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Sandra L. Kusumoto,

*Director, Bureau of Certification and
Licensing.*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Announcement of the Second Meeting of the Physical Activity Guidelines Advisory Committee

AGENCY: Department of Health and
Human Services, Office of the Secretary,
Office of Public Health and Science.

ACTION: Notice.

Authority: 42 U.S.C. 217a, section 222 of
the Public Health Service Act, as amended.
The Committee is governed by the provision
of Public Law 92-463, as amended (5 U.S.C.
Appendix 2), which sets forth standards for
the formation and use of advisory
committees.

SUMMARY: The U.S. Department of
Health and Human Services (HHS)
announces the second in a series of
three federal advisory committee
meetings on the Physical Activity
Guidelines for Americans, to be held in
Washington, DC. This meeting will be
open to the public. The Physical
Activity Guidelines Advisory
Committee has been charged with
reviewing existing scientific literature to
identify where there is sufficient
evidence to develop a comprehensive
set of specific physical activity
recommendations. The Committee will
prepare a report to the Secretary of HHS
that documents the scientific
background and rationale for the
issuance of Physical Activity Guidelines
for Americans. The report will also
identify areas where further scientific
research is needed. The Committee's
recommendations will be utilized by the
Department to prepare the final Physical
Activity Guidelines. The intent is to
issue physical activity
recommendations for all Americans that
will be tailored as necessary for specific
subgroups of the population.

DATES: The Committee will meet
December 6-7, 2007 for a day and a half
meeting. The December 6 session will
be from 8:30 a.m. to 5 p.m. The
December 7 session will be from 8:30
a.m. to 1:15 p.m.

ADDRESSES: The meeting will be held in
the Cohen Auditorium at the Wilbur J.
Cohen Building, located at 330
Independence Avenue, SW.,
Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT:

CAPT Richard Troiano, PhD., Executive
Secretary, Physical Activity Guidelines
Advisory Committee, Department of
Health and Human Services, Office of
Public Health and Science, Office of
Disease Prevention and Health
Promotion, Room LL-100, 1101
Wootton Parkway, Rockville, MD 20852,
240/453-8280 (telephone), 240/453-
8281 (fax). Additional information is
available on the Internet at [http://
www.health.gov/PAguidelines](http://www.health.gov/PAguidelines).

SUPPLEMENTARY INFORMATION: The
Physical Activity Guidelines Advisory
Committee: The thirteen-member
Committee is chaired by William
Haskell, PhD., Professor of Medicine,
Stanford University School of Medicine.
The Vice-Chair is Miriam Nelson, PhD.,
Director, John Hancock Center for
Physical Activity and Nutrition,
Friedman School of Nutrition Science
and Policy, Tufts University. Other
members of the Committee include Rod
K. Dishman, PhD., Professor of Exercise
Science and Director, Exercise
Psychology Laboratory, Department of
Kinesiology, University of Georgia;
Edward Howley, PhD., Professor
Emeritus, Department of Exercise, Sport,
and Leisure Studies, University of
Tennessee; Wendy Kohrt, PhD.,
Professor of Medicine, Division of
Geriatric Medicine, University of
Colorado at Denver and Health Sciences
Center; William Kraus, M.D., Professor,
Division of Cardiovascular Medicine,
Duke University School of Medicine; I-
Min Lee, M.D., Sc.D., Associate
Professor of Medicine, Harvard Medical
School and Associate Professor of
Epidemiology, Harvard School of Public
Health; Anne McTiernan, M.D., PhD.,
Director, Prevention Center, Fred
Hutchinson Cancer Research Center;
Russell Pate, PhD., Associate Vice
President for Health Sciences, Office of
Research and Health Sciences and
Professor, Department of Exercise
Science, University of South Carolina;
Kenneth Powell, M.D., M.P.H., Public
Health and Epidemiologic Consultant;
Judith Regensteiner, PhD., Professor
Department of Medicine and Director,
Center for Women's Health Research,
University of Colorado at Denver and
Health Sciences Center; James Rimmer,
PhD., Professor and Director, National
Center on Physical Activity and
Disability, Department of Disability and
Human Development, University of
Illinois at Chicago; and Antronette
Yancey, M.D., M.P.H., Professor,
Department of Health Services,
University of California at Los Angeles
School of Public Health.

Purpose of the Meeting: The Advisory
Committee will present current work
performed since the initial meeting of
the Committee in June and deliberate on
next steps. The Committee will also
hear oral comments from the public to
help inform them as they prepare their
report to the Secretary. The report to the
Secretary will outline the scientific
background and rationale for the
issuance of Physical Activity Guidelines
for Americans. The report will also
identify areas where further scientific
research is needed. The Committee's
recommendations will be utilized by the
Department to prepare the final Physical
Activity Guidelines. The intent is to
develop physical activity
recommendations for all Americans that
will be tailored as necessary for specific
subgroups of the population.

