

costs other than the amount of time required to respond to the survey.

## ESTIMATED ANNUALIZED BURDEN HOURS

Data collection instrument	Number of respondents	Responses/ respondent	Average burden per response (in hrs)	Average annual burden hours
Satisfaction survey (callers) .....	25,000	1	3/60	1,250
Satisfaction survey (e-mail inquiries) .....	330	1	3/60	17
Follow up survey .....	3,125	1	7/60	365
Key informant survey .....	100	1	7/60	12
Postcard survey for bulk mailing .....	950	1	1/60	16
Postcard survey for individual publications .....	2,100	1	1/60	35
Web survey for e-mail publication orders .....	1,000	1	1/60	17
Web survey for internet publications .....	950	1	1/60	16
Special event/Outreach survey—General Public .....	25,600	1	5/60	2,133
Special event/Outreach survey—Professionals .....	10,400	1	5/60	867
Emergency response survey—Level 1 emergency—General Public .....	31,151	1	5/60	2596
Emergency response survey—Level 1 emergency—Professionals .....	7,459	1	5/60	622
Emergency response survey—Level 2 emergency—General Public .....	57,579	1	5/60	4798
Emergency response survey—Level 2 emergency—Professionals .....	51,821	1	5/60	4318
Emergency response survey—Level 3 emergency—General Public .....	351,863	1	5/60	29,322
Emergency response survey—Level 3 emergency—Professional .....	316,678	1	5/60	26,390
Emergency response survey—Level 4 emergency—General Public .....	645,630	1	5/60	53,803
Emergency response survey—Level 4 emergency—Professional .....	596,504	1	5/60	49,709
Total Burden Hours .....	.....	.....	.....	176,286

Dated: February 6, 2007.

Joan F. Karr,

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

[FR Doc. E7-2637 Filed 2-14-07; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. 2006N-0430]

**Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; General Licensing Provisions: Biologics License Application, Changes to an Approved Application, Labeling, Revocation and Suspension, Postmarketing Studies Status Reports, and Forms FDA 356h and 2567; Correction**

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

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is correcting a notice that appeared in the **Federal Register** of February 2, 2007 (72 FR 5057). The document announced that an opportunity for public comment on a proposed collection of information had been submitted to the Office of Management and Budget for review and clearance under the Paperwork Reduction Act of 1995. The notice

published with an error in titles referring to an FDA form number in two places in the document. This document corrects those errors.

**DATES:** February 15, 2007.

#### FOR FURTHER INFORMATION CONTACT:

Jonna Capezzuto, Office of the Chief Information Officer (HFA-250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-4659.

**SUPPLEMENTARY INFORMATION:** In the **Federal Register** of Friday, February 2, 2007, the following corrections are made on page 5057:

1. In the first column, in the ninth line of the title of the document, the phrase "Forms FDA 456h" is corrected to read "Forms FDA 356h".

2. In the second column, in the **SUPPLEMENTARY INFORMATION** section of the document, in the sixth line of the title, the phrase "Forms FDA 456h" is corrected to read "Forms FDA 356h".

Dated: February 8, 2007.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. E7-2576 Filed 2-14-07; 8:45 am]

BILLING CODE 4160-01-S

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. 2006N-0436]

**Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Guidance for Industry on How To Use E-Mail To Submit a Study Protocol**

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

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

**DATES:** Fax written comments on the collection of information by March 19, 2007.

**ADDRESSES:** To ensure that comments on the information collection are received, OMB recommends that written comments be faxed to the Office of Information and Regulatory Affairs, OMB, Attn: FDA Desk Officer, FAX: 202-395-6974.

**FOR FURTHER INFORMATION CONTACT:** Denver Presley, Jr., Office of the Chief Information Officer (HFA-250), Food and Drug Administration, 5600 Fishers

Lane, Rockville, MD 20857, 301-827-1472.

