

primary care providers who agree to practice in areas of the country that need them most.

The NHSC invites individuals who are affiliated with academic, clinical, trade, and other public health related organizations to apply to be volunteers within the NHSC Ambassador Program. NHSC Ambassadors are dedicated volunteers who help educate and inform prospective NHSC members. Ambassadors give their time and talents to spread the word about the opportunities available through the NHSC and serve as additional local resources for current NHSC members. NHSC Ambassadors inspire and motivate students and providers to provide primary health care in communities with limited access to care.

The NHSC Ambassador Portal will serve as both the application interface for interested individuals to apply and become NHSC Ambassadors, as well as the public-facing online searchable database of Ambassador contact information. Applicants will create individual Ambassador profiles that will contain

information such as name, email address(es), professional/employment information (including organization name and address), (or the school which they attend), phone number(s), which discipline of students and/or professionals they interact with, and a brief reason why they would like to be an Ambassador. Completed applications will be forwarded through the portal to NHSC staff for approval. If approved, the NHSC Ambassador will have the opportunity to add a brief professional biography and social network addresses to their profile. Assistance in completing the application will be provided through prompts via the online portal and also through the NHSC Customer Care Center, if necessary.

*Need and Proposed Use of the Information:* The need and purpose of this information collection is to create a database where interested parties can search for NHSC Ambassadors (that meet specific search criteria) to serve as local resources on the NHSC programs. The other purpose is that NHSC can have access to volunteers who are

available to spread important programmatic information on behalf of the NHSC.

*Likely Respondents:* Individuals who are affiliated with academic, clinical, trade, and other public health related organizations.

*Burden Statement:* Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this Information Collection Request are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Ambassador Portal—New Applicants .....	200	1	200	.10	20
Ambassador Portal—Updates to current Ambassador profiles .....	500	1	500	.10	50
Total .....	700	.....	700	.....	70

Dated: May 20, 2014.

**Jackie Painter,**

*Deputy Director, Division of Policy and Information Coordination.*

[FR Doc. 2014-12324 Filed 5-27-14; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**National Vaccine Injury Compensation Program; List of Petitions Received**

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Health Resources and Services Administration (HRSA) is publishing this notice of petitions received under the National Vaccine Injury Compensation Program (the Program), as required by Section

2112(b)(2) of the Public Health Service (PHS) Act, as amended. While the Secretary of Health and Human Services is named as the respondent in all proceedings brought by the filing of petitions for compensation under the Program, the United States Court of Federal Claims is charged by statute with the responsibility for considering and acting upon the petitions.

**FOR FURTHER INFORMATION CONTACT:** For information about requirements for filing petitions, and the Program in general, contact the Clerk, United States Court of Federal Claims, 717 Madison Place NW., Washington, DC 20005, (202) 357-6400. For information on HRSA's role in the Program, contact the Director, National Vaccine Injury Compensation Program, 5600 Fishers Lane, Room 11C-26, Rockville, MD 20857; (301) 443-6593.

**SUPPLEMENTARY INFORMATION:** The Program provides a system of no-fault compensation for certain individuals

who have been injured by specified childhood vaccines. Subtitle 2 of Title XXI of the PHS Act, 42 U.S.C. 300aa-10 *et seq.*, provides that those seeking compensation are to file a petition with the U.S. Court of Federal Claims and to serve a copy of the petition on the Secretary of Health and Human Services, who is named as the respondent in each proceeding. The Secretary has delegated this responsibility under the Program to HRSA. The Court is directed by statute to appoint special masters who take evidence, conduct hearings as appropriate, and make initial decisions as to eligibility for, and amount of, compensation.

A petition may be filed with respect to injuries, disabilities, illnesses, conditions, and deaths resulting from vaccines described in the Vaccine Injury Table (the Table) set forth at Section 2114 of the PHS Act or as set forth at 42 CFR 100.3, as applicable. This Table lists for each covered childhood vaccine

the conditions which may lead to compensation and, for each condition, the time period for occurrence of the first symptom or manifestation of onset or of significant aggravation after vaccine administration. Compensation may also be awarded for conditions not listed in the Table and for conditions that are manifested outside the time periods specified in the Table, but only if the petitioner shows that the condition was caused by one of the listed vaccines.

