participants. In addition to input generated through this public meeting, FDA is interested in receiving patient input addressing these questions through electronic or written comments, which can be submitted to the Division of Dockets Management (see *Location*). For context, please indicate if you are commenting as a patient with a heritable bleeding disorder or on behalf of a child or loved one.

Topic 1: The effects of your bleeding disorder that matter most to you

- Of all of the symptoms that you experience because of your condition, which one to three symptoms (bleeding or non-bleeding) have the most significant impact on your life? (Examples may include joint damage/pain, infections, prolonged and heavy bleeding with menstruation, fatigue, etc.)
- Are there specific activities that are important to you, but that you cannot do at all, or as well as you would like, because of your condition? Please describe, using specific examples. (Examples may include participating in physical activities, attending work/school, and family/social activities, etc.)
- How have your condition and its symptoms changed over time?
- What worries you most about your condition?

Topic 2: Perspectives on current approaches to treatment

- What are you currently doing to treat your condition or its symptoms? (Examples may include blood transfusions, replacement therapies, over-the-counter products, and/or other therapies).
- How well do these treatments work for you?
- What are the most significant disadvantages or complications of your current treatments, and how do they affect your daily life?
- O How has your treatment changed over time and why?
- What aspects of your condition are not improved by your current treatment regimen?
- What treatment has had the most positive impact on your life?
- If you could create your ideal treatment, what would it do for you (i.e., what specific things would you look for in an ideal treatment)?
- If you had the opportunity to consider participating in a clinical trial studying experimental treatments, what things would you consider when deciding whether or not to participate?

B. Attendance and/or Participation in the Meeting

If you wish to attend this meeting, visit https://www.eventbrite.com/e/ patient-focused-public-meeting-onheritable-bleeding-disordersregistration-11996980291. Please register by September 12, 2014. Those who are unable to attend the meeting in person can register to view a live Webcast of the meeting. You will be asked to indicate in your registration if you plan to attend in person or via the Webcast. Your registration will also contain your complete contact information, including name, title, affiliation, address, email address, and phone number. Seating will be limited, so early registration is recommended. Registration is free and will be on a firstcome, first-served basis. However, FDA may limit the number of participants from each organization based on space limitations. Registrants will receive confirmation once they have been accepted. Onsite registration on the day of the meeting will be based on space availability. If you need special accommodations because of disability, please contact Henry Allen (see Contact Person) at least 7 days before the

Patients and patient stakeholders who are interested in presenting comments as part of the initial panel discussions should register by August 22, 2014. You will be asked to indicate in your registration which topic(s) you wish to address. You will be asked to send a brief summary of responses to the topic questions to

PatientFocused_CBER@fda.hhs.gov.
Panelists will be notified of their
selection soon after August 22, 2014.
FDA will try to accommodate all
patients and patient advocate
participants who wish to speak, either
through the panel discussion or
audience participation; however, the
duration of comments may be limited by
time constraints.

Comments: Interested members of the public, including those who attend the meeting in person or via the Webcast, are invited to provide electronic or written responses to any or all of the questions pertaining to topics 1 and 2 to the Division of Dockets Management (see Location). Comments may be submitted until November 28, 2014. Received comments may be seen in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday, and will be posted to the docket at http://www.regulations.gov.

Transcripts: Please be advised that as soon as a transcript is available, it will

be accessible at http://www.fda.gov/BiologicsBloodVaccines/NewsEvents/WorkshopsMeetingsConferences/ucm401761.htm and at http://www.regulations.gov. It may be viewed at the Division of Dockets Management (see Location). A transcript will also be available in either hardcopy or on CD–ROM, after submission of a Freedom of Information request. Written requests are to be sent to the Division of Freedom of Information (ELEM–1029), Food and Drug Administration, 12420 Parklawn Dr., Element Bldg., Rockville, MD 20857.

Dated: July 2, 2014.

Leslie Kux,

 $Assistant\ Commissioner\ for\ Policy.$ [FR Doc. 2014–15990 Filed 7–8–14; 8:45 am]

BILLING CODE 4164-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA-2004-N-0451]

Food and Drug Administration Modernization Act of 1997: Modifications to the List of Recognized Standards, Recognition List Number: 036

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug
Administration (FDA or we) is
announcing a publication containing
modifications the Agency is making to
the list of standards FDA recognizes for
use in premarket reviews ("FDA
Recognized Consensus Standards").
This publication, entitled
"Modifications to the List of Recognized
Standards, Recognition List Number:
036" ("Recognition List Number: 036"),
will assist manufacturers who elect to
declare conformity with consensus
standards to meet certain requirements
for medical devices.

DATES: Submit either electronic or written comments concerning this document at any time. See section VII for the effective date of the recognition of standards announced in this document.

ADDRESSES: Submit written requests for single copies of the document entitled "Modifications to the List of Recognized Standards, Recognition List Number: 036" to the Division of Industry and Consumer Education, Center for Devices and Radiological Health, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 66, Rm. 4613, Silver Spring,

MD 20993–0002. Send two self-addressed adhesive labels to assist that office in processing your request, or fax your request to 301–847–8149.

Submit electronic comments on this document to http:// $www.regulation \bar{s}.gov. \ Submit \ written$ comments to the Division of Dockets Management (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. Identify comments with the docket number found in brackets in the heading of this document. An electronic copy of Recognition List Number: 036 is available on the Internet at http:// www.fda.gov/MedicalDevices/Device RegulationandGuidance/Standards/ ucm123792.htm. See section VI for electronic access to the searchable database for the current list of FDA recognized consensus standards, including Recognition List Number: 036 modifications and other standards related information.

FOR FURTHER INFORMATION CONTACT:

Scott A. Colburn, Center for Devices and Radiological Health, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 66, Rm. 3632, Silver Spring, MD 20993, 301–796–6287, standards@cdrh.fda.gov.

SUPPLEMENTARY INFORMATION:

I. Background

Section 204 of the Food and Drug Administration Modernization Act of 1997 (Pub. L. 105–115) amended section 514 of the Federal Food, Drug, and Cosmetic Act (the FD&C Act) (21 U.S.C. 360d). Amended section 514 allows FDA to recognize consensus standards developed by international and national organizations for use in satisfying portions of device premarket review submissions or other requirements.

