

## ELECTRONIC ELEMENTS FOR SF 515

Item	Placement*
Text: Title: Pediatric Nursing Notes ..... Form ID: Standard Form 536 (Rev. 2-95) .....	Top of form. Bottom right corner of form.
Data entry fields: Date Hour Temp Wt. Diet Amt. Taken Vomited Urine Stools Treatments, Medications Nursing Notes Patient's Name—last, first, middle .....  Patient's ID No. or SSN Hospital or Medical Facility Register No. Ward No.	Bottom left corner of form.

\*If no placement indicated, items can appear anywhere on the form.

**FOR FURTHER INFORMATION CONTACT:**

The Interagency Committee for Medical Records via General Services Administration (CARM); 1800 F Street, NW, Room 7136; Washington, DC 20405-0002.

Dated: May 12, 1998.

**Capt. Patricia Buss, MC, USN,**

*Chairperson, Interagency Committee on Medical Records.*

[FR Doc. 98-15246 Filed 6-8-98; 8:45 am]

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**GENERAL SERVICES  
ADMINISTRATION****Interagency Committee for Medical  
Records (ICMR); Automation of  
Medical Standard Form 515**

**AGENCY:** General Services  
Administration.

**ACTION:** Guideline on Automating  
Medical Standard Forms.

**BACKGROUND:** The Interagency Committee on Medical Records (ICMR) is aware of numerous activities using computer-generated medical forms, many of which are not mirror images of the genuine paper Standard Form. With GSA's approval the ICMR eliminated the requirement that every electronic version of a medical Standard/Optional form be reviewed and granted an exception. The committee proposes to set required fields standards and that activities developing computer-generated versions adhere to the required fields but not necessarily to the image. The ICMR plans to review medical Standard/Optional forms which are commonly used and/or commonly computer-generated. We will identify those fields which are required, those (if any) which are optional, and the required format (if necessary). Activities

may not add data elements that would change the meaning of the form. This would require written approval from the ICMR. Using the process by which overprints are approved for paper Standard/Optional forms, activities may add other data entry elements to those required by the committee. With this decision, activities at the local or headquarters level should be able to develop electronic versions which meet the committee's requirements. This guideline controls the "image" or required fields but not the actual data entered into the field.

**SUMMARY:** With GSA's approval, the Interagency Committee on Medical Records (ICMR) eliminated the requirement that every electronic version of a medical Standard/Optional form be reviewed and granted an exception. The following fields must appear on the electronic version of the following form:

## ELECTRONIC ELEMENTS FOR SF 515

Item	Placement*
Text: Title: Tissue Examination ..... Form ID: Standard Form 515 (Rev. 8-97) .....	Top of form. Bottom right corner of form.
Data entry fields: Specimen Submitted By Date Obtained Specimen Brief Clinical History (Include duration of lesion and rapidity of growth, if a neoplasm) Preoperative Diagnosis Operative Findings Postoperative Diagnosis Signature Name of Signer Title of Signer Pathological Report**	

## ELECTRONIC ELEMENTS FOR SF 515—Continued

Item	Placement*
Name of Laboratory Accession No(s)*** Gross Description, Histologic Examination and Diagnoses Signature of Pathologist Name of Pathologist Date**** Hospital or Medical Facility Records Maintained At Department/Service of Patient Relation to Sponsor Sponsor's Name (Last, first, middle) Sponsor's ID Number (SSN or Other) Patient's Name (last, first, middle) ..... Patient's ID No. or SSN ..... Patient's Sex ..... Patient's Date of Birth ..... Patient's Rank/Grade ..... Register No. Ward No.	Bottom left. Corner of form. (All items that start with "Patient's")

\*If no placement indicated, items can appear anywhere on the form.

\*\* Optional title to cover next 6 items in list.

\*\*\* Date Pathologist signed form.

**FOR FURTHER INFORMATION CONTACT:** The Interagency Committee for Medical Records via General Services Administration (CARM); 1800 F Street, NW., Room 7136; Washington, DC 20405-0002.

Dated: May 12, 1998.

**Capt. Patricia Buss, MC, USN,**

*Chairperson, Interagency Committee on Medical Records.*

[FR Doc. 98-15245 Filed 6-8-98; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the Secretary

#### Agency Information Collection Activities: Submission for OMB Review; Comment Request

The Department of Health and Human Services, Office of the Secretary publishes a list of information collections it has submitted to the Office of Management and Budget (OMB) for clearance in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35) and 5 CFR 1320.5. The following are those information collections recently submitted to OMB.

1. Applicant Background Survey—0990-0208—Extension—This form will be used to ask applicants for employment how they learned about a vacancy, to make sure that recruitment sources yield qualified women, minority and handicapped applicants in compliance with EEOC Management Directives. Respondents: Individuals; Annual Number of Respondents:

310,000; Annual Frequency of Response: one time; Average Burden per Response: 2 minutes; Total Annual Burden: 10,333 hours.

*OMB Desk Officer:* Allison Eydt.

Copies of the information collection packages listed above can be obtained by calling the OS Reports Clearance Officer on (202) 690-6207. Written comments and recommendations for the proposed information collection should be sent directly to the OMB officer designated above at the following address: Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, 725 17th Street N.W., Washington, D.C. 20503.

Comments may also be sent to Cynthia Agens Bauer, OS Reports Clearance Officer, Room 503H, Humphrey Building, 200 Independence Avenue S.W., Washington DC, 20201. Written comments should be received within 30 days of this notice.

Dated: May 29, 1998.

**Dennis P. Williams,**

*Deputy Assistant Secretary, Budget.*

[FR Doc. 98-15274 Filed 6-8-98; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Health Care Policy and Research

#### Notice of Meetings

In accordance with section 10(d) of the Federal Advisory Committee Act (5 U.S.C. Appendix 2) announcement is

made of the following subcommittees scheduled to meet during the month of June 1998:

*Name:* Health Care Technology and Decision Sciences.

*Date and Time:* June 12, 1998, 1:00 p.m.

*Place:* Agency for Health Care Policy and Research, 2101 East Jefferson Street, Suite 400, Rockville, Maryland 20852.

Open June 12, 1:00 p.m. to 1:15 p.m.

Closed for remainder of meeting.

*Name:* Health Systems Research.

*Date and Time:* June 17, 1998, 8:00 a.m.

*Place:* Radisson Barcelo, 2121 P Street, NW, Room TBD, Washington, DC 20037.

Open June 17, 8:00 a.m. to 8:15 a.m.

Closed for remainder of meeting.

*Name:* Health Care Quality and Effectiveness Research.

*Date and Time:* June 19, 1998 8:00 a.m.

*Place:* Radisson Barcelo, 2121 P Street, NW, Room TBD, Washington, DC 20037.

Open June 19, 8:00 a.m. to 8:15 a.m.

Closed for remainder of meeting.

*Purpose:* To review and evaluate grant applications.

*Agenda:* The open session of the meetings will be devoted to business covering administrative matters and reports. During the closed sessions, the Subcommittees will be reviewing and discussing grant applications dealing with health services research issues. In accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C., 552b(c)(6), the Administrator, Agency for Health Care Policy and Research, has made a formal determination that these latter sessions will be closed because the discussions are likely to reveal personal information concerning individuals associated with the applications. This information is exempt from mandatory disclosure.

Anyone wishing to obtain a roster of members, minutes of the meetings, or other