above-captioned consent agreement containing a consent order to cease and desist, having been filed with and accepted, subject to final approval, by the Commission, has been placed on the public record for a period of sixty (60) days. The following Analysis To Aid Public Comment describes the terms of the consent agreement, and the allegations in the accompanying complaint. An electronic copy of the full text of the consent agreement package can be obtained from the Commission Actions section of the FTC Home Page (for June 17, 1997), on the World Wide Web, at ''http://www.ftc.gov/os/actions/htm.'' A paper copy can be obtained from the FTC Public Reference Room, Room H–130, Sixth Street and Pennsylvania Avenue, NW., Washington, DC 20580, either in person or by calling (202) 326–3627. Public comment is invited. Such comments or views will be considered by the Commission and will be available for inspection and copying at its principal office in accordance with Section 4.9(b)(6)(ii) of the Commission's Rules of Practice (16 CFR 4.9(b)(6)(ii)).

Analysis of Proposed Consent Order To Aid Public Comment

The Federal Trade Commission has accepted, subject to final approval, an agreement to a proposed consent order from respondent Life Fitness (''respondent''), a New York general partnership that markets exercise equipment. Although not a respondent, Life Fitness' general partner, The Life Fitness Companies L.P., a Delaware limited partnership, has also agreed to be bound by the terms of the consent order.

The proposed consent order has been placed on the public record for sixty (60) days for reception of comments by interested persons. Comments received during this period will become part of the public record. After sixty (60) days, the Commission will again review the agreement and the comments received and will decide whether it should withdraw from the agreement and take other appropriate action or make final the agreement's proposed order.

The Commission's complaint against respondent alleges that respondent deceptively advertised the Lifecycle exercise bicycle. The Commission's complaint charges that respondent's advertising contained unsubstantiated calorie burn representations. Specifically, the complaint alleges that the respondent did not possess adequate substantiation for the claim that users of the Lifecycle will burn calories at a rate of over 1,000 per hour under conditions of ordinary use. The complaint also charges that respondent's representation that its calorie burn claim was based on competent and reliable research is false.

The proposed consent order contains provisions designed to remedy the violations charged and to prevent the respondents from engaging in similar acts and practices in the future.

Part I of the proposed order would prohibit Life Fitness and The Life Fitness Companies L.P. from making any claim for the ''Lifecycle,'' or for any other exercise equipment: (1) About the rate at which users burn calories, or the number of calories users burn, through use of such product; (2) about the weight loss or fat loss users achieve through use of such product; or (3) about the benefits, performance, or efficacy of such product with respect to calorie burning, fat burning, or weight loss; unless, at the time such a claim is made, the companies possess and rely upon competent and reliable evidence, which when appropriate must be competent and reliable scientific evidence, that substantiates the claim. Part II of the order prohibits the companies from misrepresenting the existence, contents, validity, results, conclusions or interpretations of any test, study, or research relating to calorie burning, fat burning, or weight loss.

The remaining provisions of the proposed order relate to respondents' obligation to make available to the Commission materials substantiating claims covered by the order; to notify the Commission of changes in the companies' structure; to provide copies of the order to certain personnel of the companies; and to file compliance reports with the Commission. The order also provides that the order will terminate after twenty years under certain circumstances.

The purpose of this analysis is to facilitate public comment on the proposed order. It is not intended to constitute an official interpretation of the agreement and proposed order or to modify in any way their terms.

Donald S. Clark,

Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[INFO–97–13]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 639–7090.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques for other forms of information technology. Send comments to Wilma Johnson, CDC Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Projects

1. Endometriosis and Exposure to Endocrine Disrupting Compounds—New—Exposure to endocrine disrupting compounds (determined by the concentration of these compounds and their metabolites in serum) may be associated with the incidence of endometriosis. Over two years, a case-control study will be conducted to compare serum levels of PCB's, pesticides, and dioxins in 50 women with newly diagnosed, laproscopically-confirmed endometriosis with serum levels in 50 women who are presumed free of endometriosis. Information on risk factors for endometriosis which may confound the association between endocrine disruptors and endometriosis will be obtained. These factors include demographics, smoking, and reproductive history. Information on potential sources of exposure to endocrine disrupting compounds (e.g.,

tampons and occupational or personal use of pesticides and herbicides) will also be obtained. The total cost to respondents is $ 0 .