In a notice published in the Federal Register of February 25, 1998 (63 FR 9561), FDA announced the availability of a guidance entitled "Recognition and Use of Consensus Standards." The notice described how we would implement our standard recognition program and provided the initial list of recognized standards.

Modifications to the initial list of recognized standards, as published in the **Federal Register**, can be accessed at http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/Standards/ucm123792.htm.

These notices describe the addition, withdrawal, and revision of certain standards recognized by FDA. The Agency maintains HTML and PDF versions of the list of FDA Recognized Consensus Standards. Both versions are publicly accessible at the Agency's Internet site. See section VI for

electronic access information. Interested persons should review the supplementary information sheet for the standard to understand fully the extent to which FDA recognizes the standard.

II. Modifications to the List of Recognized Standards, Recognition List Number: 036

FDA is announcing the addition, withdrawal, correction, and revision of certain consensus standards the Agency will recognize for use in premarket submissions and other requirements for devices. We will incorporate these modifications in the list of FDA Recognized Consensus Standards in the Agency's searchable database. We will use the term "Recognition List Number: 036" to identify these current modifications.

In table 1, we describe the following modifications: (1) The withdrawal of standards and their replacement by others, if applicable, (2) the correction of errors made by FDA in listing previously recognized standards, and (3) the changes to the supplementary information sheets of recognized standards that describe revisions to the applicability of the standards.

In section III, we list modifications the Agency is making that involve the initial addition of standards not previously recognized by FDA.

TABLE 1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDARDS

Old recognition No.	Replacement recognition No.	Title of standard ¹		Change		
		A. Anesthesia				
1–58	1–99	ASTM G175–13 Standard test method for evaluating the ignition sensitivity and fault tolerance of oxygen pressure regulators used for medical and emergency applications.	Withdrawn a version.	nd replaced	with	newer
1–77	1–100	0 , 11	Withdrawn a version.	nd replaced	with	newer
1–80	1–101	CGA C-9:2013 Standard color marking of compressed gas containers for medical use.	Withdrawn a version.	nd replaced	with	newer
	B. Biocompatibility					
2–117		ANSI/AAMI/ISO 10993–3:2003/(R) 2013 Biological evaluation of medical devices—Part 3: Tests for genotoxicity, carcinogenicity, and reproductive toxicity.	Reaffirmation.			
2–133		ASTM F1408–97 (Reapproved 2013) Standard practice for subcutaneous screening test for implant materials.	Reaffirmation.			
2–136		ASTM E1262–88 (Reapproved 2013) Standard guide for performance of the Chinese hamster ovary cell/hypoxanthine guanine phosphoribosyl transferase gene mutation assay.	Reaffirmation.			
2–141		ASTM F1984–99 (Reapproved 2013) Standard practice for testing for whole complement activation in serum by solid materials.	Reaffirmation.			
2–145		·	Reaffirmation.			
2–146	2–206	ASTM F2148–13 Standard practice for evaluation of delayed contact hypersensitivity using the murine local lymph node assay (LLNA).	Withdrawn a version.	nd replaced	with	newer
2–153		ANSI/AAMI/ISO 10993–5:2009/(R) 2014 Biological evaluation of medical devices—Part 5: Tests for in vitro cytotoxicity.	Reaffirmation.			

TABLE 1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDARDS—Continued

	TABLE	I MODILIONATO TO THE EIGT OF TREGOGINIZED CTAINDAIN	
Old recognition No.	Replacement recognition No.	Title of standard ¹	Change
2–154	2–207	ASTM F756–13 Standard practice for assessment of hemolytic properties of materials.	Withdrawn and replaced with newer version.
2–156		ANSI/AAMI/ISO 10993–1:2009/(R) 2013 Biological evaluation of medical devices—Part 1: Evaluation and testing within a risk man-	Reaffirmation.
2–175		agement process. ISO 10993–3 Second edition 2003–10–15, Biological evaluation of medical devices—Part 3: Tests for genotoxicity, carcinogenicity,	Extent of recognition.
2–199	2–208	and reproductive toxicity. USP 37–NF32:2014 <87> Biological reactivity test, in vitro—direct contact test.	Withdrawn and replaced with newer version.
2–200	2–209	USP 37-NF32:2014 <87> Biological reactivity test, in vitro— elution test.	Withdrawn and replaced with newer version.
2–201	2–210	USP 37-NF32:2014 <88> Biological reactivity test, in vivo, procedure preparation of sample.	Withdrawn and replaced with newer version.
2–202	2–211	USP 37-NF32:2014 <88> Biological reactivity test, in vitro, classification of plastics—intracutaneous test.	Withdrawn and replaced with newer version.
2–203	2–212	USP 37–NF32:2014 <88> Biological reactivity test, in vivo, classification of plastics—systemic injection test.	Withdrawn and replaced with newer version.
		C. Cardiovascular	
3–42		ANSI/AAMI EC13:2002/(R)2007 Cardiac monitors, heart rate me-	Withdrawn. See 3–101.
3–65		ters, and alarm. ANSI/AAMI EC38:2007 Medical electrical equipment—Part 2–47: Particular requirements for the safety including essential performance of ambulatory electrocardiographic systems.	Withdrawn. See 3–127.
3–72	3–129	ANSI/AAMI EC53:2013 ECG trunk cables and patient lead wires	Withdrawn and replaced with newer version.
3–77		ANSI/AAMI PC69:2007 Active implantable medical devices—Electromagnetic compatibility—EMC test protocols for implantable car-	Withdrawn. See 3–128.
3–78	3–130	diac pacemakers and implantable cardioverter defibrillators. ANSI/AAMI/ISO 80601–2–30:2009 and A1:2013 Medical electrical equipment—Part 2–30: Particular requirements for the basic safety and essential performance of automated non-invasive sphygmomanometers [Amendment 1:2013].	Withdrawn and replaced with newer version.
3–79			Reaffirmation.
3–82	3–125	ISO 5841 Third edition 2013–04–15 Implants for surgery—Cardiac pacemakers—Part 3: Low-profile connectors [IS–1] for implantable pacemakers.	Withdrawn and replaced with newer version.
3–95	3–126	IEC 60601–2–27 Edition 3.0 2011–03 Medical electrical equipment—Part 2–27: Particular requirements for the basic safety and essential performance of electrocardiographic monitoring equipment [Including: Corrigendum 1 (2012)].	Withdrawn and replaced with newer version including technical corrigendum.
		D. Dental/ENT	
4–92 4–96		ANSI/ADA Standard No. 88 (Reaffirmed 2012) Dental brazing alloys ANSI/ADA Specification No. 30 (Reaffirmed 2010) Dental zinc oxide—eugenol and zinc oxide—non-eugenol cements.	Reaffirmation. Reaffirmation.
4–97		ANSI/ADA Standard No. 57 (Reaffirmed 2012) Endodontic sealing materials.	Reaffirmation.
4–149		ANSI/ADA Specification No. 39 (Reaffirmed 2011) Pit and fissure sealants.	Reaffirmation.
4–160		ANSI S3.1 (Reaffirmed 2013) Maximum permissible ambient noise levels for audiometric test rooms.	Reaffirmation.
4–162		ANSI S3.4–2007 (Reaffirmed 2012) Procedure for the computation of loudness of steady sounds.	Reaffirmation.
4–163		ANSI S3.5–1987 (Reaffirmed 2012) American national standard methods for calculation of the speech intelligibility index.	Reaffirmation.
4–165		ANSI S3.13–1987 (Reaffirmed 2012) American national standard mechanical coupler for measurement of bone vibrators.	Reaffirmation.
4–171		ANSI S3.37–1987 (Reaffirmed 2012) American national standard preferred earhook nozzle thread for postauricular hearing aids.	Reaffirmation.
4–175	4–211	ANSI S3.46–2013 American national standard method of measurement of real-ear performance characteristics of hearing aids.	Withdrawn and replaced with newer version.
4–177		ANSI S12.65–2006 (Reaffirmed 2011) American national standard for rating noise with respect to speech interference.	Reaffirmation.

