Name of Committee: Biological Chemistry and Macromolecular Biophysics Integrated Review Group; Synthetic and Biological Chemistry A Study Section.

Date: February 12, 2013. Time: 8:00 a.m. to 6:00 p.m.

Agenda: To review and evaluate grant applications.

Place: Doubletree Hotel Washington, 1515 Rhode Island Ave., NW., Washington, DC 20005.

Contact Person: Mike Radtke, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4176, MSC 7806, Bethesda, MD 20892, 301–435– 1728, radtkem@csr.nih.gov.

Name of Committee: Center for Scientific Review Special Emphasis Panel; Member Conflict: Radiation Oncology.

Date: February 12, 2013.

Time: 12:00 p.m. to 2:30 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Syed M. Quadri, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 6210, MSC 7804, Bethesda, MD 20892, 301–435– 1211, quadris@csr.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: January 8, 2013.

Michelle Trout,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2013–00499 Filed 1–11–13; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the meeting of the National Cancer Advisory Board.

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

A portion of the meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4), and 552b(c)(6), Title 5

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

Name of Committee: National Cancer Advisory Board; Ad hoc Subcommittee on Global Cancer Research.

Open: February 7, 2013, 6:30 p.m. to 8:00 p.m.

Agenda: Discussion on Global Cancer. Place: Hyatt Regency Bethesda, One Bethesda Metro Center, Bethesda, Maryland 20814.

Contact Person: Dr. Ted Trimble, Executive Secretary, NCAB Ad hoc Subcommittee on Global Cancer Research, National Cancer Institute, National Institutes of Health, 6130 Executive Boulevard, EPN/7025, Rockville, MD 20892–8345, (301) 496–2522, trimblet@mail.nih.gov.

Name of Committee: National Cancer Advisory Board.

Open: February 8, 2013, 9:00 a.m. to 3:30 p.m.

Agenda: Program reports and presentations; business of the Board.

Place: National Institutes of Health, 9000 Rockville Pike, Building 31, C Wing, 6th Floor, Conference Room 10, Bethesda, MD 20892.

Closed: February 8, 2013, 3:30 p.m. to 5:00 p.m.

Agenda: Review of grant applications. Place: National Institutes of Health, 9000 Rockville Pike, Building 31, C Wing, 6th Floor, Conference Room 10, Bethesda, MD 20892.

Contact Person: Dr. Paulette S. Gray, Executive Secretary, National Cancer Institute, National Institutes of Health, 6116 Executive Boulevard, 8th Floor, Room 8001, Bethesda, MD 20892–8327, (301) 496–5147.

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

In the interest of security, NIH has instituted stringent procedures for entrance onto the NIH campus. All visitor vehicles, including taxicabs, hotel, and airport shuttles will be inspected before being allowed on campus. Visitors will be asked to show one form of identification (for example, a government-issued photo ID, driver's license, or passport) and to state the purpose of their visit.

Information is also available on the Institute's/Center's home page: http://deainfo.nci.nih.gov/, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: January 8, 2013.

Melanie J. Gray,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2013–00497 Filed 1–11–13; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276–1243.

Comments are invited on: (a) Whether the proposed collections of information are necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: Evaluation of Emergency Department Crisis Center Follow-up—New

The Substance Abuse and Mental Health Services Administration's (SAMHSA), Center for Mental Health Services (CMHS) will conduct an evaluation to assess the impact of crisis center follow-up with patients admitted to emergency departments following a suicide attempt.

The overarching purpose of the proposed Evaluation of Emergency Department Crisis Center Follow-up— New is to examine the impact of crisis center follow-up with patients admitted to emergency departments following a suicide attempt on subsequent emergency department readmissions. In total this evaluation effort includes two data collection activities.

Clearance is being requested to abstract patient hospital data and companion crisis center data to examine the impact of crisis center follow-up on readmissions to the emergency department for suicidal behavior. The data collected through this project will ultimately help SAMHSA to understand and direct crisis center follow-up lifesaving initiatives. The data collection activities are described below.

Two funded crisis centers, working in collaboration with two hospital emergency departments, will provide follow-up services to patients seen in the emergency department following a suicide attempt. Patient data will be collected for patients admitted for a suicide attempt in the two years prior to collaboration between the emergency department and crisis center and for patients admitted for a suicide attempt for the 2-year period after collaboration.

