inadequate for widespread use in preventive medicine and public health. As part of the family history initiative, CDC is developing an electronic, selfadministered, Web-based tool that assesses familial risk for six diseases and recommends early detection and prevention strategies. The tool collects:

• Name, date of birth, gender, adoption status, Ashkenazi Jewish heritage.

• Current height and weight.

• Health behaviors: smoking, physical activity, fruit and vegetable consumption, alcohol use, aspirin use.

• Screening tests: clinical breast exam, mammogram, fecal occult blood test, sigmoidoscopy, colonoscopy, blood cholesterol, blood pressure, and blood sugar.

• Disease history of a person's firstand second-degree relatives (mother, father, grandparents, siblings, aunts and uncles) for coronary heart disease, stroke, diabetes, and colorectal, breast, and ovarian cancer.

Algorithms in the software analyze the data and assess risk based on the number of relatives affected, their age at disease onset, their gender, the closeness of the relatives to each other and the user, and the combinations of diseases in the family. The tool provides the user with a report that includes an assessment of familial risk for each disease (described as strong, moderate or weak), an explanation as to why the family history is a risk factor, and recommendations for disease prevention and screening that are targeted to the familial risk and based on answers to the health behavior and screening questions. An evaluation trial of Family Healthware<sup>TM</sup>; set in primary practice clinics will begin in July 2005.

Inventors: Maren T. Scheuner, Paula W. Yoon, Muin J. Khoury, and Cynthia Jorgensen.

CDC Ref. #: I-004-04.

Dated: June 13, 2005.

#### James D. Seligman,

Associate Director for Program, Services, Centers for Disease Control and Prevention. [FR Doc. 05–12498 Filed 6–23–05; 8:45 am]

BILLING CODE 4163-18-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Health Promotion and Diabetes Prevention Projects for American Indian/Alaska Native Communities: Adaptations of Practical Community Environmental Indicators, Program Announcement Number AA029

In accordance with Section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following meeting:

*Name:* Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Health Promotion and Diabetes Prevention Projects for American Indian/ Alaska Native Communities: Adaptations of Practical Community Environmental Indicators, Program Announcement Number AA029.

*Times and Dates:* 9 a.m.–5 p.m., August 2, 2005 (Closed); 9 a.m.–5 p.m., August 3, 2005 (Closed); 9 a.m.–4 p.m., August 4, 2005 (Closed).

*Place:* Club House Inn and Suites, 1315 Menaul Boulevard NE., Albuquerque, NM 87107, Telephone Number (505) 345–0010.

Status: The meeting will be closed to the public in accordance with provisions set forth in Section 552b(c) (4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92–463.

Matters To Be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to: Health Promotion and Diabetes Prevention Projects for American Indian/ Alaska Native Communities: Adaptations of Practical Community Environmental Indicators, Program Announcement Number AA029.

For Further Information Contact: Maria E. Burns, M.P.A., Senior Program Management Officer, National Center for Chronic Disease Prevention and Health Promotion, CDC, 1720 Louisiana Boulevard, NE., Albuquerque, NM 87110, Telephone (505) 232–9907.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: June 20, 2005.

#### Alvin Hall.

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 05–12499 Filed 6–23–05; 8:45 am] BILLING CODE 4163–18–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

### Availability of Opportunity to Provide Input for the National Occupational Research Agenda

The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) announces the following:

Availability of Opportunity for the Public to Provide Input for the National Occupational Research Agenda (NORA).

For the past nine years, NORA has served as a framework to guide occupational safety and health research in the nation. Approximately 500 participants outside NIOSH provided input into the development of the first agenda. Building on the success of NORA, the second decade of NORA will use a sector-based approach.

NIOSH and its partners under NORA are pleased to introduce a newly updated NORA Web site at *http:// www.cdc.gov/niosh/nora*. An important feature of the updated page is an online feedback form. We hope both individuals and organizations will use this opportunity to submit comments and suggestions for guiding the design of future occupational safety and health research in the nation.

The Web site allows stakeholders to describe what they perceive to be the top research needs within each sector, sub-sector, or in multiple sectors. Stakeholders can submit comments on the approach to redesigning NORA as it enters its second decade. We invite partners and collaborators to use the electronic option to provide comments, which will automatically be entered into the NORA Docket maintained by NIOSH.

Experience gained in the first decade of NORA indicates that the following types of information may help identify the areas where new research will make the greatest contributions to preventing work-related injuries, illnesses, and deaths:

• Number of workers at risk

Seriousness of the hazard

• Probability that new information and approaches will make a difference

Alternatively, comments may be emailed to *NIOCINDOCKET@cdc.gov* or mailed to: Docket NIOSH–047, Robert A. Taft Laboratories (C–34), 4676 Columbia Parkway, Cincinnati, OH 45226.

The public may also view the complete NORA Docket at this location.