### Administrative Record

An administrative record entitled ATSDR–130 will be established for materials pertaining to this notice. All materials received as a result of this notice will be included in the public file available for inspection from 8 a.m. to 4:30 p.m., Monday through Friday, except Federal legal holidays, at the Agency for Toxic Substances and Disease Registry, #4 Executive Park Drive, Suite 2400, Atlanta, Georgia (not a mailing address).

Dated: November 7, 1997.

**Georgi Jones,**

*Director, Office of Policy and External Affairs, Agency for Toxic Substances and Disease Registry.*

[FR Doc. 97–30055 Filed 11–14–97; 8:45 am]

BILLING CODE 4163–70–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

**[30DAY–03–98]**

### 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 Office on (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 Projects

1. Validation of Self-Reported Health Outcomes from the Health Assessment of Persian Gulf War Veterans From Iowa—New—The purpose of this proposed study is to collect additional data to validate health outcomes reported by participants in the Health Assessment of Persian Gulf War Veterans From Iowa. The original data collection consisted of a telephone survey of 3,695 military personnel who served during the time of the Persian Gulf War and listed Iowa as their home of residence. Data will be collected from subjects who participated in the telephone survey to validate the self-report of four health outcomes: cognitive dysfunction, depression, asthma, and multi systemic conditions. Neuropsychological testing will be administered to validate cognitive dysfunction. Structured clinical interviews for mental disorders and paper-and-pencil questionnaires will be administered to validate depression. Lung function assessment, tests of airways hyperactivity, and standard respiratory health questionnaires will be administered to validate asthma. Review of medical records, standard physical examination, and laboratory evaluation will be conducted to validate multi systemic conditions, including chronic fatigue syndrome and fibromyalgia. In addition, a feasibility study will be conducted to explore the usefulness of two databases established by the Department of Defense, the Troop Exposure Assessment Model and the Registry of Unit Locations, to validate self-reported exposures among Persian Gulf War veterans who participated in the Iowa telephone survey.

The total annual burden hours are 947.

| Form names | No. of respondents | No. of responses/ respondent | Avg. burden/ response (in hrs.) |
|---|---|---|---|
| Introductory Call (Attachment 1, Appendix C) | 285 | 1 | 0.166 |
| Scheduling of Appt. (Attachment 1, Appendix C) | 200 | 1 | 0.083 |
| Consent Procedures | 200 | 1 | 0.166 |
| Questionnaire Administration (Attachment 1, Appendix K): | | | |
| a. Medical Questionnaire | 200 | 1 | 0.250 |
| b. Occupational and Exposure History | 200 | 1 | 0.250 |
| c. Mental Health and Social Support History (Battery of standardized psychological tests) | 200 | 1 | 1.583 |
| d. American Thoracic Society Questionnaire | 200 | 1 | 0.166 |
| e. Iowa Persian Gulf Study Questionnaire (Selected questions on asthma) | 200 | 1 | 1.583 |
| f. Iowa Persian Gulf Study Questionnaire (Selected questions on health-related quality of life-SF36) | 200 | 1 | 0.166 |
| Physical Examination | 200 | 1 | 0.500 |
| Lung Function Testing | 200 | 1 | 1.250 |

2. NCHS Laboratory-Based Questionnaire Research (0920–0222)—Revision—The QDRL conducts pretesting activities related to the development of NCHS and other Federal survey questionnaires, such as the National Health Interview Survey (NHIS). These activities mainly involve use of the cognitive interview, in which volunteer respondents (''laboratory subjects'') are administered draft survey questions, and are asked to react to those questions. The cognitive interviewer notes sources of error in these questions, based on problems that subjects have in comprehending the questions and in attempting to recall the information requested. After several cycles of testing of small numbers of respondents (generally 10–12), and development of the questions between testing ''rounds,'' the questionnaires are improved to the point to which they are ready for field testing and household administration. QDRL staff are also engaged in the conduct of general questionnaire design research, in which survey questions are administered to laboratory subjects using different phrasings, or under different administration modes (e.g., face-to-face versus telephone), in order to determine the optimal means for presenting the questions. These investigative pretesting activities are now routinely used by NCHS and by other survey organizations for testing and development purposes, and result in high data quality at a minimal cost, especially in terms of

respondent burden. The total annual burden hours are 500.

