questions, as well as any responses to the questions themselves based on information that may already be in the public domain. The EMA Workgroup further requests comment on the utility of the working definition of EMA used here. A transcript of the public meeting will be made available.

Please note that FDA does not wish to publicize sensitive information that could potentially be used by those who wish to commit EMA or other adulteration or that identifies those who may be committing adulteration FDA would like to remind the public that if they have information about these or any other problems they have encountered with FDA products, they may report such information at http:// www.fda.gov/opacom/backgrounders/ problem.html. In addition, if the public has information pertaining to suspected criminal activity with regard to FDAregulated products (e.g., information about individuals who may be committing EMA or other adulteration), they may contact FDA's Office of Criminal Investigations at http:// www.fda.gov/oci/default.htm in lieu of responding publicly to this document. (1) General Questions:

a. What information should U.S. regulators seek and from what sources to help predict and prevent EMA? What further steps can U.S. regulators take to predict and prevent EMA?

b. What are members of industry doing to prevent EMA? What further steps can industry take to

prevent EMA?

- c. What recent examples of known or suspected EMA domestically and internationally should U.S. regulators study and learn from? d. What information do other organizations (including, but not limited to, trade organizations and security service providers) have that would be useful in predicting and preventing EMA? What are members of other organizations doing to prevent EMA? e. What are other government
- regulators within and outside of the United States doing to predict and address EMA?
- f. What indicators (economic-based, chemistry-based, etc.) might be used to detect potential EMA?
- (2) Questions pertaining to attributes of products, components/ingredients that may be at risk for EMA:
  - a. What are attributes of products or components/ingredients of products that may cause them to be more vulnerable to EMA? b. What food products are marketed based on measured content of

certain constituents, such as content of certain proteins, certain fats, or certain sugars?

(3) Questions pertaining to changes in the marketing environment: What changes relevant to the risk for EMA have occurred recently in:

a. The marketing environment of products or components/ ingredients?

b. The sourcing and/or distribution of products?

c. The prices, output, imports or exports of products or components/ ingredients?

d. The supply of components/ ingredients or source materials for products?

- (4) Questions about detection methods: a. What analytical equipment or methods currently used by industry and regulators to establish the identity or quality of a product or its conformity to specifications may be inadequate to detect evidence of EMA or adulterated products or ingredients?
  - b. Are there appropriate analytical methods/equipment that could be used instead of, or in addition to, existing methods or equipment in particular situations?
  - c. What rapid methods can be used to detect adulteration of products or ingredients?
- (5) What systems are currently being used to track and verify components/ ingredients from their source? (6) Are there particular types of industry structures or supply chains that are especially vulnerable to or secure from potential EMA?

### **IV. Transcripts**

Please be advised that as soon as a transcript is available, it will be accessible at http:// www.regulations.gov. It may be viewed at the Division of Dockets Management (HFA-305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD. A transcript will also be available in either hardcopy or on CD-ROM, after submission of a Freedom of Information request. Written requests are to be sent to Division of Freedom of Information (HFI-35), Office of Management Programs, Food and Drug Administration, 5600 Fishers Lane, rm. 6-30, Rockville, MD 20857.

### V. Comments

Interested persons may submit to the Division of Dockets Management (see **ADDRESSES**) written or electronic comments regarding this document. Submit a single copy of electronic comments or two paper copies of any mailed comments, except that

individuals may submit one paper copy. Comments are to be identified with the docket number found in brackets in the heading of this document. Received comments may be seen in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday.

Dated: April 1, 2009.

#### Randall W. Lutter,

Deputy Commissioner for Policy. [FR Doc. E9-7843 Filed 4-2-09; 4:15 pm] BILLING CODE 4160-01-S

### **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

#### **National Institutes of Health**

### **National Institute of Diabetes and Digestive and Kidney Diseases Diabetes Mellitus Interagency** Coordinating Committee; Notice of Meeting

The Diabetes Mellitus Interagency Coordinating Committee (DMICC) will hold a meeting on May 6, 2009, from 12:30 to 4:30 p.m. at Building 31C, Conference Room 6C, on the NIH campus, 9000 Wisconsin Ave., Bethesda, MD. The meeting will be open to the public, with attendance limited to space available. Non-federal individuals planning to attend the meeting should notify the Contact Person listed on this notice at least 2 days prior to the meeting. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should inform the Contact Person listed below at least 10 days in advance of the meeting.

