I. Background

In recent years, many important initiatives have been undertaken by regulatory authorities and industry associations to promote international harmonization of regulatory requirements. FDA has participated in many meetings designed to enhance harmonization and is committed to seeking scientifically based harmonized technical procedures for pharmaceutical development. One of the goals of harmonization is to identify and then reduce differences in technical requirements for drug development among regulatory agencies.

ICH was organized to provide an opportunity for harmonization initiatives to be developed with input from both regulatory and industry representatives. FDA also seeks input from consumer representatives and others. ICH is concerned with harmonization of technical requirements for the registration of pharmaceutical products for human use among regulators around the world. The six founding members of the ICH are the European Commission; the European Federation of Pharmaceutical Industries Associations; the Japanese Ministry of Health, Labour, and Welfare; the Japanese Pharmaceutical Manufacturers Association; CDER and CDRH, FDA; and the Pharmaceutical Research and Manufacturers of America. The standing members of the ICH Association include Health Canada and Swissmedic. Any party eligible as a member in accordance with the ICH Articles of Association can apply for membership in writing to the ICH Secretariat. The ICH Secretariat, which coordinates the preparation of documentation, operates as an international nonprofit organization and is funded by the members of the ICH Association.

The ICH Assembly includes representatives from each of the ICH members, as well as observers from the World Health Organization and Drug Regulatory Authorities and Regional Harmonization Initiatives from around the world.

In December 2015, the ICH Assembly endorsed the draft guidance entitled “E18 Genomic Sampling and Management of Genomic Data” and agreed that the guidance should be made available for public comment. The draft guidance is the product of the Efficacy Expert Working Group of the ICH. Comments about this draft will be made available for public comment.

The draft guidance provides guidance on genomic sampling and management of genomic data from interventional and non-interventional clinical studies. The draft guidance addresses use of genomic samples and data irrespective of the timing of analyses and both pre-specified and non-pre-specified use. The focus is on the general principles of collecting, processing, transporting, storing and disposing of genomic samples or data, within the scope of an informed consent. The technical aspects of genomic sampling and research are also discussed when appropriate, recognizing the rapidly evolving technological advances in these areas.

This draft guidance is being issued consistent with FDA’s good guidance practices regulation (21 CFR 10.115). The draft guidance, when finalized, will represent the current thinking of FDA on “E18 Genomic Sampling and Management of Genomic Data.” It does not establish legal rights for any person and is not binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the applicable statutes and regulations.

II. Electronic Access


Leslie Kux, Associate Commissioner for Policy.

[FR Doc. 2016–13168 Filed 6–2–16; 8:45 am]

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503A bulk drug substances list. FDA intends to discuss the following nominated bulk drug substances:
Chrysin, cesium chloride, sodium dichloroacetate, pyruvic acid, tea tree oil, and 2,3-Dimercapto-1-
propanesulfonic acid (DMPS). The nominators of these substances will be invited to make a short presentation
supporting the nomination. During the afternoon session, the committee will receive updates on certain issues
to follow up on discussions from previous meetings, including the option for obtaining access to investigational new
drugs under expanded access.

FDA intends to make background material available to the public no later than 2 business days before the meeting.
If FDA is unable to post the background material on its Web site prior to the meeting, the background material will
be made publicly available at the location of the advisory committee meeting, and the background material will be posted on FDA’s Web site after the meeting. Background material is available at http://www.fda.gov/
AdvisoryCommittees/Calendar/default.htm. Scroll down to the appropriate advisory committee meeting link.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending
before the committee. Written submissions may be made to the contact person or before June 15, 2016. Oral
presentations from the public will be scheduled between approximately 9:30 a.m. and 9:40 a.m., 10:35 a.m. and
10:45 a.m., 11:40 a.m. and 11:50 a.m., 2:15 p.m. and 2:25 p.m., 3:20 p.m. and 3:30 p.m., and 4:40 p.m. and 4:50 p.m. Those
individuals interested in making formal oral presentations should notify Cindy Hong and submit a brief statement of the
general nature of the evidence or arguments they wish to present, the names and addresses of proposed
participants, and an indication of the approximate time requested to make their presentation on or before June 10,
2016. Time allotted for each presentation may be limited. If the number of registrants requesting to speak is greater than can be reasonably accommodated during the scheduled open public hearing session, FDA may conduct a lottery to determine the speakers for the scheduled open public hearing session. The contact person will notify interested persons regarding their request to speak by June 13, 2016.

Persons attending FDA’s advisory committee meetings are advised that the Agency is not responsible for providing
access to electrical outlets.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with disabilities. If you require accommodations due to a disability, please contact Cindy Hong at least 7 days in advance of the meeting.

FDA is committed to the orderly conduct of its advisory committee meetings. Please visit our Web site at http://www.fda.gov/
AdvisoryCommittees/AboutAdvisoryCommittees/ucm111462.htm for procedures on public conduct during advisory committee meetings.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).


Leslie Kux,
Associate Commissioner for Policy.

BILLING CODE 4164–01–P

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 (HHS) 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 responsibility for considering and acting upon the petitions.

SUPPLEMENTARY INFORMATION: The Program provides a system of no-fault compensation for certain individuals who have been injured by specified childhood vaccines. 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 HHS, who is named as the respondent in each proceeding. The Secretary has delegated this responsibility under the Program to