Public Participation at Meeting:
Members of the public are invited to
observe the Advisory Committee
meeting. On December 7, a portion of
the meeting agenda will be allocated for
committee members to hear public
comments. All individuals wishing to
observe and/or make comments at the
meeting must indicate their intention to
do so by pre-registering at [http://
www.health.gov/PAguidelines](http://www.health.gov/PAguidelines). Due to
time constraints, a limited number of
scheduled time slots for public
comments will be made available on a
first-come-first-served basis through pre-
registration. Comments will also be
limited to 1-2 minutes per individual.
Attendees that do not pre-register to
make comments cannot be guaranteed
an opportunity to have his or her
comments heard during the meeting.
Individuals are encouraged to submit
their comments in writing in advance of
the meeting through the pre-registration
process. Additionally, individuals
wishing to only submit written
comments may also do so through pre-
registration or by e-mail to
PA.Guidelines@hhs.gov. Please note
there will be no public comment session
during the Advisory Committee meeting
on December 6. Registrations must be
completed by November 30, 2007. Space
for the meeting is limited and
registrations will be accepted until
maximum room capacity is reached. A
waiting list will be maintained should
registrations exceed room capacity.
Individuals on the waiting list will be
contacted as additional space for the
meeting becomes available.

Registrants for the Physical Activity
Advisory Guidelines Committee
meeting must present valid government-
issued photo identification (i.e., driver's
license) and should arrive 45 minutes
prior to the start of the meeting to clear
through security. Security will provide

registered attendees badges that must be worn at all times and returned to security prior to exiting the Cohen Building.

Registration questions may be directed to Experient at PAguidelines@experient-inc.com (e-mail), (703) 525-8333 x3346 (phone) or (703) 525-8557 (fax).

Dated: November 8, 2007.

Penelope Slade Royall,
RADM, USPHS, Deputy Assistant Secretary for Health, Office of Disease Prevention and Health Promotion.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-08-05AJ]

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

National Surveillance for Severe Adverse Events Associated with Treatment of Latent Tuberculosis Infection—New, Division of Tuberculosis Elimination (DTBE), National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Between October 2000 and October 2007, 79 patients receiving treatment for Latent TB Infection (LTBI) were reported to the Division of Tuberculosis Elimination (DTBE), Centers for Disease Control and Prevention (CDC) with severe adverse events to their medications(s). A severe adverse event is defined as a drug-related reaction resulting in hospitalization or death of a person receiving treatment for LTBI. Deaths reported among persons with LTBI included, 2 of 50 persons who were on the recommended two-month regimen of rifampin and pyrazinamide (RZ); 9 of 22 treated with isoniazid alone, and 2 of 3 patients on other regimens (e.g., pyrazinamide and ethambutol). Severe adverse events such as hospitalizations, liver transplants, and death related to treatment of LTBI continue to be reported to DTBE.

The purpose of this information collection request is to determine the

annual number and trends of severe adverse events associated with treatment of LTBI and identify common characteristics of patients with severe adverse events during treatment of LTBI. Potential correspondents are any of the 60 reporting areas for the national TB surveillance system (the 50 states, the District of Columbia, New York City, Puerto Rico, and 8 jurisdictions in the Pacific and Caribbean). Data will be collected using the data collection form for adverse event associated with LTBI treatment (AELT). The AELT form is completed for each reported hospitalization or death related to treatment of LTBI and contains demographic, clinical, and laboratory information. CDC will analyze and periodically publish reports summarizing national LTBI treatment adverse events statistics and also will conduct special analyses for publication in peer-reviewed scientific journals to further describe and interpret these data.

The Food and Drug Administration (FDA) collects data on adverse events related to drugs through the FDA MedWatch Program but it does not include the disease context and risk factors that are essential for revising treatment options for LTBI. Reporting will be conducted through telephone, e-mail, or during CDC site visits. There is no cost to respondents other than their time to gather medical records to complete the form. The total estimated annualized burden hours are 32.

ESTIMATED ANNUALIZED BURDEN

Type of respondent	Form name	Number of respondents	Number responses per respondent	Average burden per response (in hours)
Physician	AELT	4	1	3
Nurses	AELT	4	1	4
Medical Clerk	AELT	4	1	1

Dated: November 6, 2007.

Maryam I. 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

[30Day-08-07AU]

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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

Methicillin-Resistant *Staphylococcus aureus* (MRSA) Infection Control Practices Survey—New—National Center for Preparedness, Detection, and Control of Infectious Diseases (NCPDCID), Centers for Disease Control and Prevention (CDC).