material fact for resolution through administrative review. After reviewing the petition, FDA will decide whether to grant or deny the petition and will publish a notice of its decision in the **Federal Register**. If FDA grants the petition, the notice will state the issue to be reviewed, the form of the review to be used, the persons who may participate in the review, the time and place where the review will occur, and other details.

Petitioners may, at any time on or before January 9, 1998, file with the Dockets Management Branch (address above) two copies of each petition and supporting data and information, identified with the name of the device and the docket number found in brackets in the heading of this document. Received petitions may be seen in the office above between 9 a.m. and 4 p.m., Monday through Friday.

This notice is issued under the Federal Food, Drug, and Cosmetic Act (secs. 515(d), 520(h) (21 U.S.C. 360e(d), 360j(h))) and under authority delegated to the Commissioner of Food and Drugs (21 CFR 5.10) and redelegated to the Director, Center for Devices and Radiological Health (21 CFR 5.53).

Dated: October 31, 1997.

Joseph A. Levitt,

Deputy Director for Regulations Policy, Center for Devices and Radiological Health.

[FR Doc. 97–32216 Filed 12–9–97; 8:45 am] BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-320]

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding the 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: Reinstatement, without change, of a previously approved collection for which approval has expired; Title of Information Collection: Corrective Action Plan (Medicaid Eligibility Quality Control); Form No.: HCFA-320; Use: Medicaid eligibility quality control (MEQC) is a State-administered system designed to improve the management of the Medicaid program and reduce the level of misspent Medicaid funds. Each month, States select a sample of Medicaid cases from their inventory of eligible cases and conduct QC reviews to determine the accuracy of the eligibility determinations. This Corrective Action Plan allows HCFA to determine the types of corrective actions used by States. Sound and effective corrective actions used by one State to correct causes of errors and reduce erroneous Medicaid payments are shared with other States experiencing the same types of error-causing problems. Frequency: Annually; Affected Public: State, Local or Tribal Government; Number of Respondents: 51; Total Annual Responses: 51; Total Annual Hours: 20,400.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, E-mail your request. including your address and phone number, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Information Services, Information Technology Investment Management Group, Division of HCFA Enterprise Standards, Attention: John Rudolph, Room C2-26-17, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: December 2, 1997

John P. Burke III,

HCFA Reports Clearance Officer, Division of HCFA Enterprise Standards, Health Care Financing Administration.

[FR Doc. 97-32320 Filed 12-9-97; 8:45 am]

BILLING CODE 4120-03-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Availability of the HRSA Competitive Grants Preview

Correction

In notice document 97–26645 appearing on page 52905 of the issue on Thursday, October 9, 1997, make the following correction:

On page 52905, in the second column under the heading "Centers of Excellence (COE)" in the sixth paragraph labeled as "Estimated Amount of This Competition," the amount should read "\$1,500,000."

Dated: December 3, 1997.

Claude Earl Fox,

Acting Administrator.

[FR Doc. 97–32277 Filed 12–9–97; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Final Review Criteria for Grants for the National Research Service Awards: Primary Care Research for Fiscal Year

The Health Resources and Services Administration (HRSA) National Research Service Awards: Primary Care Research (NRSA) institutional training grants (T32) are provided to accredited public or private nonprofit schools of medicine, osteopathy, dentistry, or a public or private nonprofit hospital or other entity which is affiliated with an entity that has received grants or contracts under section 747, 748, or 749 of the PHS Act, agrees to use the funding for research in primary medical care, and is located in a State. The NRSA program is authorized by Title IV, Section 487(d)(3)(A) of the Public Health Service Act.

A notice was published in the **Federal Register** at 62 FR 49521 on September 22, 1997, for review criteria for the above-referenced program. No comments were received within the 30 day comment period. Therefore, the review criteria remain as proposed.

Final Review Criteria

The following criteria are for National Research Service Awards in primary care research:

1. Program Characteristics:

Objectives, design, and direction of the research training program including the probability of achieving stated goals.

Substantive and methodological content of the proposed program and its relevance to the Program Objectives noted above, including relevant descriptions of courses and experiential opportunities offered and/or required.

The extent to which proposed approaches address areas in need of research given changes in the health care delivery system.

