and order materials and resources by phone using the NPIN toll-free reference and referral line or electronic mail system. As of January 25, 2007, over 370,000 unique requests for materials have been logged and 4,561,186 materials have been ordered by the public.

The primary purposes of the proposed data collection are to assess CDC NPIN users' satisfaction and perceived quality with the Web site, products, and

services; determine the extent to which the users' needs are being met; and identify how the Web site, products, and services can be enhanced to meet the needs of the user.

The evaluation will be accomplished by survey data collection from users of the CDC NPIN Web site and users of CDC NPIN products and services. Organizations that do not have access to the Internet will be administered the survey by phone. The estimated 5,655 respondents include representatives from government agencies, community-based organizations, advocacy organizations, and various other organizations involved in the prevention and/or treatment of HIV/AIDS, STDs, TB, and/or viral Hepatitis.

There are no costs to respondents other than their time. The total estimated annual burden hours are 2.525.

## ESTIMATED ANNUALIZED BURDEN HOURS

Form	Type of respondent	Number of respondents	Number of responses per respondent	Average burden per response
NPIN Website User Survey	All NPIN Users (Individuals)	1,078	1	13/60
NPIN Products and Services User Survey	Private Sector Organizations	2,155	2	15/60
	State and local government organization	222	2	15/60
	Federal government organization	94	2	15/60
	Individual/Households	1,648	2	15/60
NPIN Products and Services User Survey	Private Sector Organizations	239	2	15/60
(Telephone).	State and local government organization	25	2	15/60
	Federal government organization	11	2	15/60
	Individual/Households	183	2	15/60

Dated: September 27, 2007.

## Maryam I. Daneshvar,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E7–19620 Filed 10–3–07; 8:45 am] **BILLING CODE 4163–18–P** 

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

[Docket Number NIOSH-110]

## Notice of Public Meeting and Availability for Public Comment

**AGENCY:** The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

**ACTION:** Notice of Public Meeting and Availability for Public Comment.

SUMMARY: The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) announces a public meeting and request for public input regarding a proposed survey of U.S. truck driver safety and health. The goal of the survey is to collect information on truck driver health, sleep disorders, fatigue, working conditions, and non-fatal injuries. Further information on the proposed

survey may be found at: http://www.cdc.gov/niosh/review/public/110.

*Public Comment Period:* From date of publication of this notice until January 2, 2008.

Public Meeting Date and Time: Thursday, November 1, 2007, 8:30 a.m.–4:30 p.m., CST.

*Place:* Westin O'Hare Hotel, 6100 North River Road, Rosemont, Illinois 60018, telephone (888) 627–8517.

Purpose of the Meeting: To obtain public comment on the content and conduct of a nationally representative survey of truck drivers' safety and health. Special emphasis will be placed on discussion of the following:

(1) Content of the survey.

(2) Appropriate methods of conducting such a survey.

Status: The forum will include scientists and representatives from various government agencies, industry, labor, and other stakeholders, and is open to the public. Attendance is limited only by the space available. The meeting room will accommodate approximately 70 people. Interested parties should make hotel reservations directly with the Westin O'Hare Hotel by calling (888) 627-8517 or via the Web site at http:// www.starwoodmeeting.com/Book/ westatOc before the cut-off date of 5 p.m. CST October 10, 2007. A special group rate of \$205.00 per night (or prevailing government rate) plus tax per night for meeting guests has been negotiated for this meeting. In order to receive the special room rate, you will

need to indicate that you will be attending the NIOSH meeting.

Interested parties should confirm their attendance to this meeting by contacting Ms. Mary K. Dingwall, meeting coordinator, at (301) 738–3583 or *MaryDingwall@Westat.com* by October 19, 2007. Oral comments given at the meeting will be recorded and included in the docket. Written comments will also be accepted at the meeting or by submitting them to the NIOSH Docket Office.

Contact Person for Technical Information: Karl Sieber, NIOSH/CDC, Robert A. Taft Laboratories, 4676 Columbia Pkwy. MS R-17, Cincinnati, OH 45226, telephone (513) 841-4231, or Stephanie Pratt, NIOSH/CDC, 1095 Willowdale Road, MS 1808, Morgantown, WV 26505, telephone (304) 285-5992.

Contact Person for Submitting Comments: Comments on the topics presented in this notice and at the meeting should be mailed to: NIOSH Docket Office, Robert A. Taft Laboratories, MS-C34, 4676 Columbia Parkway, Cincinnati, Ohio 45226, telephone (513) 533-8450, fax (513) 533–8285. Comments may also be submitted by e-mail to nioshdocket@cdc.gov or at http:// www.cdc.gov/niosh/review/public/110/. E-mail attachments should be formatted in Microsoft Word. All comments should be received by January 2, 2008 and should reference the Docket Number (NIOSH-110) in the subject heading.

All information received in response to this notice will be available for public examination and copying at the NIOSH Docket Office, 4676 Columbia Parkway, Cincinnati, Ohio 45226 and at http:// www.cdc.gov/niosh/docket/ default.html.

Dated: September 26, 2007.

#### James D. Seligman,

Chief Information Officer, Centers for Disease Control and Prevention.