TABLE 1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDARDS—Continued

	TABLE 1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDARDS—Continued				
Old recognition No.	Replacement recognition No.	Title of standard ¹	Change		
4–179	4–212	ISO 7405 Second edition 2008–12–15 Dentistry—Evaluation of biocompatibility of medical devices used in dentistry [Including:	Withdrawn and replaced with newer version including amendment.		
4–193		Amendment 1 (2013)]. ANSI/ADA Standard No. 15 (Reaffirmed 2013) Artificial teeth for dental prostheses.	Reaffirmation.		
	E. General I (Quality Systems/Risk Management (QS/RM))				
5–22		ISO 2768-I First edition 1999–11–15 General tolerances—Part 1: Tolerances for linear and angular dimensions without individual	Withdrawn.		
5–23		tolerance indications. ISO 2768–2 First edition 1989–11–15 General tolerances—Part 2: Geometrical tolerances for features without individual tolerance indications.	Withdrawn.		
5–50	5–87	IEC 62366 Edition 1.1 2014–01 Medical devices—Application of usability engineering to medical devices.	Withdrawn and replaced with newer version.		
5–53	19–1	IEC 60601–1–2 Edition 3:2007–03 Medical electrical equipment— Part 1–2: General requirements for basic safety and essential per- formance—Collateral standard: Electromagnetic compatibility— Requirements and tests.	Transferred to General II (ES/EMC).		
5–54	19–2	ANSI/AAMI/IEC 60601-1-2:2007/(R)2012 Medical electrical equipment—Part 1-2: General requirements for basic safety and essential performance—Collateral standard: Electromagnetic com-	Transferred to General II (ES/EMC).		
5–66	19–3	patibility—Requirements and tests. IEC 60601–1–10 Edition 1.0 2007–11 Medical electrical equipment—Part 1–10: General requirements for basic safety and essential performance—Collateral standard: Requirements for the	Transferred to General II (ES/EMC).		
5–77	19–4	development of physiologic closed-loop controllers. ANSI/AAMI ES60601–1:2005/(R)2012 and A1:2012,C1:2009/ (R)2012 and A2:2010/(R)2012 (consolidated text) Medical electrical equipment—Part 1: General requirements for basic safety	Transferred to General II (ES/EMC).		
5–78	19–5	and essential performance (IEC 60601–1:2005, mod). ANSI/AAMI ES60601–1:2005/(R)2012 and C1:2009/(R)2012 and A2:2010/(R)2012 (consolidated text) Medical electrical equipment—Part 1: General requirements for basic safety and essential performance (IEC 60601–1:2005, mod).	Transferred to General II (ES/EMC).		
5–81	5–88	ISO 2859–1 First edition 1999–11–15 Sampling procedures for inspection by attributes—Part 1: Sampling schemes indexed by acceptance quality limit (AQL) for lot-by-lot inspection [Including: Corrigendum 1 (2001), Amendment 1 (2011)].	Withdrawn and replaced with newer version including amendment.		
5–82	19–6	IEC 60601–1–11 Edition 1.0 2010–04 Medical electrical equipment—Part 1–11: General requirements for basic safety and essential performance—Collateral standard: Requirements for medical electrical equipment and medical electrical systems used in the home healthcare environment [including: Technical corrigendum 1 (2011)].	Transferred to General II (ES/EMC).		
5–83	19–7	ANSI/AAMI HA60601-1-11:2011 Medical electrical equipment— Part 1-11: General requirements for basic safety and essential performance—Collateral standard: Requirements for medical elec- trical equipment and medical electrical systems used in the home healthcare environment (IEC 60601-1-11:2010 mod).	Transferred to General II (ES/EMC).		
5–85		IEC 60601–1–6 Edition 3.0 2010–01 Medical electrical equipment—Part 1–6: General requirements for basic safety and essential performance—Collateral standard: Usability.	Transition period added.		
5–73	5–90	ISO 15223–1 Second edition 2012–07–01 Medical devices—Symbols to be used with medical device labels, labeling, and information to be supplied—Part 1: General requirements.	Extent of recognition.		
5–75	5–91	AAMI/ANSI/ISO 15223–1:2012 Medical devices—Symbols to be used with medical devices labels, labeling, and information to be supplied—Part 1: General requirements.	Extent of recognition.		
5–57		AAMI/ANSI HE75:2009 Human factors engineering—Design of medical devices.	Relevant guidance.		
5–67		ANSI/AAMI/IEC 62366:2007/(R)2013 Medical devices—Application of usability engineering to medical devices.	Relevant guidance.		
		F. General Hospital/General Plastic Surgery			
6–180		ASTM F2407–06 (Reapproved 2013) Standard specification for surgical gowns intended for use in healthcare facilities.	Reaffirmation.		

TABLE 1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDARDS—Continued

	I ABLE	1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDAR	JS—Continued
Old recognition No.	Replacement recognition No.	Title of standard ¹	Change
6–184	6–323	ASTM F1862/F1862M-13 Standard test method for resistance of medical face masks to penetration by synthetic blood (horizontal projection of fixed volume at a known velocity).	Withdrawn and replaced with newer version.
6–234	6–324	IEC 60601–2–50 Edition 2.0 2009–03 Medical electrical equipment—Part 2–50: Particular requirements for the basic safety and essential performance of infant phototherapy equipment [Including: Technical corrigendum 1 (2010)].	Withdrawn and replaced with newer version including technical corrigendum.
6–300	6–325		Withdrawn and replaced with newer version including technical corrigendum.
6–309	6–326	, ,,	Withdrawn and replaced with newer version.
6–310		,	Withdrawn and replaced with newer version.
6–311	6–328		Withdrawn and replaced with newer version.
6–312		ŭ	Withdrawn and replaced with newer version.
6–313	6–330	USP 37-NF 33:2014 <861> Sutures—Diameter	Withdrawn and replaced with newer version.
6–314			Withdrawn and replaced with newer version.
6–315			Withdrawn and replaced with newer version.
6–316		'	Withdrawn and replaced with newer version.
6–317	6–334	USP 37–NF 33:2014 Absorbable surgical suture	Withdrawn and replaced with newer version.
		G. In Vitro Diagnostics	
7–48		CLSI C60-A (Formerly T/DM06-A) Blood alcohol testing in the clinical laboratory; Approved guideline.	Designation number.
7–112		CLSI POCT14–A (Formerly H49–A) Point-of-care monitoring of anticoagulation therapy; Approved guideline.	Designation number.
7–133	7–246	CLSI POCT12–A3 Point-of-care blood glucose testing in acute and chronic care facilities; Approved guideline—Third edition.	Withdrawn and replaced with newer version.
7–142		CLSI GP43–A4 (Replaces H11–A4) Procedures for the collection of arterial blood specimens; Approved standard—Fourth edition.	Designation number.
7–162		CLSI POCT14–A (Formerly H49–A) Point-of-care monitoring of anticoagulation therapy; Approved guideline.	Designation number.
7–175		CLSI C59–A (Formerly I/LA15–A) Apolipoprotein immunoassays: Development and recommended performance characteristics; Approved guideline.	Designation number.
7–201		CLSI GP41–A6 (Replaces H03–A6) Procedures for the collection of diagnostic blood specimens by venipuncture; Approved standard—Sixth edition.	Designation number.
7–203		CLSI GP42–A6 (Replaces H04–A6) Procedures and devices for the collection of diagnostic capillary blood specimens; Approved standard—Sixth edition.	Designation number.
7–213		CLSI GP44–A4 (Replaces H18–A4) Procedures for the handling and processing of blood specimens for common laboratory tests; Approved guideline—Fourth edition.	Designation number.
7–221		CLSI GP39–A6 (Replaces H01–A6) Tubes and additives for venous and capillary blood specimen collection; Approved standard—Sixth edition.	Designation number.
7–241	7–247	CLSI M100–S24 Performance standards for antimicrobial susceptibility testing; Twenty-fourth informational supplement.	Withdrawn and replaced with newer version.
	1	H. Materials	
8–173	8–371	ASTM F601–13 Standard practice for fluorescent penetrant inspec-	Withdrawn and replaced with newer
8–183	8–372	tion of metallic surgical implants. ASTM F560–13 Standard specification for unalloyed tantalum for surgical implant applications (LINS R05200, LINS R05400)	version. Withdrawn and replaced with newer
8–193		surgical implant applications (UNS R05200, UNS R05400). ASTM F2754/F2754M-09 (Reapproved 2013) Standard test method for measurement of camber, cast, helix, and direction of helix of coiled wire.	version. Reaffirmation.
	I	coiled wire.	1

TABLE 1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDARDS—Continued

	INDEL	I WOOD TO THE LIST OF TREGORNIZED STANDARD	So Continued		
Old recognition No.	Replacement recognition No.	Title of standard ¹	Change		
8–198	8–373	ASTM F2102–13 Standard guide for evaluating the extent of oxidation in polyethylene fabricated forms intended for surgical implants.	Withdrawn and replaced with newer version.		
8–199	8–374	ASTM F2633–13 Standard specification for wrought seamless nickel-titanium shape memory alloy tube for medical devices and surgical implants.	Withdrawn and replaced with newer version.		
8–221	8–375	ASTM F2066–13 Standard specification for wrought titanium-15 molybdenum alloy for surgical implant applications (UNS R58150).	Withdrawn and replaced with newer version.		
8–224	8–376	ASTM F2102–13 Standard guide for evaluating the extent of oxidation in polyethylene fabricated forms intended for surgical implants.	Withdrawn and replaced with newer version.		
8–341	8–377	ASTM F136–13 Standard specification for wrought titanium- 6aluminum-4vanadium ELI (extra low interstitial) alloy for surgical implant applications (UNS R56401).	Withdrawn and replaced with newer version.		
8–364	8–378		Withdrawn and replaced with newer version.		
8–366	8–379	ISO 11542–2 First edition 1998–11–15 Plastics—Ultra-high-molecular-weight polyethylene (PE–UHMW) moulding and extrusion materials—Part 2: Preparation of test specimens and determination of properties [Including: Technical corrigendum 1 (2007)].	Withdrawn and replaced with newer version including technical corrigendum.		
		I. Nanotechnology			
18–2		ASTM E2535-07 (Reapproved 2013) Standard guide for handling unbound engineered nanoscale particles in occupational settings.	Reaffirmation.		
		J. Neurology			
17–10		ANSI/AAMI/ISO 14708–3:2008/(R)2011 Implants for surgery—Active implantable medical devices—Part 3: Implantable neurostimulators.	Reaffirmation.		
		K. OB-GYN/Gastroenterology/Urology			
9–44		ASTM F623–99 (Reapproved 2013) Standard performance speci-	Reaffirmation.		
9–87	9–93	fication for Foley catheter. ISO 25841 Second edition 2014–01–15 Female condoms—Requirements and test methods.	Withdrawn and replaced with newer version.		
9–21	9–94	ISO 8600–4 Second edition 2014–03–15 Optics and optical instruments—Medical endoscopes and certain accessories—Part 4: Determination of maximum width of insertion portion.	Withdrawn and replaced with newer version.		
		L. Orthopedic			
11–211	11–276	ASTM F1798–13 Standard test method for evaluating the static and fatigue properties of interconnection mechanisms and subassemblies used in spinal arthrodesis implants.	Withdrawn and replaced with newer version.		
11–237	11–277	ISO 7206–6 Second edition 2013–11–15 Implants for surgery—Partial and total hip joint prostheses—Part 6: Endurance properties testing and performance requirements of neck region of stemmed femoral components.	Withdrawn and replaced with newer version.		
11–255	11–278	ASTM F1717–14 Standard test methods for spinal implant constructs in a vertebrectomy model.	Withdrawn and replaced with newer version.		
	M. Radiology				
12–23		NEMA XR 10–1986 (R1992, R1998, R2003) Measurement of the maximum symmetrical radiation field from a rotating anode x-ray tube used for medical diagnosis.	Withdrawn.		
12–24		NEMA XR 11–1993 (R1999) Test standard for determination of the limiting spatial resolution of x-ray image intensifier systems.	Withdrawn.		
12–25		NEMA XR 15–1991 (R1996, R2001) Test standard for the determination of the visible entrance field size of an x-ray image intensifier system.	Withdrawn.		
12–26		NEMA XR 16–1991 (R1996, R2001) Test standard for the determination of the system contrast ratio and the system veiling glare index of an x-ray image intensifier system.	Withdrawn.		
12–27		NEMA XR 17–1993 (R1999) Test standard for the measurement of the image signal uniformity of an x-ray image intensifier system.	Withdrawn.		

TABLE 1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDARDS—Continued

Old recognition No.	Replacement recognition No.	Title of standard ¹	Change
12–28		NEMA XR 18–1993 (R1999) Test standard for the determination of the radial image distortion of an x-ray image intensifier system.	Withdrawn.
12–29		NEMA XR 19–1993 (R1999) Electrical, thermal, and loading characteristics of x-ray tubes used for medical diagnosis.	Withdrawn.
12–66	12–271		Withdrawn and replaced with newer version.
12–79		NEMA XR7-1995 (R2000) High-voltage x-ray cable assemblies and receptacles.	Withdrawn.
12–80		NEMA XR 9–1984 (R1994, R2000) Power supply guidelines for x-ray machines.	Withdrawn.
12–81		NEMA XR 13–1990 (R1995, R2000) Mechanical safety standard for power driven motions of electromedical equipment.	Withdrawn.
12–82		NEMA XR 14–1990 (R1995, R2000) Recommended practices for load bearing mechanical assemblies used in diagnostic imaging.	Withdrawn.
12–100		NEMA UD 3–2004 (R2009) Standard for real time display of thermal and mechanical acoustic output indices on diagnostic ultrasound equipment.	Withdrawn
12–146	12–272		Withdrawn and replaced with newer version.
12–168	12–273		Withdrawn and replaced with newer version including technical corrigendum and interpretation sheets.
12–193		AIUM AOL 2008 Acoustic output labeling standard for diagnostic ultrasound equipment revision 1—A standard for how manufacturers should specify acoustic output data.	Withdrawn.
12–194		i i	Reaffirmation.
12–201	12–274	IEC 60601–2–54 Edition 1.0 2009–06 Medical electrical equipment—Part 2–54: Particular requirements for the basic safety and essential performance of x-ray equipment for radiography and radioscopy [Including: Technical corrigendum 1 (2010), technical corrigendum 2 (2011)].	Withdrawn and replaced with newer version including technical corrigendum.
12–220		IEC 60825–1 (Second edition-2007) Safety of laser products—Part 1: Equipment classification and requirements corrigendum 1.	Withdrawn. See 12–273.
12–239		IEC 60825–1 (Second edition-2007) I–SH 01 Safety of laser prod- ucts—Part 1: Equipment classification and requirements, interpre- tation sheet 1.	Withdrawn. See 12–273.
12–240		IEC 60825–1 (2007) Second edition, I–SH 02 Safety of laser products—Part 1: Equipment classification and requirements, interpretation sheet 2.	Withdrawn. See 12–273.
		N. Software/Informatics	
13–4	13–65	ANSI/UL 1998 Third edition 2013 Standard for software in programmable components.	Withdrawn and replaced with newer version.
13–15		CLSI AUTO13–A2 Laboratory instruments and data management systems: Design of software user interfaces and end-user software systems validation, operation, and monitoring; Approved guideline—second edition.	New designation number.
13–46		ASTM F2761–09 (2013) Medical devices and medical systems—Essential safety requirements for equipment comprising the patient-centric integrated clinical environment (ICE)—Part 1: General requirements and conceptual model.	Reaffirmation.
13–58	13–66	ISO/IEEE 11073–10417 First edition 2014–03–01 Health informatics—Personal health device communication—Part 10417: Device specialization: Glucose meter.	Withdrawn and replaced with newer version.
		O. Sterility	
14–181	14–432	ANSI/AAMI ST58:2013 Chemical sterilization and high-level disinfection in health care facilities.	Withdrawn and replaced with newer version.
14–228		ANSI/AAMI/ISO 11135–1:2007 Sterilization of healthcare products—Ethylene oxide—Part 1: Requirements for the development, validation, and routine control of a sterilization process for medical devices.	Withdrawn. See 14–452.

