held approximately four times a year at the call of the Designated Federal Official who also approves the agenda. The Designated Federal Official will be present at all meetings.

COMMITTEE ROSTER

SCIENTIFIC MANAGEMENT REVIEW BOARD

AUTHORITY

Established pursuant to 42 U.S.C. 281, section 401(e), of the Public Health Service (PHS) Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2.

STRUCTURE

The Board shall consist of an odd number of voting members including the chair, not to exceed 21, who are selected by the Secretary, and the Director, NIH, who shall be a permanent nonvoting ex officio member. The voting members of the Board shall include not fewer than 9 officials who are directors of NIH institutes or centers. The Director, NIH, shall consider members of the NIH governance structure in identifying institute and center officials for nomination to the Board. The Secretary shall ensure that the group of institute and center officials includes: (1) national research institutes whose budgets are substantial relative to a majority of the other institutes; (2) national research institutes that have been in existence for a substantial period of time without significant organizational change (4) as applicable, national research institutes that have undergone significant organizational; and (5) national centers.

The Secretary shall appoint members from among individuals who are not officers or employees of the United States. Such members shall include: (1) individuals representing the interests of public or private institutions of higher education that have historically received funds from NIH to conduct research; and (2) individuals representing the interests of private entities that have received funds from NIH to conduct research or that have broad expertise regarding how the NIH functions, exclusive of private entities under (1). The Chair of the Board shall be selected by the Secretary from among the non-Federal members of the Board. The term of office of the Chair shall be two years. Members shall be invited to serve for overlapping five-year terms.

FUNCTION

Not less than once each seven years, the Board shall provide advice to appropriate HHS and NIH officials regarding the use of organizational authorities established under the NIH Reform Act of 2006. Specifically, the Board shall (1) determine whether and to what extent the organization authorities should be used; and (2) issue a report providing the recommendations of the Board regarding the use of the authorities and the reasons underlying the recommendations.

MEETINGS

The Board shall meet at the call of the Chair with advance approval of the Executive Secretary or other properly assigned Government official or upon the request of the Director of NIH, but not fewer than five times with respect to issuing any particular report. The Executive Secretary or other appropriate Government official shall approve the agenda and shall be present at all meetings of the full Board or of any subcommittee.

COMMITTEE ROSTER

SECRETARY'S ADVISORY COMMITTEE ON GENETICS, HEALTH, AND SOCIETY

AUTHORITY

Established pursuant to 42 U.S.C. 217a, section 222 of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of up to 17 members, including the Chair. Members and the Chair shall be appointed by the Secretary, or designee, from authorities knowledgeable about biomedical sciences, human genetics, health care delivery, evidence-based practice, public health, behavioral sciences, social sciences, health services research, health policy, health disparities, ethics, economics, law, health care financing, consumer issues and concerns and the views and perspectives of the general public. Of the appointed members, at least two members shall be specifically selected for their knowledge of consumer issues and concerns and the views and perspectives of the general public. Members may be invited to serve for overlapping terms of up to four years. The following governmental officials, or their designees, serve as nonvoting ex officio members of the Committee: Assistant Secretary for Children and Families; Assistant Secretary for Health; Administrator, Agency for Healthcare Research and Quality; Director, Centers for Disease Control and Prevention; Commissioner, Food and Drug Administration; Administrator, Health Resources and Services Administration; Director, National Institutes of Health; Director, Office for Civil Rights; Director, Office of Human Research Protections; Attorney General of the United States: Secretary of Commerce: Secretary of Defense: Secretary of Education: Secretary of Energy; Secretary of Labor; Commissioner, Equal Employment Opportunity Commission; and any other officers or employees of the United States as the Secretary determines are necessary for the Committee to effectively carry out its functions.

FUNCTION

Explores, analyzes, and deliberates on the broad range of policy needs associated with the scientific, clinical, public health, ethical, economic, legal and social issues raised by the development, use and potential misuse of genetic and genomic technologies and makes recommendations to the Secretary and other entities as appropriate. The scope of the Committee's charge includes assessing ow genetic technologies are being integrated into health care and public health; studying the clinical, ethical, economic, legal and societal implications of genetic and genomic technologies and applications; identifying opportunities and gaps in research, and data collection analysis efforts; examining the impact of current patent policy and licensing practices on access to genetic technologies; analyzing uses of genetic information in education, employment, insurance; and law; serving as a public forum for discussion of issues raised by genetic and genomic theologies.

MEETINGS

Meetings shall be held not less than two times per year at the call of the Chair with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL ADVISORY COUNCIL ON MINORITY HEALTH AND HEALTH DISPARITIES

AUTHORITY

Established pursuant to 42 U.S.C. 287c-31(j), section 285E(j),of the PHS Act, as amended. This Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consist of 16 members appointed by the Secretary; and 5 nonvoting ex officio members: the Secretary; the Director, National Institutes of Health (NIH); the Director, National Center on Minority Health Disparities (NCMHD); the Chief Medical Director of the Department of Veterans Affairs; the Assistant Secretary of Defense for Health Affairs (or their designees); and such additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. The membership shall in addition include a nonvoting representative of the Office of Behavioral and Social Sciences Research, NIH. Of the appointed members, 11 shall be selected from among the leading representatives of the health and scientific disciplines and disease areas such as genomics, pharmacokinetics, cancer, diabetes, infant mortality, AIDS, cardiovascular disease, and other minority health and other health disparity conditions. Five of the members shall be appointed by the Secretary from the general public and shall include leaders in the fields of public policy, law, health policy, economics, and management. Members shall be invited to serve for overlapping four-year terms, except that any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of that term. The Chair of the Council is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NCMHD, to be the Chair. The term of office of the Chair shall be two years.

FUNCTIONS

Advises the Secretary; the Assistant Secretary for Health; the Director, NIH; and the Director, NCMHD, on matters relating to the conduct and support of research, training, health information dissemination, and on other programs that address minority health and other health disparity conditions as well as advise on matters relating to improving the visibility of minority health and other health disparities research and on expanding the role of this research in learning why some groups have disproportionately high rates of disease.

MEETINGS

Meetings shall be held not less than three times a year at the call of the Chair, with the advance approval of a Government official, or upon the request of the Director, NCMHD. A Government official shall approve the agenda and shall be present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

NATIONAL CENTER ON MINORITY HEALTH AND HEALTH DISPARITIES SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant 42 U.S.C. 282(b)(6), section 402(b)(6) of the PHS Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S. C. Appendix 2).

STRUCTURE

Members and Chairs will be selected on an as needed basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of genomics, pharmacokinetics, cancer, diabetes, infant mortality, AIDS, and cardiovascular disease.

FUNCTION

Advise the Director, National Institutes of Health (NIH), and the Director of the National Center on Minority Health and Health Disparities (NCMHD), regarding concept review, research grant and cooperative agreement applications, and contract proposals relating to all areas of minority health and health disparity research.

MEETINGS

Meetings of the Panel will be held as necessary as determined by the Designated Federal Official who shall also approve the agenda. A Government official shall be present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY COUNCIL ON AGING

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and six nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Institute on Aging (NIA), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs (or their designees), a member designated by the Commissioner of the Administration on Aging, and such additional officers or employees of the United States as the Secretary determines necessary for the Advisory Council to effectively carry out its functions. Of the eighteen appointed members, twelve are selected from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the areas of biological and medical sciences relating to aging and public health. Six of the members are appointed by the Secretary from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NIA. to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIA, on matters relating to the conduct and support of biomedical, social, and behavioral research, training, health information dissemination, and other programs with respect to the aging process and the diseases and other special problems and needs of the aged.

MEETINGS

Meetings of the full Council are held not less than three times a year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NIA. A Government official approves the agenda and is present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS NATIONAL INSTITUTE ON AGING

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 12 members, including the Chair. Members and the Chair are selected by the Director, National Institutes of Health (NIH), from authorities who have broad knowledge in cellular and molecular biology, clinical research, physiology, behavioral sciences, and epidemiology. Members, including the Chair, are invited to serve for overlapping terms of up to five years.

FUNCTION

Advises the Director, NIH, the Deputy Director for Intramural Research, NIH, and the Director, National Institute on Aging (NIA), concerning the Institute's intramural research programs through periodic visits to the laboratories and programs to assess the research in progress, the proposed research, and evaluate the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately two times a year at the call of the Chair, with advance approval of a Government official, who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE ON AGING INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields related to clinical, basic, behavioral and social sciences related to aging research. Members are invited to serve for overlapping terms of up to four years. The term for the Chair of the committee may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Institute on Aging (NIA), on the scientific and technical merit of grant and cooperative agreement applications and contract proposals relating to scientific areas relevant to basic, clinical, behavioral, and social sciences research in aging, e.g., molecular biology, neurology, neurochemistry, cell biology, nutrition, endocrinology, epidemiology, immunology, demography, economics, psychology, and sociology.

MEETINGS

Meetings of the full Initial Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Initial Review Group and of the subcommittees.

COMMITTEE ROSTER

NATIONAL INSTITUTE ON AGING SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Institute on Aging (NIA), regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to the basic, clinical, behavioral and social sciences of aging, such as immunology, molecular biology, neurology, cell biology, nutrition, epidemiology, demography, economics, and psychology.

MEETINGS

Meetings of the Panel are held as necessary as determined by the Designated Federal Official who will also approve the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY COUNCIL ON ALCOHOL ABUSE AND ALCOHOLISM

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 15 members appointed by the Secretary and five nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Institute on Alcohol Abuse and Alcoholism, (NIAAA), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Of the fifteen appointed members, ten are from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the NIAAA. Five of the members are appointed by the Secretary from among the general public and shall include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Director, NIAAA, will designate a NIAAA staff member to serve as the Executive Secretary of the Council. The Chair of the Council is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NIAAA, to be the Chair.

FUNCTION

Advises, consults with, and makes recommendations to the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIAAA, on program and policy matters in the field of alcohol abuse and alcoholism.

MEETINGS

Meetings are held not less than three times a year at the call of the Chair, with the advance approval of a Government official, or upon the request of the Director, NIAAA. A Government official approves the agenda and is present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of ten members, including the Chair, appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of the medical sciences, psychology, biochemistry, physiology, pharmacology, the neurosciences, and clinical fields related to the research activities of the Institute. Members are invited to serve for overlapping terms of up to five years. The term for the Chair of the committee may include a fifth year.

FUNCTION

Advises the Director, NIH, the Deputy Director for Intramural Research, NIH, the Director, National Institute on Alcohol Abuse and Alcoholism (NIAAA), and the Scientific Director, NIAAA, on the intramural research program through periodic visits to the laboratories for assessment of the research in progress, the proposed research, and evaluation of the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields related to alcohol abuse research. Members are invited to serve for overlapping terms of up to four years. The term for the Chair of the committee may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Groups jurisdiction. The Chairpersons of each subcommittee may be designated as co-Chairs for the Initial Review Group as a whole and upon approval by the subcommittee Chair.

FUNCTION

Advises the Director, NIH, and the Director, National Institute on Alcohol Abuse and Alcoholism (NIAAA), on the scientific and technical merit of applications for grants-in-aid for research, research training, cooperative agreements and contract proposals relating to scientific areas relevant to alcohol abuse and alcoholism in the areas of biomedical, basic and clinical neuroscience, basic behavioral science, treatment, health services, epidemiology, prevention, human development, and AIDS.

MEETINGS

Meetings of the full Initial Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Initial Review Group and of the subcommittees.

COMMITTEE ROSTER

NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM SPECIAL EMPHASIS PANEL

.AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of alcohol abuse research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Institute on Alcohol Abuse and Alcoholism (NIAAA) regarding research grant and cooperative agreement applications, contract proposals and concept reviews relating to scientific areas relevant to alcohol abuse and alcoholism in the areas of biomedical, basic and clinical neuroscience, basic behavioral science, treatment, health services, epidemiology, prevention, human development, and AIDS.

MEETINGS

Meetings of the Panel are held as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY ALLERGY AND INFECTIOUS DISEASES COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. This Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consist of 18 members appointed by the Secretary, and six nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Institute of Allergy and Infectious Diseases, (NIAID), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs, and the Director, National Center for Infectious Diseases of the Centers for Disease Control and Prevention (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Of the eighteen appointed members, twelve are selected from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the areas of immunology, immunologic and allergic diseases, microbiology and infectious diseases, virology, epidemiology, tropical diseases, sexually transmitted diseases, and AIDS. Six of the members are appointed by the Secretary from the general public and shall include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members, or the Secretary may select the Director, NIAID, to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIAID, on matters relating to the conduct and support of research, training, health information dissemination, and other programs with respect to allergic and immunologic diseases and disorders, microbiology and infectious diseases, including tropical diseases and AIDS.

MEETINGS

Meetings are held not less than three times each fiscal year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NIAID. A Government official approves the agenda and is present at all meetings of the full committee or of any subcommittee.

COMMITTEE ROSTER

AIDS RESEARCH ADVISORY COMMITTEE, NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

AUTHORITY

Established pursuant to 42 U.S.C. 300cc-3, section 2304 of the Public Health Service Act, as amended. The Committee is governed by the provision of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 13 members, including the Chair. The members are selected by the Director, NIAID, with medical and scientific expertise and community perspective appropriate to the Committee's charge. Six of the members hold concurrent membership on the AIDS Subcommittee of the National Advisory Allergy and Infectious Diseases Council (NAAIDC). The Chair is selected by the Director, NIAID, from the membership of the Committee. There are two ex officio members, one from the Centers for Disease Control and Prevention to be selected by that organization, and a National Institutes of Health intramural scientist engaged in clinical research. A member of the Office of AIDS Research Advisory Council (OARAC), National Institutes of Health (NIH) acts, as liaison representative to ensure adequate communication on critical issues of concern to both Committees.

FUNCTION

Advises and makes recommendations to Director, NIAID, and the Director, DAIDS, in all areas of biomedical research on HIV infection and AIDS related to the mission of DAIDS, including pathogenesis, natural history and transmission of HIV disease, and those efforts which support progress in its detection, treatment, and prevention. The Committee provides broad scientific, programmatic, and budgetary advice on all aspects of HIV-related research supported by NIAID, including fundamental basic and clinical research, discovery and development of vaccines and other preventative interventions, and training of researchers in these activities. This includes the review of progress and productivity of ongoing efforts, assistance in identifying critical gaps/obstacles to progress, and approval of concepts for new initiatives.

MEETINGS

Meetings are normally held three times a year in conjunction with the AIDS Subcommittee of the NAAIDC, at the call of the Chair with the advance approval of a Government official. A Government official approves the agenda and is present at all meetings of the Committee.

COMMITTEE ROSTER

DIVISION OF INTRAMURAL RESEARCH BOARD OF SCIENTIFIC COUNSELORS

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of ten members, including the Chair. The Chair and members are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of microbiology, immunology and clinical research in allergy and infectious diseases. Members shall be invited to serve for overlapping terms of up to five years. The term for a member who is to serve as Chair may include a fifth year.

FUNCTION

Advises the Director, NIH; the Deputy Director for Intramural Research, NIH; the Director, NIAID; and the Scientific Director, Division of Intramural Research, NIAID, concerning the Institute's intramural research programs through periodic visits to the laboratories for assessment of research in progress, the proposed research, and evaluation the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately twice a year at the call of the Executive Secretary or other designated government official, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

VACCINE RESEARCH CENTER BOARD OF SCIENTIFIC COUNSELORS

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of ten members, including the Chair. The Chair and members are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of microbiology, immunology and clinical research in allergy and infectious diseases. Members shall be invited to serve for overlapping terms of up to five years. The term for a member who is to serve as Chair may include a fifth year.