2. Program Support and Organizational Structure and Plans

The institutional training environment, including the level of institutional commitment, quality of the facilities, availability of appropriate courses, and availability of research support.

Caliber of preceptors as researchers, including successful research support;

Organizational structure of the proposed training program, including delineation of administrative responsibilities for planning, oversight, and evaluation.

Demonstration of cooperation by any proposed collaborating facilities, institutions, or departments in providing research experiences and/or sites for trainees, including (where applicable) documentation of mechanisms by which trainees will be integrated into the ongoing primary medical care research activities of other entities.

When appropriate, the concomitant research training of health-professional postdoctorates (e.g., individuals with the M.D., D.O., D.D.S./D.M.D., etc.) with basic science postdoctorates (e.g., individuals with a Ph.D., etc.) or linkages with basic science department.

Demonstration of extent to which and ways in which HRSA support will be (has been in the past) leveraged through the use of other Federal and private resources to maximize primary medical care research training within the institution.

Availability of other relevant support.

3. Trainee Recruitment & Retention Plans

Recruitment and selection plans for trainees and the availability of highquality candidates, including minority trainees (see below for details).

When appropriate, record of the research training program in retaining health-professional postdoctoral trainees for at least 2 years in research training or other research activities.

4. Program Record and Evaluation Plans

Past research training record of both the program and the designated preceptors as determined by the success of former trainees in seeking further career development and in establishing productive scientific careers. Evidence of further career development can include receipt of fellowships, career awards, a prestigious training appointment, and similar accomplishments. Evidence of a productive scientific career can include a record of successful competition for individual research grants, receipt of special honors, a record of publications, receipt of patents, promotion to prestigious positions in academe, industry, or health policy and any other appropriate measure of success consistent with the nature and duration of the training received.

Record of the research training program in recruiting and retaining trainees, noting past annual success rates in filling committed slots.

Proposed methods for monitoring and evaluating performance of trainees and the overall program, record of trainees in obtaining individual research awards or fellowships following training, and in establishing careers in primary medical care research.

5. Budget

Reasonableness of the proposed budget, including number and levels of trainees, in relation to the research training.

For additional information, please contact: Enrique Fernandez, M.D., Division of Medicine, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 9A–20, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone: (301) 443–1467, FAX: (301) 443–8890.

Dated: December 3, 1997.

Claude Earl Fox,

Acting Administrator.

[FR Doc. 97–32279 Filed 12–9–97; 8:45 am] BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Final Review Criterion for Grants for Primary Care Training Programs for Fiscal Year 1998

Grants for Primary Care Training programs are authorized under sections 747(a) and (b), 748, 750 and 751, title VII of the Public Health Service Act, as amended by the Health Professions Education Extension Amendments of 1992, Pub. L. 102–408, dated October 13, 1992. These grant programs include:

Grants for Predoctoral Training in Family Medicine

Grants for Faculty Development in Family Medicine

Grants for Graduate Training in Family Medicine

Grants for Establishment of Departments of Family Medicine

Grants for Residency Training in General Internal Medicine and General Pediatrics Grants for Faculty Development in General Internal Medicine and General Pediatrics Grants for Physician Assistant Training Grants for Podiatric Primary Care Residency Training

A notice was published in the **Federal Register** at 62 FR 46502 on September 3, 1997, for a review criterion for the above-referenced programs. No comments were received within the 30 day comment period. Therefore, the review criterion remains as proposed.

Final Review Criterion

The following criterion has been added to the existing review criteria established in 61 FR 52034 on October 4, 1996:

5. Project impact/influence in shaping the curriculum, program, department, institution and the community.

The review criterion is finalized in this combined notice, rather than individual program announcements, to provide consistent review of all primary care medical education grant applications.

If additional information is needed, please contact: Enrique Fernandez, M.D., Division of Medicine, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 9A–20, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone: (301) 443–1467, FAX: (301) 443–8890.

Dated: December 4, 1997.

Claude Earl Fox,

Acting Administrator.

[FR Doc. 97–32280 Filed 12–9–97; 8:45 am] BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Vaccine Injury Compensation Program; List of Petitions Received

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice.