although it recognized that the government still may prohibit untruthful or misleading advertising or impose other measures to ensure that ads are not deceptive.2 In subsequent cases, courts, including the Supreme Court, have held that a commercial advertisement does not necessarily enjoy full First Amendment protection just because it promotes a fully protected product or activity or incorporates statements that, outside the advertising context, are fully protected. See, e.g., Zauderer v. Office of Disciplinary Counsel of the Supreme Court of Ohio, 471 U.S. 626, 637 & n.7 (1985) (holding that statements contained in an advertisement for legal services regarding the legal rights of persons injured by the Dalkon shield normally would be fully protected speech, but not when presented in the context of an advertisement that proposed a commercial transaction—the offer of legal representation).3

The Commission has determined that the MID is unnecessary in light of the Supreme Court's commercial speech jurisprudence developed since the MID's adoption. The Court's commercial speech cases, not the MID, delimit the constitutional constraints on challenges to deceptive advertising claims for books and other publications that are commercially marketed. For the reasons described, the Commission hereby rescinds its "Advertising in Books" enforcement policy.

List of Subjects:

Advertising, Consumer protection, Trade practices.

Authority: 15 U.S.C. 41-58 By direction of the Commission.

Donald S. Clark,

Secretary.

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although meriting some protection, is of less constitutional moment than other forms of speech.").

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the National Vaccine Advisory Committee Vaccine Safety Working Group

AGENCY: Department of Health and Human Services, Office of the Secretary, Office of Public Health and Science.

ACTION: Notice of meeting.

SUMMARY: The Department of Health and Human Services (HHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) Vaccine Safety Working Group will hold a meeting. The meeting is open to the public. Pre-registration is required for both public attendance and comment. The event will be webcast live and audio conferencing will be available. DATES: The meeting will be held on

March 16, 2009, from 9 a.m. to 5 p.m. ADDRESSES: Department of Health and Human Services; Hubert H. Humphrey Building, Room 800; 200 Independence Avenue, SW., Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: Ms.

Kirsten Vannice, National Vaccine Program Office, Department of Health and Human Services, Room 443–H, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201. Phone: (202) 690–5566; Fax: (202) 260–1165; e-mail: kirsten.vannice@hhs.gov.

SUPPLEMENTARY INFORMATION: Pursuant to Section 2101 of the Public Health Service Act (42 U.S.C. Section 300aa-1), the Secretary of Health and Human Services was mandated to establish the National Vaccine Program to achieve optimal prevention of human infectious diseases through immunization and to achieve optimal prevention against adverse reactions to vaccines. The National Vaccine Advisory Committee was established to provide advice and make recommendations to the Director of the National Vaccine Program, on matters related to the Program's responsibilities. The Assistant Secretary for Health serves as Director of the National Vaccine Program.

The NVAC Vaccine Safety Working Group was initially established to (1) undertake and coordinate a scientific review of the draft Centers for Disease Control and Prevention (CDC) Immunization Safety Office (ISO) Scientific Agenda, and (2) review the current vaccine safety system.

On March 16, 2009, the NVAC Vaccine Safety Working Group will meet to hear comments from stakeholders on the ISO Scientific Agenda. Stakeholder participants will be asked to comment broadly on two areas: (1) The content of the draft ISO research agenda and (2) approaches for developing priorities for the draft ISO research agenda. Organizations and individuals with a strong interest in vaccine safety are encouraged to attend. Additional guidance and materials will be provided in advance to registered participants. The information collected during this meeting will inform the Working Group on issues and concerns that should be taken into consideration in developing recommendations to be made to NVAC on the ISO scientific agenda.

Public attendance at the meeting is limited to space available and interested individuals are encouraged to register early to secure a space. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the contact person above at least one week prior to the meeting. Members of the public will have the opportunity to provide comments at the meeting. Public comment will be limited to five minutes per speaker. Pre-registration is required for both public attendance and comment. Any members of the public who wish to have printed material distributed to NVAC Vaccine Safety Working Group members should submit materials to the Executive Secretary, NVAC, through the contact person listed above prior to close of business March 9, 2009. Audio-conferencing will be available. Call in numbers, a draft agenda, a link to the webcast, and additional materials will be posted on the NVAC Vaccine Safety Working Group Web site (http://www.hhs.gov/ nvpo/nvac/vaccinesafety.html) prior to the meeting.