FUNCTION

Advises the Director, NIH; the Deputy Director for Intramural Research, NIH; the Director, NIAID; and the Director, Vaccine Research Center, NIAID, concerning the Institute's intramural research programs through periodic visits to the laboratories for assessment of research in progress, the proposed research, and evaluation the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately twice a year at the call of the Executive Secretary or other designated government official, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

MICROBIOLOGY, INFECTIOUS DISEASES AND AIDS INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of its subcommittees shall be selected by the Director, NIH, or designee, from authorities knowledgeable in the various disciplines and fields relating to microbiology and infectious diseases, including sexually-transmitted diseases, enteric diseases, recombinant DNA research, hepatitis, influenza and other viral respiratory infections, mechanisms of resistance to antimicrobial agents, streptococcal disease and sequelae, biological regulation of vectors of human disease, immunology and parasitic infections, antiviral substances, hospital-associated infections, chronic and degenerative diseases of man of possible viral etiology, general research programs in bacteriology, mycology, virology, rickettsiology, parasitology, microbial physiology, genetics and activities in basic, applied, preclinical and clinical extramural research associated with the human immunodeficiency virus (AIDS) and related retroviruses. Members shall be invited to serve for overlapping terms of up to four years; the term for a member who is to serve as Chair may include a fifth year. As necessary, standing and ad hoc subcommittees of the Initial Review Group, composed of members from the parent committee, may be established to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Institute of Allergy and Infectious Diseases, regarding research grant and cooperative agreement applications and contract proposals relating to the aforementioned areas.

MEETINGS

Meetings of the Initial Review Group and/or its subcommittees shall be held approximately three times a year at the call of the Chair, with the advance approval of a Government official who approves the agenda.

COMMITTEE ROSTER

ALLERGY, IMMUNOLOGY, AND TRANSPLANTATION RESEARCH COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members, including the Chair, selected by the Director, NIH, from authorities knowledgeable in the various disciplines and fields relating to allergy, clinical immunology, immunobiology, immunopathology, immunochemistry, immunogenetics, and transplantation biology.

FUNCTION

Advises the Director, NIH, and the Director, National Institute of Allergy and Infectious Diseases, regarding research grant and cooperative agreement applications and contract proposals relating to the aforementioned areas.

MEETINGS

Meetings are held approximately three times a year at the call of the Chair, with the advance approval of a Government official who approves the agenda.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of immunology, immunobiology, immunologic and allergic diseases, transplantation, microbiology and infectious diseases, mycology, virology, epidemiology, drug development and synthesis, therapeutics research, tropical diseases, sexually transmitted diseases, vaccinology, AIDS and AIDS-related research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Institute of Allergy and Infectious Diseases (NIAID), regarding research grant and cooperative agreement applications and contract proposals relating to the aforementioned areas.

MEETINGS

Meetings of the Panel will be held as necessary as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES ADVISORY COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and five nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS), the Chief Medical Officer of the Department of Veterans Affairs, and the Assistant Secretary of Defense for Health Affairs (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Twelve of the appointed members are selected from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the areas of arthritis and musculoskeletal and skin diseases, including sports-related disorders; and six are selected from the general public including leaders in the fields of public policy, law, health policy, economics and management. The Chair of the Council is selected by the Secretary from among the appointed members, or the Secretary may select the Director, NIAMS.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIAMS, on matters relating to the conduct and support of research training, health information dissemination, and other programs with respect to arthritis and musculoskeletal and skin diseases, including sports-related disorders. Prepares and contributes to reports and makes recommendations concerning progress, objectives, future directions, and policy emphasis of the Institute.

MEETINGS

Meetings are held not less than three times a year as called by the Chair, with the advance approval of a Government official or upon the request of the Director, NIAMS. A Government official approves the agenda and is present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

NATIONAL ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES BOARD OF SCIENTIFIC COUNSELORS

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended, (5 U.S.C. Appendix 2).

STRUCTURE

Consists of ten members, including the Chair, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the basic and clinical medical sciences related to the fields of arthritis and musculoskeletal and skin diseases. Members are invited to serve for overlapping terms of up to five years. The term for the Chair of the committee may include a fifth year.

FUNCTION

Advise the Director, NIH, the Deputy Director for Intramural Research, NIH and the Director, National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS), concerning the Institute's intramural research programs through periodic visits to the laboratories to assess the research in progress and evaluate the productivity and performances of staff scientists. Results and recommendations of the Board are submitted to the Scientific Director who reports at least annually to the National Arthritis and Musculoskeletal and Skin Diseases Advisory Council.

MEETINGS

Meetings are held approximately twice a year, as called by the Chair, with the advance approval of a Government official, who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES SPECIAL GRANTS REVIEW COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended, (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 12 members, including the Chair, designated by the Director, National Institutes of Health (NIH), from outstanding authorities knowledgeable in the areas of research related to arthritis, muscle and musculoskeletal and skin diseases, dermatology, and sports-related disorders. Members are invited to serve for overlapping terms of four years.

FUNCTION

Advises the Director, NIH, and the Director, National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS), concerning the scientific and technical merit of grant applications, cooperative agreements, and contract proposals for special research programs, including program projects and centers, institutional fellowships, conference grants, and special developmental award programs. The Committee also provides recommendations to the National Arthritis and Musculoskeletal and Skin Diseases Advisory Council and surveys research fields, assessing the status and needs of these areas.

MEETINGS

Meetings are held approximately three times a year, as called by the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director of National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS), regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to the areas of arthritis and musculoskeletal and skin diseases, including sports-related disorders.

MEETINGS

Meetings of the Panel are held, as necessary, as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL ADVISORY COUNCIL OF BIOMEDICAL IMAGING AND BIOENGINEERING

AUTHORITY

Established pursuant to 42 U.S.C. 285r, section 464z of the PHS Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

The Council shall consist of 12 members appointed by the Secretary; and eight nonvoting ex officio members: the Secretary; the Director, National Institutes of Health (NIH); the Director, National Institute for Biomedical Imaging and Bioengineering (NIBIB); the Chief Medical Director of the Department of Veterans Affairs; the Assistant Secretary of Defense for Health Affairs; the Director of the Centers for Disease Control and Prevention; the Director of the National Science Foundation; and the Director of the National Institute of Standards and Technology (or their designees); and such additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Of the appointed members, six shall be selected from among scientists, engineers, physicians, and other health professionals who represent disciplines in biomedical imaging and bioengineering and who are not officers or employees of the United States. Members are invited to serve for overlapping four-year terms, except that any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of that term. The Chair of the Council shall be selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NIBIB, to be the Chair. The term of office of the Chair shall be two years.

FUNCTION

Advises the Secretary; the Assistant Secretary for Health; the Director, NIH; and the Director, NIBIB, on matters relating to the conduct and support of research, training, health information dissemination, and on other programs that address biomedical imaging, biomedical engineering, and associated technologies and modalities with biomedical applications.

MEETINGS

Meetings shall be held not less than three times a year at the call of the Chair, with the advance approval of a Government official, or upon the request of the Director, NIBIB. A Government official shall approve the agenda and shall be present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF BIOMEDICAL IMAGING AND BIOENGINEERING SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402 (b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Institute of Biomedical Imaging and Bioengineering (NIBIB), regarding concept review, research grant and cooperative agreement applications, and contract proposals relating to biomedical imaging, bioengineering, information science, physics, chemistry, mathematics, material science, engineering, computer science, medical sciences, and life sciences.

MEETINGS

Meetings of the Panel are held as necessary as determined by the Designated Federal Official who will also approve the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL CANCER ADVISORY BOARD

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the President, and 12 nonvoting ex officio members: the Secretary of Health and Human Services (HHS); the Director of the Office of Science and Technology Policy; the Director, National Institutes of Health (NIH); the Chief Medical Director of the Department of Veterans Affairs; the Director of the National Institute for Occupational Safety and Health; the Director of the National Institute of Environmental Health Sciences; the Secretary of Labor; the Commissioner of the Food and Drug Administration; the Administrator of the Environmental Protection Agency; the Chairman of the Consumer Product Safety Commission; the Assistant Secretary of Defense for Health Affairs; and the Director of the Office of Energy Research of the Department of Energy (or their designees). Twelve of the appointed members are from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute; not less than five of the appointed members are knowledgeable in environmental carcinogenesis (including carcinogenesis involving occupational and dietary factors); and six of the appointed members are representatives from the general public, including leaders in fields of public policy, law, health policy, economics and management. Members are invited to serve for overlapping six-year terms. The President designates one of the appointed members to serve as Chair for a term of two years. In the absence of the Chair, the Director, National Cancer Institute (NCI) designates an Acting Chair from among the appointed members.

FUNCTION

Advises the Secretary and the Director, NCI, on matters relating to the activities of the NCI and policies respecting these activities; recommends for support grants and cooperative agreements.

MEETINGS

Meetings are held not less than four times a year at the call of the Chair with the advance approval of a Government official. A Government official approves the agenda and is present at all meetings of the full committee or of any subcommittee.

COMMITTEE ROSTER

PRESIDENT'S CANCER PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 285a-4, section 415 of the Public Health Service Act, as amended. The Panel is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of three members appointed by the President, who by virtue of their training, experience, and background are exceptionally qualified to appraise the National Cancer Program. At least two of the members are distinguished scientists or physicians. Members are appointed for three-year terms. The President designates one of the members to serve as Chair for a term of one year.

FUNCTION

Monitors the development and execution of the activities of the National Cancer Program and reports directly to the President. Any delays in rapid execution of the Program are immediately brought to the attention of the President.

MEETINGS

Meetings are held not less than four times a year, at the call of the Chair with the advance approval of a Government official. A Government official approves the agenda and is present at all meetings.

COMMITTEE ROSTER

ADVISORY COMMITTEE TO THE DIRECTOR, NATIONAL CANCER INSTITUTE

AUTHORITY

Established pursuant to 42 U.S.C. 285a-2(b)(7), section 413(b)(7) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 10 members, who serve for the duration of their terms as Chair or Cochairs of their respective committees. The Director, National Cancer Institute (NCI) as Chair; and the Chair, National Cancer Advisory Board, and the Chairs and Cochairs of the Board of Scientific Counselors (BSC) and Board of Scientific Advisors (BSA), respectively; the chair of the NCI Director's Consumer Liaison Group; and three nonvoting ex officio members: the Deputy Director, NCI; Deputy Director for Extramural Science, NCI; and the Director, Division of Extramural Activities, NCI. Any individual designated as Acting for any of those positions may serve as a full member of the Committee in the absence of permanent appointments to the named positions.

FUNCTION

Advises the Director, NCI on matters relating to the oversight and integration of various planning and advisory groups serving the broad programmatic and institutional objectives of the Institute. Serves as the official channel through which the findings and recommendations emerging from these groups are submitted to the NCI. Considers the reports of the various review groups as informational, advisory, or as recommendations, and provides the NCI with assistance in identifying opportunities to be pursued within the areas of cancer research that cut across the intramural and extramural programs.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL CANCER INSTITUTE BOARD OF SCIENTIFIC ADVISORS

AUTHORITY

Established pursuant to 42 U.S.C. 285a-2(b)(7), section 413(b)(7) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 35 members, including the Chair and Subcommittee Chairs appointed by the Director, National Cancer Institute (NCI), from authorities knowledgeable in the fields of laboratory, clinical and biometric research, clinical cancer treatment, cancer etiology, and cancer prevention and control, with emphasis on training and experience in the various disciplines and fields related to scientific areas relevant to carcinogenesis, cancer biology and diagnosis, cancer center administration, medicine, radiological and surgical oncology, cancer chemotherapy, cancer epidemiology, cancer prevention and control, cancer education, cancer information services, community outreach, biological, chemical and physical carcinogenesis, DNA repair and effects, tumor biology and immunology, humoral and cellular immunity, hematopoiesis, cell differentiation and transformation, oncogenes and growth factors, molecular and structural biology and genetic regulation, viral oncology, vaccine development, transplantation, chemotherapy, clinical trial design, management and evaluation, pharmacology, drug development and developmental therapeutics, genetic and immunotherapies, pathology, diagnostic research and cytogenetics, biological response modifiers, imaging, nutrition, survey research, epidemiology, biostatistics, rehabilitation, psychology and behavioral medicine, public health and community oncology, quality of life, pain management, cancer detection and diagnosis, cancer treatment and restorative care, dentistry, nursing, public health, nutrition, education of health professionals, medical oncology, surgery, radiotherapy, gynecologic oncology, pediatric oncology, pathology, and biostatistics. Members are invited to serve for overlapping terms of up to five years.

FUNCTION

Advises the Director and Deputy Director for Extramural Science, NCI, and the Director of each NCI Division on a wide variety of matters concerning scientific program policy, and progress and future direction of extramural research programs of each of the Divisions. This includes those activities which it considers meritorious and consistent with the Institute's programs. The advisory role of the Board is scientific and does not include deliberation on matters of public policy.

MEETINGS

Meetings of the full Board are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who also approves the agenda. Meetings of the Board are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Board and its subcommittees.

COMMITTEE ROSTERS

NATIONAL CANCER INSTITUTE CLINICAL TRIALS ADVISORY COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 285a-2(b)(7), section 413(b)(7) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

The Committee shall consist of 25 members, including the Deputy Director for Translational and Clinical Sciences, NCI as Chair. Ten of the members will hold concurrent membership on either the National Cancer Advisory Board, Board of Scientific Advisors, Board of Scientific Counselors (Basic Sciences and Clinical Epidemiology), or Director's Consumer Liaison Group. Members shall be authorities knowledgeable in the fields of community oncology, surgical oncology, medical oncology, radiation oncology, patient advocacy, extramural clinical investigation, regulatory agencies, pharmaceutical industry, public health, clinical trials design, management and evaluation, drug development and developmental therapeutics, cancer education, cancer information services, community outreach, vaccine development, cellular oncology, molecular oncology, pediatric oncology, clinical, basic and translational research, cancer center administration, cancer biology and diagnosis, cancer epidemiology, biostatistics, quality of life, pain management, cancer treatment and restorative care, and education of health professionals.

FUNCTION

Advises the Director, NCI, NCI Deputy Directors, and the Director of each NCI Division on the NCI-supported national clinical trials enterprise to build a strong scientific infrastructure by bringing together a broadly developed and engaged coalition of stakeholders involved in the clinical trials process.

MEETINGS

Meetings are held approximately three times a year at the call of the Chair with the advance approval of Government official. A Government official approves the agenda and is present at all meetings of the Board and its subcommittees.

COMMITTEE ROSTER

NATIONAL CANCER INSTITUTE DIRECTOR'S CONSUMER LIAISON GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 285a-2(b)(7), section 413(b)(7) of the Public Health Service Act, as amended. The committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 16 members, including the Chair and Vice Chair, appointed by the Director, National Cancer Institute (NCI). Members are consumer advocates who are involved in cancer advocacy and the cancer experience, and represent a constituency with which they communicate on a regular basis. Members are invited to serve for overlapping terms of up to four years.

FUNCTION

Advises the Director, NCI, from the perspective and viewpoint of cancer consumer advocates on a wide variety of issues, programs and research priorities. The Committee shall serve as a channel for consumer advocates to voice their views and concerns.

MEETINGS

Meetings are held approximately two times a year, at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS FOR BASIC SCIENCES, NATIONAL CANCER INSTITUTE

AUTHORITY

42 U.S.C. 284(c)(3), section 405(c)(3) of the PHS Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

STRUCTURE

Consists of 30 members, including the Chair appointed by the Director, NCI, from authorities knowledgeable in the fields of laboratory, clinical and biometric research, clinical cancer treatment, cancer etiology, and cancer prevention and control with emphasis on training and experience in the various disciplines and fields related to scientific areas relevant to carcinogenesis, cancer biology and diagnosis, medicine, cancer chemotherapy, cancer epidemiology, cancer prevention and control, cancer education, cancer information services, biological, chemical and physical carcinogenesis, DNA repair and effects, tumor biology and immunology, humoral and cellular immunity, hematopoiesis, cell differentiation and transformation, oncogenes and growth factors, molecular and structural biology and genetic regulation, viral oncology, vaccine development, transplantation, chemotherapy, pharmacology, drug development and developmental therapeutics, genetic and immunotherapies, pathology, diagnostic research and cytogenetics, biological response modifiers, imaging, nutrition, survey research, biostatistics, psychology and behavioral medicine, public health and community oncology, cancer detection and diagnosis, cancer treatment and restorative care, nutrition, education of health professionals, medical oncology, gynecologic oncology, and pediatric oncology. Members are invited to serve for overlapping terms of up to five years. The term for the Chair may include a fifth year.