Section 2112(b)(2) of the PHS Act, 42 U.S.C. 300aa-12(b)(2), requires that “[w]ithin 30 days after the Secretary receives service of any petition filed under section 2111 the Secretary shall publish notice of such petition in the **Federal Register**.” Set forth below is a list of petitions received by HRSA on April 1, 2014, through April 31, 2014. This list provides the name of petitioner, city and state of vaccination (if unknown then city and state of person or attorney filing claim), and case number. In cases where the Court has redacted the name of a petitioner and/or the case number, the list reflects such redaction.

Section 2112(b)(2) also provides that the special master “shall afford all interested persons an opportunity to submit relevant, written information” relating to the following:

1. The existence of evidence “that there is not a preponderance of the evidence that the illness, disability, injury, condition, or death described in the petition is due to factors unrelated to the administration of the vaccine described in the petition,” and

2. Any allegation in a petition that the petitioner either:

(a) “Sustained, or had significantly aggravated, any illness, disability, injury, or condition not set forth in the Vaccine Injury Table but which was caused by” one of the vaccines referred to in the Table, or

(b) “Sustained, or had significantly aggravated, any illness, disability, injury, or condition set forth in the Vaccine Injury Table the first symptom or manifestation of the onset or significant aggravation of which did not occur within the time period set forth in the Table but which was caused by a vaccine” referred to in the Table.

In accordance with Section 2112(b)(2), all interested persons may submit written information relevant to the issues described above in the case of the petitions listed below. Any person choosing to do so should file an original and three (3) copies of the information with the Clerk of the U.S. Court of Federal Claims at the address listed above (under the heading **FOR FURTHER**

**INFORMATION CONTACT**), with a copy to HRSA addressed to Director, Division of Vaccine Injury Compensation Program, Healthcare Systems Bureau, 5600 Fishers Lane, Room 11C-26, Rockville, MD 20857. The Court’s caption (Petitioner’s Name v. Secretary of Health and Human Services) and the docket number assigned to the petition should be used as the caption for the written submission. Chapter 35 of title 44, United States Code, related to paperwork reduction, does not apply to information required for purposes of carrying out the Program.

Dated: May 21, 2014.