TABLE 1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDARDS—Continued

Old recognition No.	Replacement recognition No.	Title of standard 1	Change
14–232	14–433	ASTM F2227–13 Standard test method for non-destructive detection of leaks in non-sealed and empty packaging trays by CO ₂ tracer gas method.	Withdrawn and replaced with newer version.
14–233	14–434	ASTM F2228–13 Standard test method for non-destructive detection of leaks in packaging which incorporates porous barrier material by CO₂ tracer gas method.	Withdrawn and replaced with newer version.
14–256		ASTM F2095–07 (Reapproved 2013) Standard test methods for pressure decay leak test for flexible packages with and without restraining plates.	Reaffirmation.
14–257		ASTM D3078-02 (Reapproved 2013) Standard test method for determination of leaks in flexible packaging by bubble emission.	Reaffirmation.
14–259	14–435	ASTM F2251–13 Standard test method for thickness measurement of flexible packaging material.	Withdrawn and replaced with newer version.
14–261		ANSI/AAMI/ISO 17665–1:2006/(R)2013 Sterilization of health care products—Moist heat—Part 1: Requirements for the development, validation, and routine control of a sterilization process for medical devices.	Reaffirmation.
14–282		ASTM F2338–09 (Reapproved 2013) Standard test method for non- destructive detection of leaks in packages by vacuum decay method.	Reaffirmation.
14–286		ANSI/AAMI ST65:2008/(R)2013 Processing of reusable surgical textiles for use in health care facilities.	Reaffirmation.
14–288		ASTM F1886/F1886M–09 (Reapproved 2013) Standard test method for determining integrity of seals for flexible packaging by visual inspection.	Reaffirmation.
14–290		ANSI/AAMI ST24:1999/(R)2013 Automatic, general purpose ethylene oxide sterilizers and ethylene oxide sterilant sources intended for use in health care facilities.	Reaffirmation.
14–291		ANSI/AAMI/ISO 14937:2009/(R)2013 Sterilization of healthcare products—General requirements for characterization of a sterilizing agent and the development, validation, and routine control of a sterilization process for medical devices.	Reaffirmation.
14–331	14–452	ISO 11135 Second edition 2014 Sterilization of healthcare products—Ethylene oxide—Requirements for the development, validation, and routine control of a sterilization process for medical devices.	Withdrawn and replaced with newer version.
14–342		ASTM E2628-09 (E2009) Standard practice for dosimetry in radiation.	Withdrawn. See 14–436.
13–343		ASTM E2701–09 Standard guide for performance characterization of dosimeters and dosimetry systems for use in radiation processing.	Withdrawn. See 14–437.
14–348		ANSI/AAMI/ISO 13408–2:2003/(R)2013 Aseptic processing of healthcare products—Part 2: Filtration.	Reaffirmation.
14–364	14–438		Withdrawn and replaced with newer version.
14–394	14–439	ANSI/AAMI ST79:2010, A1:2010, A2:2011, A3:2012, and A4:2013 (consolidated text) Comprehensive guide to steam sterilization and sterility assurance in health care facilities.	Withdrawn and replaced with newer version.
14–414	14–440	USP 37NF32:2014 Microbiological examination of nonsterile products: Microbial enumeration tests.	Withdrawn and replaced with newer version.
14–415	14–441	USP 37NF32:2014 Sterility tests	Withdrawn and replaced with newer version.
14–416	14–442	USP 37NF32:2014 Bacterial endotoxins test	Withdrawn and replaced with newer version.
14–417	14–443	USP 37NF32:2014 Pyrogen test (USP rabbit test)	Withdrawn and replaced with newer version.
14–418	14–444	USP 37NF32:2014 Transfusion and infusion assemblies and similar medical devices.	Withdrawn and replaced with newer version.
14–419	14–445	USP 37NF32:2014 Biological indicator for steam sterilization—Self-contained.	Withdrawn and replaced with newer version.
14–420	14–446	USP 37NF32:2014 Biological indicator for dry-heat sterilization, paper carrier.	Withdrawn and replaced with newer version.
14–421	14–447	USP 37NF32:2014 Biological indicator for ethylene oxide sterilization, paper carrier.	Withdrawn and replaced with newer version.
14–422	14–448	USP 37NF32:2014 Biological indicator for steam sterilization, paper carrier.	Withdrawn and replaced with newer version.
14–423	14–449	USP 37NF32:2014 Microbiological examination of nonsterile products: Tests for specified microorganisms.	Withdrawn and replaced with newer version.

TABLE 1—MODIFICATIONS TO THE LIST OF RECOGNIZED STANDARDS—Continued

Old recognition No.	Replacement recognition No.	Title of standard ¹	Change		
14–425		ANSI/AAMI/ISO 13408–6:2005/(R)2013 and A1:2013 Aseptic processing of healthcare products—Part 6: Isolator systems.	Reaffirmation.		
	P. Tissue Engineering				
15–21	15–39	ASTM F2150–13 Standard guide for characterization and testing of biomaterial scaffolds used in tissue-engineered medical products(TEMPs).	Withdrawn and replaced with version.	newer	
15–26	15–40	ASTM F2211–13 Standard classification for tissue-engineered medical products (TEMPs).	Withdrawn and replaced with version.	newer	
15–33	15–41	ASTM F2602–13 Standard test method for determining the molar mass of chitosan and chitosan salts by size exclusion chromatography with multi-angle light scattering detection (SEC–MALS).	Withdrawn and replaced with version.	newer	

¹ All standard titles in this table conform to the style requirements of the respective organizations.

