submitted manuscripts, and grant applications submitted to NIH in 2004, he falsely claimed that transgenic mice had been generated with the mono-functional lentiviral vectors with c–Myc, Ras or Akt under the control of the CD4 promoter, when they had not, and that transgenic mice had been generated with the bi-functional lentiviral vectors with CD4–c–Myc, Ras or Akt– and U6–shRNAs targeting luciferase, Bcl–2, or Bim proteins, when they had not. The effect of these misrepresentations was the reported false conclusion that a cytokine-stimulated proto-oncogene network regulated CD4+ T-cell survival and responses to foreign and self antigens.

8. While at MIT, Dr. Luk Van Parijs admitted that in presentations and submitted manuscripts in 2004, he falsely claimed that mice injected with plasmids carrying shRNAs for Bcl–2, Akt1 and Akt2, complexed to polyethylene imine (PEI) showed a significant reduction in c–myc-induced tumor growth, when the experiments had not been done.

9. While at MIT, Dr. Luk Van Parijs admitted that in presentations in 2004, he falsely claimed that shRNAs designed using algorithms developed in 2004 were more effective to silence target genes than the shRNAs designed with algorithms in 2002.

10. While at MIT, Dr. Luk Van Parijs admitted that in multiple presentations, submitted manuscripts, a grant application submitted to NIH, and in the text of *Current Opinions in Molec. Therapeutics,* 6:136, 2004, he falsely claimed that an in vivo RNAi screen was developed to identify genes in cytokine and apoptosis pathways that accelerated or suppressed Myc-induced tumorigenesis in lethally irradiated mice, by using bi-functional lentiviral vectors that expressed c-Myc under control of the CMV enhancer-β-actin promoter (CAG) and U6-driven shRNAs designed to silence 168 selected genes, when the experiments had not been done.

11. While at MIT, Dr. Luk Van Parijs admitted that in a submitted manuscript in 2004 and a grant application submitted to NIH in 2003, he falsely claimed that with the use of retroviral vectors with Bim and activated Ras, Akt or Myc, he showed that the IL–2-stimulated activation of proto-oncogene pathways functioned to promote the survival of T cells following antigen encounter by regulating Bim and Bcl–2 pathways, when the experiments that were performed were inconclusive.

Dr. Van Parijs has entered into a Voluntary Exclusion Agreement in which he has voluntarily agreed, for a period of five (5) years, beginning on December 22, 2008:

(1) to exclude himself from any contracting or subcontracting with any agency of the United States Government and from eligibility or involvement in nonprocurement programs of the United States Government referred to as ''covered transactions'' pursuant to HHS' Implementation (2 CFR Part 376 *et seq.*) of OMB Guidelines to Agencies on Government wide Debarment and Suspension (2 CFR, Part 180); and

(2) To exclude himself from serving in any advisory capacity to PHS, including but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as a consultant.

FOR FURTHER INFORMATION CONTACT: Director, Division of Investigative Oversight, Office of Research Integrity, 1101 Wootton Parkway, Suite 750, Rockville, MD 20852, (240) 453–8800.

Dated: January 14, 2009.

Chris B. Pascal,

Director, Office of Research Integrity.

[FR Doc. E9–1453 Filed 1–22–09; 8:45 am]

BILLING CODE 4150–31–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting.

Name: National Committee on Vital and Health Statistics (NCVHS), Full Committee Meeting.

Time and Date:

February 25, 2009, 9 a.m.–3 p.m. February 26, 2009, 10 a.m.–4 p.m.

Place: Hubert Humphrey Building, 200 Independence Avenue, SW., Room 505A, Washington, DC 20201.

Status: Open.

Purpose: At this meeting the Committee will hear presentations and hold discussions on several health data policy topics. On the morning of the first day the Committee will hear updates from the Department, the HHS Data Council, the Center for Medicare and Medicaid Services, as well as update on the transition to the new administration. There will also be an ONC update on the NHIN Conference. In the afternoon there will be a speaker on de-identification of health data from the Center for Democracy and Technology.

On the morning of the second day there will be a briefing on international terminology and an update on Health Statistics for the 21st Century. There will also be an update from NCHS Board of Scientific Counselors and an overview of emerging and innovative sources of health data.

The times shown above are for the full Committee meeting. Subcommittee breakout sessions can be scheduled for late in the afternoon of the first day and second day and in the morning prior to the full Committee meeting on the second day. Agendas for these breakout sessions will be posted on the NCVHS website (URL below) when available.

For Further Information Contact: Substantive program information as well as summaries of meetings and a roster of committee members may be obtained from Marjorie S. Greenberg, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Room 2402, Hyattsville, Maryland 20782, telephone (301) 458–4245. Information also is available on the NCVHS home page of the HHS Web site: *http://www.ncvhs.hhs.gov/,* where further information including an agenda will be posted when available.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on (301) 458–4EEO (4336) as soon as possible.

Dated: January 12, 2009.

James Scanlon,

Deputy Assistant Secretary for Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. E9–1445 Filed 1–22–09; 8:45 am]

BILLING CODE 4151–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10273]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare & Medicaid Services (CMS) is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.