

Respondents	Number of respondents	Number of responses/ respondent	Average burden/ response (in hrs)	Total burden (in hours)
Normal Controls. (PGW/Non-PGW Vets denying symptoms of asthma). Questionnaire (ATS and Adult Respiratory Health); Pulmonary Function Tests (spirometry, DLCO, lung volumes); Histamine Challenge	50	1	2.25	112.5
TOTAL				337.5

Dated: March 11, 1999.

Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control And Prevention

[INFO-99-13]

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 the Centers for Disease Control and Prevention is providing opportunity for public comment on proposed data collection projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 639-7090.

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 collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques for other forms of information technology. Send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received with 10 days of this notice.

Proposed Project

1. PHS Supplements to the Application for Federal Assistance SF 424 (0920-0428)—Reinstatement—The Centers for Disease Control and Prevention (CDC) is requesting an emergency clearance for the three-year extension and revision of OMB approval for continued use of the Supplements to the Request for Federal Assistance Application (SF-424). We also plan on modifying the SF 424 form. The Checklist, Program Narrative, and the Public Health System Impact Statement (third party notification) (PHSIS) are a

part of the standard application for State and local governments and for private non-profit and for-profit organizations when applying for financial assistance from PHS grant programs. The Checklist assists applicants to ensure that they have included all required information necessary to process the application. The Checklist data helps to reduce the time required to process and review grant applications, expediting the issuance of grant awards. The PHSIS Third Party Notification Form is used to inform State and local health agencies of community-based proposals submitted by non-governmental applicants for Federal funding. In addition, we are adding two new supplements to the information collection request. One form will be used by CDC and the other by SAMHSA.

The current OMB approval for the supplements was previously submitted by the Department of Health and Human Services (DHHS), Office of the Assistant Secretary of Health (OASH) under OMB number 0937-0189. This submission is time-sensitive and requests emergency approval because these supplements will be utilized by several agencies within DHHS immediately after clearance is granted. The total annual cost to the respondents is estimated to be \$1,184,452.

Respondents	Number of respondents	Number of responses/ respondent	Average burden/ response (in hrs.)	Total burden (in hrs.)
State and local health departments; non-profit and for-profit organizations	7,643	1	4.215	32,215
Total				32,215

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Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-09-99]

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) 639-7090. 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 Project

1. Validity of Recall of Prostate and Colorectal Cancer Screening Tests—New—The National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Division of Cancer Prevention and Control. Prostate and colorectal cancer are among the leading causes of cancer deaths in the U.S. Prostate cancer screening has increased rapidly during the past few years although it is unknown whether screening decreases prostate cancer mortality and conflicting screening

guidelines exist. Evidence suggests that colorectal cancer screening can save lives and efforts are under way to increase participation in screening. An increasing number of people are served by managed care organizations where they may receive cancer screening tests. However, for both types of cancer little screening information is available on screening guidelines for practitioners of managed care organizations (HMOs). Therefore, the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Cancer

Prevention and Control, intends to conduct a pilot survey of HMOs to obtain information on the validity of recall on prostate and colorectal cancer screening tests. Members of three prepaid health plans (HMO's) will be interviewed by telephone, and medical records will be abstracted. Information from this pilot study will allow the Program to explore whether screening rates can be determined from self-reports and whether future studies are warranted. The total annual burden hours are 573.

Respondents	Number of respondents	Number of responses/ respondent	Average burden/ respondent (in hrs.)
HMOs	2,293	1	0.25

2. Evaluation of the Use of Data Transmitted Through the National Electronic Telecommunications System for Surveillance (NETSS)—New—Epidemiology Program Office (EPO). A questionnaire has been designed to collect information for the project entitled: "Evaluation of the Use of Data Transmitted Through the National Electronic Telecommunications System for Surveillance (NETSS)". The purpose of the project is to develop and implement a comprehensive evaluation strategy which will provide EPO, and

the National Center for Infectious Diseases (NCID), Centers for Disease Control and Prevention (CDC) with the capacity to assess the degree to which data processed locally and at CDC after transmission through NETSS is used by State and Local Health Departments. This evaluation will encompass: (1) Dissemination of processed data, (2) Access to disseminated data, and (3) Use of accessed data for analysis by State and Local health authorities. The information gathered will be analyzed, in conjunction with data collected from

other sources, to address these issues. The results of the project will assist the EPO, and NCID in carrying out CDC's mission of protecting the health of the United States public, through improved use of surveillance data by public health officials at local, state, and national levels. In order to focus efforts and resource allocation, a clear understanding of the barriers to access and use of NETSS data is needed. The total annual burden hours are 129.

Respondents	Number of respondents	Number of responses/ respondent	Average burden/ respondent (in hrs.)
State and Territorial Epidemiologists	56	1	0.25
CDC Program Staff who work with NETSS	40	0.25
State Infectious Disease Control Staff who work with NETSS	42	1	1.5
State and Local Health Departments who work with VPD* from NETSS	28	1	1.5

* vaccine-preventable diseases

Dated: March 11, 1999.

Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 99018]

Water Intervention Studies To Determine the Fraction of Gastrointestinal Illness Attributable to Drinking Water; Notice of Availability of Funds; Amendment

A notice announcing the availability of Fiscal Year 1999 funds for the Water Intervention Studies to Determine the Fraction of Gastrointestinal Illness Attributable to Drinking Water was published in the **Federal Register** on

March 8, 1999, [Vol. 64 FR No. 44]. The notice is amended as follows:

On page 11025, second column, under "C. Availability of Funds", the first paragraph should read:

Approximately \$1,800,000 is available in FY 1999 to fund approximately two awards. It is expected that the average award will be \$900,000 ranging from \$900,000 to \$1,800,000. It is expected that the awards will begin on or about August 15, 1999, and will be made for a 12-month budget period within a project period of up to two years. The funding estimate may change.