

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Office of the Secretary**

[Document Identifier: OS-0990-0260]

Agency Information Collection Activities: Proposed Collection; Comment Request*Agency:* Office of the Secretary, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), 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 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.

#1 Type of Information Collection Request: Extension of Currently Approved Collection;

Title of Information Collection: Protection of Human Subjects: Common Rule (56 FR 28003);

Form/OMB No.: OS-0990-0260;

Use: The Common Rule (56 FR 28003) establishes Federal policy for the protection of human subjects in research that is conducted or supported by Federal departments or agencies that are signatories to the Common Rule. The 1991 Common Rule requires institutions engaged in research which is covered by the Federal policy to establish procedures to report, disclose and maintain required information including information regarding the informed consent of research subjects and an institution's assurance of the establishment of an Institutional Review Board.

Frequency: Recordkeeping, Reporting on occasion;

Affected Public: State, local, or tribal governments, Federal government, business or other for-profit, not-for-profit institutions; and individuals or households;

Annual Number of Respondents: 5,000;

Total Annual Responses: 446,334;

Average Burden Per Response: 2.5 hours;

Total Annual Hours: 1,105,834.

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 mailed within 30 days of this notice directly to the Desk Officer at the address below: OMB Desk Officer: John Kraemer, OMB Human Resources and Housing Branch, Attention: (OMB #0990-0260), New Executive Office Building, Room 10235, Washington DC 20503.

Dated: August 8, 2005.

Robert E. Polson,

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

[FR Doc. 05-16351 Filed 8-17-05; 8:45 am]

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

[30Day-05-0624]

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 via fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

An Evaluation Survey on the Use and Effectiveness of Internet SAMMEC, (0920-0624)—Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Since 1987, CDC has used the Smoking-Attributable Mortality, Morbidity, and Economic Costs (SAMMEC) software to estimate the disease impact of smoking for the nation, states, and large populations. The Internet version of the SAMMEC software was released in 2002, and it contains two distinct computational programs, Adult SAMMEC and Maternal and Child Health SAMMEC, which can be used to estimate the adverse health outcomes and disease impact of smoking on adults and infants.

Since the release of Internet SAMMEC, more than 1,230 tobacco control professionals in the State health departments and other tobacco control institutions in the country have used SAMMEC to generate the data they need for their projects. Some of them have provided comments and sent requests for assistance. Of those using SAMMEC, 1,000 will be recruited for each of the 2 surveys planned over a three year period. Therefore, an average of 667 respondents will complete the survey annually.

The purpose of this survey is to evaluate the use and effectiveness of the SAMMEC software and identify ways to improve the system so that it will better meet the needs of the users in tobacco control and prevention. There are no costs to the respondents except for their time in completing the questionnaire. The estimated total annualized burden is 167 hours.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	No. of respondents	No. of responses per respondent	Average burden per response (in hrs.)
Tobacco Control Professionals/Internet SAMMEC Users	667	1	15/60

Dated: August 11, 2005.
Joan F. Karr,
Acting Reports Clearance Officer, Centers for Disease Control and Prevention.
[FR Doc. 05-16365 Filed 8-17-05; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-05-0680]

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

Model Performance Evaluation Program (MPEP), Severe Acute Respiratory Syndrome (SARS) MPEP

OMB No. 0920-0680—Revision—
Division of Laboratory Systems, Center for Health Information and Services (CoCHIS), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

To support our mission of improving public health and preventing disease through continuously improving laboratory practices, the Model Performance Evaluation Program (MPEP), Division of Public Health Partnerships, Coordinating Center for Health Information and Services, in collaboration with the Coordinating Center for Infectious Diseases, Centers for Disease Control and Prevention, intends to provide a new SARS-associated Coronavirus testing Model Performance Evaluation Program (SARS MPEP). This program will offer external performance evaluation (PE) for SARS antibody (Ab) testing and SARS Ribonucleic Acid (RNA) Reverse Transcriptase—Polymerase Chain Reaction (RT-PCR) testing. A SARS outbreak or epidemic could recur at any time. Therefore, it is imperative that the CDC ensure all state public health department laboratories, Laboratory Response Network laboratories and other laboratories designated by CDC remain proficient in performing SARS testing. For this reason, it is of critical public health importance at this time, that the CDC develop and maintain a performance evaluation program for SARS. Participation in PE programs is

expected to lead to improved SARS testing performance because participants have the opportunity to identify areas for improvement which will help to ensure accurate testing as a basis for development of SARS prevention and intervention strategies.

This external quality assessment program will be made available at *no cost* (for receipt of sample panels) to 54 state laboratories. This program will offer laboratories/testing sites opportunities for:

- (1) assuring that the laboratories/testing sites are providing accurate tests through external quality assessment,
- (2) improving testing quality through self-evaluation in a nonregulatory environment,
- (3) testing well characterized samples from a source outside the test kit manufacturer,
- (4) discovering potential testing problems so that laboratories/testing sites can adjust procedures to eliminate them,
- (5) comparing individual laboratory/testing site results to others at state level, and
- (6) consulting with CDC staff to discuss testing issues.

Participants in the MPEP SARS will be required to submit results twice a year after testing mailed performance evaluation samples.

There are no costs to the respondents other than their time. The total estimated annualized burden hours are 18.

ESTIMATED ANNUALIZED BURDEN HOURS

Form name	No. of respondents	Frequency of responses	Average burden per response (in hours)
SARS Testing Results Booklet	54	2	10/60

Dated: August 11, 2005.
Joan F. Karr,
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

[60Day-05-05CS]

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