*Place:* Tamastslikt Cultural Institute, Umatilla Indian Reservation, 72777 Highway 331, Pendleton, Oregon 97801.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 100 people.

Background: Under a Memorandum of Understanding (MOU) signed in October 1990 and renewed in November 1992 between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or 'Superfund''). These activities include health consultations and public health assessments at DOE sites listed on, or proposed for, the Superfund National Priorities List and at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles.

In addition, under an MOU signed in December 1990 with DOE and replaced by an MOU signed in 1996, the Department of Health and Human Services (HHS) has been given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production and use. HHS has delegated program responsibility to CDC.

Purpose: This subcommittee is charged with providing advice and recommendations to the Director, CDC, and the Administrator, ATSDR, regarding community, American Indian Tribes, and labor concerns pertaining to CDC's and ATSDR's public health activities and research at this DOE site. The purpose of this meeting is to receive an update from the Inter-tribal Council on Hanford Health Projects; to review and approve the Minutes of the previous meeting; to receive updates from ATSDR/NCEH and NIOSH; to receive reports from the Outreach, Public Health Assessment, Public Health Activities, and the Studies Workgroups; and to address other issues and topics, as necessary.

Matters to be Discussed: Agenda items include a presentation and discussion on Native American Risk Scenario, question and answer session with Hanford Thyroid Disease Study researchers, and agency updates.

Agenda items are subject to change as priorities dictate.

Contact Persons for More Information: Leslie C. Campbell, Executive Secretary HHES, or Marilyn Palmer, Committee Management Specialist, Division of Health Assessment and Consultation, ATSDR, 1600 Clifton Road, NE, M/S E–56, Atlanta, Georgia 30333, telephone 1–888/42–ATSDR(28737), fax 404/639–6075.

The Director, Management Analysis and Services office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: March 25, 1999.

#### Carolyn J. Russell,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99–8008 Filed 3–31–99; 8:45 am] BILLING CODE 4163–18–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

[30DAY-10-99]

# 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) 639–7090. Send written comments to CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503. Written comments should be received within 30 days of this notice.

#### **Proposed Project:**

1. Mammography Rescreening Rates and Risk Factor Assessment—New—The National Center for Chronic Disease Prevention and Health Promotion, Division of Cancer Control and Prevention proposes to conduct mammography research to reduce breast cancer deaths by detecting tumors while

they are still small and easier to treat. Because new tumors can develop in women previously free of breast cancer. older women who face higher risks of developing breast cancer should complete mammography screening every one to two years. To provide cancer screening for low income women, Congress passed the Breast and **Cervical Cancer Mortality Prevention** Act (Pub. L. 101-354) in 1990. The Division of Cancer Prevention and Control (DCPC) in the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC) was given funding to establish the National Breast and Cervical Cancer Early Detection Program (NBCCEDP). The NBCCEDP now provides mammography and cervical cancer screening services to low income and medically under-served women in all 50 states, the District of Columbia, 4 territories, and 13 tribes. To assist state, territorial, and tribal programs with efficient service delivery, new data are needed to (1) estimate scientifically valid, statistically precise estimates of mammography rescreening rates and (2) identify the factors associated with timely rescreening among NBCCEDPenrollees.

To obtain data on mammography rescreening rates and risk factors, DCPC plans to conduct telephone interviews with a random sample of 2,250 NBCCEDP-enrollees from four states. Consenting women will complete a 35 minute telephone interview about their knowledge, attitudes, and experiences with mammography screening. Those who report having received a mammogram during the study period (April 1, 1997 through September 30, 2000) will be asked to sign a release of information form so a copy of the mammography report can be obtained to verify the date the procedure was completed. All women invited to participate in the survey will be 50-73 years of age. Each telephone interview will be scheduled for a time (day, evening, or weekend) and place that is convenient to the participant. The total annual burden hours are 2,223.

Respondents (forms)	No. of respondents	No. of responses/ respondent	Average bur- den/response (in hrs.)	Total burden (in hrs.)
Telephone Script for Project Coordination	2,500 2,250	1	0.167 0.50	417 1.125
Consent Form to Release Mammography Reports	1,350 1,215	1 1.5	0.167 0.25	225 456

2. Multistate Case-Control Study of Childhood Brain Cancers—New—The Agency for Toxic Substances and Disease Registry (ATSDR) is mandated pursuant to the 1980 Comprehensive **Environmental Response Compensation** and Liability Act (CERCLA), and its 1986 Amendments, The Superfund Amendments and Reauthorization Act (SARA), to prevent or mitigate adverse human health effects and diminished quality of life resulting from exposure to hazardous substances in the environment. Scientific knowledge is lacking concerning the reasons for the apparent rise in childhood brain cancer incidence during the last two decades in the U.S. and for explanations of childhood brain cancer in general. To

date, most epidemiologic studies exploring the causes of childhood brain cancer have suffered from lack of statistical power due to the small numbers of cases available for the study. By combining recent childhood brain cancer data from multiple states, this study will help to better understand what environmental factors may be associated with childhood brain cancer, and therefore, to possibly develop well-focused prevention measures.