[FR Doc. E7-19613 Filed 10-3-07; 8:45 am] BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND **HUMAN SERVICES**

#### **Centers for Disease Control and** Prevention

## **Proposed Consolidated Vaccine** Information Materials for Multiple Infant Vaccines

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

**ACTION:** Notice with comment period.

**SUMMARY:** Under the National Childhood Vaccine Injury Act (NCVIA) (42 U.S.C. 300aa-26), the CDC must develop vaccine information materials that all health care providers are required to give to patients/parents prior to administration of specific vaccines. CDC seeks written comment on a proposed new vaccine information statement that consolidates the six vaccine information statements for the following childhood vaccines: DTaP, Haemophilus influenzae type b, inactivated polio vaccine, pneumococcal conjugate vaccine, hepatitis B. and rotavirus. This consolidated Vaccine Information Statement would be available to be used by vaccination providers as an alternative to providing the six individual Vaccine Information Statements for the same vaccines.

**DATES:** Written comments are invited and must be received on or before December 3, 2007.

ADDRESSES: Written comments should be addressed to Anne Schuchat, M.D., Director, National Center for Immunization and Respiratory Diseases, Centers for Disease Control and Prevention, Mailstop E-05, 1600 Clifton Road, N.E., Atlanta, Georgia 30333.

## FOR FURTHER INFORMATION CONTACT:

Anne Schuchat, M.D., Director, National Center for Immunization and Respiratory Diseases, Mailstop E-05, 1600 Clifton Road, NE., Atlanta, Georgia 30333, telephone (404) 639-8200.

SUPPLEMENTARY INFORMATION: The National Childhood Vaccine Injury Act of 1986 (Pub. L. 99–660), as amended by section 708 of Public Law 103-183, added section 2126 to the Public Health Service Act. Section 2126, codified at 42 U.S.C. 300aa–26, requires the Secretary of Health and Human Services to develop and disseminate vaccine information materials for distribution by all health care providers in the United States to any patient (or to the parent or legal representative in the case of a child) receiving vaccines covered under the National Vaccine Injury Compensation Program.

Development and revision of the

vaccine information materials, also known as Vaccine Information Statements (VIS), have been delegated by the Secretary to the Centers for Disease Control and Prevention (CDC). Section 2126 requires that the materials be developed, or revised, after notice to the public, with a 60-day comment period, and in consultation with the Advisory Commission on Childhood Vaccines, appropriate health care provider and parent organizations, and the Food and Drug Administration. The law also requires that the information contained in the materials be based on available data and information, be presented in understandable terms, and include:

- (1) A concise description of the benefits of the vaccine,
- (2) A concise description of the risks associated with the vaccine,
- (3) A statement of the availability of the National Vaccine Injury Compensation Program, and
- (4) Such other relevant information as may be determined by the Secretary.

The vaccines initially covered under the National Vaccine Injury Compensation Program were diphtheria, tetanus, pertussis, measles, mumps, rubella and poliomyelitis vaccines. Since April 15, 1992, any health care provider in the United States who intends to administer one of these covered vaccines is required to provide copies of the relevant vaccine information materials prior to administration of any of these vaccines. Hepatitis B, Haemophilus influenzae type b (Hib), varicella (chickenpox), pneumococcal conjugate, hepatitis A, meningococcal conjugate and polysaccharide, rotavirus, human papillomavirus (HPV), and trivalent influenza vaccines have subsequently been added to the National Vaccine Injury Compensation Program. Use of the Vaccine Information Statements applicable to all of these vaccines, except meningococcal, rotavirus and HPV, is also required. (Interim versions

of Vaccine Information Statements for meningococcal, rotavirus and HPV vaccines are available for discretionary use pending completion of the statutory process for finalizing VISs applicable to those vaccines.) Instructions for use of the vaccine information materials and copies of the materials can be found on the CDC Web site at: http:// www.cdc.gov/vaccines/pubs/vis. In addition, single camera-ready copies are available from State health departments. A list of State health department contacts for obtaining copies of these materials is included in a December 17, 1999 Federal Register notice (64 FR 70914).

#### **Proposed Consolidated Vaccine Information Materials**

With six vaccines recommended for infants from birth through 6 months of age—all covered by the National Vaccine Injury Compensation Program—CDC, as required under 42 U.S.C. 300aa-26, developed Vaccine Information Statements for each of those vaccines. CDC is proposing an alternative consolidated Vaccine Information Statement covering those six vaccines in one document, which providers could choose to use instead of the existing individual Vaccine Information Statements for the same vaccines.

## **Development of Vaccine Information** Materials

The vaccine information materials referenced in this notice are being developed in consultation with the Advisory Commission on Childhood Vaccines, the Food and Drug Administration, and parent and health care provider groups.

In addition, we invite written comment on the proposed vaccine information materials that follow, entitled "Your Baby's First Vaccines: What You Need to Know." Comments submitted will be considered in finalizing these materials. When the final consolidated VIS is published in the **Federal Register**, the instructions for use of vaccine information materials will be revised to note that this alternative consolidated VIS can be used in lieu of the individual vaccine VISs.

#### **Proposed Multi-vaccine Vaccine Information Statement**

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YOUR BABY'S FIRST VACCINES: WHAT YOU NEED TO KNOW

Babies are scheduled for six vaccines at 2, 4, and 6 months of age. One of these (hepatitis B) is usually given at birth.