FUNCTION

Advises the Director of CCR, and the Director and Deputy Director, NCI, on a wide variety of matters concerning scientific program policy and progress and future direction of research programs in Basic Sciences.

MEETINGS

Meetings of the full Board shall be held approximately three times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official shall be present at all meetings.

COMMITTEE ROSTERS

BOARD OF SCIENTIFIC COUNSELORS FOR CLINICAL SCIENCES AND EPIDEMIOLOGY, NATIONAL CANCER INSTITUTE

AUTHORITY

42 U.S.C. 284(c)(3), section 405(c)(3) of the PHS Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

STRUCTURE

Consists of 30 members, including the Chair appointed by the Director, NCI, from authorities knowledgeable in the fields of laboratory, clinical and biometric research, clinical cancer treatment, cancer etiology, and cancer prevention and control with emphasis on training and experience in the various disciplines and fields related to scientific areas relevant to carcinogenesis, cancer biology and diagnosis, cancer center administration, medicine, radiological and surgical oncology, cancer chemotherapy, cancer epidemiology, cancer prevention and control, cancer education, cancer information services, community outreach, biological, chemical and physical carcinogenesis, DNA repair and effects, tumor biology and immunology, humoral and cellular immunity, hematopoiesis, cell differentiation and transformation, oncogenes and growth factors, molecular and structural biology and genetic regulation, viral oncology, vaccine development, transplantation, chemotherapy, clinical trial design, management and evaluation, pharmacology, drug development and developmental therapeutics, genetic and immunotherapies, pathology, diagnostic research and cytogenetics, biological response modifiers, imaging, nutrition, survey research, epidemiology, biostatistics, rehabilitation, psychology and behavioral medicine, public health and community oncology, quality of life, pain management, cancer detection and diagnosis, cancer treatment and restorative care, dentistry, nursing, public health, nutrition, education of health professionals, medical oncology, surgery, radiotherapy, gynecologic oncology, and pediatric oncology. Members shall be invited to serve for overlapping terms of up to five years. The term for a member who is to serve as Chair may include a fifth year.

FUNCTION

Advises the Directors of CCR and DCEG, and the Director and Deputy Director, NCI, on a wide variety of matters concerning scientific program policy and progress and future direction of research programs in Clinical Sciences and Epidemiology.

MEETINGS

Meetings of the full Board shall be held approximately three times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official shall be present at all meetings.

COMMITTEE ROSTER

NATIONAL CANCER INSTITUTE INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 284(c)(3), section 405(c)(3) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Cancer Institute (NCI), from authorities knowledgeable in the various disciplines and fields related to scientific areas relevant to carcinogenesis, cancer biology and diagnosis, cancer center administration, medicine, radiological and surgical oncology, cancer chemotherapy, cancer epidemiology, cancer prevention and control, cancer education, cancer information services, community outreach, biological, chemical and physical carcinogenesis, DNA repair and effects, tumor biology and immunology, humoral and cellular immunity, hematopoiesis, cell differentiation and transformation, oncogenes and growth factors, molecular and structural biology and genetic regulation, viral oncology, vaccine development, transplantation, chemotherapy, clinical trial design, management and evaluation, pharmacology, drug development and developmental therapeutics, genetic and immunotherapies, pathology, diagnostic research and cytogenetics, biological response modifiers, imaging, nutrition, survey research, epidemiology, biostatistics, rehabilitation, psychology and behavioral medicine, public health and community oncology, quality of life, pain management, cancer detection and diagnosis, cancer treatment and restorative care, dentistry, nursing, public health, education of health professionals, medical oncology, surgery, radiotherapy, gynecologic oncology, pediatric oncology, and pathology. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year.

FUNCTION

Advises the Director, NCI, and the Director, Division of Extramural Activities, NCI, on the scientific and technical merit of applications for grants for research, research training, or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to carcinogenesis, cancer biology and diagnosis, cancer center administration, medicine, radiological and surgical oncology, cancer chemotherapy, cancer epidemiology, cancer prevention and control, cancer education, cancer information services, community outreach, cancer detection and diagnosis, cancer treatment and restorative care, dentistry, nursing, public health, nutrition, education of health professionals, medical oncology, surgery, radiotherapy, gynecologic oncology, pediatric oncology, pathology, and biostatistics.

MEETINGS

Meetings of the full Initial Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Initial Review Group and its subcommittees.

COMMITTEE ROSTERS

NATIONAL CANCER INSTITUTE SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 284(c)(3), section 405(c)(3) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chairs, selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Cancer Institute (NCI), and the Director, Division of Extramural Activities, regarding research grant and cooperative agreement applications, contract proposals and concept review relating to basic and clinical sciences, and applied research and development programs of special relevance to the NCI.

MEETINGS

Meetings of the Panel are held, as necessary, as determined by the Designated Federal Official who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL ADVISORY CHILD HEALTH AND HUMAN DEVELOPMENT COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and five nonvoting ex officio members: the Secretary of Health and Human Services, the Director, National Institutes of Health (NIH), the Director, National Institute of Child Health and Human Development (NICHD), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs (or their designees), and a representative from the Maternal and Child Health Bureau, Health Resources and Services Administration. Twelve of the appointed members are from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the area of obstetrics, gynecology, pediatrics, genetics, perinatology, reproductive biology, developmental biology, physiology, biochemistry, endocrinology, nutrition, psychiatry, medical rehabilitation, child development, and demography; and six are from the general public and shall include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members or the Secretary may select the Director, NICHD, to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NICHD, on matters relating to maternal health; child health; mental retardation; human growth and development, including prenatal development; population research; medical rehabilitation; and special health problems and requirements of mothers and children. Make recommendations to the Director, NICHD, respecting research conducted at the Institute.

MEETINGS

Meetings are held three times a year at the call of the Chair with the advance approval of a Government official. A Government official approves the agenda and is present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

NATIONAL CHILDREN'S STUDY ADVISORY COMMITTEEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Publish Health Service Act, as amended. The committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of not more than 40 members, including the Chair, appointed by the Director, National Institutes of Health (NIH), who represents nonfederal interests and 4 ex offficio members, the Director, National Institute of Child Health and Human Development (NICHD), the Secretary, Department of Housing and Urban Development, the Secretary, Department of Education, and the Assistant Administrator, Agency for Toxic Substances and Disease Registry. The Chair of the committee is a Federal member. Members are appointed from among, but not limited to state, local, and tribal governments, academia, industry, community and public interest groups. Nonfederal members are experts in the fields of multidisciplinary activity, such as epidemiology, pediatrics, toxicology, biostatics, bioethics, public health, applicable law, social sciences, and patient advocacy. Members are invited to serve overlapping terms of up to four years.

FUNCTION

Advises, consults, and make recommendations to the Director, NICHD and the Interagency Coordinating Committee of the National Longitudinal Study on the planning and implementation of the Longitudinal Cohort Study.

MEETINGS

Meetings are held at least once a year at the call of the Chair with the advance approval of al Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL ADVISORY BOARD ON MEDICAL REHABILITATION RESEARCH

AUTHORITY

Established pursuant to 42 U.S.C. 285g-4, section 452 of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Director, National Institutes of Health (NIH), who are not officers or employees of the Federal Government, and 16 ex officio members: Director, National Center for Medical Rehabilitation Research (NCMRR), Director, National Institute of Child Health and Human Development (NICHD), Director, National Institute on Aging, Director, National Institute of Arthritis and Musculoskeletal and Skin Diseases, Director, National Cancer Institute, Director, National Institute on Deafness and Other Communication Disorders, Director, National Heart, Lung, and Blood Institute, Director, National Institute of Neurological Disorders and Stroke, Director, National Institute of Nursing Research, Director, National Institute on Disability and Rehabilitation Research, Department of Education, Commissioner, Rehabilitation Services Administration, Department of Education, Assistant Secretary of Defense for Health Affairs, Chief Medical Director, Department of Veterans Affairs, Director, National Science Foundation, Director, National Council on Disability, and Director, Center for Disease Control and Prevention(or designees). Twelve of the appointed members are representatives of health and scientific disciplines related to medical rehabilitation and six are representatives of the interests of individuals undergoing, or in need of, medical rehabilitation. Members are invited to serve for overlapping four-year terms. Members of the Board select a Chair from the appointed members.

FUNCTION

Advises the Director, NIH, the Director, NICHD, and the Director, NCMRR, on matters and policies relating to the Centers medical rehabilitation research and training programs. Reviews and assesses Federal research priorities, activities, and findings regarding medical rehabilitation research and advises on the provision of the statute-required comprehensive plan for the conduct and support of medical rehabilitation research.

MEETINGS

Meetings are held twice a year at the call of the Chair with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT BOARD OF SCIENTIFIC COUNSELORS

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 12 members, including the Chair appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of developmental neurobiology, developmental pharmacology, pharmacogenetics, social and behavioral science, pregnancy research, reproductive endocrinology, molecular genetics, developmental endocrinology, human genetics, developmental and molecular immunity, theoretical and physical biology, and neurochemistry and neuroimmunology, and reproductive, perinatal and pediatric epidemiology and statistics. Members are invited to serve for overlapping five-year terms. The term for the Chair of the committee may include a fifth year.

FUNCTION

Advise the Director, NIH, the Deputy Director for Intramural Research, NIH, and the Director, National Institute of Child Health and Human Development (NICHD), concerning the Institute's intramural research programs through periodic visits to the laboratories to assess the research in progress and evaluate the productivity and performance of staff scientists. Results and recommendations of the Board are submitted to the Scientific Director who reports at least annually to the National Advisory Child Health and Human Development Council.

MEETINGS

Meetings are held two times a year, at the call of the Chair with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields. Members are invited to serve for overlapping terms of up to four years. The term for the Chair of the committee may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Institute of Child Health and Human Development (NICHD), on the scientific and technical merit of applications for grants-in-aid for research, research training, or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to maternal and child health, reproductive and population sciences, mental retardation, developmental disabilities, and medical rehabilitation. Survey, as scientific leaders, the status of research and research training in their fields.

MEETINGS

Meetings of the full Initial Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government Official who approves the agenda. Meetings of the Subcommittees are held approximately 3 times a year at the call of the Chair. A Government official is present at all meetings of the Initial Review Group and of the subcommittees.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S. C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S. C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director of National Institute of Child Health and Human Development (NICHD) regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to the areas of maternal and child health, reproductive and population sciences, mental retardation, developmental disabilities, and medical rehabilitation.

MEETINGS

Meetings of the Panel are held, as necessary, as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL DEAFNESS AND OTHER COMMUNICATION DISORDERS ADVISORY COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and six nonvoting ex officio members: the Secretary of Health and Human Services, the Director, National Institutes of Health (NIH), the Director, National Institute on Deafness and Other Communication Disorders (NIDCD), the Director of the Center for Disease Control and Prevention, the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs (or their designees), and such additional officers or employees of the United States as the Secretary determines necessary for the Council to carry out its functions effectively. Of the 18 appointed members, 12 are selected from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the areas of deafness and other communication disorders. Six of the members are appointed by the Secretary from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members or the Secretary may select the Director, NIDCD, to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIDCD, on matters relating to the conduct and support of research and research training, health information dissemination, and other programs with related to normal and disordered communication processes, including diseases and disorders of hearing, balance, smell, taste, voice, speech, and language.

MEETINGS

Meetings are held not less than three times each year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NIDCD. A Government official approves the agenda and is present at all meetings of the full committee or any subcommittee.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS, NATIONAL INSTITUTE OF DEAFNESS AND OTHER COMMUNICATION DISORDERS

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of nine members, including the Chair. The Chair and members are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines related to the research activities of the National Institute on Deafness and Other Communication Disorders (NIDCD). Members are invited to serve for overlapping terms of up to five years. The term for the Chair of the committee may include a fifth year.

FUNCTION

Advises the Director and the Deputy Director for Intramural Research, NIH, and the Director, NIDCD, concerning the Institute's intramural research programs through periodic reviews of the Laboratories or Branches of the NIDCD Division of Intramural Research to assess research in progress, proposed research, and the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, with the advanced approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

COMMUNICATION DISORDERS REVIEW COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 21 members, including the Chair. The members and Chair are selected by the Director, National Institutes of Health (NIH), from authorities in academic medicine, basic research, and clinical sciences related to the mission of the National Institute on Deafness and Other Communication Disorders (NIDCD). Members are invited to serve for overlapping terms of up to four years. The term for the Chair of the committee may include a fifth year. The committee may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the committee's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, NIDCD, concerning programs and activities in the areas of communication sciences. The Committee provides the primary technical merit review of contract proposals and grant applications for program projects, specialized centers, planning grants for specialized centers, multi-institutional clinical trials, small grants and conference grants in the aforementioned areas and recommends approval of those applications and proposals which it deems worthy of support. The Committee also reviews applications for Institutional National Research Service Awards (training grants) and Clinical Investigator Development Awards.

MEETINGS

Meetings of the Committee are normally held approximately three times a year at the call of the Chair, with the advance approval of a Government official who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE ON DEAFNESS AND OTHER COMMUNICATION DISORDERS SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on "as needed" basis in response to specific applications proposals on proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director of the National Institute on Deafness and Other Communication Disorders (NIDCD), regarding research grant and cooperative agreement applications and contract proposals, relating to communication sciences and disorders, such as hearing, balance, smell, taste, voice, speech and language.

MEETINGS

Meetings of the panels are held as necessary as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL ADVISORY DENTAL AND CRANIOFACIAL RESEARCH COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 13 members appointed by the Secretary and 5 nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Institute of Dental and Craniofacial Research (NIDCR), the Chief Dental Director of the Department of Veterans Affairs, and the Assistant Secretary of Defense for Health Affairs (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Of the 13 appointed members, 9 are selected from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the areas of the study, diagnosis, treatment or prevention of dental, oral and craniofacial diseases and conditions. Four of the members are appointed by the Secretary from the general public and will include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms, except that any member appointed to fill a vacancy for an unexpired term is appointed for the remainder of that term. The Chair of the Council is selected by the Secretary from among the appointed members, or the Secretary may select the Director, NIDCR, to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIDCR, on matters relating to the conduct and support of research, training, health information dissemination and other programs carried out, by and through the Institute.

MEETINGS

Meetings are held not less than three times a year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NIDCR. A Government official approves the agenda and is present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS, NATIONAL INSTITUTE OF DENTAL AND CRANIOFACIAL RESEARCH

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of nine members, including the Chair. The Chair and members are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of basic and clinical sciences related to the research activities of the National Institute of Dental and Craniofacial Research (NIDCR). Members are invited to serve for overlapping terms of up to five years. The term for the Chair of the committee may include a fifth year.

FUNCTION

Advises the Director, NIH, the Deputy Director for Intramural Research, NIH, and the Director, NIDCR, concerning the Institute's intramural research programs through periodic visits to the laboratories to assess the research in progress and evaluate the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF DENTAL AND CRANIOFACIAL RESEARCH SPECIAL GRANTS REVIEW COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of dental, medical and fundamental sciences, as well as academic and public administration. Members are invited to serve for overlapping terms of up to four years. The term for the Chair of the Committee may include a fifth year. The Committee may have standing subcommittees, to perform specific functions within the Committee's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Institute of Dental and Craniofacial Research (NIDCR), concerning programs and activities in the areas relating to the cause, diagnosis, and treatment of dental diseases and conditions in order that program priorities can be established and research developments can be appraised for future planning. The Committee provides a primary review of grant applications, cooperative agreements, and contract proposals for special research programs, including program projects and centers, institutional fellowships, conference proposals, and special developmental award programs in the aforementioned areas and recommends approval of those applications and proposals which it finds worthy of support.

MEETINGS

Meetings of the Committee will normally be held three times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE ON DENTAL AND CRANIOFACIAL RESEARCH SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director of the National Institute of Dental and Craniofacial Research (NIDCR), regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to the cause, diagnosis, and treatment of dental diseases and dental research.