**Mary K. Wakefield**,  
*Administrator.*

#### List of Petitions Filed

1. Rene Dumas, Washington, District of Columbia, Court of Federal Claims No: 14-0256V
2. Theodore and Jodi Orm on behalf of A.S.O., Grand Haven, Michigan, Court of Federal Claims No: 14-0257V
3. Lauren Natalie Lee, Littleton, Colorado, Court of Federal Claims No: 14-0258V
4. Monica R. Beason, Pittsburg, Kansas, Court of Federal Claims No: 14-0262V
5. Stacie Rublein, Farmington Hills, Michigan, Court of Federal Claims No: 14-0264V
6. Matthew J. Lenihan, Council Bluffs, Iowa, Court of Federal Claims No: 14-0265V
7. Wilbert L. Townsend, Sr., Las Vegas, Nevada, Court of Federal Claims No: 14-0266V
8. Carlos Lopez and Sylvia Medina on behalf of Cedric Carlos Lopez, Dallas, Texas, Court of Federal Claims No: 14-0270V
9. Joseph and Angela Quance on behalf of E. J. Q., Marshfield, Wisconsin, Court of Federal Claims No: 14-0271V
10. Paxton and Dee King on behalf of F. M. K., Baraboo, Wisconsin, Court of Federal Claims No: 14-0272V
11. Vijay Divakar, Chandler, Arizona, Court of Federal Claims No: 14-0273V
12. Wynette Arias, Chalmette, Louisiana, Court of Federal Claims No: 14-0274V
13. Jeff and Cynthia Davis on behalf of Paige Davis, Spring, Texas, Court of Federal Claims No: 14-0276V
14. Melanie Yalacki, Lakewood, Colorado, Court of Federal Claims No: 14-0278V
15. Susie Avchen, Boston, Massachusetts, Court of Federal Claims No: 14-0279V
16. Sarah Meyers, Lewiston, Maine, Court of Federal Claims No: 14-0281V
17. Cheri Srou, Brooklyn, New York, Court of Federal Claims No: 14-0283V
18. Ofelia Winters, Gaithersburg, Maryland, Court of Federal Claims No: 14-0285V
19. Sarah Dearing, Washington, District of Columbia, Court of Federal Claims No: 14-0289V
20. Julio Paz and Olga Paz on behalf of J. P., Deceased, Boston, Massachusetts, Court of Federal Claims No: 14-0290V
21. Amy Lea on behalf of Michael Lea, Deceased, Fayetteville, Arkansas, Court of Federal Claims No: 14-0291V
22. Emily Thompson, Germantown, Tennessee, Court of Federal Claims No: 14-0292V
23. Ruby J. Williams, Morgantown, West Virginia, Court of Federal Claims No: 14-0293V
24. Jennifer Pryde, Baltimore, Maryland, Court of Federal Claims No: 14-0298V
25. Alexander Katsaros, Naples, Florida, Court of Federal Claims No: 14-0302V
26. James Pike, Tequesta, Florida, Court of Federal Claims No: 14-0303V
27. Sheila Foster on behalf of A. F., Brandenburg, Kentucky, Court of Federal Claims No: 14-0309V
28. Linette Breland on behalf of C.B., New York, New York, Court of Federal Claims No: 14-0312V
29. Emily Culligan, Baraboo, Wisconsin, Court of Federal Claims No: 14-0318V
30. Markus Heinze and Candace Heinze on behalf of J.H., Crestview Hills, Kentucky, Court of Federal Claims No: 14-0319V
31. Ashley and Craig Rice on behalf of Rowan Rice, Charleston, South Carolina, Court of Federal Claims No: 14-0321
32. Berenice Dorris, Beverly Hills, California, Court of Federal Claims No: 14-0322V
33. Loretta Zimmerman, Fountain Valley, California, Court of Federal Claims No: 14-0323V
34. Jeanette Parrish on behalf of Armandina Parrish, Deceased, Houston, Texas, Court of Federal Claims No: 14-0324V
35. Rita Martin, Riverside, California, Court of Federal Claims No: 14-0325V
36. Elena Ford, Washington, District of Columbia, Court of Federal Claims No: 14-0327V
37. Myroslawa Yangis, Piermont, New York, Court of Federal Claims No: 14-0328V
38. Barbara Sweat on behalf of Shaniya Sweat, Tampa, Florida, Court of Federal Claims No: 14-0329V
39. Janet Moody, Dallas, Texas, Court of Federal Claims No: 14-0336V
40. Arlene deRego, Marlborough, Massachusetts, Court of Federal Claims No: 14-0337V
41. Samantha Jenney, New Bedford, Massachusetts, Court of Federal Claims No: 14-0338V
42. Susan Harrison, Boston, Massachusetts, Court of Federal Claims No: 14-0339V
43. Crystal La Veck and Mark Osterhoudt on behalf of B.O., Boston, Massachusetts, Court of Federal Claims No: 14-0340V
44. Kenneth Baron and Jayme Baron on behalf of S. B., Boston, Massachusetts, Court of Federal Claims No: 14-0341V
45. Cassie Wolf and Richard Wolf on behalf of Richard Wolf, II, Cincinnati, Ohio, Court of Federal Claims No: 14-0342V
46. Marilyn Erickson, Spring, Texas, Court of Federal Claims No: 14-0351V
47. Jonathan Mason, Mayfield, Kentucky, Court of Federal Claims No: 14-0356V
48. Candice Lewis and Kevin Neal on behalf of K. M. N., St. Louis, Missouri, Court of Federal Claims No: 14-0357V
49. Judy Becker, Endwell, New York, Court of Federal Claims No: 14-0363V
50. Yolanda Rosebraugh on behalf of Noah Rosebraugh, Santa Cruz, California, Court of Federal Claims No: 14-0364V
51. Cathy Erdmann, Baraboo, Wisconsin,

- Court of Federal Claims No: 14–0365V
52. Martha Mascia-Strickler, Sarasota, Florida, Court of Federal Claims No: 14–0368
53. Stephanie Astle on behalf of M. A., Vienna, Virginia, Court of Federal Claims No: 14–0369V
54. Debra Bub, Vienna, Virginia, Court of Federal Claims No: 14–0370V

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**BILLING CODE 4165–15–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Poison Control Program

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Notice of Non-Competitive Replacement Awards to the Nationwide Children's Hospital, Inc., and the Children's Hospital Medical Center.

**SUMMARY:** HRSA will transfer funds and duties from the University Hospitals of Cleveland to the Nationwide Children's Hospital, Inc., d.b.a., the Central Ohio Poison Center and the Children's Hospital Medical Center, d.b.a., the Cincinnati Drug and Poison Information Center. These transfers are necessary in order to maintain poison control services and education efforts throughout the State of Ohio.