Dated: February 19, 2009.

Raymond A. Strikas,

Medical Officer, National Vaccine Program Office, U.S. Department of Health and Human Services.

[FR Doc. E9–3977 Filed 2–24–09; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Statement of Delegation of Authority

Notice is hereby given that I have delegated to the Director, Agency for Healthcare Research and Quality (AHRQ), the authorities vested in the Secretary of the Department of Health and Human Services under Section 204,

² 425 U.S. at 771-72 & n.24. Accord Bates v. State Bar of Arizona, 433 U.S. 350, 382 (1977) (holding that advertising for legal services is commercial speech and noting that false, deceptive, or misleading advertising of legal services can be prohibited).

³ Cf. Rushman v. City of Milwaukee, 959 F. Supp. 1040, 1043-44 (E.D. Wis. 1997) (holding that the city could not regulate speech of an astrologer, because the targeted speech did not involve the proposal of a commercial transaction: "[A]n astrologer's advice neither proposes nor encourages an additional transaction. In contrast, if [the astrologer] told her clients that they had curses and she could remove them, that would be commercial speech because she would be using astrology to sell her curse-lifting services.").

of the Medicare Improvements for Patients and Providers Act of 2008, Public Law 110–275, as amended, pertaining to contracting with the Institute of Medicine for reports on best practices for conducting systematic reviews of clinical effectiveness research and for developing clinical protocols.

This delegation shall be exercised in accordance with the Department's applicable policies, procedures, guidelines and regulations.

In addition, the delegation ratifies and affirms any actions taken by you or your subordinates that involved the exercise of the authorities delegated herein prior to the effective date of this delegation.

This delegation is effective upon date of signature.

Dated: February 9, 2009.

Charles E. Johnson,

Acting Secretary.

[FR Doc. E9–3837 Filed 2–24–09; 8:45 am]

BILLING CODE 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-09-08BP]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–5960 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–6974. Written comments should be received within 30 days of this notice.

Proposed Project: Audience Profiling for Carbon Monoxide Poisoning Prevention Status—New—National Center for Environmental Health (NCEH), Coordinating Center for Environmental Health and Injury Prevention (CCEHIP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Carbon monoxide (CO) is one of the leading causes of poison-related deaths in the United States. The Centers for Disease Control and Prevention (CDC) estimates that each year approximately 500 people die of unintentional, nonfire-related CO exposure, and another 15,000 individuals visit emergency rooms for treatment from exposure to CO gas.

Despite our current knowledge of scenarios and products that lead to CO poisoning, questions remain about when and how individuals use CO-emitting products, why they engage in certain risk behaviors, how best to inform them about the CO poisoning, and how receptive they are to existing prevention

materials. This study aims to address these questions through assessing the basis for current audience knowledge, attitudes, and practices and, ultimately, strengthen educational materials about CO poisoning prevention.

The study will employ the use of qualitative methods during three phases of data collection. Phase I will consist of eight in-person focus groups among home furnace owners and portable generator owners (n = 64) as well as four telephone interviews with organizations that serve populations at risk for CO poisoning (n = 4). Phase II will consist of analyzing previously collected data on consumer media usage and preferences. Phase III will consist of 16 in-person triad interviews (3 individuals per interview) with home furnace owners and portable generator owners (n = 48) to pretest CO poisoning educational materials.

NCEH will identify individuals for the focus groups and triad interviews using recruiting firms that specialize in the two at-risk populations: (1) Home furnace owners and (2) portable generator owners. Individuals in these two groups will be screened over the telephone by the recruiting firms, and if they meet the eligibility criteria, will be invited to participate in the study. At the end of each focus group and triad interview, NCEH will ask participants to complete a brief exit questionnaire on demographics and media usage.

There is no cost to respondents other than their time. The total estimated burden hours are 276.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Instrument type	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Owners of Gas or Oil Burning Household Appliances.	Focus Group Screener	64	1	10/60
• •	Focus Group	32	1	2
	Exit Questionnaire	32	1	10/60
	Triad Screener	48	1	10/60
	Triad	24	1	2
Owners of Portable Gas Burning Generator	Focus Group Screener	64	1	10/60
	Focus Group	32	1	2
	Exit Questionnaire	32	1	10/60
	Triad Screener	48	1	10/60
	Triad	24	1	2
Expert	Telephone Interview	4	1	1