DISTRIBUTION OF BURDEN BY REGULATORY CITATION

Regulation citation	No. of respondents	Responses per respondent	Total responses**	Hours per response	Total burden hours	Wage rate	Total cost
§61.6 (a), (b)							
Errors & Omissions	188	4.4	817	15 min.	204.25	$25	$5,106
§61.6							
Revisions/Appeal Status.	130	26.9	3,492	30 min.	1,746	25	43,650
§61.7							
Reporting By State Licensure Boards.	305	80.8	24,640	45 min.	18,480	25	462,000
§61.8							
Reporting of State Criminal Convictions.	45	56	2,518	45 min.	1,888.5	43	81,205
§61.9							
Reporting of Civil Judgments.	4	2.5	10	45 min.	7.5	43	322
§61.10 (b)							
Reporting Exclusions from participation in Federal and State Health Care Programs.	9	320.3	2,883	20 min.	961.0	38	36,518
§61.11							
Reporting of Adjudicated Actions/ Decisions.	92	17	1562	45 min.	1,171.5	43	50,375
§61.12 Request for Information							
State and Federal Agencies.	855	279.3	238,814	5 min.	19,901.26	25	497,531.50
Health Plans	1,239	532.4	659,617	5 min.	54,968.1	30	1,649,043
Health Care Providers, Suppliers and Practitioners (self query).	50,416	1	50,416	25 min.	21,006.7	45	945,301.50
§61.12(a)(4)							
Requests by Researchers for Aggregate Data.	1	1	1	30 min.	.5	38	19
§61.15							
Dispute Report	300	1	300	5 min	25	45	1,125
Add Report Statement.	669	1	669	45 min	501.8	100	50,180
Request for Secretarial Review.	15	1	15	480 min	120	200	24,000
Administrative Forms*	0	0	0	0	0	0	0
Total	54,268	.....	985,754	.....	120,982.11	.....	3,846,376

*__Note:__ The burden for Administrative Forms has been accounted for in the NPDB OMB clearance renewal submission.
**Numbers in the table may not add up exactly due to rounding.

E-mail comments to *paperwork@hrsa.gov* or mail the HRSA Reports Clearance Officer, Room 10–33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: May 19, 2010.

Sahira Rafiullah,

Director, Division of Policy and Information Coordination.

[FR Doc. 2010–12516 Filed 5–24–10; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60-Day10–09BY]

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, send comments to Maryam I. Daneshvar, CDC Acting 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

Healthy Homes and Lead Poisoning Surveillance System (HHLPSS)—New—National Center for Environmental Health (NCEH) and Agency for Toxic Substances and Disease Registry (ATSDR)/Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The overarching goal of the Healthy Homes and Lead Poisoning Surveillance System (HHLPSS) is to establish Healthy Homes Surveillance Systems at the state and national levels. Currently, 40 state and local Childhood Lead Poisoning Prevention Programs (CLPPP) report information (*e.g.,* presence of lead paint, age of housing, and type of housing) to CDC via the National Blood Lead Surveillance System (NBLSS) (OMB No. 0920–0337, exp. 1/31/2012). The addition of a new panel of housing questions would help to provide a more comprehensive picture of housing stock in the United States and potentially modifiable risk factors.

The objectives for developing this system are two-fold. First, the program would like to use surveillance data to estimate the extent of housing-related injuries and asthma. This is important because it will allow the program to systematically track the management and follow-up of those residents with these health outcomes.

The next objective for the development of this system is to examine potential housing-related risk factors. Childhood lead poisoning is just one of many adverse health conditions that are related to common housing deficiencies. Multiple hazards in housing, *e.g.,* mold, vermin, radon and the lack of safety devices, continue to adversely affect the health of residents. It is in the interest of public health to expand from a single focus on lead poisoning prevention to a coordinated, comprehensive, and systematic approach to eliminating multiple housing-related health hazards.

HHLPSS builds upon previous efforts by the NBLSS. While the earlier NBLSS was focused on homes of children less than six years old, the new HHLPSS, upon approval, will replace the NBLSS and will enable flexibility to evaluate all homes, regardless of the presence of children < age 6 years.

There is no cost to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN TABLE

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)	Total burden hours
State and Local Health Departments for Child Surveillance	40	4	4	640
Total				640

Carol Walker,

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

[FR Doc. 2010–12538 Filed 5–24–10; 8:45 am]

BILLING CODE P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Miner Safety and Health Training—Western United States, Request for Application (RFA) OH10–001, Initial Review

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC), announces the aforementioned meeting:

Time and Date: 8:30 a.m.–5 p.m., June 15, 2010 (Closed).

Place: Hyatt Regency Pittsburgh International Airport, 1111 Airport Boulevard, Pittsburgh, Pennsylvania 15231.

Status: The meeting will be closed to the public in accordance with provisions set forth in Section 552b(c)(4) and (6), Title 5, U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Section 10(d) of Public Law 92–463.

Matters To Be Discussed: The meeting will include the initial review, discussion, and evaluation of applications received in response to "Miner Safety and Health Training Program—Western United States, RFA OH10–001."

Agenda items are subject to change as priorities dictate.

Contact Person For More Information: S. Price Connor, PhD, Scientific Review Officer, Office of Extramural Programs, CDC, 1600 Clifton Road, NE., Mailstop E–74, Atlanta, Georgia 30333, Telephone (404) 498–2511.

The Director, Management Analysis and Services Office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: May 18, 2010.

Elaine L. Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 2010–12564 Filed 5–24–10; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2009–D–0260]

Draft Guidance for Industry: Questions and Answers Regarding the Reportable Food Registry as Established by the Food and Drug Administration Amendments Act of 2007 (Edition 2); Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of availability and request for comments.

SUMMARY: The Food and Drug Administration (FDA) is announcing the availability of a draft guidance entitled