

Application No.	Drug
40-548	Theophylline Extended-Release Tablets, 300 mg
40-558	Promethazine HCl Tablets USP, 12.5 mg, 25 mg, and 50 mg
40-559	Hydroxyzine HCl Tablets USP, 10 mg
40-562	Hydroxyzine HCl Tablets USP, 25 mg
40-563	Hydroxyzine HCl Tablets USP, 50 mg
76-114	Indomethacin Extended-Release Capsules USP, 75 mg
76-121	Lithium Carbonate Capsules USP, 300 mg
76-382	Lithium Carabonate Extended-Release Tablets USP, 300 mg
76-462	Metronidazole Extended-Release Tablets, 750 mg
76-505	Metronidazole Capsules, 375 mg
76-519	Metronidazole Tablets USP, 250 mg and 500 mg
76-528	Butalbital, Acetaminophen, Caffeine, and Codeine Phosphate Capsules, 50 mg/325 mg/40 mg/30 mg
76-544	Naproxen Sodium Tablets USP, 275 mg and 550 mg
76-666	Indomethacin Capsules USP, 25 mg and 50 mg
76-814	Dextroamphetamine Sulfate Extended-Release Capsules, 5 mg, 10 mg, and 15 mg
76-823	Lithium Carbonate Capsules USP, 150 mg, 300 mg, and 600 mg
76-907	Atenolol Tablets USP, 25 mg, 50 mg, and 100 mg

Therefore, under section 505(e) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(e)) and under authority delegated to the Director, Center for Drug Evaluation and Research, by the Commissioner of Food and Drugs, approval of the applications listed in the table in this document, and all amendments and supplements thereto, is hereby withdrawn, effective January 19, 2006.

Dated: January 4, 2006.

**Douglas C. Throckmorton,**

*Deputy Director, Center for Drug Evaluation and Research.*

[FR Doc. E6-506 Filed 1-18-06; 8:45 am]

BILLING CODE 4160-01-S

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

#### **Request for Public Comment: 60-Day Proposed Information Collection: Indian Health Service Chief Executive Officer Retention Survey**

**AGENCY:** Indian Health Service, HHS.

**SUMMARY:** The Department of Health and Human Services, as part of its continuing effort to reduce paperwork and respondent burden, conducts a pre-clearance consultation program to

provide the general public and Federal agencies with an opportunity to comment on proposed and/or continuing collections of information in accordance with the Paperwork Reduction Act of 1995 (PRA95) (44 U.S.C. 3506(c)(2)(A)). This program helps to ensure that requested data can be provided in the desired format, reporting burden (time and financial resources) is minimized, collection instruments are clearly understood, and the impact of collection requirements on respondents can be properly assessed. Currently, the Indian Health Service (IHS) is providing a 60-day advance opportunity for public comment on a proposed extension of current information collection activity to be submitted to the Office of Management and Budget for review.

#### **Proposed Collection**

*Title:* 0917-NEW, "Indian Health Service Chief Executive Officer Retention Survey".

*Type of Information Collection Request:* New Collection.

*Form Number:* None.

*Forms:* The IHS Chief Executive Officer Retention Survey.

*Need and Use of Information Collection:* The National Council of Chief Executive Officers (NCCEO) was established to ensure that the IHS

Service Unit Chief Executive Officers (CEO) effectively participate in the establishment and implementation of strategies to achieve the IHS mission. Part of their responsibility (as stated in their Charter) includes: ongoing recruitment, development, and retention of professional CEOs. The NCCEO's purpose is to ensure that the IHS Service Unit CEO and their Tribal CEO counterparts effectively participate in the establishment and implementation of an agency strategy to achieve the IHS mission. The current Executive Committee is actively addressing recruitment, retention and succession planning for their constituents, the IHS CEOs. To enhance their ability to be effective in this challenging task, the NCCEO needs to know more about IHS CEOs and the issues that affect retention and recruitment including the competitive influences of private sector health care delivery systems. The chosen method to obtain this critical information from the CEOs of IHS, Tribal and Urban facilities is by electronic survey. The goal of the IHS is to raise the health status of American Indians and Alaska Natives to the highest possible level. To meet this goal, the IHS is committed to providing high quality health services to the eligible service population. An important factor

in improving the quality of services is: ensuring that our clinics and hospitals recruit and retain the best possible CEO reasonably available. The proposed survey is designed to ascertain current

demographics: age, gender, years of experience, education, pay compared to complexity of facilities, job satisfaction and retirement eligibility.

*Affected Public:* Individuals.

*Type of Respondents:* Individuals.