| Project | No. of respondents | No. of responses/ respondent | Avg. burden/ response (in hrs.) |
|---|---|---|---|
| QDRL Laboratory Interviews: | | | |
| (1) NHIS modules | 150 | 1 | 1.0 |
| (2) Behavioral Risk Factors Survey | 100 | 1 | 1.0 |
| (3) Other Questionnaire Testing: | | | |
| 1998 | 200 | 1 | 1.0 |
| 1999 | 200 | 1 | 1.0 |
| 2000 | 200 | 1 | 1.0 |
| (4) Perceptions of Quality of Life Project | 100 | 1 | 1.0 |
| (5) Perceptions of Confidentiality Project | 50 | 1 | 1.0 |
| (6) Perception of Statistical Maps Project | 100 | 1 | 1.0 |
| (7) General Methodological Research | 200 | 1 | 0.5 |
| Pilot Household Interviews: | | | |
| 1999 NHIS Modules | 100 | 1 | 1.0 |
| 2000 NHIS Modules | 100 | 1 | 1.0 |
| 2001 NHIS Modules | 100 | 1 | 1.0 |

Dated: November 10, 1997.

**Wilma G. Johnson,**

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

[FR Doc. 97–30099 Filed 11–14–97; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

### Advisory Committee for Injury Prevention and Control Meeting: Change of Time and Location

**Federal Register** Citation of Previous Announcement: 62 FR 54639—dated October 21, 1997.

**SUMMARY:** Notice is given that the meeting time and location of the Advisory Committee for Injury Prevention and Control (ACIPC) has changed. The meeting date, status, purpose, and matters to be discussed announced in the original notice remain unchanged. There will be no change in the meeting location of the Science and Program Review Work Group, which will be meeting prior to the full Committee from 1–1:45 p.m. at the Sheraton Washington Hotel.

*Original Time and Location:* 1–4:30 p.m., Sheraton Washington Hotel, 2660 Woodley Road at Connecticut Avenue, NW, Washington, DC 20008.

*New Time and Location:* 2–4:30 p.m., Omni Shoreham Hotel, 2500 Calvert Street, NW, Washington, DC 20008.

**CONTACT PERSON FOR MORE INFORMATION:** Thomas E. Blakeney, Executive Secretary, ACIPC, National Center for Injury Prevention and Control, CDC, 4770 Buford Highway, NE, M/S K61, Atlanta, Georgia 30341–3724, telephone 770/488–1481.

Dated: November 10, 1997.

**John C. Burckhardt,**

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

[FR Doc. 97–30098 Filed 11–14–97; 8:45 am]

**BILLING CODE 4163–18–M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

### Fees for Sanitation Inspections of Cruise Ships and Consultation Services for Ship Construction and Renovation

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (DHHS).

**ACTION:** Notice and request for public comment.

**SUMMARY:** This notice announces fees for vessel sanitation inspections effective January 1, 1998. The Public Health Service (PHS) proposes an additional vessel size category for ships >90,000 gross register tonnage. The purpose of the new ''Mega'' size category is to more accurately recover costs of the Vessel Sanitation Program (VSP) for conducting sanitary inspections of these super-large ships. The PHS also proposes to begin charging fees for consultation services for ship construction and renovation. The purpose of these charges would be to recover costs of conducting the consultation services for ship construction and renovation.

Public comment is requested on the proposed administrative policies to add the new size category for inspections, and to charge for consultation services for ship construction and renovation.

**DATES:** To ensure consideration, respondents must have their written comments regarding the new size category and charges for services for ship construction and renovation to the VSP by January 2, 1998. Fees for vessel sanitation inspections are effective January 1, 1998.

**ADDRESSES:** Written comments should be sent by mail or facsimile to the Vessel Sanitation Program, Special Programs Group, National Center for Environmental Health, Centers for Disease Control and Prevention (CDC), 4770 Buford Highway, NE., (F16), Atlanta, Georgia 30341–3724, facsimile (770) 488–4127.

**FOR FURTHER INFORMATION CONTACT:** Daniel M. Harper, Program Manager, Vessel Sanitation Program, National Center for Environmental Health, telephone (770) 488–7093 or e-mail DMH2@CDC.GOV, or Dave Forney, Public Health Advisor, Division of Environmental Hazards and Health Effects, National Center for Environmental Health, telephone (770) 488–7333 or e-mail DLF1@CDC.GOV.

**SUPPLEMENTARY INFORMATION:**

#### Purpose and Background

The Centers for Disease Control and Prevention (CDC) operates a vessel sanitation inspection program for cruise ships with international itineraries and calling at United States ports under sections 361–369 (42 U.S.C. 264–272) of the Public Health Service Act, as amended. Regulations for the inspection program appear at 42 CFR part 71.