The DMICC facilitates cooperation, communication, and collaboration on diabetes among government entities. DMICC meetings, held several times a year, provide an opportunity for members to learn about and discuss current and future diabetes programs in DMICC member organizations and to identify opportunities for collaboration. The May 6, 2009, DMICC meeting will discuss "Federally Supported Diabetes-Related National Education Programs.'

Any member of the public interested in presenting oral comments to the Committee should notify the Contact Person listed on this notice at least 10 days in advance of the meeting. Interested individuals and representatives or organizations should submit a letter of intent, a brief description of the organization represented, and a written copy of their oral presentation in advance of the meeting. Only one representative of an organization will be allowed to present

oral comments and presentations will be limited to a maximum of five minutes. Both printed and electronic copies are requested for the record. In addition, any interested person may file written comments with the Committee by forwarding their 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. Because of time constraints for the meeting, oral comments will be allowed on a first come, first served basis.

Please Note: The NIH has instituted security measures to ensure the safety of NIH employees and property. 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). All visitors should be prepared to have their personal belongings inspected and to go through metal detection inspection. Visitors are strongly encouraged to take public transportation to the NIH campus, as there are very few visitor parking spaces available. NIH Building 31C is a 10-minute walk from the Medical Center Station on the Red Line of the Metro.

A registration link and information about the DMICC meeting will be available on the DMICC Web site: http://www.diabetescommittee.gov. Members of the public who would like to receive e-mail notification about future DMICC meetings could register on a listserv available on the same Web site.

For further information concerning this meeting, contact Dr. Sanford Garfield, Executive Secretary of the Diabetes Mellitus Interagency Coordinating Committee, National Institute of Diabetes and Digestive and Kidney Diseases, 6707 Democracy Boulevard, Room 654, MSC 5460, Bethesda, MD 20892–5460, Telephone: 301–594–8803, fax: 301–402–6271, E-mail: dmicc@mail.nih.gov.

Dated: April 1, 2009.

### Sanford Garfield, PhD,

Executive Secretary, DMICC, Division of Diabetes, Endocrinology and Metabolic Diseases, NIDDK, National Institutes of Health.

[FR Doc. E9-7724 Filed 4-3-09; 8:45 am]

BILLING CODE 4140-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **National Institutes of Health**

# National Center for Complementary & Alternative Medicine; Notice of Closed Meeting

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

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Center for Complementary and Alternative Medicine Special Emphasis Panel Clinical Sciences.

Date: June 22–23, 2009.

Time: 8 a.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: Embassy Suites at the Chevy Chase Pavilion, 4300 Military Road, NW., Washington, DC 20015.

Contact Person: Laurie Friedman Donze, PhD, Scientific Review Officer, Office of Scientific Review, National Center for Complementary, and Alternative Medicine, NIH, 6707 Democracy Blvd., Suite 401, Bethesda, MD 20892, 301–402–1030, donzel@mail.nih.gov.

Dated: March 31, 2009.

### Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. E9–7709 Filed 4–3–09; 8:45 am] BILLING CODE 4140-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **National Institutes of Health**

# National Center for Complementary & Alternative Medicine; Notice of Closed Meeting

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

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial

property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Center for Complementary and Alternative Medicine Special Emphasis Panel Loan Repayment Program.

Date: April 28, 2009. Time: 8 a.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, One Democracy Plaza, 6701 Democracy Boulevard, Bethesda, MD 20892. (Telephone Conference Call)

Contact Person: Laurie Friedman Donze, PhD, Scientific Review Officer, Office of Scientific Review, National Center for Complementary, and Alternative Medicine, NIH, 6707 Democracy Blvd., Suite 401, Bethesda, MD 20892, 301–402–1030, donzel@mail.nih.gov.

Dated: March 31, 2009.

### Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. E9–7713 Filed 4–3–09; 8:45 am]

BILLING CODE 4140-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## **National Institutes of Health**

# National Center for Complementary & Alternative Medicine; Notice of Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the National Advisory Council for Complementary and Alternative Medicine (NACCAM) meeting.

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/or contract proposals and the discussion could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications and/or contract proposals, the disclosure of which would