# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Health Resources and Services Administration

## National Advisory Council on Nurse Education and Practice; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), notice is hereby given of the following advisory committee meeting. The meeting is open to the public.

Name: National Advisory Council on Nurse Education and Practice.

Date and Time: November 7, 2002, 8:30 a.m.–5 p.m., November 8, 2002, 8:30 a.m.–3 p.m.

Place: The Hotel Washington, Pennsylvania Avenue, NW at 15th St., Washington, DC 20004.

Agenda: Agency, Bureau and Division administrative updates. Overview of the Nurse Reinvestment Act, Pub. L. 107–205; staff legislative workgroup reports; and Council workgroup sessions with discussion and recommendations for implementation of legislation. Presentations and discussion of bioterrorism workforce issues with focus on nursing. Reports of the Institute of Medicine Health Professions Summit meeting with discussion regarding future interdisciplinary activities and report of the Development of a Funding Methodology for the Allocation of Title VIII Funds: Phase II.

For Further Information Contact: Anyone interested in obtaining a roster of members, minutes of the meeting, or other relevant information should write or contact Ms. Elaine G. Cohen, Executive Secretary, National Advisory Council on Nurse Education and Practice, Parklawn Building, Room 9–35, 5600 Fishers Lane, Rockville, Maryland 20857, telephone (301) 443–1405.

Dated: October 17, 2002.

#### Jane M. Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 02–26916 Filed 10–22–02; 8:45 am]

BILLING CODE 4165-15-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health/National Institute of Environmental Health Sciences

### Proposed Collection; Comment Request; Organochlorine Exposure in Relation to Timing of Natural Menopause

SUMMARY: 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 National Institute of Environmental Health Sciences (NIEHS), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

#### **Proposed Collection**

Title: Organochlorine Exposure in Relation to Timing of Natural Menopause. Type of Information Collection Request: New. Need and Use of Information Collection: Smoking has been shown in many studies to be associated with a 1-2 year decrease in age at natural menopause. However, relatively little is known about the effect of other potential toxicants, including organochlorines such as polychlorinated biphenyls (PCBs) and 1,1 dichloro-2,2bis(p-chlorophenyl) ethylene (p,p'-DDE (DDE). We will assess timing of menopause among women who previously participated in the North Carolina Infant Feeding Study. PCB and DDE levels were analyzed in blood and breast milk samples around delivery and after pregnancy. The median age of the women as of March, 2002, is 50 years. Data will be collected in a telephone interview focusing on reproductive and menstrual history with additional information samples in order to classify menopausal status of women who had undergone hysterectomy with retention of at least one ovary, women who are currently using hormone replacement therapy whose use began

while still having periods, and women who report very short, very long, or irregular menstrual cycle lengths during the past 12 months. PCB and DDE levels will also be determined in these samples, allowing us to assess the correlation between current and baseline (1978–1982) PCB and DDE measures. The purpose of this study is to assess the association between the baseline organochlorine measurements and timing of natural menopause. A secondary aim will be to conduct exploratory analyses of the association between specific factors (e.g., pregnancy history, weight change) and rate of change in collected and demographic, social and behavioral factors that could affect timing of menopause. Approximately 50% of participants based on sampling strata that involve criteria relating to age and menopausal status will also have a blood sample collection. Follicle stimulating hormone and luteinizing hormone will be measured in these organochlorine levels. Frequency of Response: On occasion (one half-hour long telephone interview and ten minutes for biological specimens collection for half of the study population). Affected Public: Individuals. Type of Respondents: We will enroll women who participated in the North Carolina Infant Feeding Study. The annual reporting burden is as follows: Estimated Number of Respondents: 857. Estimated Number of Responses per Respondent: See table below. Average Burden Hours Per Response: 0.5 for the telephone interview and 0.334 for the blood collection; and Estimated Total Burden Hours Requested: 571.45. The average annual burden hours requested is 428.5 for the telephone interview and 142.95 for the blood collection. The annualized cost to respondents is estimated at \$10 (assuming \$20 hourly wage  $\times$  0.50 hours) for the interview and \$6.658 (assuming a \$20 hourly wage × 0.334 hours) for blood collection. There are no Capital Costs to report. There are no

Operating or Maintenance Costs to

report.

Type of respondents	Estimated number of respondents	Estimated number of re- sponses per respondent	Average burden hours per response	Estimated total burden hours requested
Telephone Interview (CATI)	857 * 428	1 1	.5 .334	428.5 142.95
Total	1,285			571.45

<sup>\*</sup> Expect approximately 50% of the (n=857) participants to complete the blood draw.

Request for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of collection of information on whose who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Dr. Glinda Cooper, Epidemiology Branch, NIEHS, Building 101, AE–05, P.O. Box 12233, Research Triangle Park, NC 27709 or call non-toll-free number (929) 541–0799 or E-mail your request, including your address to: cooper1@niehs.nih.gov.

Comments Due Date: Comments regarding this information are best assured of having their full effect if received within 60 days of the date of this publication.

Dated: October 12, 2002.

#### Francine Little,

NIEHS, Associate Director for Management. [FR Doc. 02–27029 Filed 10–22–02; 8:45 am] BILLING CODE 4140–01–M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### **National Institutes of Health**

Submission for OMB Review; Comment Request, National Kidney Disease Education Program Evaluation Survey

**SUMMARY:** Under the provisions of section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the Federal Register. August 5, 2002 (67 FR 50678-50679), and allowed 60-days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

### **Proposed Collection:**

Title: National Kidney Disease
Education Program Evaluation Survey.
Type of Information Collection Request:
New. Need and Use of Information
Collection: NIDDK will conduct a
survey to monitor and evaluate the
effects of a pilot kidney disease
education program. This will be
accomplished through baseline and
follow-up surveys of the primary target
audience members, i.e., African
American adults and primary care

providers, in four pilot site locations. The search is designed to assess the overall impact of the program, but also to provide information that will be useful in developing and refining this and future programs. Frequency of Response: A baseline and follow-up survey will each require a onetime response. Affected Public: Individuals or households, clinics or doctor's offices. Type of Respondents: African-American adults and primary care providers (e.g., physicians, physician assistants, nurse practitioners, etc.). The annual reporting burden is as follows: Estimated Number of Respondents: 2,000; Estimated Number of Responses per Respondent: 1 (Respondents will answer a single survey: African American adults will complete a 20 minute computer assisted telephone interview (CATI); Primary care providers will complete a 10 minute faxed survey); Average Burden Hours Per Response: .298 and Estimated Total Annual Burden Hours Requested: 596. The annualized total cost to respondents is estimated at \$10,684. All respondents will be contacted via telephone. To reduce respondent burden and overall costs of administering the study, it is expected that random digit dialing will be used to contact African American adults and telephone lists will be used to contact primary care providers. Because different program materials will be developed for each audience the questionnaires will be tailored such that respondents will be asked only targetaudience pertinent questions. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

Type of respondents	Number of re- spondents	Frequency of response	Average time per response	Annual hour burden
African Americans Primary Care Providers	1,600 400	1.0 1.0	.33 .17	528 68
Total	2,000			596

Request for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance

the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated burden and associated response time,

should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 102353, Washington, DG 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Dr. Thomas Hostetter, Project Officer, Director, NIDDK National Kidney Disease Education Program, NIH, Building 31, 6707 Democracy Bldg, Room 625, Bethesda, MD 20892–2560,