

ESTIMATED ANNUALIZED BURDEN TABLE

Citation	Form number/ former OMB#	Number of respondents	Number of responses per respondent	Average bur- den per respondent (in hours)
Reporting:				
71.21 Radio report death/illness .....	.....	9,500	1	2/60
71.33(c) Report by person/s in isolation or surveillance .....	.....	11	1	3/60
71.35 Report of death/illness in port .....	.....	5	1	30/60
Used in an outbreak of public health significance	0920-0664	2,700,000	1	5/60
Used for reporting of an ill passenger(s)	0920-0664	800	1	5/60
71.51(b)(3) Admission of cats/dogs: death/illness .....	.....	5	1	3/60
71.51(d) Dogs/cats: certification of confinement, vaccination	CDC 75.37	1,200	1	15/60
71.52(d) Turtle importation permits .....	.....	10	1	30/60
71.53(d) Importer registration—nonhuman primates	CDC 75.10A	40	1	10/60
Total (Reporting) .....	.....	2,711,571		
Recordkeeping:				
71.53(e) .....	.....	30	4	30/60

Dated: September 30, 2005.

Betsey Dunaway,

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

[60 Day-05-05CX]

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 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

A Survey of University Field Biology Training Programs to Assess Zoonosis Education, Animal Handling and Personal Protective Equipment Training—New—Centers for Disease Control and Prevention (CDC), National Center for Infectious Diseases (NCID).

Background and Brief Description

Field Biologists and members of allied disciplines (Ecology, Conservation Biology, Wildlife Biology, Mammalogy, etc.) frequently come in contact with wild animals, many of which may carry diseases transmissible to humans (zoonotic diseases). Examples of these diseases include Rabies, Hantavirus Pulmonary Syndrome, Leptospirosis, Tularemia and many others. The recent death of a Wildlife Sciences graduate student from occupationally-acquired Hantavirus Pulmonary Syndrome highlights the vulnerability of this population to zoonotic diseases. The graduate student's exposure was thought to be due to inadequate understanding of the risk of zoonotic disease and need for proper animal handling and personal protective equipment (PPE) use.

Throughout the field biology community, there are no universally accepted standards for zoonosis risk reduction education, safe animal

handling or PPE use. While it may be difficult to re-train seasoned biologists who have established habits related to animal handling and PPE use, new members of the community (*i.e.* undergraduate and graduate students) may represent an opportunity for timely intervention. By developing proper animal handling and PPE use habits early in their careers, field biologists can minimize their exposure to potentially fatal zoonotic illnesses.

The proposed survey asks 85 Department Chairs (or Program Directors, as surrogates) of university training programs in field-related biological sciences about their programs' policies regarding zoonotic disease education, safe animal handling training, and PPE training and use. The survey consists of an introductory letter and a self-administered, Web-based questionnaire e-mailed to persons at universities in the United States. The study objectives are to describe current knowledge, attitudes and practices of educational institutions and their faculty regarding zoonotic disease risks and protection of undergraduate and graduate students, and to determine what types of national guidelines on zoonotic disease risk reduction in university training programs are needed. If these data were not collected, it would make it more difficult to create logical and appropriate national guidelines for zoonotic risk reduction in university training programs. This data collection supports the CDC's broader research agenda of understanding the determinants of illness in vulnerable populations. There is no cost to the respondents other than their time.

ESTIMATE OF ANNUALIZED BURDEN TABLE

Respondents	Number of respondents	Number of responses per respondent	Average burden per response	Total burden (in hours)
Surveys	85	1	10/60	14.0
Total .....	.....	.....	.....	14.0

Dated: September 30, 2005.

Betsey Dunaway,

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

Statement of Organization, Functions, and Delegations of Authority

Part C (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Service (45 FR 67772-76, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 70 FR 55859-55860, dated September 23, 2005) is amended to reflect the establishment of the Office of the Chief of Staff, Office of the Director, Centers for Disease Control and Prevention.

After the mission statement for the *Office of Chief of Public Health Practice (CAR)*, insert the following:

Office of the Chief of Staff (CAT), The Office of the Chief of Staff (OCS) provides leadership, coordination and management of agency-wide policies and issues, directs operations for the Office of the Director, coordinates senior leadership and provides direct to the director to serve CDC and its people and ensure decisions are made in the agency's best interest. In carrying out its mission, OCS: (1) Coordinated policy and program issues across the Office of the Director (OD), coordinating centers and coordinating offices, centers, and staff offices in collaborating with the Office of Enterprise Communication (OEC); (2) provides integrated policy analysis and strategic consultation to the Director and senior leadership on major issues affecting CDC; (3) identifies, triages, supervises and tracks OD action items from start to finish in conjunction with senior leadership across CDC, specifically OEC; (4) serves as one of the Director's primary strategic

liaisons with staff partners and the community at large; (5) manages budget and resources and provides operations oversight for selected staff offices within the OD; (6) directs Office of the Director operations and administration; (7) serves as a primary point of contact to select OD-level partners in conjunction with other pre-established points of contact across CDC; (8) serves as a primary point of contact with the CDC Foundation, specifically for coordination and decision support with other pre-established points of contact across CDC; (9) oversees all activities related to the Advisory Committee to the Director and its subcommittees and workgroups; (10) coordinates and manages select activities between CDC and the Department of Health and Human Services; (11) manages senior staff with the OD such as staff on long-term training, details, intergovernmental personnel actions, etc.; (12) manages the Executive Leadership Board (ELB) and CIO Leadership Council (CLC), inclusive of preparing for and conducting ELB and CLC meetings and identifying, triaging, supervising and tracking action items stemming from ELB and CLC meetings; (13) provides senior management information, as necessary, to make timely strategic and operational decisions; (14) manages OD-level special events and VIP visits; (15) coordinates and manages implementation of the Freedom of Information Act for CDC, including receiving and tracking requests and composing responses.

Dated: September 29, 2005.

William H. Gimson,

Chief Operating Officer, Centers for Disease Control and Prevention (CDC).

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Statement of Organization, Functions, and Delegations of Authority

Part C (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 67772-76, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 70 FR 55859-55860, dated September 23, 2005) is amended to reflect the establishment of the Office of Enterprise Communication, within the Office of the Director, Centers for Disease Control and Prevention.

Section C-B, Organization and Functions, is hereby amended as follows:

Delete in its entirety the titles and functional statements for the *Office of the Executive Secretariat (CAH)* and the *Office of Program Planning and Evaluation (CA4)*.

Revise the functional statement for the *Management Analysis and Policy Branch (CAJ64)*, *Management Analysis and Services Officer (CAJ6)*, *Office of the Chief Operating Officer (CAJ)*, be deleting item (3) of the functional statement and renumber the remaining items accordingly.

After the mission statement for the *Office of Chief of Public Health Practice (CAR)*, insert the following:

Office of Enterprise Communication (CAU). The mission of the Office of Enterprise Communication (OEC) is to assure the Centers for Disease Control and Prevention's (CDC) leadership role in promoting public health and preventing disease by fostering an enterprise-wide culture that ensures coordination and prompt response to urgent issues and concerns; anticipating and elevating issues that shape the agency's position; upholding and safeguarding our credibility and the confidence of employees, partners and public; and promoting effective and efficient communication networks. To carry out its mission, OEC: (1) Plans,