

to improve the timeliness of hypothesis-generating analyses and reducing the time it takes to pinpoint how and where contamination events occur.

Both the content of the questionnaire (the core elements) and the format were developed through a series of working groups comprised of local, state, and federal public health partners. The questionnaire is designed to be administered over the phone by public

health officials to collect core elements data from case-patients or their proxies. It is designed to be used when a multistate cluster of enteric disease infections is identified. Data collected during a multistate investigation of an enteric disease cluster will be pooled and analyzed at the CDC in order to develop hypotheses about potential sources of infection.

The total estimated annualized burden for the Standardized National Generating Questionnaire is 3,000 hours (approximately 4,000 individuals identified during the hypothesis-generating phase of outbreak investigations x 45 minutes/response). There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Individuals	Standardized National Hypothesis Generating Questionnaire (Core Elements).	4,000	1	45/60	3,000
Total					3,000

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30-Day-12-0040]

Agency Forms Undergoing Paperwork Reduction Act Review

The Agency for Toxic Substances and Disease Registry (ATSDR) 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 (404) 639-7570 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

NCEH/ATSDR Exposure Investigations (EIs) [OMB NO: 0923-0040, Expiration Date 11/30/2012] – Revision – The National Center for Environmental Health (NCEH), and the Agency for Toxic Substances and Disease Registry (ATSDR), and the Centers for Disease Control and Prevention (CDC).

Background and Brief Description

EIs are an approach developed by ATSDR that employs targeted biologic (e.g., urine, blood, hair samples) and environmental (e.g., air, water, soil, or food) sampling to determine whether people are or have been exposed to unusual levels of pollutants at specific locations (e.g., where people live, spend leisure time, or anywhere they might come into contact with contaminants under investigation). After a chemical release or suspected release into the environment, ATSDR's EIs are used by public health professionals, environmental risk managers, and other decision makers to determine if current conditions warrant intervention strategies to minimize or eliminate human exposure. EIs are usually requested by officials of a state health agency, county health departments, the Environmental Protection Agency, the general public, and ATSDR staff.

ATSDR has been conducting EIs since 1995 throughout the United States. All of ATSDR's biomedical assessments and some of the environmental investigations involve participants. Participation is completely voluntary. To assist in interpreting the sampling results, a survey questionnaire appropriate to the specific contaminant is administered to participants. ATSDR collects contact information (e.g., name, address, phone number) to provide the participant with their individual results. Name and address information are broken into nine separate questions (data fields) for computer entry. General information, which includes height, weight, age, race, gender, etc., is also collected primarily on biomedical investigations to assist with results

interpretation. General information can account for approximately 20 questions per investigation. Some of this information is investigation-specific; not all of these data are collected for every investigation. ATSDR is seeking a revision of our approval for use of a set of 61 general information questions.

ATSDR also collects information on other possible confounding sources of chemical(s) exposure such as medicines taken, foods eaten, hobbies, jobs, etc. In addition, ATSDR asks questions on recreational or occupational activities that could increase a participant's exposure potential. That information represents an individual's exposure history. To cover those broad categories, ATSDR is also seeking a revision to our approval for the use of sets of topical questions. Of these, we use approximately 12-20 questions about the pertinent environmental exposures per investigation. This number can vary depending on the number of chemicals being investigated the route of exposure (e.g., breathing, eating, touching), and number of other sources of the chemical(s) (e.g., products used, jobs).

Typically, the number of participants in an individual EI ranges from 10 to 100. Questionnaires are generally needed in less than half of the EIs (approximately 7 per year).

The subject matter for the complete set of topical questions includes the following:

(1) Media specific which includes: Air (indoor/outdoor); water (water source and plumbing); soil, and food gardening, fish, game, domestic animals (e.g., chickens).

(2) Other sources such as: occupations; hobbies; household chemical uses and house construction

characteristics; lifestyle (e.g., smoking); medicines and/or health conditions, and

foods. There are no costs to respondents other than their time.

ATSDR is requesting approval to conduct this information collection for

three years. The estimated annualized burden hours are 350.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Exposure Investigation Participants	Chemical Exposure Questions	700	1	30/60

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-12-120G]

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 404-639-7570 and send comments to Kimberly S. Lane, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an email 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

Science to Practice: Developing and Testing a Marketing Strategy for Preventing Alcohol-related Problems in College Communities—NEW—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Each year, 1,700 college students die and more than 1.4 million are injured as a result of alcohol-related incidents. Additionally, about 25% of students report negative academic consequences due to alcohol (Engs *et al.*, 1996; Presley *et al.*, 1996a, 1996b; Wechsler *et al.*, 2002). Despite the enormous public health burden of college-age alcohol misuse, there have been few rigorous evaluations of environmental strategies to address alcohol misuse in college settings. Environmental strategies typically involve implementing and enforcing policies that change the environments that influence alcohol-related behavior and subsequent harm. Further, studies show that the typical lag time between identifying effective interventions and obtaining widespread adoption can stretch to well over a decade. Given the number of students harmed, there is an urgent need to develop more efficient and timely strategies for moving effective science to widespread practice. This project will address this exact issue by

systematically developing a marketing strategy for The Safer University Intervention, a comprehensive, community-based environmental prevention program with proven efficacy in reducing intoxication and alcohol-impaired driving among college students.

The CDC proposes an on-line information collection, that will take place during the spring semester of the 2012-2013 academic year, and will constitute a follow-up to a marketing effort targeting a national sample of 4-year colleges and universities. The follow-up comprises a survey of key informants from the sampled institutions and key leaders of the surrounding community.

The CDC will use the information gathered from the on-line survey to: (1) Develop and revise customized marketing and program materials targeting potential campus and community stakeholders; and (2) inform strategies for the marketing plan.

The respondents targeted for the on-line survey include: College Administrators and staff, campus and municipal police; as well as selected community leaders. A total of up to 160 Institutions of Higher Education (IHE) will be contacted with a maximum of 12 participants per IHE. A maximum of 1,800 respondents will be contacted by email and asked to forward the email and participate in the on-line survey. Questions of a sensitive nature will not be asked. The amount of time required for a respondent to take part in the survey is estimated to be less than 1 hour. We estimate a total maximum of 1,800 burden hours.

There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form	Number of respondents	Number of responses per respondent	Average burden per respondent (in hours)	Total burden hours
College Administrators and staff	On-line survey	600	1	1	600
Campus and Municipal Police officers	On-line survey	600	1	1	600