MEETINGS

Meetings of the Panel will be held as necessary as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL DIABETES AND DIGESTIVE AND KIDNEY DISEASES ADVISORY COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and six nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs, and the Assistant Secretary for Science and Education, United States Department of Agriculture (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Of the eighteen appointed members, twelve are selected from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the areas of diabetes mellitus, endocrinology, metabolism, digestive diseases, nutrition, nephrology, urology, and hematology. Six of the members are appointed by the Secretary from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members, or the Secretary may select the Director, NIDDK, to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIDDK, on matters relating to the conduct and support of research, training, health information dissemination, and other programs with respect to diabetes mellitus and endocrine and metabolic diseases; digestive diseases and nutrition; and kidney, urologic, and hematologic diseases.

MEETINGS

Meetings are held not less than three times each fiscal year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NIDDK. A Government official approves the agenda and is present at all meetings of the full committee or of any subcommittee.

COMMITTEE ROSTER

NATIONAL COMMISSION ON DIGESTIVE DISEASES NATIONAL INSTITUTE ON DIABETES AND DIGESTIVE AND KIDNEY DISEASES

AUTHORITY

42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. Thes Commission is governed by the provisions of the Federal Advisory Committee Act (FACA), Public Law 92-463, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 16 members appointed by the Director, NIH and 18 nonvoting ex officio members. The appointed members, who shall have a broad diversity of scientific and professional experience, 12 shall be knowledgeable about digestive diseases as members of academic or medical research and practice communities involved in digestive diseases research, including individuals in allied health specialties relevant to digestive diseases research. Four members shall be appointed who have close personal or family experience with digestive diseases or experience with patient-oriented organizations in digestive diseases.

FUNCTION

Conducts an overview of the state-of-the-science in the field of digestive diseases research and develops a long-range plan for digestive diseases research consistent with the research mission of NIH. The overall plan will focus on the goal of improving the health of the nation through digestive diseases research and will include specific objectives and goals and a recommended time line for their implementation. Recommendations shall be made to the Director, NIH and to Congress.

MEETINGS

The Commission shall meet as appropriate as determined by the Chair. Meetings shall be held at the call of the Chair, with advance approval of a Government official, who shall also approve the agenda. A Government official shall be present at all meetings.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS, NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of eight members, including the Chair. The Chair and members are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the basic and clinical medical sciences related to the fields of diabetes, endocrine and metabolic diseases; digestive diseases and nutritional disorders; and kidney, urologic and hematologic diseases. Members are invited to serve for overlapping terms of up to five years. The term for the Chair of the committee may include a fifth year.

FUNCTION

Advises the Director, NIH, the Deputy Director for Intramural Programs, NIH, and the Director, National Institute of Diabetes and Digestive and Kidney Diseases, (NIDDK), concerning the Institute's intramural research programs through periodic visits to the laboratories to assess the research in progress and evaluate the productivity and performance of staff scientists.

MEETINGS

Meetings are held twice a year at the call of the Chair with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6); section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chair of the subcommittee are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields related to diabetes mellitus endocrine and metabolic diseases; digestive diseases and nutritional disorders; and kidney urologic and hematologic diseases. Members are invited to serve for overlapping terms of up to four years. The term for the Chair of the committee may include a fifth year. The committee may have standing and ad hoc subcommittees, composed of members from the parent committee, to perform specific functions within the committee's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), on the scientific and technical merit of applications for grants-in-aid for research, research training, or research related grants and cooperative agreements, and contract proposals relating to scientific areas relevant to diabetes mellitus, endocrine and metabolic diseases; digestive diseases and nutritional disorders; and kidney, urologic, and hematologic diseases.

MEETINGS

Meetings for the full Initial Review Group are held in plenary session, as necessary, and as called by the Chair with the advance approval of a Government official who also approves the agenda. Meetings of each of the subcommittees are held approximately three times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the full committee and of the subcommittees.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to areas such as diabetes, endocrine and metabolic diseases, digestive diseases, nutritional disorders, kidney and urological diseases and disorders, and hematology.

MEETINGS

Meetings of the Panel are held as necessary as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL ADVISORY COUNCIL ON DRUG ABUSE

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and five nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Institute on Drug Abuse (NIDA), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. 12 of the appointed members are selected from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute. Six of the members are appointed by the Secretary from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. The Director, NIDA, shall designate an Institute staff member to serve as the Executive Secretary of the Council. The Chair of the Council is selected by the Secretary from among the appointed members, or the Secretary may select the Director, NIDA, to be the Chair.

FUNCTION

Advises, consults with, and makes recommendations to the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIDA, on matters relating to the development, support, and conduct of comprehensive health, education, research, epidemidogy, research training, and planning programs for the prevention and treatment of drug abuse and for the rehabilitation of drug abusers.

MEETINGS

Meetings are held not less than three times a year, at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NIDA. A Government official approves the agenda and is present at all meetings of the full committee or of any subcommittee.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS, NATIONAL INSTITUTE ON DRUG ABUSE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 12 members, including the Chair, appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the scientific, biological, and behavioral sciences related to the research activities of the National Institute on Drug Abuse (NIDA), including such areas as sociology, psychology, psychiatry, biochemistry, physiology, pharmacology, endocrinology, neuroscience, neuropharmacology, neuropsychiatry, neurobiology, pharmacology, and neuroimaging. Members are invited to serve for overlapping terms of up to five years. The term for the Chair of the committee may include a fifth year.

FUNCTION

Advises the Director, NIH, the Deputy Director for Intramural Research, NIH, the Director, NIDA, and the Scientific Director, NIDA, concerning the Institute's intramural research programs through periodic visits to the intramural laboratories to assess the research programs in progress, proposed research, and to evaluate the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair with advance approval of a Government official, who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE ON DRUG ABUSE INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields related to drug abuse research. Members are invited to serve for overlapping terms of up to four years. The term for the Chair of the committee may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction. The Chairpersons of each subcommittee shall be designated as co-Chairs for the Initial Review Group as a whole.

FUNCTION

Advises the Director, NIH, and the Director, National Institute on Drug Abuse (NIDA), on the scientific and technical merit of applications for grants-in-aid for research, research training, cooperative agreements and contract proposals relating to scientific areas relevant to drug abuse in the areas of biomedical, basic and clinical neuroscience, basic behavioral science, treatment, health services, epidemiology, prevention, human development, and AIDS.

MEETINGS

Meetings for the full Initial Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Initial Review Group and of the subcommittees.

COMMITTEE ROSTER

NATIONAL INSTITUTE ON DRUG ABUSE SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members will be selected from outstanding authorities in the various fields of drug abuse research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Institute on Drug Abuse (NIDA), regarding research grant and cooperative agreement applications, contract proposals and concept review relating to scientific areas relevant to drug abuse in the areas of biomedical, basic and clinical neuroscience, basic behavioral science, treatment, health services, epidemiology, prevention, human development, and AIDS.

MEETINGS

Meetings of the Panel will be held as necessary approximately as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY ENVIRONMENTAL HEALTH SCIENCES COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Services Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and six nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Institute of Environmental Health Sciences (NIEHS), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs, the Director, National Cancer Institute (NCI) or their designees. 12 of the appointed members are selected from among the leading representatives of the health and scientific disciplines--especially in the areas of toxicology, pharmacology, epidemiology, pathology, biochemistry, and not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences. Six members are appointed by the Secretary from the general public and include leaders in the fields of public policy, law, health policy, economics, management, and environmental justice. Members are invited to serve overlapping terms of up to four years. The Chair of the Council is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NIEHS, to be the Chair. The term of office of the Chair is two years. The Council may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Council's jurisdiction.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIEHS, on matters relating to the conduct and support of research, training, health information dissemination, and other programs with respect to factors in the environment that affect human health, directly or indirectly.

MEETINGS

Meetings of the Council are held not less than three times a year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NIEHS. A Government official approves the agenda and is present at all meetings.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS, NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of ten members, including the Chair. The Chair and members are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of environmental health sciences, e.g., biochemistry, neurobiology, cell biology, genetics, pathology, pharmacology, toxicology, biostatistics, epidemiology, etc. Members are invited to serve for overlapping terms of up to five years. The term for the Chair may include a fifth year.

FUNCTION

Advises the Director and the Deputy Director for Intramural Research, NIH and the Director, National Institute of Environmental Health Sciences, (NIEHS) concerning the Institute's intramural research programs through periodic visits to the laboratories to assess the research in progress and evaluate the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

ENVIRONMENTAL HEALTH SCIENCES REVIEW COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chair are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of toxicology, pharmacology, epidemiology, pathology, genetics, biochemistry, and other fields as necessary, and who are familiar with the program goals of the National Institute of Environmental Health Sciences. Members are invited to serve for overlapping terms of up to four years. Terms for the Chair may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Makes recommendations to the Director, NIH, the Director, National Institute of Environmental Health Sciences (NIEHS), and the National Advisory Environmental Health Sciences Council on the effects of the environment on human health and provides technical advice to the Institute in developing, monitoring, and evaluating special programs that include grant applications and cooperative agreements.

MEETINGS

Meetings of the Committee are normally held three times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

SCIENTIFIC ADVISORY COMMITTEE ON ALTERNATIVE TOXICOLOGICAL METHODS

AUTHORITY

Established pursuant to section 3(d) of Public Law 106-545, the Interagency Coordinating Committee on the Validation of Alternative Methods (ICCVAM) Authorization Act of 2000 [42 U.S.C. 285I-3(d)]. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 15 members, including the Chair. Voting members will be appointed by the Director, National Institute of Environmental Health Sciences (NIEHS), and will include representatives from an academic institution, a State government agency, and international regulatory body, or any corporation developing or marketing new or revised or alternative test methodologies, including contract laboratories. Knowledgeable representatives from public health, environmental communities, or organization using new or revised or alternative test methods from each of the following categories: (1) personal care, pharmaceutical, industrial chemicals, or agricultural industry; (2) any other industry that is regulated by one of the Federal agencies on the ICCVAM; and (3) a national animal protection organization established under section 501 (c)(3) of the Internal Revenue Code of 1986.

FUNCTION

Advises the Director, NIEHS, ICCVAM and the National Toxicology Program Center regarding the efficiency and effectiveness of Federal agency test method review, eliminate unnecessary duplicative efforts and share experiences between Federal regulatory agencies, optimize utilization of scientific expertise outside the Federal government; ensure that new and revised test methods are validated to meet the needs of Federal agencies, and reduce, refine, or replace the use of animals in testing, where feasible.

MEETINGS

Meetings are held approximately two to three times per year at the call of the Chair with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of toxicology, pharmacology, epidemiology, pathology, genetics, biochemistry, and other fields as necessary, and who are familiar with the program goals of the National Institute of Environmental Health Sciences (NIEHS).

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director of the NIEHS, regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to factors in the environment that affect human health, directly or indirectly.

MEETINGS

Meetings of the Panel are held as necessary as determined by the Designated Federal Official who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY EYE COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 12 members appointed by the Secretary, and five nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Eye Institute (NEI), the Chief Medical Director, Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to carry out its functions effectively. Eight of the appointed members are from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to blinding eye diseases, visual disorders, mechanisms of visual function, preservation of sight, and the special health problems and requirements of individuals who are blind or visually impaired; and four are from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members, or the Secretary may select the Director, NEI, to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NEI, on matters relating to the conduct and support of research, training, health information dissemination, and other programs with respect to blinding eye diseases, visual disorders, mechanisms of visual function, preservation of sight and the special health problems and requirements of individuals with visual impairments.

MEETINGS

Meetings are held not less than three times a year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NEI. A Government official approves the agenda and is present at all meetings of the full committee or of any subcommittee.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS, NATIONAL EYE INSTITUTE

AUTHORITY

Pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of seven members, including the Chair, and the Chairs of any subcommittees, appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of laboratory and clinical sciences related to vision research. Members are invited to serve for overlapping terms of up to five years. The term for the Chair may include a fifth year.

FUNCTION

Advises the Director, NIH, the Deputy Director for Intramural Research, NIH, and the Director, National Eye Institute (NEI), concerning the Institute's intramural research program through periodic visits to the laboratories to assess the research in programs in progress, the proposed research, and evaluate the productivity and performance of staff scientists. Reports at least annually to the National Advisory Eye Council the results of the review.

MEETINGS

Meetings of the full Board are held approximately twice a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Board and its subcommittees.

COMMITTEE ROSTER

NATIONAL EYE INSTITUTE SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chairs, selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields relating to vision and biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Eye Institute (NEI), regarding concept review, research grant and cooperative agreement applications and contract proposals relating to vision research, such as clinical trials, epidemiological studies, institutional NRSA training grants, core centers, and other special research programs.

MEETINGS

Meetings of the Panel are held, as necessary, as determined by the Designated Federal Official who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY GENERAL MEDICAL SCIENCES COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 14 members appointed by the Secretary and five nonvoting ex officio members: the Secretary of Health and Human Services; the Director, National Institutes of Health (NIH), the Director, National Institute of General Medical Sciences (NIGMS), the Chief Medical Director of the Department of Veterans Affairs, and the Assistant Secretary of Defense for Health Affairs (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Ten of the appointed members are from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the areas of genetics, developmental biology, cell biology, molecular biology, biophysics, chemistry, biochemistry, physiology, clinical research, bioengineering/bioinformatics, and pharmacological sciences. Four of the members appointed by the Secretary are from the general public and include leaders in the fields of public policy, law, health policy, economics and management. Members are invited to serve for overlapping four-year terms

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIGMS, on matters relating to the conduct and support of research, research training, health information dissemination, and other programs with respect to general or basic medical sciences and related natural or behavioral sciences which have significance for two or more other national research institutes or are outside the general area of responsibility of any other national research institute.

MEETINGS

Meetings are held not less than three times a year at the call of the Chair with the advance approval of a Government official. A Government official approves the agenda and is present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

MINORITY PROGRAMS REVIEW COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 26 members including the Chairs. Members and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields related to biological, chemical, physical, and behavioral sciences, and from individuals who possess familiarity with the needs of institutions serving minorities. Members are invited to serve for overlapping four-year terms. The term for the Chair may include a fifth year. The Committee may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Committee's jurisdiction.

FUNCTION

Advises the Director, NIH and the Director, National Institute of General Medical Sciences, on the scientific and technical merit of applications for grants, cooperative agreements, and contract proposals relating to programs, including institutional and individual fellowships, designed to increase the expertise and numbers of minority investigators doing biomedical research.

MEETINGS

Meets in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who shall approve the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with advance approval of a Government official who approves the agenda. A Government official is present at all meetings of the Minority Programs Review Committee and of the subcommittees.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees shall be selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields related to basic, clinical, and applied aspects of biology, chemistry, physics, and engineering. Members are invited to serve for overlapping four-year terms. The term for the Chair may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH and the Director, National Institute of General Medical Sciences on the scientific and technical merit of applications for grants-in-aid for research, research training, or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to basic biomedical, clinical, and behavioral sciences.

MEETINGS

Meets in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who shall approve the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who approves the agenda. A Government official is present at all meetings of the Initial Review Group and of the subcommittees.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S. C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members will be selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH) and the Director of the National Institute of General Medical Sciences (NIGMS), regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to the areas of basic biomedical, clinical, and behavioral sciences.

MEETINGS

Meetings of the Panel are held, as necessary, as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL HEART, LUNG, AND BLOOD ADVISORY COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and five nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Heart, Lung, and Blood Institute (NHLBI), the Chief Medical Director, Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs or their designees. Of the eighteen appointed members, twelve are selected from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the areas of the heart, blood vessels, lungs, and blood. Six of the members are appointed by the Secretary from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms, except that any member appointed to fill a vacancy for an unexpired term is appointed for the remainder of that term. The Chair of the Council is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NHLBI, to be the Chair.

FUNCTIONS

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NHLBI, on matters relating to the conduct and support of research, training, health information dissemination and other programs with respect to the cause, prevention, diagnosis, and treatment of heart, blood vessel, lung, and blood diseases, and to the use of blood and blood products and the management of blood resources. These matters also include sleep disorders.

