

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Office of the Secretary****Findings of Misconduct in Science; Correction****AGENCY:** Office of the Secretary, HHS.**ACTION:** Correction of notice.

**SUMMARY:** This document corrects typographical errors that appeared in the notice published in the January 28, 2010, **Federal Register** entitled "Findings of Misconduct in Science."

**DATES:** *Effective Date:* February 10, 2010.

*Applicability Date:* The correction notice is applicable for the Findings of Misconduct in Science notice published on January 28, 2010.

**FOR FURTHER INFORMATION CONTACT:** Karen Gorirossi or Sheila Fleming at 240-453-8800.

**SUPPLEMENTARY INFORMATION:****I. Background**

In FR Doc. 2010-1706 of January 28, 2010 (75 FR 4566), there were two typographical errors. The errors are identified and corrected in the Correction of Errors section below.

**II. Correction of Errors**

In FR Doc. 2010-1706 of January 28, 2010 (75 FR 4566), make the following corrections:

1. On page 4566, second column, first paragraph, change the date of January 7, 2010, to January 5, 2010, so that the first paragraph reads as follows: "Summary: Notice is hereby given that on January 5, 2010, the Department of Health and Human Services (HHS) Debarring Official, on behalf of the Secretary of HHS, issued a final notice of debarment based on the misconduct in science findings of the Office of Research Integrity (ORI) in the following case:"

2. On page 4566, third column, last line of the first paragraph, change the

date of January 7, 2010, to January 5, 2010, so that the last line of this paragraph reads as follows: "Thus, the scientific misconduct findings set forth above became effective, and the following administrative actions have been implemented for a period of three (3) years, beginning on January 5, 2010."

Dated: January 29, 2010.

**John Dahlberg,**

*Director, Division of Research Investigations, Office of Research Integrity.*

[FR Doc. 2010-2488 Filed 2-9-10; 8:45 am]

**BILLING CODE 4160-17-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and Prevention**

**[30Day-10-0488]**

**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) 639-5960 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

**Proposed Project**

Restrictions on Interstate Travel of Persons (OMB Control No. 0920-0488)—Extension—National Center for Preparedness, Detection, and Control of Infectious Diseases (NCPDCID), Centers for Disease Control and Prevention (CDC).

**Background and Brief Description**

The Centers for Disease Control and Prevention is requesting OMB approval to extend the information collection request, Restrictions on Interstate Travel of Persons (OMB Control No. 0920-0488). This information collection request is scheduled to expire on February 28, 2010.

CDC is authorized to collect this information under 42 CFR 70.5 (Certain communicable diseases; special requirements). This regulation requires that any person who is in the communicable period for cholera, plague, smallpox, typhus, or yellow fever or having been exposed to any such disease is in the incubation period thereof, to apply for and receive a permit from the Surgeon General or his authorized representative in order to travel from one State or possession to another.

Control of disease transmission within the States is considered to be the province of State and local health authorities, with Federal assistance being sought by those authorities on a cooperative basis without application of Federal regulations. The regulations in 42 Part 70 were developed to facilitate Federal action in the event of large outbreaks requiring a coordinated effort involving several states, or in the event of inadequate local control. While it is not known whether, or to what extent situations may arise in which these regulations would be invoked, contingency planning for domestic emergency preparedness is now commonplace. Should these situations arise, CDC will use the reporting and recordkeeping requirements contained in the regulations to carry out quarantine responsibilities as required by law.

The only cost to respondents is their time to submit the application materials. The estimated annualized burden for this data collection is 3,601 hours.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Regulation	Respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
42 CFR 70.3 Application to the State of Destination for a permit.	Traveler .....	2,000	1	15/60
42 CFR 70.3 Copy of material submitted by applicant and permit issued by State health authority.	Attending physician .....	2,000	1	15/60
	State health authority .....	8	250	6/60
42 CFR 70.4 Report by the master of a vessel or person in charge of conveyance of the incidence of a communicable disease occurring while in interstate travel.	Master of a vessel or person in charge of conveyance.	1,500	1	15/60
42 CFR 70.4 Copy of material submitted or state or local health authority under this provision.	State health authority .....	20	75	6/60

## ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Regulation	Respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
42 CFR 70.5 Application for a permit to move from State to State while in the communicable period.	Traveler .....	3,750	1	15/60
	Attending physician .....	3,750	1	15/60

Dated: February 4, 2010.

**Maryam I. Daneshvar,**

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

[FR Doc. 2010–2917 Filed 2–9–10; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[30Day–10–0128]

#### 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) 639–5960 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov). Send written

comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

#### Proposed Project

Congenital Syphilis (CS) Case Investigation and Report Form (CDC73.126), OMB No. 0920–0128, (exp. 02/28/2010)—revision—National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

The purpose of the proposed revision is to continue data collection for congenital syphilis case investigations with a revised “Congenital Syphilis (CS) Case Investigation and Report Form” (CDC73.126). The CS Form is currently approved under OMB No. 0920–0128. This request is to extend clearance for 0920–0128 for an additional three years with revisions to the instrument, and decrease in the burden hours. The

instrument is revised to exclude “reporting city” and “resident city” information blocks from the CS Form.

Reducing congenital syphilis is a national objective in the Department of Health and Human Services (DHHS) Report entitled *Healthy People 2010 (Vol. I and II)*. Objective 25–9 of the DHHS document states the goal to “reduce congenital syphilis to 1 new case per 100,000 live births.” In order to meet this national objective, an effective surveillance system for congenital syphilis must be continued to monitor current levels of disease and progress towards the year 2010 objective. These data will also be used to develop intervention strategies and to evaluate ongoing control efforts. There is no cost to respondents other than their time. In addition to modifications to the form, seven reporting areas have stopped using the paper collection form and are now reporting CS data electronically. As a result, the total estimated annualized burden hours have been reduced from 130 to 63.

## ESTIMATED ANNUALIZED BURDEN HOURS

Types of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State Health Departments .....	Congenital Syphilis (CS) Case Investigation and Report.	10	11	20/60
Territorial Health Agencies .....	Congenital Syphilis (CS) Case Investigation and Report.	3	11	20/60
City and county health departments .....	Congenital Syphilis (CS) Case Investigation and Report.	4	11	20/60

Dated: February 3, 2010.

**Maryam I. Daneshvar,**

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

[FR Doc. 2010–2909 Filed 2–9–10; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[30Day–10–0818]

#### 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) 639–5960 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

#### Proposed Project

Cost and Follow-up Assessment of Administration on Aging (AoA)—Funded Fall Prevention Programs for