III. Listing of New Entries

In table 2, we provide the listing of new entries and consensus standards

added as modifications to the list of recognized standards under Recognition List Number: 036.

TABLE 2—New Entries to the List of Recognized Standards

Recognition No.	Title of standard 1	Reference No. and date			
	A. Cardiovascular				
3–127	Medical electrical equipment—Part 2–47: Particular requirements for the basic safety and essential performance of ambulatory electrocardiographic systems.	ANSI/AAMI/IEC 60601-2-47:2012.			
3–128	Active implantable medical devices—Electromagnetic compatibility—EMC test protocols for implantable cardiac pacemakers, implantable cardioverter defibrillators, and cardiac resynchronization devices.	ANSI/AAMI/ISO 14117:2012.			
	B. General I (Quality System/Risk Management (QS/RM))				
5–89 5–92	Medical electrical equipment—Part 1–6: General requirements for basic safety and essential performance—Collateral standard: Usability. Medical Electrical Equipment—Part 1–8: General requirements for basic safety and essential performance—Collateral standard: General requirements, tests and guidance for alarm systems in medical electrical equipment and medical electrical systems.	IEC 60601-1-6 Edition 3.1 2013- 10. ANSI/AAMI/IEC 60601-1-8:2006 & A1:2012.			
	C. General II (Electrical Safety/Electromagnetic Compatibility (ES/EM	C))			
19–1	Medical electrical equipment—Part 1–2: General requirements for basic safety and essential performance—Collateral standard: electromagnetic compatibility—requirements and tests.	IEC 60601-1-2 Edition 3:2007-03.			
19–2	Medical electrical equipment—Part 1–2: General requirements for basic safety and essential performance—Collateral standard: electromagnetic compatibility—requirements and tests.	ANSI/AAMI/IEC 60601-1-2:2007/ (R)2012.			
19–3	Medical electrical equipment—Part 1–10: General requirements for basic safety and essential performance—Collateral standard: requirements for the development of physiologic closed-loop controllers.	IEC 60601-1-10 Edition 1.0:2007- 11.			
19–4	Medical electrical equipment—Part 1: General requirements for basic safety and essential performance (IEC 60601–1:2005, mod).	ANSI/AAMI ES60601-1:2005/ (R)2012 and A1:2012,C1:2009/ (R)2012 and A2:2010/(R)2012.			
19–5	Medical electrical equipment—Part 1: General requirements for basic safety and essential performance (IEC 60601–1:2005, mod).	ANSI/AAMI ES60601-1:2005/ (R)2012 and C1:2009/(R)2012 and, A2:2010/(R)2012 (Consolidated text).			
19–6	Medical electrical equipment—Part 1–11: General requirements for basic safety and essential performance—Collateral standard: Requirements for medical electrical equipment and medical electrical systems used in the home healthcare environment [Including: Technical corrigendum 1 (2011)].	IEC 60601–1–11 Edition 1.0:2010– 04.			
19–7	Medical electrical equipment—Part 1–11: General requirements for basic safety and essential performance—Collateral standard: Requirements for medical electrical equipment and medical electrical systems used in the home healthcare environment (IEC 60601–1–11:2010 mod).	ANSI/AAMI HA60601-1-11:2011.			

TABLE 2—New Entries to the List of Recognized Standards—Continued

Recognition No.	Title of standard ¹	Reference No. and date
19–8	Medical electrical equipment—Part 1–2: General requirements for basic safety and essential performance—Collateral standard: Electromagnetic disturbances—Requirements and tests.	IEC 60601-1-2 Edition 4.0:2014- 02.
19–9		IEC 60601-1-10 Edition 1.1:2013- 11.
19–10	Lithium batteries	UL 1642 5th Edition 2013.
19–11		UL 2054 2nd Edition 2011.
	D. Orthopedics	
11–279	orthopaedic hip femoral stems.	ASTM F2996-13.
11–280	Standard test method for static, dynamic, and wear assessment of extra- discal single level spinal constructs.	ASTM F2624-12.
	E. Radiology	
12–275	Ultrasonics—Power measurement—Radiation force balances and performance requirements.	IEC 61161 Edition 3.0:2013-01.
12–276		IEC TS 62462 First edition 2007– 05.
12–277	 Ultrasonics—Hydrophones—Part 1: Measurement and characterization of medical ultrasonic fields up to 40 megahertz (MHz). 	IEC 62127-1 Edition 1.1:2013-02.
12–278	40 MHz (including corrigendum 1:2008 and amendment 1:2013).	IEC 62127–2 Edition 1.0:2007–08.
12–279	sonic fields up to 40 MHz.	IEC 62127–3 Edition 1.1:2013–05.
12–280	 Ultrasonics—Power measurement—High intensity therapeutic ultrasound (HITU) transducers and systems. 	IEC 62555 Edition 1.0:2013–11.
12–281	Medical electrical equipment—Part 2–62: Particular requirements for the basic safety and essential performance of high intensity therapeutic ultrasound (HITU) equipment.	IEC 60601-2-62 Edition 1.0:2013- 07.
12–282		ISO 12609–1 First edition 2013– 07–15.
12–283		ISO 12609–2 First edition 2013– 07–15.
	F. Software/Informatics	
13–67	Health informatics—Personal health device communication—Part 10418: Device specialization—International normalized ratio (INR) monitor.	ISO/IEEE 11073-10418 First edition 2014-03-01.
13–68	Health informatics—Point-of-care medical device communication—Part 90101: Analytical instruments—Point-of-care test.	ISO 11073–90101 First edition 2008–01–15.
13–69		ISO/IEEE 11073-10472 First edition 2012-11-01.
	G. Sterility	1
14–436	Practice for dosimetry in radiation processing	ISO/ASTM 52628 First edition 2013–11–15.
14–437	tems for use in radiation processing.	ISO/ASTM 52701 First edition 2013–11–15.
14–450		USP 37-NF32:2014 <55>.
14–451	Biological indicators for sterilization	USP 37-NF32:2014 <1035>.

¹ All standard titles in this table conform to the style requirements of the respective organizations.