MEETINGS

Meetings are held not less than four times a year at the call of the Chair, with the advance approval of the Director, NHLBI, who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

SICKLE CELL DISEASE ADVISORY COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of ten members including the Chair. Members and the Chair are selected by the Director, National Institutes of Health (NIH). Eight members are selected from authorities knowledgeable in the fields related to sickle cell disease such as hematology, pediatrics, family practice, health education, and behavioral science, and two public members are selected with demonstrated leadership in programs related to sickle cell disease. Members are invited to serve for overlapping terms of up to four years. In addition, there are five non-voting ex officio members: the Director, NIH; the Director, Centers for Disease Control and Prevention; the Administrator, Health Resources and Services Administration; the Chief Medical Director, Department of Veterans Affairs; and the Assistant Secretary of Defense (Health Affairs), or their designees.

FUNCTION

Advises the Director, NIH, the Director, National Heart, Lung, and Blood Institute (NHLBI), and the Director, Division of Blood Diseases and Resources (DBDR), on the Sickle Cell Disease Program, NHLBI; recommends priorities within the program; identifies research opportunities and needs; and makes recommendations concerning the planning, execution, and evaluation of the program.

MEETINGS

Meetings of the full Committee are held approximately two times a year at the call of the Chair with the advance approval of a Government official, who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

SLEEP DISORDERS RESEARCH ADVISORY BOARD

AUTHORITY

Established pursuant to 42 U.S.C. 285b-7, section 424 of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 12 members appointed by the Director, National Institutes of Health (NIH), who are not officers or employees of the Federal Government and ten ex officio members: the Director, NIH; the Director of the National Center for Sleep Disorders Research (NCSDR); the Director, National Heart, Lung, and Blood Institute (NHLBI); the Director of the National Institute of Mental Health; the Director of the National Institute on Aging; the Director of the National Institute of Child Health and Human Development; the Director of the National Institute of Neurological Disorders and Stroke; the Assistant Secretary for Health; the Assistant Secretary of Defense (Health Affairs); and the Chief Medical Director of the Department of Veterans Affairs, or their designees. Of the 12 appointed members, eight are representatives of health and scientific disciplines with respect to sleep disorders and four are individuals representing the interest of individuals with or undergoing treatment for sleep disorders. Members are invited to serve for overlapping terms of up to four years. The members of the Board designate a current member to serve as the Chair.

FUNCTION

Advises and makes recommendations to the Director, NIH, through the Director, NHLBI, and the Director, NCSDR, concerning matters related to the scientific activities carried out by and through the NCSDR and the policies respecting these activities, including development of a comprehensive plan for the conduct and support of sleep disorders research, including the identification of research priorities and provisions for coordination of sleep and sleep disorders research conducted or supported by the NIH and other Federal, professional and voluntary organizations.

MEETINGS

Meetings of the full Board are held approximately two times a year at the call of the Chair with the advance approval of a Government official, who shall also approve the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS OF THE NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 11 members, including the Chair. The Chair and members are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of basic and clinical medical sciences related to the research activities of the National Heart, Lung, and Blood Institute. Members are invited to serve for overlapping terms of up to five years. Terms for the Chair may include a fifth year.

FUNCTION

Advises the Director, NIH, the Deputy Director for Intramural Research, NIH, the Director, National Heart, Lung, and Blood Institute (NHLBI), and the Director, Division of Intramural Research, NHLBI, concerning the Institute's intramural research programs through periodic visits to the laboratories to assess the research in progress and evaluate the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL HEART, LUNG, AND BLOOD INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C Appendix 2).

STRUCTURE

Consists of 15 members including the Chair. The members and Chair are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of fundamental and clinical research in disciplines related to cardiovascular, lung, and blood diseases, as well as epidemiology, biostatistics, and clinical trial design. Members are invited to serve for overlapping terms of up to four years. The term of the Chair may include a fifth year. The Committee may have standing subcommittees, composed of members from the parent committee, to perform specific functions with the Committee's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Heart, Lung and Blood Institute (NHLBI), concerning programs and activities in the areas of preventive, diagnostic, or therapeutic measures in cardiovascular, blood, or lung diseases through cooperative studies, controlled clinical trials, or other studies related to these fields. The Committee provides an initial review of grant applications and cooperative agreements for special research programs in the aforementioned areas.

MEETINGS

Meetings of the Committee are held approximately three times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members and Chairs selected on an "as needed" basis in response to specific applications, proposals, or proposed solicitations to be reviewed. Members will be selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Heart, Lung, and Blood Institute (NHLBI), regarding concept review, research grant and cooperative agreement applications and contract proposals relating to cardiovascular, pulmonary, and blood diseases and blood resources research.

MEETINGS

Meetings are held as necessary as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all Panel meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY MENTAL HEALTH COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and five nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH) the Director, National Institute of Mental Health (NIMH), the Chief Medical Director of the Department of Veterans Affairs, and the Assistant Secretary of Defense for Health Affairs (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Twelve of the appointed members are from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute. Six of the appointed members are from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members, or the Secretary may select the Director, NIMH

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NIMH, on matters relating to the conduct of research, investigations, and demonstrations on the cause, diagnosis, and treatment of mental disorders; assisting such research activities by public and private agencies; promoting the coordination of all such research and related activities and the application of their results; training personnel in matters relating to mental health; and assisting state or local agencies and other public or nonprofit agencies or institutions in the use of the most effective methods of prevention, diagnosis, and treatment of mental disorders.

MEETINGS

Meetings are held three times a year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NIMH. A Government official approves the agenda and is present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS NATIONAL INSTITUTE OF MENTAL HEALTH

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 12 members, including the Chair, appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the basic and clinical medical sciences related to the research activities of the National Institute of Mental Health (NIMH). Members are invited to serve for overlapping terms of up to five years. The term for the Chair of the committee may include a fifth year.

FUNCTION

Advises the Director, NIH, the Deputy Director for Intramural Research, NIH, the Director, National Institute of Mental Health (NIMH), and the Scientific Director, NIMH, concerning the Institute's intramural research programs through periodic visits to the laboratories to assess the research programs in progress, proposed research, and evaluate the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately two times per year at the call of the Chair with the advance approval of a Government official who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF MENTAL HEALTH INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S. Code 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields related to mental health issues. Members are invited to serve for overlapping terms of up to four years; the term for a member who is to serve as Chair may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Institute of Mental Health (NIMH), on the scientific and technical merit of applications for grants-in-aid for research, research training, or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to mental health and mental disorders.

MEETINGS

Meetings of the full Initial Review Group are held in plenary session, as necessary and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Initial Review Group and of the subcommittees.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF MENTAL HEALTH SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of mental health research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Institute of Mental Health (NIMH), regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to the areas of mental health and mental disorders.

MEETINGS

Meetings of the Panel are held as necessary as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are selected to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY NEUROLOGICAL DISORDERS AND STROKE COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary, and five nonvoting ex officio members: the Secretary; the Director, National Institutes of Health (NIH); the Director, National Institute of Neurological Disorders and Stroke (NINDS), the Chief Medical Director of the Department of Veterans Affairs, and the Assistant Secretary of Defense for Health Affairs (or their designees), and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Twelve of the appointed members are from among the leading representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the areas of brain research and neurological disorders (including stroke and neuromuscular disorders); and six are from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members, or the Secretary may select the Director, NINDS, to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NINDS, on matters relating to the conduct and support of research, training, health information dissemination, and other programs with respect to neurological disease and disorders and stroke, spinal cord regeneration, and the means to overcome paralysis of the extremities through electrical stimulation and the use of computers.

MEETINGS

Meetings are held not less than three times a year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NINDS. A Government official approves the agenda and is present at all meetings of the full committee or of any subcommittee.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS, NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of ten members, including the Chair and the Chairs of any subcommittees, appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of academic medicine, sensory disease research and clinical sciences related to the research activities of the National Institute of Neurological Disorders and Stroke (NINDS). Members are invited to serve for overlapping terms of up to five years. The term for the Chair may include a fifth year.

FUNCTION

Advises the Director, NIH, Deputy Director for Intramural Research, NIH, and the Director, NINDS, concerning the Institute's intramural research program through periodic visits to the laboratories to assess the research in programs in progress, the proposed research, and evaluate the productivity and performance of staff scientists. Reports at least annually to the National Advisory Neurological and Stroke Council the results of the review.

MEETINGS

Meetings of the full Board are held approximately twice a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Board and its subcommittees.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields related to neurological disorders and stroke. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Institute of Neurological Disorders and Stroke (NINDS), on the scientific and technical merit of applications for grants in aid for research, or research related grants and cooperative agreements, and contract proposals relating to scientific areas relevant to neurological disorders and stroke.

MEETINGS

Meetings of the full Initial Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Initial Review Group and of the subcommittees.

COMMITTEE ROSTERS

NEUROLOGICAL SCIENCES TRAINING INITIAL REVIEW COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 42 members, including the Chair, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of clinical, translational, and neurological sciences. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Committee may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Committee's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Institute of Neurological Disorders and Stroke (NINDS), concerning training and career development programs and activities in the areas of neurological disorders and stroke. Provides primary review of National Research Service Award applications and Clinical Investigator Development Award applications, as well as provides information concerning future manpower needs in the basic and clinical neurological sciences.

MEETINGS

Meetings are normally held three times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chairs, selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields relating to neurological basic science disorders, neurological clinical disorders and stroke.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Institute of Neurological Disorders and Stroke (NINDS), regarding concept review, research grant and cooperative agreement applications and contract proposals relating to neurological basic science disorders, neurological clinical disorders and stroke.

MEETINGS

Meetings of the Panel are held, as necessary, as determined by the Designated Federal Official who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

BOARD OF REGENTS OF THE NATIONAL LIBRARY OF MEDICINE

AUTHORITY

Established pursuant to 42 U.S.C. 286a, section 466 of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of ten members appointed by the Secretary of Health and Human Services (Secretary), and nine ex officio members: the Surgeons General of the PHS, the Army, the Navy, and the Air Force; the Under Secretary for the Health of the Department of Veteran Affairs; the Dean of the Uniformed Services University of the Health Sciences; the Assistant Director for Biological Sciences of the National Science Foundation; the Director of the National Agricultural Library; and the Librarian of Congress (or their designees). The ten members appointed by the Secretary are from among leaders in the various fields of the fundamental sciences, medicine, dentistry, public health, hospital administration, pharmacology, health communications technology, or scientific or medical library work, or in public affairs. At least six of the appointed members shall be selected from among leaders in the fields of medical, dental, or public health research or education, and two are representatives of the general public. Members are invited to serve for overlapping four-year terms. The Board annually elects one of the appointed members to serve as Chair. As necessary, standing and ad hoc subcommittees, composed of members of the parent committee, may be established to perform functions with the Boards jurisdiction.

FUNCTION

Advises, consult with, and make recommendations to the Secretary, Assistant Secretary for Health; Director, National Institutes of Health (NIH), and the Director, National Library of Medicine (NLM), on matters of policy in regard to the NLM, including such matters as the acquisition of materials for the Library, the scope, content, and organization of the NLM's services, and the rules under which its materials, publications, facilities, and services shall be made available to various kinds of users. The Board makes recommendations with respect to research conducted at the Library; reviews and makes recommendations about applications for grants, contracts and cooperative agreements for support of medical library resources and systems; research in medical informatics and in management of biotechnology information; training for research and for use of information management technology; biomedical publications; development and demonstration projects; educational technology; and related projects which show promise of making valuable contributions to the Library's mission. In addition, the Board advises on the development of a biomedical communications network through the support and maintenance of a national network of libraries of medicine throughout the country.

MEETINGS

Meetings are held three times each year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NLM. A Government official approves the agenda and is present at all meetings.

COMMITTEE ROSTER

PUBMED CENTRAL NATIONAL ADVISORY COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S. C. Appendix 2).

STRUCTURE

Consists of 15 members, including the Chair. The Chair and members are selected by the Director, National Institutes of Health (NIH), and drawn from expert scientists, life sciences publishers, members of learned societies, medical library and information specialists, and members of the general public. Members and the Chair are invited to serve for overlapping three-year terms.

FUNCTIONS

Advises the Director, NIH, the Director, National Library of Medicine, and the Director, National Center for Biotechnology Information, concerning the content and operation of the PubMed Central repository. Establishes criteria to certify groups submitting materials to the system, monitors the operation of the system, and ensures that PubMed Central evolves and remains responsive to the needs of researchers, publishers, librarians and the general public.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair with the advance approval of a Government official, who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS, LISTER HILL NATIONAL CENTER FOR BIOMEDICAL COMMUNICATIONS, NATIONAL LIBRARY OF MEDICINE

AUTHORITY

Established pursuant to 42 U.S.C 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C Appendix 2).

STRUCTURE

Consists of 8 members, including the Chair, appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of health sciences, computer sciences, information technology, library science, behavioral sciences, social sciences, educational technology, communications engineering, molecular biology, biochemistry, genetics, structural chemistry, mathematics, statistics, and media development and utilization. Members are invited to serve for overlapping five-year terms. The term for the Chair of the committee may include a fifth year.

FUNCTIONS

Advises the Director, NIH and the Deputy Director for Intramural Research, NIH, the Director, National Library of Medicine (NLM), and the Director, Lister Hill National Center for Biomedical Communications (LHNCBC) concerning the intramural research and development programs of the LHNCBC through regularly scheduled visits to the National Library of Medicine for assessment of the research and development programs in progress, assessments of proposed programs and evaluation of the productivity and performance of staff scientists. The Director, LHNCBC, will report at least annually to the Board of Regents of the National Library of Medicine the results of the review.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, with the advance approval of a Government official, who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS, NATIONAL CENTER FOR BIOTECHNOLOGY INFORMATION, NATIONAL LIBRARY OF MEDICINE

AUTHORITY

Established pursuant to 42 U.S.C 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C Appendix 2).

STRUCTURE

Consists of 8 members, including the Chair, appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of health sciences, computer sciences, information technology, library science, behavioral sciences, social sciences, educational technology, communications engineering, molecular biology, biochemistry, genetics, structural chemistry, mathematics, statistics, and media development and utilization. Members are invited to serve for overlapping five-year terms. The term for the Chair of the committee may include a fifth year.

FUNCTIONS

Advises the Director, NIH, the Deputy Director for Intramural Research, NIH, the Director, National Library of Medicine (NLM), and the Director, National Center for Biotechnology Information (NCBI) concerning the intramural research and development programs of the National Library of Medicine through regularly scheduled visits to the National Library of Medicine for assessment of the research and development programs in progress, assessments of proposed programs and evaluation of the productivity and performance of staff scientists. The Director, NCBI, will report at least annually to the Board of Regents of the National Library of Medicine the results of the review.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, with the advance approval of a Government official, who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

BIOMEDICAL LIBRARY AND INFORMATICS REVIEW COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 21 members, including the Chairs, designated by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of the information management health science libraries, publications, and medical informatics. Members are invited to serve overlapping terms of up to four years. The term for the Chair of the committee may include a fifth year. The Committee is divided into three Subcommittees, composed entirely of members of the parent body: Medical Library Resource Subcommittee, Medical Informatics Subcommittee, and Biotechnology Information Subcommittee.

FUNCTION

Advises the Director, NIH, and the Director, National Library of Medicine, and makes recommendations to the Board of Regents of the National Library of Medicine on the scientific and technical merit applications for grants-in-aid and cooperative agreements for research, training, resource support, and publications in the areas of health science libraries, management of health science information, biomedical science publications, and medical informatics to include clinical informatics, bioinformatics and related biomedical topics.

MEETING

The full Committee meets in plenary session as necessary, as called by the Chair, with the advance approval of a Government official, who also approves the agenda. A Government official is present at each meeting. Meetings of the three subcommittees are held approximately three times a year at the call of the Chair of each subcommittee, with the advance approval of a Government official, who also approves the agenda.

COMMITTEE ROSTER

LITERATURE SELECTION TECHNICAL REVIEW COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 15 members, including the Chair. The members and Chair are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of biomedicine, such as physicians, researchers, educators, editors, health science librarians and historians. Members are invited to serve for overlapping terms up to four years. The term for the Chair of the committee may include a fifth year.