Respondents	No. of respondents	No. of responses/respondent	Avg. burden/response (in hrs.)	Total burden (in hrs.)
Women	100	1	.50	50
Total				50

2. (NIOSH) Occupational Asthma Identification Methods -0920–0350—Extension—Over the last decade, OCCUPATIONAL ASTHMA (OA) has emerged as the most prevalent occupational respiratory disease, resulting in morbidity, disability, diminished productivity, and rarely, death. Prevention of OA has become one of the most important goals for NIOSH. This project addresses these issues by examining the potential of different asthma screening approaches as surveillance tools when employed serially over time among workers at risk, and also characterizes the occurrence of and risk factors for occupational asthma in various high risk industries.

The primary objective of the study is to examine the potential of different asthma screening approaches as surveillance tools when employed serially over time among workers at risk. A second major objective is to characterize the occurrence of and risk factors for occupational asthma in several industries, specifically workers rearing insects for agricultural pest control, wood product workers using isocyanates, and other occupational groups with different exposure profiles.

A series of four groups of screening measures are applied to examine the potential of each measure in different situations. This includes a questionnaire (including an occupational history), lung function tests (shift spirometry, serial peak flow tests, airway responsiveness), inflammation and immunology tests (specific and nonspecific serum immunoglobulins, skin prick tests, nasal lavage for cellular and biochemical factors), and environmental measurements (gravimetric dusts, antigens, chemical vapors, viable organisms, endotoxins). Workers exposed to (1) high molecular weight sensitizing dusts, (insect particulate), (2) low molecular weight sensitizers, (methylene biphenyldiisocyanate, MDI), and (3) irritant but not sensitizing exposures, as well as a control group of unexposed workers, are followed for two years.

The results should be useful in improving tools for recognition, monitoring, and surveillance of OA. In addition, risk factors for OA will be further delineated, which will assist in targeting OA prevention strategies for agricultural and other workers. The total cost to respondents is $11,960.

Respondents	No. of respondents	No. of responses/respondent	Avg. burden/response (in hrs.)	Total burden (in hrs.)
Workers	299	2	2.0	1,196
Total				1,196

Dated: June 13, 1997.

Wilma G. Johnson,

Acting Associate Director for Policy Planning And Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 97–16322 Filed 6–20–97; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Announcement 780]

State Injury Intervention and Surveillance Program; Notice of Availability of Funds for Fiscal Year 1997

Introduction

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1997 funds for a cooperative agreement program for State injury intervention and surveillance programs, focused in four topic areas: Prevention of Unintentional Injuries (bicycle helmet promotion (Part IA1), prevention of residential fire-related injuries (Part IA2)); Trauma Care Systems (Part IB); Emergency Department Injury Surveillance (Part IC); and Basic Injury Program Development (Part II).

CDC is committed to achieving the health promotion and disease prevention objectives of ''Healthy People 2000,'' a national activity to reduce morbidity and mortality and to improve the quality of life. This announcement is related to the priority areas of Unintentional Injuries, Violent and Abusive Behavior, and Surveillance and Data Systems. (For ordering a copy of ''Healthy People 2000,'' see the section **WHERE TO OBTAIN ADDITIONAL INFORMATION.**)

Programmatic Assistance—Topic Specific Telephone Conferences

During the week of July 7–11, 1997, a series of five, one-hour each, topic-specific, programmatic assistance telephone conferences will be arranged by CDC program staff. To receive the exact date, time, and call-in information, please contact the appropriate CDC program individual (see **WHERE TO OBTAIN ADDITIONAL INFORMATION** section).

Authority

This program is authorized under sections 301, 317, 391, and 394A of the Public Health Service Act [42 U.S.C. 241, 247b, 280b, and 280b–3] as amended.

Smoke-Free Workplace

CDC strongly encourages all cooperative agreement recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products, and Public Law 103–227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.