

Information related to the characteristics of the patient population most likely to benefit from biofeedback treatment of hypertension, as well as information on the clinical acceptability, effectiveness, and the extent of use of this technology, is also being sought.

The AHCPR is interested in receiving information which would help in the evaluation or review of the technology as described above. To enable the interested scientific community to evaluate the information included in the assessment, AHCPR will discuss in the assessment only those data and analyses for which a source(s) can be cited. Respondents are therefore encouraged to include with their submissions a written consent permitting AHCPR to cite the sources of the data and comments provided. Otherwise, in accordance with the confidentiality statute governing information collected by AHCPR, 42 U.S.C. 299a-1(c), no information received will be published or disclosed which could identify an individual or entity described in the information, or could identify an entity or individual supplying the information.

Any person or group wishing to provide AHCPR with information relevant to this assessment should do so in writing no later than [insert date 90 days after the date of publication] to the Center for Health Care Technology at the address below.

Thomas V. Holohan, M.D., FACP,
Acting Director, Center for Health
Care Technology, AHCPR, 6000
Executive Boulevard, Suite 309,
Rockville, MD 20852, Phone: (301)
594-4023.

Dated: November 20, 1995.
Clifton R. Gaus,
Administrator.
[FR Doc. 95-29086 Filed 11-28-95; 8:45 am]
BILLING CODE 4160-90-M

Centers for Disease Control and Prevention

[INFO-95-06]

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 the CDC Reports Clearance Officer on (404) 639-3453.

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 for other forms of information technology. Send comments to Wilma Johnson, CDC Reports Clearance Officer,

1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project

1. Prevention Marketing Initiative Community Demonstration Site Project Evaluation—New—The Centers for Disease Control and Prevention, National Center for HIV, STD, and TB Prevention, Division of HIV/AIDS Prevention, Prevention Communication Branch is planning to conduct a survey as part of the evaluation of a five-city HIV prevention demonstration program that is part of the national Prevention Marketing Initiative. The local demonstration program is attempting to integrate community participation into a social marketing process. Community groups in the local sites have chosen to target particular high-risk behaviors and/or their determinants in young people under 25 years of age through a variety of intervention strategies. Decisions about the nature of local interventions are being based on formative research in each geographic area. It is hoped that this demonstration program will result in lowering HIV risk behavior among youth in the target audiences, and also in enhanced collaboration among individuals and organizations in the local communities. To evaluate the effectiveness of the interventions, questionnaire data will be collected from community social marketing group members before and after participation, and surveys of youth in local project areas and comparison areas will be undertaken before and after prevention message campaigns are launched. Baseline surveys are planned for early spring. Total cost to respondents is estimated at \$450,000.

Respondents	No. of respondents	No. of responses/respondent	Avg. burden/response (in hrs.)	Total burden (in hrs.)
Community social marketing group members and control group	200	2	0.50	200
Young people under 25 years of age in target audience and control group	3,000	2	0.25	1500
Total				1700

Dated: November 22, 1995.
Joseph R. Carter,
Acting Associate Director for Management and Operations, Centers for Disease Control and Prevention (CDC).
[FR Doc. 95-29166 Filed 11-28-95; 8:45 am]
BILLING CODE 4163-18-P

[30DAY-01]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review, 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 Office on (404) 639-3453.

The following requests have been submitted for review since the enactment of the PRA of 1995 on October 1, 1995.

1. Evaluation of the "WomanKind: Support Systems for Battered Women" Project in Minnesota—New—The Division of Violence Prevention at CDC has been directed to increase physicians' and other health care providers' ability to identify and attend

to the needs of victims of domestic violence.

WomanKind strives to: (1) Increase health care providers' capacity and motivation to identify and refer battered women to WomanKind advocates from several hospital departments, (2) facilitate clients' decisions to alter their circumstances, and (3) work with clients to identify and access existing community services that provide practical support in developing and implementing a plan for change.

The evaluation is being conducted to determine the extent to which the objectives listed above are achieved and to identify the integration and level of contribution made by each specific program element. If proven effective, this program could be used with other domestic violence prevention strategies to reduce the incidence of domestic violence.

Respondents	No. of re-spond-ents	No. of re-sponses/ respond-ent	Avg. bur-den/re-sponse (in hours)
Hospital Staff KABB Survey—Census 1 & 6 month & year	950	3	.17
Hospital Staff KABB Survey—Trainees Immediate Post-test	250	1	.17
Volunteer Advocate KABB Survey	30	4	.17
Womankind Client KABB Survey	450	4	.25
Control Client KABB Survey	200	4	.25
Hospital Staff Training Evaluation ...	250	1	.08
Volunteer Advocate Training Evaluation	30	6	.08
Hospital Staff Trainer Evaluation	250	1	.08
Volunteer Trainer Evaluation	30	6	.08

The total annual burden is 1262. Send comments to Allison Eydt; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503.

Dated: November 22, 1995.
Joseph R. Carter,
Acting Associate Director for Management and Operations, Centers for Disease Control and Prevention (CDC).
[FR Doc. 95-29167 Filed 11-28-95; 8:45 am]
BILLING CODE 4163-18-P

Mine Health Research Advisory Committee; Meeting

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 following committee meeting.

Name: Mine Health Research Advisory Committee.
Times and Dates: 9 a.m.-5 p.m., December 13, 1995. 9 a.m.-12 noon, December 14, 1995.

Place: The Washington Court Hotel, Hermitage Room, 525 New Jersey Avenue, NW., Washington, DC 20001.

Status: Open to the public, limited only by the space available.

Purpose: The Committee is charged with advising the Secretary of Health and Human Services on matters involving or relating to mine health research, including grants and contracts for such research. Additionally, the Committee assesses mine health research needs and advises on the conduct of mine health research.

Matters to be discussed: The agenda will include a discussion on current trends and future directions in the mining industries, NIOSH plans for a National Occupational Research Agenda, critical mining research needs for the next decade, NIOSH Recommended Standard for Occupational Exposure to Respirable Coal Mine Dust, subcommittee reports, report from 2nd International Conference on Health Miners and a report from the Director of NIOSH.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Gregory R. Wagner, M.D., Executive Secretary, Division of Respiratory Disease Studies, NIOSH, CDC, Mailstop 220, 944 Chestnut Ridge Road, Morgantown, West Virginia 26505, telephone 304/291-4474.

Dated: November 21, 1995.
Carolyn J. Russell,
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).
[FR Doc. 95-29168 Filed 11-28-95; 8:45 am]
BILLING CODE 4163-19-M

Board of Scientific Counselors, National Center for Infectious Diseases; Meeting

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 following committee meeting.

Name: Board of Scientific Counselors, National Center for Infectious Diseases (NCID).

Times and Dates: 8:30 a.m.-5 p.m., December 7, 1995. 8:30 a.m.-2:30 p.m., December 8, 1995.

Place: CDC, Auditorium B, 1600 Clifton Road, NE, Atlanta, Georgia 30333.

Status: Open to the public, limited only by the space available.

Purpose: The Board of Scientific Counselors, NCID, provides advice and guidance to the Director, CDC, and Director, NCID, in the following areas: program goals and objectives; strategies; program organization and resources for infectious disease prevention and control; and program priorities.

Matters to be Discussed: The agenda will focus on:

1. Progress and Plans for Implementation of CDC Emerging Infectious Diseases: Prevention Strategy for the U.S.
2. Personnel and Facility Updates.
3. Committee on Science, Engineering, and Technology Working Group Report on Emerging and Re-emerging Infectious Diseases; Recommendations for CDC; Implementation of Interagency Task Force.
4. Update on World Health Organization Emerging Infections Programs.
5. Research on Emerging and Re-emerging Infectious Diseases.
6. Health Communication Strategies.
7. Current Scientific Investigations.

Other agenda items include announcements/introductions; NCID update; late breakers; and follow-up on actions recommended by the Board (May 1995).

Agenda items are subject to change as priorities dictate.

Written comments are welcome and should be received by the contact person listed below prior to the opening of the meeting.

Contact Person for More Information: Diane S. Holley, Office of the Director, NCID, CDC, Mailstop C-20, 1600 Clifton Road, NE, Atlanta, Georgia 30333, telephone 404/639-0078.

Dated: November 20, 1995.
Carolyn J. Russell,
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 95-29191 Filed 11-28-95; 8:45 am]
BILLING CODE 4163-18-M

Food and Drug Administration

Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). This notice also summarizes the procedures for the meeting and methods by which