

respondents, the average annual number of responses, the time it will take for each response, and the average annual

burden across 3 years of OMB clearance, which includes 3 years of data

collection for Cohorts 3 and 4 and two years of data collection for Cohort 5.

ANNUALIZED AVERAGES: RESPONDENTS, RESPONSES AND HOURS

Measure name	Number of respondents	Number of responses per respondent	Hours/response	Response burden*
Community Specific Data Collection Activities—Tier I:				
GONA Baseline Interviews	50	1	0.33	17
GONA Followup Interviews	75	1	1.0	75
GONA Youth Followup Focus Groups	150	1	2.0	300
Community Plan Focus Groups	225	1	2.0	450
Community Plan In-depth Interviews—V.1	51	1	1.0	51
Community Plan In-depth Interviews—V.2	51	1	0.33	17
Service Provider Focus Groups—V.1	252	1	2.0	504
Cross Community Data Collection Activities—Tier II:				
Service Provider Focus Groups—V. 2	126	1	2.0	252
C-KABS Adult Version	2,234	1	0.75	1,676
C-KABS Youth Version	2,234	1	0.75	1,676
Community Readiness Assessment1	84	1	1.0	84
Data Abstraction and Submission Form	156	2.0	6.0	1,872
Total	5,688			6,974

* Rounded to the nearest whole number.

Send comments to Summer King, SAMHSA Reports Clearance Officer, Room 7-1044, One Choke Cherry Road, Rockville, MD 20857 and e-mail her a copy at summer.king@samhsa.hhs.gov. Written comments should be received within 60 days of this notice.

Dated: June 26, 2009.

Elaine Parry,

Director, Office of Program Services.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30-Day-09-0556]

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 e-mail to omb@cdc.gov. Send written

comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

Assisted Reproductive Technology (ART) Program Reporting System (0920-0559, exp. 9/30/2009)—Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The ART program reporting system is used to comply with section 2(a) of Public Law 102-493 (known as the Fertility Clinic Success Rate and Certification Act of 1992 (FCSRCA)), 42 U.S.C. 263a-1(a)). FCSRCA requires each ART program to annually report to the Secretary through the CDC: the pregnancy success rates achieved by each ART program, the identity of each embryo laboratory used by the ART program, and whether the laboratory is certified or has applied for certification under the Act. The reporting system also makes it possible for the CDC to publish an annual success rate report to Congress as specified by the FCSRCA. This Revision request includes minor wording changes to improve the clarity

of the question concerning pre-implantation genetic diagnosis (PGD), and an increase in the total estimated burden hours due to an increase in the estimated number of responses.

Information is collected electronically through the National ART Surveillance System (NASS), a Web-based interface, or by electronic submission of NASS-compatible files. The NASS includes information about all ART cycles initiated by any of the ART programs practicing in the United States and its territories. The system also collects information about the pregnancy outcome of each cycle as well as a number of data items deemed important to explain variability in success rates across ART programs and individuals.

Respondents are the 483 ART programs in the United States. Approximately 430 programs are expected to report an average of 321 ART cycles each. The burden estimate includes the time for collecting, validating, and reporting the requested information. Information is collected on an annual schedule.

There are no costs to the respondents other than their time. The total estimated annualized burden hours are 89,720.

Estimated Annualized Burden Hours

Respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
ART Programs	NASS	430	321	39/60

Dated: June 26, 2009.

Maryam Daneshvar,

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

[30-Day-09-0040]

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Proposed Project

NCEH/ATSDR Exposure Investigations (EI) [OMB NO: 0923-0040]—Revision—The National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR).

Background and Brief Description

This is a brief summary of a joint clearance between the NCEH and ATSDR, (hereafter ATSDR will represent both ATSDR and NCEH). ATSDR is mandated pursuant to the 1980 Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) and its 1986 Amendments, the Superfund Amendments and Reauthorization Act (SARA) to prevent or mitigate adverse

human health effects and diminished quality of life resulting from the exposure to hazardous substances in the environment. 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 and seeks revision approved of the currently approval ICR. 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 28 questions per investigation, out of a set of 57 general information questions. Some of this information is investigation-specific; not all of this data is collected for every investigation.

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 seeking approval for the use of sets of topical questions. Of these, we use approximately 12-15 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).

Data management procedures have not changed since the previous approved information collection and the instrument does not have extensive revisions. Only minor non-substantive changes were made to the Library of Chemical Exposure Questions by dividing one question into two; to clarify, specify and better generate the information needed.

Typically, the number of participants in an individual EI ranges from 10 to less than 50. Questionnaires are generally needed in less than half of the EIs (approximately 10-15 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. The total estimated annual burden hours are 375.

Estimated Annualized Burden Hours

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Exposure Investigation Participants	750	1	30/60	375