Proposed Project

Exposure to Aerosolized Brevetoxins during Red Tide Events (OMB No. 0920–0494)—Reinstatement with change—National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Karenia brevis (formerly Gymnodinium breve) is the marine dinoflagellate responsible for extensive blooms (called Florida red tides) that form in the Gulf of Mexico. K. brevis produces potent toxins, called brevetoxins, which have been responsible for killing millions of fish and other marine organisms. The biochemical activity of brevetoxins is not completely understood and there is still little information regarding human health effects from environmental exposures, such as inhaling brevetoxin that has been aerosolized and swept onto the coast by offshore winds. The National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC) has recruited people who work along the coast of Florida and who are

periodically occupationally exposed to aerosolized red tide toxins.

NCEH administered a baseline respiratory health survey and conducted pre- and post-shift pulmonary function tests (PFTs) during a time when there is no red tide reported near the area. When a red tide developed, NCEH administered a symptom survey and conducted PFTs. NCEH compared symptoms reported before the shift with symptoms reported after the shift. NCEH also examined changes in PFT test results (post-shift values compared to pre-shift values). NCEH did these comparisons during a time when there was no red tide and during a time when there was a red tide and then examined the data to see if red tide exposure had an effect on symptom reports or PFT results.

NCEH requests a reinstatement with change of data collection procedures for the previously approved project for an additional three years. The respondents for this reinstatement with change are a recruited group of approximately 25 lifeguards (aged ≥18) who work along the coast of Florida and who periodically are occupationally exposed to aerosolized red tide toxins. The lifeguards and employees of the

Department of Environmental Protection, (Sarasota County), Florida were recruited via a posted notice requesting volunteers. NCEH plans to re-contact study participants previously enrolled and add additional lifeguards hired previously to work at the relevant beaches.

Unfortunately, the exposures experienced by the study cohort have been minimal, and NCEH plans to conduct another study (using the same symptom surveys and PFTs) during a more severe red tide event. First, NCEH wants to quantify the levels of cytokines in nasal exudates to assess whether they can be used to verify exposure and to demonstrate a biological effect (i.e., allergic response) following inhalation of aerosolized brevetoxins. NCEH will collect nasal exudates at the same time the PFTs are done. We propose to add a component to this study to assess whether loratidine, an antihistamine available in over-the-counter products, such as Claritin, can relieve the upper respiratory symptoms induced by inhaling aerosolized brevetoxins during Florida red tides.

There is no cost to respondents other than their time. The total estimated annual burden hours are 16.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Instrument type	No. of respondents	No. of responses per respondent	Average burden per response (in hours)
New study participants	Pulmonary Health Questionnaire	10	1 6	20/60
Lifeguards (previous participants and new).	Pre- and Post-Shift Red Tide Questionnaire.	25		5/60

Dated: February 12, 2009.

Maryam I. Daneshvar,

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

[FR Doc. E9–3651 Filed 2–19–09; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-09-0762]

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 404–639–5960 or send comments to Maryam Daneshvar, Acting CDC 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 collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques

or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Formative Research to Inform an HIV Testing Social Marketing Campaign for African American Men Who Have Sex With Men (MSM), (OMB No. 0920–0762)—Revision—National Center for HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases, and Tuberculosis Elimination Programs (NCHHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The purpose of the proposed study is to conduct formative research to inform the development of the HIV Testing Social Marketing Campaign for African American MSM, a CDC-sponsored social marketing campaign aimed at increasing HIV testing rates among young, African American MSM. The study entails conducting interviews with a sample of African American MSM, ages 18 to 44 to: (1) Explore participants' knowledge, attitudes and beliefs about HIV and HIV testing to inform the development of campaign messages; (2) identify the most motivating approach, supporting data, and key messages for materials

development; (3) test creative concepts, potential campaign themes, logos and names; and (4) test creative materials developed based on the findings from the previous phases of the research. Findings from this study will be used by CDC and its partners to inform current and future program activities.

A total of 288 participants will be screened for eligibility in order to find 144 people who will participate in an interview. All interview participants (n=144) will complete a short "Paper and Pencil" questionnaire. There are no costs to the respondents other than their time.

ESTIMATED ANNUALIZED BURDEN TABLE

Types of data collection	No. of respondents	No. of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Screener	288	1	10/60	48
Consent Form	144	1	5/60	12
Interview	144	1	1	144
Paper and Pencil Survey	144	1	10/60	24
Total				228

Dated: February 13, 2009.

Maryam I. Daneshvar,

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

[FR Doc. E9–3654 Filed 2–19–09; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day-09-0762]

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 404–639–5960 or send comments to Maryam Daneshvar, Acting CDC 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 collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Formative Research to Inform an HIV Testing Social Marketing Campaign for African American Men Who Have Sex With Men (MSM), (OMB No. 0920–0762)—Revision—National Center for HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases, and Tuberculosis Elimination Programs (NCHHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The purpose of the proposed study is to conduct formative research to inform the development of the HIV Testing Social Marketing Campaign for African American MSM, a CDC-sponsored social marketing campaign aimed at increasing HIV testing rates among young, African American MSM. The study entails conducting interviews with a sample of African American MSM, ages 18 to 44 to: (1) Explore participants' knowledge, attitudes and beliefs about HIV and HIV testing to inform the development of campaign messages; (2) identify the most motivating approach, supporting data, and key messages for materials development; (3) test creative concepts, potential campaign themes, logos and names; and (4) test creative materials developed based on the findings from the previous phases of the research. Findings from this study will be used by CDC and its partners to inform current and future program activities.

A total of 288 participants will be screened for eligibility in order to find 144 people who will participate in an interview. All interview participants (n=144) will complete a short "Paper and Pencil" questionnaire. There are no costs to the respondents other than their time.

ESTIMATED ANNUALIZED BURDEN TABLE

Types of data collection	No. of respondents	No. of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Screener Consent Form Interview Paper and Pencil Survey	288 144 144 144	1 1 1	10/60 5/60 1 10/60	48 12 144 24
Total				228