

Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection

Request: Regular Clearance, Extension of a currently approved collection.

Title of Information Collection:

Service Use and Transition of Private Long-Term Care Insurance.

Form/OMB No.: OS-0990-0268.

Use: This is a longitudinal study of an admission cohort of private long-term care insurance claimants. A representative sample of claimants from nine companies will be followed for twenty months to better understand how they select and use services.

Frequency: Reporting.

Affected Public: Individuals or households.

Annual Number of Respondents: 1,650.00.

Total Annual Responses: 6,755.00.

Average Burden per Response: 1/2 hour.

Total Annual Hours: 3,720.00.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access the HHS Web site address at <http://www.hhs.gov/oirm/infocollect/pending/> or e-mail your request, including your address, phone number, OMB number, and OS document identifier, to naomi.cook@hhs.gov, or call the Reports Clearance Office on (202) 690-6162. Written comments and recommendations for the proposed information collections must be received with 60-days, and directed to the OS Paperwork Clearance Officer at the following address:

Department of Health and Human Services, Office of the Secretary, Assistant Secretary for Budget, Technology, and Finance, Office of Information and Resource Management, Attention: Naomi Cook (0990-0268), Room 531-H, 200

Independence Avenue, SW., Washington DC 20201.

Dated: September 28, 2005.

Robert E. Polson,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-05-0134]

Proposed Data Collections Submitted for Public Comment and Recommendations

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) 371-5983 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

Foreign Quarantine Regulations, OMB No. 0920-0134—Revision—National Center for Infectious Diseases (NCID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description:

Section 361 of the Public Health Service (PHS) Act (42 U.S.C. 264) authorizes the Secretary of Health and Human Services (DHHS) to make and enforce regulations necessary to prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the United States. Legislation and the existing regulations governing foreign quarantine activities (42 CFR part 71) authorize quarantine officers and other personnel to inspect and undertake necessary control measures with respect to conveyances, persons, and shipments of animals and etiologic agents entering the United States from foreign ports in order to protect the public health.

Under foreign quarantine regulations, the master of a ship or captain of an airplane entering the United States from a foreign port is required by public health law to report certain illnesses

among passengers (42 CFR 71.21)(b). In this revision, CDC proposes adding two additional reporting requirements. First, in addition to the aforementioned list of required illnesses to be reported, CDC is asking that reports be made for the following conditions, which may indicate a reportable illness: (1) Hemorrhagic fever syndrome (persistent fever accompanied by abnormal bleeding from any site); or (2) acute respiratory syndrome (severe cough or severe respiratory disease of less than 3 weeks in duration); or (3) acute onset of fever and severe headache, accompanied by stiff neck or change in level of consciousness. CDC has the authority to collect personal health information to protect the health of the public under the authority of section 301 of the Public Health Service Act (42 U.S.C.).

Second, CDC proposes adding the Passenger Locator Form currently under OMB control number 0920-0664 to OMB control number 0920-0134. The Passenger Locator Form is used to collect reliable information that assists quarantine officers in locating in a timely manner those passengers and crew who are exposed to communicable diseases of public health importance while traveling on a conveyance. Additional burden hours for the voluntary reporting of additional certain illnesses and the Passenger Locator Form are reflected in the burden hour table below. DHHS delegates authority to CDC to conduct quarantine control measures. Currently, with the exception of rodent inspections and the cruise ship sanitation program, inspections are performed only on those vessels and aircraft which report illness prior to arrival or when illness is discovered upon arrival. Other inspection agencies assist quarantine officers in public health screening of persons, pets, and other importations of public health significance and make referrals to PHS when indicated. These practices and procedures assure protection against the introduction and spread of communicable diseases into the United States with a minimum of recordkeeping and reporting as well as a minimum of interference with trade and travel.

Respondents include airplane pilots, ships' captains, importers, and travelers. The nature of the quarantine response would dictate which forms are completed by whom. There are no costs to respondents except for their time. The total estimated annual burden hours are 225,759.

ESTIMATED ANNUALIZED BURDEN TABLE

Citation	Form number/ former OMB#	Number of respondents	Number of responses per respondent	Average bur- den per respondent (in hours)
Reporting:				
71.21 Radio report death/illness .....	.....	9,500	1	2/60
71.33(c) Report by person/s in isolation or surveillance .....	.....	11	1	3/60
71.35 Report of death/illness in port .....	.....	5	1	30/60
Used in an outbreak of public health significance	0920-0664	2,700,000	1	5/60
Used for reporting of an ill passenger(s)	0920-0664	800	1	5/60
71.51(b)(3) Admission of cats/dogs: death/illness .....	.....	5	1	3/60
71.51(d) Dogs/cats: certification of confinement, vaccination	CDC 75.37	1,200	1	15/60
71.52(d) Turtle importation permits .....	.....	10	1	30/60
71.53(d) Importer registration—nonhuman primates	CDC 75.10A	40	1	10/60
Total (Reporting) .....	.....	2,711,571		
Recordkeeping:				
71.53(e) .....	.....	30	4	30/60

Dated: September 30, 2005.

Betsey Dunaway,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day-05-05CX]

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 404-371-5983 and send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an e-mail to omb@cdc.gov.

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 or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

A Survey of University Field Biology Training Programs to Assess Zoonosis Education, Animal Handling and Personal Protective Equipment Training—New—Centers for Disease Control and Prevention (CDC), National Center for Infectious Diseases (NCID).

Background and Brief Description

Field Biologists and members of allied disciplines (Ecology, Conservation Biology, Wildlife Biology, Mammalogy, etc.) frequently come in contact with wild animals, many of which may carry diseases transmissible to humans (zoonotic diseases). Examples of these diseases include Rabies, Hantavirus Pulmonary Syndrome, Leptospirosis, Tularemia and many others. The recent death of a Wildlife Sciences graduate student from occupationally-acquired Hantavirus Pulmonary Syndrome highlights the vulnerability of this population to zoonotic diseases. The graduate student's exposure was thought to be due to inadequate understanding of the risk of zoonotic disease and need for proper animal handling and personal protective equipment (PPE) use.

Throughout the field biology community, there are no universally accepted standards for zoonosis risk reduction education, safe animal

handling or PPE use. While it may be difficult to re-train seasoned biologists who have established habits related to animal handling and PPE use, new members of the community (*i.e.* undergraduate and graduate students) may represent an opportunity for timely intervention. By developing proper animal handling and PPE use habits early in their careers, field biologists can minimize their exposure to potentially fatal zoonotic illnesses.

The proposed survey asks 85 Department Chairs (or Program Directors, as surrogates) of university training programs in field-related biological sciences about their programs' policies regarding zoonotic disease education, safe animal handling training, and PPE training and use. The survey consists of an introductory letter and a self-administered, Web-based questionnaire e-mailed to persons at universities in the United States. The study objectives are to describe current knowledge, attitudes and practices of educational institutions and their faculty regarding zoonotic disease risks and protection of undergraduate and graduate students, and to determine what types of national guidelines on zoonotic disease risk reduction in university training programs are needed. If these data were not collected, it would make it more difficult to create logical and appropriate national guidelines for zoonotic risk reduction in university training programs. This data collection supports the CDC's broader research agenda of understanding the determinants of illness in vulnerable populations. There is no cost to the respondents other than their time.