IV. List of Recognized Standards

FDA maintains the Agency's current list of FDA Recognized Consensus Standards in a searchable database that may be accessed directly at our Internet site at http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfStandards/search.cfm. We will incorporate the modifications and revisions described in this notice into the database and,

upon publication in the Federal Register, this recognition of consensus standards will be effective. We will announce additional modifications and revisions to the list of recognized consensus standards, as needed, in the Federal Register once a year, or more often if necessary. Beginning with Recognition List 033, we will no longer announce minor revisions to the list of

recognized consensus standards such as technical contact person, devices affected, processes affected, Code of Federal Regulations citations, and product codes.

V. Recommendation of Standards for Recognition by FDA

Any person may recommend consensus standards as candidates for

recognition under section 514 of the FD&C Act by submitting such recommendations, with reasons for the recommendation, to www.standards@ cdrh.fda.gov. To be properly considered, such recommendations should contain, at a minimum, the following information: (1) Title of the standard, (2) any reference number and date. (3) name and address of the national or international standards development organization, (4) a proposed list of devices for which a declaration of conformity to this standard should routinely apply, and (5) a brief identification of the testing or performance or other characteristics of the device(s) that would be addressed by a declaration of conformity.

VI. Electronic Access

You may obtain a copy of "Guidance on the Recognition and Use of Consensus Standards" by using the Internet. The Center for Devices and Radiological Health (CDRH) maintains a site on the Internet for easy access to information including text, graphics, and files that you may download to a personal computer with access to the Internet. Updated on a regular basis, the CDRH home page includes the guidance as well as the current list of recognized standards and other standards-related documents. After publication in the Federal Register, this notice announcing "Modification to the List of Recognized Standards, Recognition List Number: 036" will be available at http://www.fda.gov/MedicalDevices/ DeviceRegulationandGuidance/ Standards/ucm123792.htm. You may access the CDRH home page at http:// www.fda.gov/MedicalDevices.

You may access "Guidance on the Recognition and Use of Consensus Standards," and the searchable database for "FDA Recognized Consensus Standards" at http://www.fda.gov/MedicalDevices/DeviceRegulationand Guidance/Standards.

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VII. Submission of Comments and Effective Date

Interested persons may submit either electronic comments regarding this document to http://www.regulations.gov or written comments to the Division of Dockets Management (see ADDRESSES). It is only necessary to send one set of comments. Identify comments with the docket number found in brackets in the heading of this document. Received comments may be seen in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday, and will be posted to the docket at http://www.regulations.gov. FDA will consider any comments received in determining

whether to amend the current listing of modifications to the list of recognized standards, Recognition List Number: 036. These modifications to the list of recognized standards are effective upon publication of this notice in the **Federal Register**.

Dated: July 2, 2014.

Leslie Kux,

 $Assistant\ Commissioner\ for\ Policy.$ [FR Doc. 2014–15989 Filed 7–8–14; 8:45 am]

BILLING CODE 4164-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration [Docket No. FDA-2014-N-0899]

Request for Notification From Industry Organizations Interested in Participating in the Selection Process for a Nonvoting Industry Representative and Request for Nominations for Nonvoting Industry Representatives on the Cellular, Tissue, and Gene Therapies Advisory Committee

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is requesting that any industry organizations interested in participating in the selection of a nonvoting industry representative to serve on the Cellular, Tissue, and Gene Therapies Advisory Committee for the Center for Biologics Evaluation and Research notify FDA in writing. FDA is also requesting nominations for a nonvoting industry representative to serve on the Cellular, Tissue, and Gene Therapies Advisory Committee. A nominee may either be self-nominated or nominated by an organization to serve as a nonvoting industry representative. Nominations will be accepted for current or upcoming vacancies effective with this notice. **DATES:** Any industry organization

DATES: Any industry organization interested in participating in the selection of an appropriate nonvoting member to represent industry interests must send a letter stating that interest to FDA by August 8, 2014, for the vacancy listed in this notice. Concurrently, nomination materials for prospective candidates should be sent to FDA by August 8, 2014.

ADDRESSES: All letters of interest from industry organizations should be submitted in writing to Gail Dapolito (see FOR FURTHER INFORMATION CONTACT). All nominations should be submitted by

logging into the FDA Advisory Committee Membership Nomination Portal: https://www.accessdata.fda.gov/ scripts/FACTRSPortal/FACTRS/ index.cfm

FOR FURTHER INFORMATION CONTACT: Gail Dapolito, Center for Biologics Evaluation and Research, 10903 New Hampshire Ave., Bldg. 71, Rm. 6124, Silver Spring, MD 20993–0002, 240–402–8046; gail.dapolito@fda.hhs.gov.

SUPPLEMENTARY INFORMATION: The Agency intends to add a nonvoting industry representative to the following advisory committee:

I. Cellular, Tissue, and Gene Therapies Advisory Committee

The Committee reviews and evaluates available data relating to the safety, effectiveness, and appropriate use of human cells, human tissues, gene transfer therapies and xenotransplantation products which are intended for transplantation, implantation, infusion and transfer in the prevention and treatment of a broad spectrum of human diseases and in the reconstruction, repair or replacement of tissues for various conditions. The Committee also considers the quality and relevance of FDA's research program which provides support for the regulation of these products, and makes appropriate recommendations to the Commissioner of Food and Drugs (the Commissioner).

II. Selection Procedure

Any industry organization interested in participating in the selection of an appropriate nonvoting member to represent industry interests should send a letter stating that interest to the FDA contact (see FOR FURTHER INFORMATION **CONTACT**) within 30 days of publication of this document (see DATES). Within the subsequent 30 days, FDA will send a letter to each organization that has expressed an interest, attaching a complete list of all such organizations, and a list of all nominees along with their current resumes. The letter will also state that it is the responsibility of the interested organizations to confer with one another and to select a candidate, within 60 days after the receipt of the FDA letter, to serve as the nonvoting member to represent industry interests for the committee. The interested organizations are not bound by the list of nominees in selecting a candidate. However, if no individual is selected within 60 days, the Commissioner will select the nonvoting member to represent industry interests.