(1) The Hospital Data Abstraction Form will be utilized to collect systematic patient data for patients seen in one of the two participating hospital emergency departments. Information to be abstracted from patient data include: Demographic data, historical data, and subsequent suicidal behavioral and admission data. Data will be deidentified. Hospital staff will review patient data for qualifying (i.e., admission to the emergency department for suicide attempt) records. Records to

be reviewed will include emergency department admissions for the two years prior to crisis center and hospital emergency department collaboration and for two years following collaboration. It is expected that a total of 2,000 records will be abstracted by hospital staff and provided to the evaluation team.

(2) The Crisis Center Data Abstraction Form will be utilized to collect systematic crisis center data for patient records for whom hospital data were collected. Data will be de-identified and will only contain a patient identification number to match to the patient ID provided through hospital records.

The estimated response burden to collect this information is as follows annualized over the requested 3-year clearance period is presented below:

Instrument	Number of respondents	Responses per respondent*	Total number of responses	Burden per response	Annual burden*
Hospital Data Abstraction Form	2 2	334 167	667 333	.04 .04	27 13
Total	4				40

^{*} Rounded to the nearest whole number.

Send comments to Summer King, SAMHSA Reports Clearance Officer, Room 2–1057, One Choke Cherry Road, Rockville, MD 20857 and email her a copy at *summer.king@samhsa.hhs.gov*. Written comments should be received within 60 days of this notice.

Summer King,

SAMHSA Reports Clearance Officer. [FR Doc. 2013–00523 Filed 1–11–13; 8:45 am]

BILLING CODE 4162-20-P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

[Docket No. USCG-2012-0772]

Carriage Standards for Bridge Navigational Watch Alarm Systems (BNWAS) Aboard U.S. Flagged Vessels

AGENCY: Coast Guard, DHS.
ACTION: Notice of International
Standards.

SUMMARY: The Coast Guard announces the implementation date of carriage standards for Bridge Navigational Watch Alarm Systems (BNWAS), in accordance with the Articles of the International Convention for the Safety of Life at Sea (SOLAS) Chapter V, Regulation 19, for U.S. flagged vessels engaged on

international voyages. The purpose of a BNWAS is to detect operator disability that could lead to marine accidents.

DATES: The effective date for the BNWAS standard, according to the terms of SOLAS Chapter V, Regulation 19, was January 1, 2011. The implementation schedule for carriage of a BNWAS is listed below in the **SUPPLEMENTARY INFORMATION** section.

ADDRESSES: To view the documents mentioned in this notice, go to http:// www.regulations.gov and use "USCG-2012-0772" as your search term. If you do not have access to the Internet, you may view the docket online by visiting the Docket Management Facility in Room W12-140 on the ground floor of the Department of Transportation West Building, 1200 New Jersey Avenue SE., Washington, DC 20590, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. We have an agreement with the Department of Transportation to use the Docket Management Facility.

FOR FURTHER INFORMATION CONTACT: For information concerning this notice, contact LCDR Christopher Gagnon, U.S. Coast Guard, Commercial Vessel Compliance Division (CG–CVC–1), telephone 202–372–1224 or email *CG-cvc-1@uscg.mil*.

SUPPLEMENTARY INFORMATION:

Background

The purpose of a BNWAS is to detect operator disability that could lead to marine accidents. A BNWAS monitors the awareness of the Officer of the Watch (OOW) and automatically alerts the Master or another qualified OOW if, for any reason, the on-duty OOW becomes incapable of performing his or her duties. This purpose is achieved through a series of indications and alarms to alert the on-duty OOW and, if he or she does not respond, then to alert the Master or another qualified OOW at a remote location onboard the vessel. Additionally, a BNWAS may provide the on-duty OOW with a means of calling for immediate assistance, if required. A BNWAS should be operational whenever the ship's heading or track control system is engaged, unless inhibited by the Master.

The International Maritime
Organization (IMO) established BNWAS
carriage requirements in order to
enhance safety of navigation. The
BNWAS performance standards are
outlined in IMO Resolution
MSC.128(75), adopted on May 20, 2002.
Effective as of January 1, 2011, IMO
Resolution MSC.282(86) amended
SOLAS Chapter V, Regulation 19, and
established an implementation schedule
for the carriage of a BNWAS (SOLAS V,