FUNCTIONS

Advises the Director, NIH, and the Director, National Library of Medicine (NLM), on matters of policy as they relate to the evaluation and recommendation of biomedical publications to be considered for indexing and inclusion in the NLM publications, such as <u>Index Medicus</u> and MEDLINE. The committee is responsible for reviewing publications on the basis of (a) the extent to which their subject matter falls within the scope or subject range of NLM publications and electronic databases, and (b) potential value to users of the NLM products, including the clinical and scientific significance of the information in the publications. The committee's judgments about particular journal titles will be reported and recorded in a way to assist the Library staff and Director in making selection decisions. All recorded judgments will provide the basis on which selection decisions are made.

MEETINGS

Meetings are held three times a year at the call of the Chair, with the advance approval of a Government official, who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL LIBRARY OF MEDICINE SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including Chairs, selected on an "as needed" basis from outstanding authorities knowledgeable in the fields relevant to specific applications, proposals, or proposed solicitations to be reviewed.

FUNCTION

Advises the Director, National Institutes of Health, and the Director, National Library of Medicine, regarding concept review, research and cooperative agreement applications and contract proposals relating to new medical library services, health science publications, integrated academic information management systems, health informatics, biotechnology information, databases, resources, and educational technology.

MEETINGS

Meetings of the Panel are held, as necessary, as determined by the Designated Federal Official who approves the agenda. A Government official is to be present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

BOARD OF SCIENTIFIC COUNSELORS OF THE NIH CLINICAL CENTER

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of eight members, including the Chair, appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the basic and clinical medical sciences which comprise the clinical departments of the Clinical Center. Members are invited to serve for overlapping terms of up to five years. The term for the Chair may include a fifth year.

FUNCTION

Advises the Director, NIH, Deputy Director for Intramural Research, NIH, and the Director, Clinical Center, concerning the Clinical Center's intramural research programs through periodic visits to the laboratories to assess the research in progress and evaluate the productivity and performance of staff scientists. Submits to the Director, Clinical Center, the results of the review.

MEETINGS

Meetings of the full Committee are held approximately twice a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Committee and its subcommittees.

COMMITTEE ROSTER

NATIONAL ADVISORY BOARD FOR CLINICAL RESEARCH

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

The Board shall be co-chaired by an extramural scientist and an extramural expert in health care administration, consist of 17 members, including the co-chairs, appointed by the Director, NIH. Of the 17 members, nine shall be non-NIH employees and eight shall be NIH employees. None of the members shall be Clinical Center employees or employees of the Office of the NIH Deputy Director for Intramural Research. The Deputy Director for Intramural Research, the Director, Clinical Center, and the Chair, Director, NIH, shall serve as nonvoting ex officio members of the Board. Members are invited to serve for overlapping terms of up to five years.

FUNCTION

The Board shall advise, consult with, and make recommendations to the Director, NIH, and the NIH Deputy Director for Intramural Research, the Director, Clinical Center, and the Intramural Working Group of the NIH Steering Committee.

The Board provides guidance for the integration of clinical research initiatives in the intramural clinical research programs by developing an integrated operating strategic plan for clinical research. This plan includes: development of a shared vision for the intramural clinical research program taking into account the clinical research visions of all ICs; making recommendations on strategies for integrating proposed research initiatives considering their possible effects on the current and future intramural clinical research program; reviewing and recommending an annual strategic operating plan for the Clinical Center; and, conducting annual review of each NIH institute's or center's performance with respect to its annual operations plan for using Clinical Center resources. The Board will review and recommend the Clinical Center's annual budget to the Intramural Working Group of the NIH Steering Committee. It is the NIH Steering Committee that makes final budget recommendations to the Director, NIH.

The Board will evaluate the performance of the Director, Clinical Center; review the process by which the Medical Executive Committee approves credentials and privileging actions and the continuous improvement of the quality of clinical activities in the Clinical Center; and annually evaluate the Clinical Center's Board of Scientific Counselors' process for review of independent research conducted by the Clinical Center's investigators.

MEETINGS

Meetings of the full Board are held approximately three times a year at the call of the cochairs with the advance approval of a Government official. A Government official approves the agenda and is present at all meetings of the Board and its subcommittees.

COMMITTEE ROSTER

FOGARTY INTERNATIONAL CENTER ADVISORY BOARD

AUTHORITY

Established pursuant to 42 U.S.C. 217a, section 222 of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of the Director, Fogarty International Center (FIC), as Chair; 13 members selected by the Secretary of Health and Human Services (Secretary) from authorities knowledgeable of the issues related to the Board function; the Directors of 2 National Institutes of Health (NIH) institutes with active international programs; and any additional ex officio members as necessary to effectively carry out its function. Of the 13 appointed members, 10 are selected from among the leading representatives of the basic and clinical disciplines in biomedical or behavioral fields, such as molecular and cellular biology, basic physiology, epidemiology, immunology, nutrition, public health, economics and demography. Among these scientific disciplines are members knowledgeable in infectious and nutritional diseases that present worldwide problems. Three members are from the general public and leaders in fields of health-related enterprises such as pharmaceutical or life insurance companies, voluntary organizations committed to betterment of public health, international health, and international health law. Members are invited to serve for overlapping four-year terms.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, FIC, on matters relating to health science internationally. Provides expert knowledge of the international health scene on how FIC professional and fiscal resources can most effectively be used to encourage and contribute to health-related biomedical and behavioral research and to improve the exchange of new knowledge and technology between the United States and participating foreign countries, institutions, and scientists. Advises concerning applications for grants-in-aid relating to research projects and research fellowships of international significance. Plays a key role in the development and implementation of the Center's international programs. Identifies topics that represent health-related issues of international importance and recommends feasible approaches to addressing these issues.

MEETINGS

Meetings are held approximately three times a year, at the call of the Chair who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

NATIONAL ADVISORY COUNCIL FOR HUMAN GENOME RESEARCH

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and five nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Human Genome Research Institute (NHGRI), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs or their designees. Of the 18 appointed members, 12 are selected from the leading representatives of the health and scientific disciplines relevant to the activities of the Institute, particularly representatives of the health and scientific disciplines in the areas of basic genetics, medical genetics, genomics, human genetics, molecular biology, biochemistry, chemistry, information science, mathematics, and engineering, and not less than two individuals who are leaders in the fields of public health and the behavior or social sciences. Six of the members are appointed by the Secretary from the general public and include leaders in the fields of public policy, health policy, management, law, and economics. Members are invited to serve overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NHGRI, to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NHGRI, on matters relating to the conduct and support of research, training, and dissemination of information respecting human genome research, training, and other programs related to the human genome initiative.

MEETINGS

Meetings are held not less than three times a year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NHGRI. A Government official approves the agenda and is present at all meetings of the Council or of any subcommittee.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS NATIONAL HUMAN GENOME RESEARCH INSTITUTE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of nine members, including the Chair. The Chair and members are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the fields of gene therapy, diagnostics, medical genetics, human genetics, cancer genetics, molecular biology, and biochemistry. Members are invited to serve for overlapping terms of up to five years. The term for the Chair may include a fifth year.

FUNCTION

Advises the Director, NIH, the Deputy Director for Intramural Research, NIH, the Director, National Center for Human Genome Research (NHGRI), and the Scientific Director, NHGRI, concerning the Institute's intramural research programs through periodic visits to the laboratories to assess the research in progress, the proposed research, and the productivity and performance of staff scientists.

MEETINGS

Meetings are held approximately twice a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

CENTER FOR INHERITED DISEASE RESEARCH ACCESS COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Services Act, as amended. The Committee is governed by the provisions of the Federal advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH) from authorities knowledgeable in the various disciplines and fields of human genetics, quantitative genetics, linkage and segregation analysis, and genotyping technology. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The committee may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the committee's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Board of Governors, Center for Inherited Disease Research (CIDR), on the scientific and technical merit of applications seeking to use the resources and facilities of the CIDR. The primary assessment of the Access Committee is to determine whether or not the proposed "trait" can be mapped (using the genome-wide genotyping methods of CIDR) given the sampling strategy, sample size, and analytic methods.

MEETINGS

Meetings of the Access Committee and/or its subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Access Committee and of its subcommittees.

COMMITTEE ROSTER

NATIONAL HUMAN GENOME RESEARCH INSTITUTE INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Services Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields of cytogenetics, human genetics, quantitative genetics, somatic cell genetics, molecular biology, cell biology, chemistry, biochemistry, physical biochemistry, computer science, engineering, bioethics, law, public policy, medical genetics, genetic counseling, nursing, education, and public outreach. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Human Genome Research Institute (NHGRI), on the scientific and technical merit of applications for grants-in-aid for research, research training, or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to the Human Genome Project, including construction of genetic maps, development of physical maps, determination of DNA sequences, management and analysis of the resulting data, development of innovative technologies required to achieve these goals, and development of tools and resources supportive of this effort.

MEETINGS

Meetings for the full Initial Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, and also with the advance approval of a Government official who approves the agenda. A Government official is present at all meetings of the Initial Review Group and of the subcommittees.

COMMITTEE ROSTER

NATIONAL HUMAN GENOME RESEARCH INSTITUTE SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals, or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director of the National Human Genome Research Institute (NHGRI), regarding research grant and cooperative agreement applications, contract proposals, and concept review relating to the Human Genome Project, including construction of genetic maps, development of physical maps, determination of DNA sequences, management and analysis of resulting data, development of innovative technologies required to achieve the above, and development of tools and resources supportive of this effort, as well as in areas relevant to the ethical, legal, and social implications of the Human Genome Project.

MEETINGS

Meetings of the Panel are held as necessary as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY COUNCIL FOR NURSING RESEARCH

AUTHORITY

Established pursuant to 42 U.S.C. 285q-2, section 464X of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of fifteen members appointed by the Secretary of Health and Human Services (Secretary) and six voting ex officio members: the Secretary; the Director, National Institutes of Health (NIH); the Director, National Institute of Nursing Research (NINR); the Chief Nursing Officer of the Department of Veterans Affairs; the Assistant Secretary of Defense for Health Affairs; the Director of the Division of Nursing of the Health Resources and Services Administration or their designees, and any additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its function. Ten of the members appointed by the Secretary are from among the leading representatives of the health and scientific disciplines (including public health and the behavioral or social sciences) relevant to the activities of the NINR; of these, at least seven are professional nurses who are recognized experts in the area of clinical practice, education or research. Five of the members are appointed by the Secretary from the general public and includes leaders in the fields of public policy, law, health policy, economics and management. Members are invited to serve for overlapping four year terms. The Chair of the Council is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NINR, to be the Chair. The Council may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Council's jurisdiction.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NINR, on matters relating to the conduct and support of, and dissemination of information respecting, basic and clinical nursing research, training, and other programs in health care.

MEETINGS

Meetings are held not less than three times a year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NINR. A Government official approves the agenda and is present at all meetings of the Council or of any subcommittee

COMMITTEE ROSTER

NATIONAL INSTITUTE OF NURSING RESEARCH INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 12 members, including the Chair, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields of biomedical and behavioral sciences, economics, law, ethics and administration important to the activities of the National Institute of Nursing Research (NINR). Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, NINR, on the scientific and technical merit of applications for grants-in-aid for research, research training, or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to the broad areas of nursing research including basic and clinically oriented research to improve patient care, the promotion of health, the prevention of illness, and the understanding of individual family and community responses to acute and chronic illnesses and disabilities, the ethics of patient care, physiological, biochemical and behavioral research on the mechanisms underlining nursing interventions, the economic and quality of nursing care and the ethics of nursing care.

MEETINGS

Meetings of the Initial Review Group are held approximately three times per year at the call of the Chair and with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings

COMMITTEE ROSTER

NATIONAL INSTITUTE OF NURSING RESEARCH SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical and behavioral research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director of the National Institute of Nursing Research (NINR), regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to nursing research, such as acute and chronic illness, prevention, community health and other related areas of research.

MEETINGS

Meetings of the Panel are held as necessary as determined by the Designated Federal Official who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY RESEARCH RESOURCES COUNCIL

AUTHORITY

Established pursuant to 42 U.S.C. 287a, section 480 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Center for Research Resources (NCRR), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs (or their designees, and such additional officers or employees of the United States as the Secretary determines necessary for the Advisory Council to effectively carry out its functions. Of the 18 appointed members, twelve are selected from among the leading representatives of the health and scientific disciplines (including public health and the behavioral or social sciences) relevant to the activities of the Center, particularly representatives of the health and scientific disciplines in the areas of fundamental sciences, medical sciences, research and/or research training. Six of the members are appointed by the Secretary from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NCRR, to be the Chair.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NCRR, on matters relating to strengthening and enhancing the research environments of entities engaged in health-related research by developing and supporting essential research resources.

MEETINGS

Meetings of the full Council are held not less than three times a year at the call of the Chair with the advance approval of a Government official or upon the request of the Director, NCRR. A Government official approves the agenda and is present at all meetings of the full Council or of any subcommittee.

COMMITTEE ROSTER

SCIENTIFIC AND TECHNICAL REVIEW BOARD ON BIOMEDICAL AND BEHAVIORAL RESEARCH FACILITIES

AUTHORITY

Established pursuant to 42 U.S.C. 287a-2 et seq., and 42 U.S.C. 282(b)(6), respectively section 481A and section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended, (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 15 members including the Chair, appointed by the Director, National Center for Research Resources (NCRR). Not more than three individuals who are officers or employees of the Federal Government may serve as members of the Board. The Director, NCRR, shall ensure the members chosen are eminently qualified to perform peer review functions. In selecting individuals for membership, the Director, NCRR, shall ensure that the members of the Board collectively are: (a) experienced in the planning, construction, financing and administration of entities that conduct biomedical and behavioral research sciences; (b) knowledgeable in making determinations of the need of entities for biomedical or behavioral research facilities, including such facilities for the dentistry, nursing, pharmacy, and allied health professions; (c) knowledgeable in evaluating the relative priorities for applications for modernization and construction of facilities grants in view of the overall research needs of the United States; and (d) experienced with emerging centers of excellence.

Members shall be invited to serve for overlapping four-year terms; the term for a member who is to serve as Chair may include a fifth year.

FUNCTION

Advises the Director, NCRR, and the National Advisory Research Resources Council concerning matters relating to the construction of new or expansion/renovation of existing biomedical and behavioral research facilities to meet the research needs of public and nonprofit private entities. Reviews grant applications requesting such construction and makes recommendations for their funding.

MEETINGS

Meetings are held approximately three times a year at the call of the Chair with the advance approval of a Government official. A Government official approves the agenda and is present at all meetings.

COMMITTEE ROSTER

NATIONAL CENTER FOR RESEARCH RESOURCES INITIAL REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Initial Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields related to clinical research, hospital administration, veterinary medicine, laboratory animal and comparative medicine, anatomy, behavior, biochemistry, immunology, genetics, microbiology, neuroscience, nutrition, pathology, physiology, primatology, reproductive physiology, zoology, fiscal management, and medical research administration. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Initial Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Initial Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, National Center for Research Resources (NCRR), on the scientific and technical merit of applications for grants-in-aid for research, research training, or research-related grants and cooperative agreements, or contract proposals relating to research infrastructure and scientific areas relevant to clinical research, research concerning laboratory animal medicine and science, animal care and husbandry, mammalian and non-mammalian animal models, development of animal resources, operation of primate research centers and research activities in minority institutions.

MEETINGS

Meetings of the full Initial Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Initial Review Group and of the subcommittees.

COMMITTEE ROSTERS

NATIONAL CENTER FOR RESEARCH RESOURCES SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chairs, selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical and behavioral research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), and the Director, National Center for Research Resources (NCRR), regarding concept review, research grant and cooperative agreement applications and contract proposals, relating to research infrastructure, clinical research, laboratory animal medicine, animal models, research needs of minority institutions, biomedical research technology, and the modernization and construction of research facilities.