**SUPPLEMENTARY INFORMATION:** Former Grantee of Record: University Hospitals of Cleveland (Grant #H4BHS15469) is the former grantee.

Original Period of Grant Support is from: September 1, 2009, to August 31, 2014.

Replacement Awardees: Nationwide Children's Hospital, Inc. (Grant #H4BHS15471) and the Children's Hospital Medical Center (Grant #H4BHS15468) are the replacement awardees.

Period of Replacement Awards: The period of support for the replacement awards is March 1, 2014, to August 31, 2014.

Amount of Replacement Awards is as follows:

- University Hospitals of Cleveland d.b.a. the Greater Cleveland Poison Control Center (H4BHS15469) will transfer \$89,436 to the Nationwide Children's Hospital, Inc., d.b.a., the Central Ohio Poison Center (H4BHS15471); and
- University Hospitals of Cleveland d.b.a. the Greater Cleveland Poison Center (H4BHS15469) will transfer \$89,436 to the Children's Hospital Medical Center, d.b.a., the Cincinnati

Drug and Poison Information Center (H4BHS15468)

**Authority:** Section 1273 of the Public Health Service Act, (42 U.S.C. 300d–73), as amended by the Poison Center Support, Enhancement, and Awareness Act of 2008.

*CFDA Number:* 93.253.

*Justification:* The poison centers operated by the Nationwide Children's Hospital, Inc., and the Children's Hospital Medical Center currently provide poison center services to the citizens of Ohio, 24 hours a day, 7 days a week. These services include telephone treatment advice and consultation about toxic exposures for both the public and health care professionals and toxico and public health surveillance. Educators at the centers provide public education about poison prevention and clinical toxicology training for many different healthcare professionals. The centers also offer programs to help clinicians better manage poisoning and overdose cases that end up in a healthcare facility.

These centers have the capacity to provide poison control service to the area formerly served by the University Hospitals of Cleveland, ensuring access to critical poison emergency treatment and poison prevention information statewide, and to fulfill the expectations of the original funded application. These replacement grants will support the grantees' abilities to provide poison center services to the state's entire population with the least amount of disruption.

The State of Ohio has determined that the Nationwide Children's Hospital, Inc. and the Children's Hospital Medical Center are the best qualified grantees for this award. On February 19, 2014, the state provided HRSA with a letter designating the two centers as the official poison centers of Ohio and assigning them each 50 percent of Ohio's service areas.

#### FOR FURTHER INFORMATION CONTACT:

Poison Control Program, Director, Elisa Gladstone, via email at [Egladstone@hrsa.gov](mailto:Egladstone@hrsa.gov) or via telephone at 301.594.4394.

Dated: May 21, 2014.

**Mary K. Wakefield,**

*Administrator.*

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**BILLING CODE 4165–15–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Statement of Organization, Functions and Delegations of Authority

This notice amends Part R of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA) (60 FR 56605, as amended November 6, 1995; as last amended at 79 FR 26258–26259 dated May 7, 2014).

This notice reflects organizational changes in the Health Resources and Services Administration. Specifically, this notice updates functional statements within the HIV/AIDS Bureau (RV). (1) Updates the functions in the Office of the Associate Administrator (RV); (2) updates the functions in the Division of Community HIV/AIDS Programs (RV6); (3) transfers the Organizational Development Unit function from the Office of the Associate Administrator (RV) to the Office of Operations and Management (RV2); and (4) transfers the Clinical Unit function from the Office of the Associate Administrator (RV) to the Division of Policy and Data (RVA).

#### Chapter RV—HIV/AIDS Bureau

##### Section RV–20, Functions

(1) Delete the functional statement for the Office of the Associate Administrator (RV), and replace in its entirety; (2) delete the functional statement for the Office of Operations and Management (RV2) and replace in its entirety; (3) delete the functional statement for the Division of Policy and Data (RVA) and replace in its entirety; and (4) delete the functional statement for the Division of Community HIV/AIDS Programs (RV6) and replace in its entirety.

Office of the Associate Administrator (RV)

The Office of the Associate Administrator provides leadership and direction for the HIV/AIDS programs and activities of the Bureau and oversees its relationship with other national health programs. Specifically: (1) Promotes the implementation of the National HIV/AIDS Strategy within the Agency and among Agency-funded programs; (2) coordinates the formulation of an overall strategy and policy for programs established by Title XXVI of the PHS Act as amended by the Ryan White HIV/AIDS Treatment