

outbreak subsided in the spring of 2003. Measures being taken by Chinese health authorities since the 2004 non-laboratory-acquired case was reported include interventions on civets in the animal market based upon an accumulating but as yet unpublished body of evidence linking them with SARS-CoV infection.

To date, scientists have not been able to confirm the origin of SARS in humans. Some public health officials hypothesize that SARS-CoV was transmitted from an animal to human thereby sparking the 2003 outbreak. There is growing indirect evidence suggesting that exposure to certain wild animals, may be associated with infection, although there is no evidence that humans have become infected with the SARS coronavirus from direct contact with certain wild animals. During the initial investigations of cases of SARS coronavirus infection, it was reported that cases occurred among restaurant workers that handled wild animals and among workers in animal associated professions (1,2). Two subsequent investigations demonstrated higher rates of seropositivity against the SARS coronavirus among wild animal traders compared to controls (1,3). An analysis of the epidemiology of the SARS outbreak in Guangdong indicated that the outbreak appeared to have originated in many different municipalities without identified person to person linkages (4). Assuming humans acquire infection directly from animals, this suggests that there may have been multiple introductions from animals to humans and that the transmission was not a one-time unusual occurrence.

To date a SARS-like coronavirus has been isolated from many palm civets (*Paguma larvata*) (1). A comparison of isolates from civets and humans demonstrated 99.8% homology (1). In addition, there have been reports of small numbers of other animals that have demonstrated evidence of infection with SARS-like coronaviruses (1,5,6). Although it is possible that other animals may have a role in the lifecycle of the SARS coronavirus, to date the best available evidence points towards involvement of civets.

Civets, being wild terrestrial carnivores, also can be infected with and transmit rabies (7).

In 2001–2002, 98 civets were imported into the United States (44% from Asia); most, if not all, were imported for private ownership. Introduction of non-native species, such as civets, into the United States can lead to outbreaks of disease in the human population. CDC is therefore taking this

action to reduce the chance of the introduction or spread of SARS into the United States. Importation of civets infected with SARS would present a public health threat, and, based upon currently available evidence, banning the importation of civets is an effective way of limiting this threat.

Because there is no current evidence suggesting that SARS-infected civets have been imported and are causing disease in the United States, this order does not include restrictions upon the domestic movement of civets already in the United States.

#### Immediate Action

Therefore, pursuant to 42 CFR 71.32(b) and in accordance with this order, no person may import or attempt to import any civets (Family: Viverridae), whether dead or alive, or any products derived from civets. This prohibition does not apply to any person who imports or attempts to import products derived from civets if such products have been properly processed to render them noninfectious so that they pose no risk of transmitting or carrying the SARS virus. Such products include, but are not limited to, fully taxidermied animals and completely finished trophies. This prohibition also does not apply to any person who receives permission from the CDC to import civets or unprocessed products from civets for educational, exhibition, or scientific purposes as those terms are defined in 42 CFR 71.1.

Dated: January 15, 2004.

#### Julie Louise Gerberding,

Director, Centers for Disease Control and Prevention.

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7. CDC. Human rabies prevention—United States, 1999. Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR* 1999;48(No. RR–1):1–21.

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[Program Announcement 04069]

#### HIV Prevention Projects for the Pacific Islands; Notice of Availability of Funds—Amendment

A notice announcing the availability of fiscal year (FY) 2004 funds for cooperative agreements for HIV Prevention Projects for the Pacific Islands was published in the **Federal Register**, Tuesday, December 30, 2003, Volume 68, Number 249, pages 75246–75256. The notice is amended as follows:

Page 75246, first column, Application Deadline, and Page 75253, second column, Application Deadline Date, delete “February 2, 2004”, and replace with “February 9, 2004”.

Dated: January 16, 2004.

#### Sandra R. Manning,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Implementation of the National Violent Death Reporting System

*Announcement Type:* New.  
*Funding Opportunity Number:* 04061.  
*Catalog of Federal Domestic Assistance Number:* 93.136.  
*Key Dates:*  
*Application Deadline:* April 22, 2004.

#### I. Funding Opportunity Description

**Authority:** This program is authorized under section 301(a) (42 U.S.C. 241(a)) of the Public Health Service Act and section 391(a) (42 U.S.C. 280b(a)) of the Public Service Health Act, as amended.