Background

Under Title IX of the Public Health Service Act, AHRQ is charged with enhancing the quality, appropriateness and effectiveness of health care services and access to such services. AHRQ accomplishes these goals through scientific research and promotion of improvements in clinical practice, including prevention of diseases and other health conditions and improvements in the organization, financing and delivery of health care services. 42 U.S.C. 299–299c–7.

The United States Preventive Services Task Force (USPSTF) is an independent expert panel, first established in 1984 under the auspices of the U.S. Public Health Service. Under AHRQ's authorizing legislation noted above, specifically 42 U.S.C. 299b–4(a)(1), the Director of AHRQ is responsible for convening the USPSTF which is to be composed of individuals with appropriate expertise. The mission of the Task Force is to evaluate rigorously the effectiveness of critical preventive services and to formulate recommendations for primary care clinicians regarding the appropriate provision of preventive services. Current Task Force recommendations and associated evidence reviews are available at *http://www.preventiveservices.ahrq.gov*.

Topic Nomination Solicitation

The purpose of this solicitation for new topics by AHRQ and the USPSTF is to create a balanced portfolio of relevant topics for the current Task Force library. Balance in the library is sought on the basis of populations, types of services (screening, counseling, preventive medications) and disease types (cancer; heart and vascular disease; injury and violence-related disorders; infectious diseases; mental disorders and substance abuse; metabolic, nutritional and endocrine diseases; musculoskeletal conditions; obstetric and gynecological conditions; endocrine diseases; musculoskeletal conditions; obstetric and gynecological conditions; pediatric disorders; and vision and hearing disorders). Selection of suggested topics will be made on the basis of the qualifications of nominations as outlined above (see basic topic nomination requirements).

Dated: February 6, 2008.

Carolyn M. Clancy,

Director.

[FR Doc. 08–738 Filed 2–19–08; 8:45 am]

BILLING CODE 4160–90–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–08–0138]

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 404–639–5960 or send comments to Maryam Daneshvar, 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

Pulmonary Function Testing Course Approval Program, 29 CFR 1910.1043 (OMB No. 0920–0138)—Reinstatement—The National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

Background

NIOSH has the responsibility under the Occupational Safety and Health Administration's Cotton Dust Standard, 29 CFR 1920.1043, for approving courses to train technicians to perform pulmonary function testing in the cotton industry. Successful completion of a NIOSH-approved course is mandatory under the Standard. To carry out its responsibility, NIOSH maintains a Pulmonary Function Testing Course Approval Program. The program consists of an application submitted by potential sponsors (universities, hospitals, and private consulting firms) who seek NIOSH approval to conduct courses, and if approved, notification to NIOSH of any course or faculty changes during the approval period, which is limited to five years. The application form and added materials, including an agenda, curriculum vitae, and course materials are reviewed by NIOSH to determine if the applicant has developed a program which adheres to the criteria required in the Standard. Following approval, any subsequent changes to the course are submitted by course sponsors via letter or e-mail and reviewed by NIOSH staff to assure that the changes in faculty or course content continue to meet course requirements. Course sponsors also voluntarily submit an annual report to inform NIOSH of their class activity level and any faculty changes. Sponsors who elect to have their approval renewed for an additional 5 year period submit a renewal application and supporting documentation for review by NIOSH staff to ensure the course curriculum meets all current standard requirements. Approved courses that elect to offer NIOSH-Approved Spirometry Refresher Courses must submit a separate application and supporting documents for review by NIOSH staff. Institutions and organizations throughout the country voluntarily submit applications and materials to become course sponsors and carry out training. Submissions are required for NIOSH to evaluate a course and determine whether it meets the criteria in the Standard and whether technicians will be adequately trained as mandated under the Standard. There will be no cost to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Forms for respondents	Number of respondents	Number of responses/ respondent	Average burden/ response (in hrs)	Total burden (in hours)
Initial Application	3	1	3.5	11
Annual Report	35	1	30/60	18
Report for Course Changes	12	1	45/60	9
Renewal Application	13	1	6.0	78
Refresher Course Application	10	1	8.0	80
Total				196

Dated: February 11, 2008.

Maryam I. Daneshvar,

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

[FR Doc. E8–3076 Filed 2–19–08; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day–08–0488]

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. Alternatively, to obtain a copy of the data collection plans and instrument, call 404–639–5960 and send comments to Maryam I. Daneshvar, Acting CDC Reports Clearance Officer, 1600 Clifton Road, NE., MS–D74, Atlanta, Georgia 30333; comments may also be sent by 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 a 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 information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Restriction on Travel of Persons (OMB Control No. 0920–0488)—Reinstatement—National Center for Preparedness, Detection, and Control of Infectious Diseases (NCPDCID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention is requesting OMB approval to reinstate without change the information collection request, ''Restriction on Travel of Persons'' (OMB Control No. 0920–0488). This information collection request expired on March 31, 2007.

CDC is authorized to collect this information under 42 CFR 70.5 (Certain communicable diseases; special requirements). This regulation requires that any person who is in the communicable period for cholera, plague, smallpox, typhus, or yellow fever or having been exposed to any such disease is in the incubation period thereof, to apply for and receive a permit from the Surgeon General or his authorized representative in order to travel from one State or possession to another.

Control of disease transmission within the States is considered to be the province of state and local health authorities, with Federal assistance being sought by those authorities on a cooperative basis without application of Federal regulations. The regulations in 42 part 70 were developed to facilitate Federal action in the event of large outbreaks requiring a coordinated effort involving several states, or in the event of inadequate local control. While it is not known whether, or to what extent situations may arise in which these regulations would be invoked, contingency planning for domestic emergency preparedness is now commonplace. Should these situations arise, CDC will use the reporting and recordkeeping requirements contained in the regulations to carry out quarantine responsibilities as required by law.

There is no cost to respondents other than their time.

ESTIMATE OF ANNUALIZED BURDEN HOURS

Regulation	Respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
42 CFR 70.3 Application to the State of Destination for a permit.	Traveler	2,000	1	15/60	500
	Attending physician	2,000	1	15/60	500
42 CFR 70.3 Copy of material submitted by applicant and permit issued by State health authority.	State health authority	8	250	6/60	200
42 CFR 70.4 Report by the master of a vessel or person in charge of conveyance of the incidence of a communicable disease occurring while in interstate travel.	Master of a vessel or person in charge of conveyance.	1,500	1	15/60	375