Estimated Annual Costs to the Federal Government

The total cost of this contract to the government is \$424,000. The project

extends over four years, but this request is for a one year OMB clearance. Exhibit 3 shows a breakdown of the total cost as well as the annualized cost.

EXHIBIT 3—ESTIMATED TOTAL AND ANNUALIZED COST

Cost component	Total cost	Annualized
Project Development Data Collection Activities Data Processing and Analysis Reporting of results Project Management	\$125,000 90,000 30,000 30,000 164,552	\$31,250 22,500 7,500 7,500 41,138
Total Costs	439,552	109,888

Request for Comments

In accordance with the Paperwork Reduction Act, comments on AHRO's information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ healthcare research and healthcare information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) 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 upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: April 22, 2011.

Carolyn M. Clancy,

Director.

[FR Doc. 2011–11302 Filed 5–10–11; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-11-11EX]

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 and send comments to Daniel L. Holcomb, 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

Evaluation of Enhanced Implementation of the "Learn the Signs. Act Early." Campaign in 4 Target Sites,—New—National Center on Birth Defects and Developmental Disabilities (NCBDDD), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

CDC's "Learn the Signs Act Early" campaign is a health education campaign that aims to improve parent awareness of early child development and improve early identification of children with autism spectrum disorders and other developmental

disabilities. The proposed information collection activity will allow necessary evaluation of the supplemental program to determine if the program has achieved its intended goals; to identify efficient implementation strategies that reach the greatest numbers of parents of young children within defined population groups; and determine the effectiveness of those strategies in changing parents' awareness of the campaign and behavior related to monitoring early development.

This information collection activity will consist of two surveys of parents of young children in the demographic groups and geographic areas targeted by this enhanced implementation of the "Learn the Signs Act Early" campaign; one at baseline (before campaign implementation) and one at follow-up (near implementation end). The surveys will capture information from the program's target audience to determine campaign reach and exposure among this group, as well as identify change in knowledge, awareness, and behavior related to the campaign and monitoring early child development. The project aims to attain 250 completed parent surveys from each of the 4 sites at baseline and again at follow-up (for a total of 2,000 completed surveys). It is estimated that 2400 respondents will have to be screened in order to recruit 2000 total survey participants.

Participants will be recruited to participate in one of two surveys that will be conducted in the following four target areas: Washington: Yakima, Benton, Franklin, and Walla Walla counties; Missouri: St. Louis City; Utah: Salt Lake County; and Alaska: Anchorage, Palmer, Wasilla, Homer, Kenai.

This request is to obtain OMB clearance for two years. There are no costs to the respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of re- sponses per respondent	Average burden per response (in hours)	Total burden (in hours)
Parents	Screener	2400 1000 1000	1 1 1	3/60 10/60 10/60	120 167 167
Total					454

Dated: May 5, 2011.

Daniel L. Holcomb,

Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. 2011–11520 Filed 5–10–11; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-11-11BZ]

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) 639–5960 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

Quantitative Survey of Physician Practices in Laboratory Test Ordering and Interpretation—NEW—Office of Surveillance, Epidemiology, and Laboratory Services (OSELS), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Quantitative Survey of Physician Practices in Laboratory Test Ordering and Interpretation is a national systematic study investigating how the rapid evolution of laboratory medicine is affecting primary care practice. This will be a new collection. The survey will be funded in full by the Office of Surveillance, Epidemiology, and Laboratory Services (OSELS) of the Centers for Disease Control and Prevention (CDC).

The survey follows focus groups of fewer than ten participants with primary care physicians that identified common concerns and problems with laboratory test ordering and test interpretation. The survey will quantify the prevalence and impact of the issues identified within the focus groups. Understanding the relative importance of physician issues in the effective and efficient use of laboratory medicine in diagnosis will guide future efforts of the CDC to improve primary care practice and improve health outcomes of the American public.

The survey covers basic physician demographic characteristics (year of birth, gender, years in practice,

physician specialty, professional memberships, practice size and practice setting), practice-related questions including number and type of patients seen weekly. The majority of the questions request information about physician decision making processes involved in test ordering and interpretation.

The effective use of laboratory testing is an important component of the diagnostic process within physician practices. The field of laboratory medicine is undergoing rapid change with the continuing introduction of new tests, increased focus on evidence-based medicine, the deployment of Electronic Health Records, and the wide availability to physicians of electronic information resources, interactive diagnostic tools, and computerized order entry systems. To date, no systematic study has been conducted to investigate how physicians are incorporating these laboratory testing innovations into their day-to-day practices. This survey seeks to provide insight into how physicians integrate laboratory medicine into their routines, and how they manage any challenges they encounter.

The survey will be conducted on a national sample of primary care physicians. There are no costs to respondents except their time. The total estimated annualized burden hours are 373.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of re- sponses per respondent	Avg. burden per response (in hrs)
Family Practice Physicians & Internal Medicine Generalists	Laboratory Practices	1600	1	14/60

Daniel Holcomb,

Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. 2011-11528 Filed 5-10-11; 8:45 am]

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