**SUPPLEMENTARY INFORMATION:** In compliance with 44 U.S.C. 3507, FDA has submitted the following proposed collection of information to OMB for review and clearance:

**Guidance for Industry on "How To Use E-Mail To Submit a Study Protocol"—21 CFR 58.120; 21 CFR 514.117(b); (OMB Control Number 0910-0524)—Extension**

Protocols for nonclinical laboratory studies (safety studies), are required under 21 CFR 58.120 for approval of new animal drugs. Protocols for adequate and well-controlled effectiveness studies are required under 21 CFR 514.117(b). Upon request by the animal drug sponsors, the Center for Veterinary Medicine (CVM), reviews protocols for safety and effectiveness studies that CVM and the sponsor

consider to be an essential part of the basis for making the decision to approve or not approve an animal drug application or supplemental animal drug application. Establishing a process for acceptance of the electronic submission of protocols for studies conducted by sponsors in support of new animal drug applications (NADAs), is part of CVM's ongoing initiative to provide a method for paperless submissions. Sponsors may submit protocols to CVM in paper format. CVM's guidance on how to submit a study protocol permits sponsors to submit a protocol without data as an e-mail attachment via the Internet. CVM's guidance on how to submit a study protocol electronically implements provisions of the Government Paperwork Elimination Act (GPEA). The GPEA required Federal agencies, by October 21, 2003, to provide for the: (1) Option of the electronic maintenance, submission, or disclosure of

information, if practicable, as a substitution for paper; and (2) use and acceptance of electronic signatures, where applicable.

FDA is also seeking an extension of an existing paperwork clearance for form FDA 3536 to facilitate the use of electronic submission of protocols. This collection of information is for the benefit of animal drug sponsors, giving them the flexibility to submit data for review via the Internet.

In the **Federal Register** of November 8, 2006 (71 FR 65534), FDA published a 60-day notice soliciting public comment on the proposed collection of information requirements. In response to that notice, no comments were received.

The likely respondents for this collection of information are sponsors of NADAs.

FDA estimates the burden for this collection of information as follows:

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN<sup>1</sup>

21 CFR Section/ Form No.	No. of Respondents	Annual Frequency per Response	Total Annual Responses <sup>2</sup>	Hours per Response	Total Hours
514.117 (b) 58.120 / Form 3536	25	4.2	103	0.20	20.6

<sup>1</sup>There are no capital costs or operating and maintenance costs associated with this collection of information.

<sup>2</sup>Electronic submissions received between July 1, 2005, and June 30, 2006.

The number of respondents in table 1 of this document is the number of sponsors registered to make electronic submissions (25). The number of total annual responses is based on a review of the actual number of such submissions made between July 1, 2005, and June 30, 2006. 103 x hours per response (.20) = 20.6 total hours.

Dated: February 8, 2007.

Jeffrey Shuren,

*Assistant Commissioner for Policy.*

[FR Doc. E7-2577 Filed 2-14-07; 8:45 am]

BILLING CODE 4160-01-S

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. 2006N-0381]

**Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Mammography Quality Standards Act Requirements**

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

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

**DATES:** Fax written comments on the collection of information by March 19, 2007.

**ADDRESSES:** To ensure that comments on the information collection are received, OMB recommends that written comments be faxed to the Office of Information and Regulatory Affairs, OMB, Attn: FDA Desk Officer, FAX: 202-395-6974.

**FOR FURTHER INFORMATION CONTACT:** Denver Presley, Jr., Office of the Chief Information Officer (HFA-250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-1472.

**SUPPLEMENTARY INFORMATION:** In compliance with 44 U.S.C. 3507, FDA has submitted the following proposed collection of information to OMB for review and clearance.

**The Mammography Quality Standards Act Requirements—21 CFR Part 900 (OMB Control Number 0910-0309)—Extension**

Mammography Quality Standards Act requires the establishment of a Federal certification and inspection program for mammography facilities; regulations and standards for accreditation and certification bodies for mammography facilities, and standards for mammography equipment, personnel, and practices, including quality assurance. The intent of these regulations is to ensure safe, reliable, and accurate mammography on a nationwide level.

Under the regulations, as a first step in becoming certified, mammography facilities must become accredited by an FDA approved accreditation body. This requires undergoing a review of their clinical images and providing the accreditation body with information showing that they meet the equipment, personnel, quality assurance and quality control standards, and have a medical reporting and recordkeeping program, a medical outcomes audit program, and a consumer compliant mechanism. On the basis of this accreditation, facilities are then certified by FDA or an FDA-