MEETINGS

Meetings of the Panel are held, as necessary, as determined by the Designated Federal Official who approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL ADVISORY COUNCIL FOR COMPLEMENTARY AND ALTERNATIVE MEDICINE

AUTHORITY

Established pursuant to 42 U.S.C. 284a, section 406 of the Public Health Service Act, as amended. The Council is governed by the provisions of the Federal Advisory Committee Act, as amended, (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 18 members appointed by the Secretary and five nonvoting ex officio members: the Secretary, the Director, National Institutes of Health (NIH), the Director, National Center for Complementary and Alternative Medicine (NCCAM), the Chief Medical Director of the Department of Veterans Affairs, the Assistant Secretary of Defense for Health Affairs or their Of the appointed members, twelve are selected from among the leading designees. representatives of the health and scientific disciplines (including not less than two individuals who are leaders in the fields of public health and the behavioral or social sciences) relevant to the activities of the Center, particularly representatives of the health and scientific disciplines in the area of complementary and alternative medicine. Nine of the twelve include practitioners licensed in one or more of the major systems with which the Center is involved. Six of the members are appointed from the general public and include leaders in the fields of public policy, law, health policy, economics, and management. Three of the six represent the interests of individual consumers of complementary and alternative medicine. Members are invited to serve for overlapping four-year terms. The Chair of the Council is selected by the Secretary from among the appointed members, except that the Secretary may select the Director, NCCAM, to be the Chair. The term of office of the Chair is two years.

FUNCTION

Advises the Secretary, the Assistant Secretary for Health, the Director, NIH, and the Director, NCCAM on matters relating to the conduct and support of research, training, health information dissemination, and other programs with respect to complementary and alternative medicine treatment modalities.

MEETINGS

Meetings are held not less than three times a year at the call of the Chair with the advance approval of a Government official, who also approves the agenda. A Government official is present at all meetings.

COMMITTEE ROSTER

BOARD OF SCIENTIFIC COUNSELORS NATIONAL CENTER FOR COMPLEMENTARY AND ALTERNATIVE MEDICINE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Board is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of 8 members, including the Chair, appointed by the Director, National Institutes of Health (NIH), from authorities knowledgeable about basic and clinical conventional and complementary and alternative medicine research in the fields of cancer, depression, hypertension, diabetes, obesity, arthritis, neuroscience, aging, and any additional areas relevant to the research of the intramural senior staff. Members, including the Chair, shall be invited to serve for overlapping terms of up to five years.

FUNCTION

Advises the Director, NIH; the Deputy Director for Intramural Research, NIH; the Director, National Center for Complementary and Alternative Medicine (NCCAM); and the Scientific Director, NCCAM, on the intramural research programs through periodic visits to the laboratories for assessment of the research in progress, the proposed research, and evaluation of the productivity and performance of tenured, tenure track and staff scientists and physicians.

MEETINGS

Meetings shall be held approximately two times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official shall be present at all meetings.

COMMITTEE ROSTER

NATIONAL CENTER FOR COMPLEMENTARY AND ALTERNATIVE MEDICINE SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S. Code 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S. Code Appendix 2).

STRUCTURE

Consists of members and Chairs selected on an "as needed" basis in response to specific applications, proposals or proposed solicitations to be reviewed. Members will be selected from outstanding authorities in the various fields of mind-body medicine, alternative medical systems, disease prevention and health promotion, biologically based therapies, manipulative and body-based systems, biofield, bioelectromagnetics, and conventional research methodology.

FUNCTION

Advise the Director, National Institutes of Health (NIH), and the Director of the National Center for Complementary and Alternative Medicine (NCCAM), regarding concept review, research grant and cooperative agreement applications, and contract proposals relating to all areas of complementary and alternative medicine research.

MEETINGS

Meetings of the Panel will be held, as necessary, as determined by the Designated Federal Official who approves the agenda. A Government official is present at all meetings. Notice of all meetings shall be given to the public.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

NATIONAL INSTITUTES OF HEALTH PEER REVIEW ADVISORY COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of sixteen members, including the Co-chair and the Director, Center for Scientific Review (CSR), appointed by the Director, National Institutes of Health (NIH). Members are from authorities knowledgeable in the fields relevant to the peer review mission of NIH and have had experience with peer review and are experts such as physicians, basic and clinical investigators, and educators. Members and the Chair are invited to serve for overlapping terms of up to four years.

FUNCTION

Advises the Director, NIH, and the Deputy Director for Extramural Research, NIH, concerning matters of policy and practice pertaining to monitoring of coordination of, and evaluation of peer review at NIH. Also advises the Director, CSR, concerning matters of policy and practice relating to the receipt, research, and peer review in CSR and the Directors of other NIH Institutes and Centers concerning the scope and manner of operation of peer review. Advice regarding CSR and Institute/Center specific matters will be made to the Director, NIH and the Deputy Director for Extramural Research, NIH and, as appropriate, to the Director, CSR, and/or to the relevant NIH Institute/Center Director.

MEETINGS

Meetings are held approximately three times a year at the call of the Co-chair with the advance approval of a Government official. A Government official approves the agenda and is present at all meetings.

COMMITTEE ROSTER

AIDS AND RELATED RESEARCH INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields relating to AIDS and related research. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to molecular biology, replication, transmission, pathogenesis, immunology, prevention, therapy, epidemiology, care and behaviors associated with the immunodeficiency virus, AIDS and related clinical sequela.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

BIOBEHAVIORAL AND BEHAVIORAL PROCESS INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields relating to biobehavioral and social sciences. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to (1) the broad areas of biobehavioral processes; including conditioning, affect and stress, regulatory and hormonal function, and appetitive behaviors; (2) the broad areas of language and communication, learning, cognition and perception, and motor function, including sound production; and (3) the broad areas of behavioral, developmental, and substance use disorders including psychopathology in infants, children, adolescents and adults.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

BIOLOGICAL CHEMISTRY & MACROMOLECULER BIOPHYSICS INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to synthetic and biological chemistry, bioinorganic and bioorganic/chemical biology, drug design/medicinal chemistry, bioconjugate chemistry, biomaterials, biomimetic chemistry, imaging agents, metals in chemistry, molecular recognition, molecular design, macromolecular structure-function relationships, protein, nucleic acid, and carbohydrates, protein-ligand interaction, membrane architecture, membrane protein folding, assembly, and dynamics, membrane-based energy transduction, lipid metabolism and function, lipid protein interactions, biophysics of membrane fusion mechanisms, bioanalytical techniques, biophysical techniques software development applied to bioanalytical instrumentation, instrumentation control, data reduction, data analysis, or data mining. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to synthetic and biological chemistry, bioinorganic and bioorganic/chemical biology, drug design/medicinal chemistry, bioconjugate chemistry, biomaterials, biomimetic chemistry, imaging agents, metals in chemistry, molecular recognition, molecular design, macromolecular structure-function relationships, protein, nucleic acid, and carbohydrates, protein-ligand interaction, membrane architecture, membrane protein folding, assembly, and dynamics, membrane-based energy transduction, lipid metabolism and function, lipid protein interactions, biophysics of membrane fusion mechanisms, bioanalytical techniques, biophysical techniques software development applied to bioanalytical instrumentation, instrumentation control, data reduction, data analysis, or data mining.

MEETINGS

Meetings for the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a government official, who shall approve the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official shall be present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTERS

BIOENGINEERING SCIENCES & TECHNOLOGY INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to gene and drug delivery systems, imaging principles for molecules and cells, modeling of biological systems, bioinformatics, statistics and data management, instrumentation, chips and microarrays, biosensors, and biomaterials. Members shall be invited to serve for overlapping terms of up to fours years; the term for the Chair may include a fifth year.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to basic and clinical aspects of bioengineering and technology development in the following areas: gene and drug delivery systems, imaging principles for molecules and cells, modeling of biological systems, bioinformatics, statistics and data management, instrumentation, chips and microarrays, biosensors, and biomaterials.

MEETINGS

Meetings for the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who shall approve the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official shall be present at all meetings of the Integrated Review Group and of its subcommittees.

COMMITTEE ROSTERS

BIOLOGY OF DEVELOPMENT & AGING INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to biology and development of aging. Members are invited to serve for overlapping terms of up to four years. The term for a member who is to serve as Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction. As necessary, the Integrated Review Group and its subcommittees may call upon special consultants, assemble ad hoc working groups, and convene conferences and workshops.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to basic and clinical aspects of morphogenesis and pattern formation; gastrulation; cell fate, lineage and differentiation; organogenesis; gametogenesis; pre-and post-implantation development; regeneration; evolutionary aspects of development; molecular basis of primordial birth defects; chromosome dynamics; cell cycle control; cell death; responses to stress; cellular signaling; the biology and applications of stem cells; tissue repair; determinants of longevity; age-related changes in physiological functions; geriatric syndromes and diseases; animal models of aging; predictive markers of biological health and aging; and mechanisms of exceptional ageing.

MEETINGS

The full Integrated Review Group shall meet in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees shall be held approximately three times a year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of its subcommittees.

COMMITTEE ROSTER

BRAIN DISORDERS AND CLINICAL NEUROSCIENCE INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to (1) traumatic brain or spinal cord injury; (2) the consequence of ischemia or hypoxia; (3) addictive, cognitive, behavioral, and emotional disorders; (4) neuro-degenerative diseases; and (5) other neuropathies. Members are invited to serve for overlapping terms of up to four years. The term for a member who is to serve as Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to: (1) traumatic brain or spinal cord injury; (2) the consequence of ischemia or hypoxia; (3) addictive, cognitive, behavioral, and emotional disorders; (4) neurodegenerative diseases; and (5) other neuropathies.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

CARDIOVASCULAR SCIENCES INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to cardiovascular sciences. Members are invited to serve for overlapping terms of up to four years. The term for a member who is to serve as Chair may include a fifth year The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relating to the scientific areas relating to areas of basic, clinical and pharmacologic aspects of the cardiovascular, renal and hematologic systems in normal and disease states including, but not limited to, studies of atherosclerosis and myocardial disease, cardiac function, hemodynamics, blood pressure regulation, renal immunology, renal failure, hematology and studies of renal and cardiovascular drugs.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

CELL BIOLOGY INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields related to cell development and function. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

The Integrated Review Group shall advise the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to areas of cellular, molecular and developmental biology, and the molecular, cellular and developmental bases of normal and abnormal cell processes.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who shall approve the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

DIGESTIVE SCIENCES INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees shall be selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to basic and clinical aspects of gastrointestinal, hepatobiliary and pancreatic physiology and pathobiology, and on the disposition and action of nutrients and xenobiotics. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to basic and clinical aspects of gastrointestinal, hepatobiliary and pancreatic physiology and pathobiology, and on the disposition and action of nutrients and xenobiotics.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who also approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

EMERGING TECHNOLOGIES AND TRAINING NEUROSCIENCES INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282 (b) (6), section 402 (b) (6) of the PHS Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of its subcommittees shall be selected by the Director, NIH, or designee, from authorities knowledgeable in the various disciplines and fields relating to (1) the crosscutting technologies that serve all of the neurosciences, including neuroinformatics and imaging and molecular neurogenetics; (2) crosscutting emerging science in the small business area for all of the neurosciences; and (3) the training areas for all of the neurosciences. Members shall be invited to serve for overlapping terms of up to four years; the term for a member who is to serve as Chair may include a fifth year. All non-Federal members serve as NIH Peer Review Consultants.

FUNCTION

The Integrated Review Group shall advise the Director, National Institutes of Health (NIH), and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to (1) the crosscutting technologies that serve all of the neurosciences, including neuroinformatics and imaging and molecular neurogenetics; (2) crosscutting emerging science in the small business area for all of the neurosciences; and (3) the training areas for all of the neurosciences.

MEETINGS

The full Integrated Review Group shall meet in plenary session as called by the SRO or other appropriate Government official, who shall approve the agenda. Meetings of the subcommittees shall be held approximately three times a year at the call of the SRO or other appropriate Government official who shall also approve the agenda. A Government official shall be present at all meetings of the Integrated Review Group and of its subcommittees.

COMMITTEE ROSTER

ENDOCRINOLOGY, METABOLISM, NUTRITION & REPRODUCTIVE SCIENCES INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields related to basic and clinical aspects of endocrine function and regulation, metabolic, nutritional and gastroenteric processes in normal and disease state. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to endocrinology and reproductive biology, as well as research relating to basic and clinical aspects of metabolism, nutrition and gastroenterology, including but not limited to, metabolic studies in normal and disease states at the organism, tissue or cellular level, the requirements of living organisms for nutrients, vitamins and trace elements and nutritional practices.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who also approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

GENES, GENOMES, & GENETICS INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields related to genetic sciences. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to scientific areas of genetics, including, but not limited to, broad hereditary aspects and genome characterization of plants and all animals, including humans, ranging from theoretical models, technology development, and basic studies to human clinical studies and ethical, legal and social implications.

MEETINGS

Meetings for the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who shall approve the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

HEALTH OF THE POPULATION INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of its subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to studies of socio-environmental influences on health, behavior, and development; community and organizational interventions for the prevention and modification of risk behaviors; multilevel, multi-cotextual studies, behavioral genetics and heritability studies; population processes, composition and distribution, their antecedents and consequences and their inter-relationships with social, cultural, economic, behavioral, developmental and biomedical factors and processes; health services research on the antecedents and consequences of health services utilization, including multidisciplinary investigations of factors affecting access, organization, costs, quality, and the financing of health services; methodological issues, various statistical techniques, and modeling of phenomena relevant to behavioral and social science research; description, detection, etiology, prevention, treatment, and control of chronic and communicable diseases in the community; basic and applied research of responses to actual or potential health problems, especially symptom management in acute or chronic illness, approaches to promoting health and preventing disease, and interventions influencing patient health outcomes and reducing costs, nursing systems, and ethics; and occupational or work environments and their relationship to health and well-being of the workers. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to the broader socio-environmental contexts in which health and health-related behavior are embedded and in which the interaction of these socio-environmental factors with the health and health-related behavior of individuals and population is examined. The socio-environmental factors studied may include social class, socioeconomic conditions, cultural factors and processes, institutions, social organization, social networks, neighborhood and regional characteristics, media, policies, social and family group membership, and racial and ethnic identity.

MEETINGS

Meetings for the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who shall approve the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of its subcommittees.

COMMITTEE ROSTER

HEMATOLOGY INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of its subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to basic clinical aspects of hematological systems in normal and disease states including, but not limited to, hemoglobinopathies, thalassemias, iron, and heme metabolism, erythrocyte and granulocyte/monocyte biology, transfusion medicine, sickle cell diseases, normal and abnormal hematopoiesis including stem cell biology, leukemogenesis, bone marrow transplantation, gene therapy, basic and applied aspects of the blood and vascular elements associated with hemostasis, thrombosis, and vascular biology. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to basic and clinical aspects of hematological systems in normal and disease states including, but not limited to, hemoglobinopathies, thalassemias, iron, and hememetabolism, erythrocyte and granulocyte/monocyte biology, transfusion medicine, sickle cell diseases, normal and abnormal hematopoiesis including stem cell biology, leukemogenesis, bone marrow transplantation, gene therapy, basic and applied aspects of the blood and vascular elements associated with hemostasis, thrombosis, and vascular biology.

MEETINGS

Meetings for the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who shall approve the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of its subcommittees.

COMMITTEE ROSTER

IMMUNOLOGY INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees shall be selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields related to immunology. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to the areas of basic and clinical aspects of innate immunity and inflammation, immunity and host defense, cellular and molecular immunology, hypersensitivity, auto immune, and immune-medicated diseases, transplantation, tolerance and tumor immunology, and vaccines against microbial diseases in normal and disease states.

MEETINGS

Meetings for the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who shall approve the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who shall also approve the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

INFECTIOUS DISEASES AND MICROBIOLOGY INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees is selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to infectious diseases and microbiology. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relating to molecular biology, physiology, genetics and pathogenesis of microorganisms including viruses, rickettsia, bacteria, fungi, protozoa and other parasites.