The table below provides the estimated burden hours for this information collection:

#### ESTIMATED BURDEN HOURS

Data collection instrument	Estimated number of respondents	Responses per respondent	Average burden hour per response*	Total annual burden hrs
CEO Retention Survey .....	120	1	0.15 (10 mins)	20

\*For ease of understanding, burden hours are also provided in actual minutes.

There are no Capital Costs, Operating Costs and/or Maintenance Costs to report.

*Request For Comments:* Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the agency processes the information collected in a useful and timely fashion; (c) the accuracy of public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimate are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

*Send Comment and Requests for Further Information:* Send your written comments and requests for more information on the proposed collection or requests to obtain a copy of the data collection instrument(s) and instructions to: Mrs. Chris Rouleau, IHS Reports Clearance Officer, 801 Thompson Avenue, TMP Suite 450, Rockville, MD 20852.1601, call non-toll free (301) 443-5938, send via facsimile to (301) 443-2316, or send your E-mail requests, comments, and return address: [crouleau@hqe.ihs.gov](mailto:crouleau@hqe.ihs.gov).

*Comment Due Date:* Your comments regarding this information collection are best assured of having their full effect if received within 60-days of the date of this publication.

Dated: January 12, 2006.

**Charles W. Grim,**

*Assistant Surgeon General, Director, Indian Health Service.*

[FR Doc. 06-452 Filed 1-18-06; 8:45 am]

BILLING CODE 4165-16-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

#### List of Recipients of Indian Health Scholarships Under the Indian Health Scholarship Program

The regulations governing Indian Health Care Improvement Act Programs (Pub. L. 94-437) provide at 42 CFR 136.334 that the Indian Health Service shall publish annually in the **Federal Register** a list of recipients of Indian Health Scholarships, including the name of each recipient, school and Tribal affiliation, if applicable. These scholarships were awarded under the authority of Sections 103 and 104 of the Indian Health Care Improvement Act, 25 U.S.C. 1613-1613a, as amended by the Indian Health Care Amendments of 1988, Pub. L. 100-713.

The following is a list of Indian Health Scholarship Recipients funded under Sections 103 and 104 for Fiscal Year 2005:

Abeita, Steven John, University of New Mexico, Pueblo of Isleta, New Mexico  
 Adams Moses, Cynthia Regina, Langston University, Musogee (Creek) Nation, Oklahoma  
 Adams, Melissa Lynn, Rosalind Franklin University, Cherokee Nation, Oklahoma  
 Alcorn, Winter Dawn, Rogers State College, Cherokee Nation, Oklahoma  
 Allen, Bryan Zachary, Southwestern Oklahoma State University, Choctaw Nation of Oklahoma  
 Allery, Rhea Neachet, University of North Dakota, Turtle Mountain Band of Chippewa Indians of North Dakota  
 Anderson, Debra Jean, College of St. Scholastica, White Earth Band  
 Arredondo, Michael Howard, University of Minnesota, Eastern Shawnee Tribe of Oklahoma  
 Arviso, Kellie Lynn, University of New Mexico, Navajo Nation, Arizona, New Mexico & Utah

Ashley, Natalie Lynn, Arizona State University, Navajo Nation, Arizona, New Mexico & Utah  
 Augare-Deal, Raek, University of Kansas, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana  
 Babbitt, Jaime Lynn, Indiana University, Navajo Nation, Arizona, New Mexico & Utah  
 Baker, Allison Marie, University of North Dakota, Three Affiliated Tribes of the Fort Berthold Reservation, North Dakota  
 Baker, Jennifer Lee, Oklahoma State University, Cherokee Nation, Oklahoma  
 Baker, Valerie, University of New Mexico, Navajo Nation, Arizona, New Mexico & Utah  
 Banteah, Melinda Erika, University of New Mexico, Zuni Tribe of the Zuni Reservation, New Mexico  
 Beals, Bryan James, University of North Dakota, Muscogee (Creek) Nation, Oklahoma  
 Beaver, Aaron Don, University of Oklahoma, Choctaw Nation of Oklahoma  
 Beaver, Allen Don, University of Oklahoma, Choctaw Nation of Oklahoma  
 Becenti, Elton, New Mexico State University, Navajo Nation, Arizona, New Mexico & Utah  
 Becker, Tischa Lee, University of New Mexico, Cherokee Nation, Oklahoma  
 Beetso, Allyson Nicole, Northern Arizona University, Navajo Nation, Arizona, New Mexico & Utah  
 Begay, Melanie, University of New Mexico, Navajo Nation, Arizona, New Mexico & Utah  
 Begay, Tashina Nanabah Litanya, University of Portland, Navajo Nation, Arizona, New Mexico & Utah  
 Begay, Velma Mae, University of New Mexico, Navajo Nation, Arizona, New Mexico & Utah  
 Begay, Amelia June, University of New Mexico, Navajo Nation, Arizona, New Mexico & Utah