This study will examine the association between environmental exposures and risk of childhood brain cancers by employing a population based case-control study of childhood brain cancer. Information to be collected includes proximity of parental residence

to hazardous waste sites and other known or suspected risk factors. Other known or purported risk factors identified from the literature, will include both environmental and host factors during the prenatal as well as postnatal periods: parental occupation, parents' and child's dietary habits, parental history of smoking and drinking, mother's and child's exposure to radiation through medical care, residential use of pesticides or herbicides, mother's and child's history of viral infection, and family history of cancer and neurological disorders. This request is for a three-year OMB approval. Total annual burden hours are

Respondents	No. of respondents	No. of responses/ respondent	Avg. burden/ response (in hrs.)	Total burden (in hrs.)*
Screener for controls  Mothers of children with childhood brain cancers and controls (interview)  Mothers of children with early childhood brain cancers and controls (biologi-	16,000 1,200	1 1	0.05 0.75	800 900
cal testing)	100	1	1.083	108

<sup>\*1,808 ÷ 3</sup> years = 603 annualized burden hours.

#### Nancy Cheal,

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

[FR Doc. 99–8006 Filed 3–31–99; 8:45 am] BILLING CODE 4163–18–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Food and Drug Administration

[Docket No. 99D-0463]

Foods—Adulteration Involving Hard or Sharp Foreign Objects; Compliance Policy Guide; Availability

**AGENCY:** Food and Drug Administration, HHS.

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ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the availability of a compliance policy guide (CPG) entitled "Foods— Adulteration Involving Hard or Sharp Foreign Objects." This CPG is intended to help FDA components and industry comply with FDA's internal enforcement process concerning foods that contain hard or sharp foreign objects.

**DATES:** Written comments on this CPG may be submitted at any time.

ADDRESSES: Submit written requests for single copies of Compliance Policy Guide (CPG) Sec. 555.425 "Foods—Adulteration Involving Hard or Sharp

Foreign Objects" to the Director, Division of Compliance Policy (HFC-230), Office of Enforcement, Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857. Send two self-addressed adhesive labels to assist that office in processing your request, or fax your request to 301-827-0482. Copies of the CPG may also be downloaded to a personal computer with access to the World Wide Web (WWW). The Office of Regulatory Affairs (ORA) home page includes the CPG and may be accessed at "http:// www.fda.gov/ora". The CPG will be available on the Compliance References page for ORA.

Submit comments to MaryLynn A. Datoc, the second contact person listed in this document in the "FOR FURTHER INFORMATION CONTACT" section.

### FOR FURTHER INFORMATION CONTACT:

Technical Questions Concerning Foreign Objects in Foods: Alan R. Olsen, Microanalytical Branch (HFS-315), Office of Plant, Dairy Foods, and Beverages, Center for Food Safety and Applied Nutrition, Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202-205-4438, FAX 202-205-4091.

Questions Concerning Regulatory Actions and All Comments: MaryLynn A. Datoc, Division of Compliance Policy (HFC–230), Office of Enforcement, Office of Regulatory Affairs, Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–0413, FAX 301–827–0482.

SUPPLEMENTARY INFORMATION: FDA has developed a CPG to provide guidance on FDA's internal enforcement process concerning foods that contain hard or sharp foreign objects. This guidance synthesizes FDA's case-by-case responses to the problem of hard or sharp foreign objects in food. The CPG is intended to provide clear policy and regulatory guidelines to FDA's field and headquarters staff with regard to such foods. It also contains information that may be useful to the regulated industry and to the public.

Therefore, FDA has prepared a CPG to describe its internal enforcement process. The CPG is being issued as a guidance document and represents the agency's current thinking on the subject. It does not create or confer any rights for or on any person and does not operate to bind FDA or the public.

The agency has adopted good guidance practices (GGP's) that set forth the agency's policies and procedures for the development, issuance, and use of guidance documents (62 FR 8961, February 27, 1997). This CPG is being issued as a level 2 guidance consistent with GGP's.

Interested persons may submit to the second contact person listed in this document written comments regarding the CPG entitled "Foods—Adulteration Involving Hard or Sharp Foreign Objects." Two copies of any comments