MEETINGS

Meetings for the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who shall approve the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who shall also approve the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

INTEGRATIVE, FUNCTIONAL AND COGNITIVE NEUROSCIENCE INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to integrative, functional and cognitive neuroscience. Members are invited to serve for overlapping terms of up to four years. The term for a member who is to serve as Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to: (1) neural basis of emotional and motivational behavior; (2) regulation of function, at the systems level, by neuroendocrine and neuroimmune influences; (3) the analysis of neural system function under various behavioral states, e.g., sleep and hibernation; (4) the maintenance of homeostasis by the autonomic nervous system; (5) chemosensation, hearing, balance, touch and somatosensation; (6) motor-system and sensory motor integration; (7) the integration of multi-sensory information; (8) the development and alteration of memory and other cognitive processes that accompany aging; (9) computational and theoretical models of cognitive processes; (10) mechanisms that underlie neural coding of complex stimuli; (11) attention and its effect on information processing in the nervous system; (12) those portions of the eye, brain, and intraocular muscle system that serve visual sensation; and (13) neuropharmacological effects of alcohol and toxicants.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

MOLECULAR, CELLULAR AND DEVELOPMENTAL NEUROSCIENCE INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to molecular, cellular and developmental neuroscience. Members are invited to serve for overlapping terms of up to four years. The term for a member who is to serve as Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to (1) the basic mechanisms by which neuronal, glial, and neuromuscular structure and function are determined; (2) the development of both the central and peripheral nervous systems; and (3) the studies of the cornea, lens, retina, retinal pigmented epithelim and the choroid.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees will be held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

MUSCULOSKELETAL, ORAL & SKIN SCIENCES INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members, the Chair, and the Chairs of the subcommittees are selected by the Director, National Institutes of Health (NIH), or designee, from authorities knowledgeable in the various disciplines and fields relating to basic and clinical aspects of structural systems that are prerequisite for physical form, mechanical function, movement, and integrity of the body, including skeleton, spine, bone, connective tissue, extra-cellular matrix, and their related diseases/disorders; dental/oral and craniofacial and their related diseases/disorders; skeletal muscle, limb, and their related diseases/disorders; joints and their related diseases/disorders, including rheumatic diseases; skin and its related diseases/disorders. The research applications may include studies of: basic biology, including growth, development, maturation, and aging; biomaterials for prostheses/orthotics and implants; pathogenesis and therapeutics; physical rehabilitation; exercise; mechanobiology/biomechanics; injury and repair, including adaptation, plasticity, degeneration, and regeneration; diagnostic markers and biomarkers; cell and gene-based therapies; and clinical outcomes and trials. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to basic and clinical aspects of structural systems that are prerequisite for physical form, mechanical function, movement, and integrity of the body, including skeleton, spine, bone, connective tissue, extracellular matrix, and their related diseases/disorders; dental/oral and craniofacial and their related diseases/disorders; including rheumatic diseases; skin and its related diseases/disorders. The research applications may include studies of: basic biology, including growth, development, maturation, and aging; biomaterials for prostheses/orthotics and implants; pathogenesis and therapeutics; physical rehabilitation; exercise; mechanobiology/biomechanics; injury and repair, including adaptation, plasticity, degeneration, and regeneration; diagnostic markers and biomarkers; cell and gene-based therapies; and clinical outcomes and trials.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

ONCOLOGICAL SCIENCES INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields relating to oncological sciences. Members are invited to serve for overlapping terms of up to four years. The term for a member who is to serve as Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to oncological sciences, especially chemical carcinogenesis, radiation effects and tumor biology, mechanisms of action of cancer chemotherapeutic agents in both invitro and invitromodel systems, evaluation of experimental therapy of neoplastic diseases and studies especially in transition from basic studies to clinical applications and the effects of nutritional carcinogenesis.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

RESPIRATORY SCIENCES INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields relating to basic and clinical aspects of lung cellular, molecular, and immunobiology, lung injury, repair and remodeling, and respiratory integrative biology and translational research in normal and disease states. Members are invited to serve for overlapping terms of up to four years. The term for a member who is to serve as Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to basic and clinical aspects of lung cellular, molecular, and immunobiology, lung injury, repair and remodeling, and respiratory integrative biology and translational research in normal and disease states.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

RENAL & UROLOGICAL SCIENCES INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields relating to renal and urologic sciences. Members are invited to serve for overlapping terms of up to four years. The term for a member who is to serve as Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to systemic or local diseases affecting the kidney, urinary tract, and male genital system, including but not limited to clinical, translation and fundamental studies of the disease state and its treatment as well as of normal growth, development, structure, and function.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

RISK, PREVENTION AND HEALTH BEHAVIOR INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields relating to biological, psychological, cultural and social conditions and traits that affect the manifestation, prevention, treatment or management of physical and mental disease and disorders. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to biological, psychological, cultural and social conditions and traits that affect the manifestation, prevention, treatment or management of physical and mental disease and disorders.

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

SURGICAL SCIENCES, BIOMEDICAL IMAGING, AND BIOENGINEERING INTEGRATED REVIEW GROUP

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Integrated Review Group is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Consists of members, including the Chair and the Chairs of the subcommittees, selected by the Director, National Institutes of Health (NIH), from authorities knowledgeable in the various disciplines and fields relating to surgery, radiology, and bioengineering. Members are invited to serve for overlapping terms of up to four years. The term for the Chair may include a fifth year. The Integrated Review Group may have standing subcommittees, composed of members from the parent committee, to perform specific functions within the Integrated Review Group's jurisdiction.

FUNCTION

Advises the Director, NIH, and the Director, Center for Scientific Review (CSR), on the scientific and technical merit of applications for grants-in-aid for research, research training or research-related grants and cooperative agreements, or contract proposals relating to scientific areas relevant to anesthesiology (both experimental and clinical studies); surgery (both experimental and clinical studies) principally the cardiac, vascular, pulmonary, gastroenterological and urinary systems; transplantation grafting and reconstruction; treatment of shock trauma and burns, basic and applied bioengineering; cardiovascular biomaterials sepsis; and implantable bioinstrumentation; and diagnostic radiology (the production and technical evaluation of diagnostic images of the body and organ systems).

MEETINGS

Meetings of the full Integrated Review Group are held in plenary session, as necessary, and as called by the Chair with advance approval of a Government official, who approves the agenda. Meetings of the subcommittees are held approximately three times per year at the call of the Chair, with the advance approval of a Government official who also approves the agenda. A Government official is present at all meetings of the Integrated Review Group and of the subcommittees.

COMMITTEE ROSTER

CENTER FOR SCIENTIFIC REVIEW SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 282(b)(6), section 402(b)(6) of the Public Health Service Act, as amended. The Panel is governed by provisions of the Federal Advisory Committee Act, as amended (5 U.S. Code Appendix 2).

STRUCTURE

Members and Chairs are selected on an "as needed" basis to specific applications, proposals, or proposed solicitations to be reviewed. Members are selected from outstanding authorities in the various fields of biomedical research.

FUNCTION

Advises the Director, National Institutes of Health (NIH), regarding research grant and cooperative agreement applications and contract proposals relating to all areas of biomedical and behavioral science.

MEETINGS

Meetings of the Panel are held, as necessary, as determined by the Designated Federal Official who approves the agenda. A Government Official is present at all meetings.

COMMITTEE ROSTER

Members are designated to serve for individual meetings rather than appointed for a fixed term.

INTERAGENCY AUTISM COORDINATING COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 280i-2, section 399CC of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C Appendix 2).

STRUCTURE

This Committee shall consist of Federal members listed below, or their designees, and non-Federal public members. The authority to select the Federal members of the Committee, including the chair, is delegated to the Director, National Institutes of Health. The Committee shall be composed of: (1) the Director of the Centers for Disease Control and Prevention; (2) the Director of the National Institutes of Health (NIH), and the Directors of such national research institutes of the National Institutes of Health as the Secretary of Health and Human Services (Secretary) determines appropriate; (3) the heads of such other agencies as the Secretary determines appropriate; and (4) representatives of other Federal Governmental agencies that serve individuals with autism spectrum disorder such as the Department of Education.

Not fewer than six members of the Committee, or one-third of the total membership of the Committee, whichever is greater, shall be composed of non-Federal public members appointed by the Secretary. The non-Federal public members shall include: (1) at least one individual with a diagnosis of autism spectrum disorder; (2) at least one parent or legal guardian of an individual with an autism spectrum disorder; and (3) at least one member shall be a representative of leading research, advocacy, and service organizations for individuals with autism spectrum disorder.

Public members appointed to the Committee shall serve for a term of 4 years, and may be reappointed for one or more additional 4 year terms. Any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of such term. A member may serve after the expiration of the member's term until a successor has taken office. Terms of more than two years are contingent upon the renewal of the Committee by appropriate action prior to its termination.

The Chair of the Committee shall serve as the principal advisor to the Secretary, the Assistant Secretary for Health, and the Director of NIH, and shall provide advice to the Director of the Centers for Disease Control and Prevention, and to the heads of other relevant agencies. The Director, NIH, shall select the Chair for a term not to exceed two years.

FUNCTION

The Committee shall (1) develop and annually update a summary of advances in autism spectrum disorder research related to causes, prevention, treatment, early screening, diagnosis or ruling out a diagnosis; intervention, and access to services and supports for individuals with autism spectrum disorder; (2) monitor Federal activities with respect to autism spectrum disorder; (3) make recommendations to the Secretary regarding any appropriate changes to such activities, including recommendations to the Director of NIH with respect to the strategic plan; (4) make recommendations to the Secretary regarding public participation in decisions relating to

autism spectrum disorder; (5) develop and annually update a strategic plan for the conduct of, and support for, autism spectrum disorder research, including proposed budgetary requirements; and (6) submit to the Congress such strategic plan and any updates to such plan.

MEETINGS

The Committee shall meet not fewer than 2 times each year at the call of the Chair with the advance approval of the Executive Secretary, or upon the request of the Secretary. A government official shall give advance approval of the agenda and be present at all meetings of the Committee and its subcommittees. All meetings of the Committee shall include appropriate time periods for questions and presentations by the public.

COMMITTEE ROSTER

http://www.nimh.nih.gov/research-funding/scientific-meetings/recurringmeetings/iacc/index.shtml

MUSCULAR DYSTROPHY COORDINATING COMMITTEE

AUTHORITY

Established pursuant to 42 U.S.C. 283g, section 404E of the Public Health Service Act, as amended. The Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C Appendix 2.

STRUCTURE

The Committee shall consist of not more than 15 members, including the Chair, appointed by the Secretary. Two-thirds of the members shall represent governmental agencies, including the directors or their designees of each of the national research institutes involved in research with respect to muscular dystrophy and representatives of all other Federal departments and agencies whose programs involve health functions or responsibilities relevant to these diseases. One-third of the members shall be members of the public, including a broad cross section of persons affected with muscular dystrophies, including parents or legal guardians, affected individuals, researchers, and clinicians. Public members shall be invited to serve for a term of three years, and may serve for an unlimited number of terms if reappointed.

The Chair of the Committee shall serve as the principal advisor to the Secretary, the Assistant Secretary for Health, and the Director of NIH, and shall provide advice to the Director of the Centers for Disease Control and Prevention, the Commissioner of the Food and Drug Administration, and to the heads of other relevant agencies. The Committee shall select the Chair for a term not to exceed two years. The Chair of the Committee shall be appointed by, and be directly responsible to, the Secretary.

FUNCTION

The Committee shall develop a plan for conducting and supporting research and education on muscular dystrophy through the national research institutes, and shall periodically review and revise the plan. The plan shall (a) provide for a broad range of research and education activities relating to biomedical, epidemiological, psychosocial, and rehabilitative issues, including studies of the impact of these diseases in rural and underserved communities; (b) identify priorities among the programs and activities of the National Institutes of Health regarding these diseases; and (c) reflect input from a broad range of scientists, patients, and advocacy groups.

MEETINGS

The Committee shall meet as appropriate as determined by the Secretary in consultation with the Chair. All meetings will be held at the call of the Chair with the advance approval of a Government official, who shall also approve the agenda. A Government official shall be present at all meetings.

COMMITTEE ROSTER http://www.ninds.nih.gov/find_people/groups/mdcc/MDCC_Roster.htm

NATIONAL SCIENCE ADVISORY BOARD FOR BIOSECURITY

AUTHORITY

Established pursuant to 42 U.S.C. 217a, section 222 of the Public Health Service Act, as amended. The NSABB is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

The NSABB shall consist of not more than 25 voting members, including the Chair. Members will be appointed by the Secretary, HHS in consultation with the heads of federal departments and agencies that conduct or support life science research. The Secretary will designate the Chair. All members will hold security clearances at the level of Secret or higher. A member of the NIH Recombinant DNA Advisory Committee (RAC) will serve as a voting member of the NSABB. There may be non-voting ex officio members from various departments and agencies across the Government.

Members shall be invited to serve for overlapping terms of two to four years; terms of more than two years are contingent upon the renewal of the NSABB's Charter by appropriate action prior to its expiration. A member may serve after the expiration of the member's term until a successor has been appointed.

FUNCTION

The NSABB will advise the Secretary of HHS, the Director of NIH, and the heads of all federal departments and agencies that conduct or support life science research. The NSABB will advise on and recommend specific strategies for the efficient and effective oversight of federally conducted or supported dual use biological research, taking into consideration both national security concerns and the needs of the research community.

MEETINGS

Meetings shall be held at least twice a year, and may be convened on an as-needed basis, at the call of the HHS Designated Federal Official who shall also approve the agenda. The Designated Federal Official shall be present at all meetings.

COMMITTEE ROSTER

http://www.biosecurityboard.gov/members.asp

NATIONAL TOXICOLOGY PROGRAM BOARD OF SCIENTIFIC COUNSELORS

AUTHORITY

Established pursuant to 42 U.S.C. 217(a); section 222 of the PHS Act, as amended. The Board is governed by the provision of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

STRUCTURE

The Board shall consist of not more than 35 members, including the Chair. Members shall be selected by the Secretary, or designee, from recognized authorities knowledgeable in fields such as toxicology, pharmacology, pathology, biochemistry, epidemiology, risk assessment, mutagenesis, carcinogenesis, behavioral and neurotoxicology, immunotoxicology, reproductive toxicology or teratology, and biostatistics. None of these members shall serve as Representatives. The Director, National Toxicology Program, shall select the Chair from among the members of the Board.

Members shall be invited to serve for overlapping terms of up to four years. Members are initially appointed for two or three years and may be extended to a full term if deemed in the best interest of the Program. Members may serve after the expiration of their terms for 180 days after the date of expiration.

FUNCTION

The Board shall advise the National Toxicology Program Executive Committee and Program Director on matters of scientific program content, both present and future, as they relate to the Program. The Board shall conduct periodic review of the Program for the purpose of determining and advising on the scientific merit of these activities and the overall scientific quality of the Program.

MEETINGS

Meetings of the Board and each subcommittee shall be held no less than twice a year, at the call of the Executive Secretary or other designated Government official, with the advance approval of a Government official who shall also approve the agenda. A Government official shall be present at all meetings of the Board and its subcommittee.

COMMITTEE ROSTER

http://ntp.niehs.nih.gov/ntpweb/index.cfm?objectid=720164D3-BDB7-CEBA-F10D5547148D1216 NIH Directory of Federal Advisory Committees

NATIONAL TOXICOLOGY PROGRAM SPECIAL EMPHASIS PANEL

AUTHORITY

Established pursuant to 42 U.S.C. 217a; section 222 of the Public Health Service (PHS) Act, as amended. The Panel is governed by the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2).

STRUCTURE

Members and Chairs shall be selected by the Secretary or designee on an "as needed" basis in response to specific issues or areas to be considered. Members shall be selected from outstanding authorities knowledgeable in the various scientific disciplines pertinent to the specific issues or areas being considered. None of these members serve as Representatives.

FUNCTION

The Panels shall advise the National Toxicology Program and its specialized centers on agents of public health concern, new/revised toxicological test methods, or other issues. The Panels shall provide independent scientific review and conduct objective and scientifically rigorous evaluations. They shall provide opinions and recommendations that include, but are not limited to, the strength of the scientific evidence that exposure to an agent is a hazard for human health, the adequacy of new/revised toxicological test methods relative to current toxicological tests for assessing specific toxicities, or the validation status of test methods.

The Panel shall advise on the quality, reproducibility, and limitations of scientific findings; identify critical knowledge gaps and data needs; identify areas where improved or new test methods are needed; or advise on the design, conduct, and adequacy of validation studies for new/revised test methods.

MEETINGS

Meetings of the Panel will be held as necessary, as determined by the Executive Secretary or other designated government official, who shall also approve the agenda. A Government official shall be present at all meetings of the Panel.