

Board of Governors of the Federal Reserve System, January 31, 1996.

Jennifer J. Johnson,

Deputy Secretary of the Board.

[FR Doc. 96-2390 Filed 2-5-96; 8:45 am]

BILLING CODE 6210-01-F

**The Tampa Banking Company, et al.;
Notice of Applications to Engage de
novo in Permissible Nonbanking
Activities**

The companies listed in this notice have filed an application under § 225.23(a)(1) of the Board's Regulation Y (12 CFR 225.23(a)(1)) for the Board's approval under section 4(c)(8) of the Bank Holding Company Act (12 U.S.C. 1843(c)(8)) and § 225.21(a) of Regulation Y (12 CFR 225.21(a)) to commence or to engage *de novo*, either directly or through a subsidiary, in a nonbanking activity that is listed in § 225.25 of Regulation Y as closely related to banking and permissible for bank holding companies. Unless otherwise noted, such activities will be conducted throughout the United States.

Each application is available for immediate inspection at the Federal Reserve Bank indicated. Once the application has been accepted for processing, it will also be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether consummation of the proposal can "reasonably be expected to produce benefits to the public, such as greater convenience, increased competition, or gains in efficiency, that outweigh possible adverse effects, such as undue concentration of resources, decreased or unfair competition, conflicts of interests, or unsound banking practices." Any request for a hearing on this question must be accompanied by a statement of the reasons a written presentation would not suffice in lieu of a hearing, identifying specifically any questions of fact that are in dispute, summarizing the evidence that would be presented at a hearing, and indicating how the party commenting would be aggrieved by approval of the proposal.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than February 20, 1996.

A. Federal Reserve Bank of Atlanta (Zane R. Kelley, Vice President) 104 Marietta Street, N.W., Atlanta, Georgia 30303:

1. *The Tampa Banking Company*, Tampa, Florida; to engage *de novo* through its subsidiary, Florida

Investments Advisers, Inc., Tampa, Florida (in organization), in investment advisory services, pursuant to § 225.25(b)(4) of the Board's Regulation Y.

B. Federal Reserve Bank of Minneapolis (James M. Lyon, Vice President) 250 Marquette Avenue, Minneapolis, Minnesota 55480:

1. *Pembina County Bankshares, Ltd.*, Cavalier, North Dakota; to engage *de novo* in the extension of credit to borrowers of its subsidiary bank, pursuant to § 225.25(b)(1) of the Board's Regulation Y. The geographic scope for this activity is North Dakota.

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**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

**Centers for Disease Control and
Prevention**

[INFO-96-09]

**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 Projects

1. Intensive-Care Antimicrobial Resistance Epidemiology (Project ICARE), Phase II—NEW—Antibiotic resistance is estimated to cost as much as 4 billion dollars a year to the health care system in the United States and the number of resistant microorganisms is increasing. For example, data reported to the National Nosocomial Infections Surveillance (NNIS) system demonstrated a 20-fold increase, between January 1989 and March 1993, in the percentage of enterococci associated with nosocomial infections that are resistant to vancomycin (VRE). Additional analysis of NNIS data has demonstrated that other antibiotic resistant nosocomial pathogens have also increased in recent years. One of the major factors limiting the understanding of antibiotic resistance among nosocomial pathogens is the lack of information on the relationship between the amount and kind of antibiotic used in hospitals and the emergence of resistance.

This proposed one year study, called Project ICARE, will collect data on the amount of antibiotics used in 50 NNIS hospitals and the antibiotic susceptibility patterns found in certain bacterial pathogens isolated in these hospitals' microbiology laboratories between June 1996 and June 1997. Further, new mechanisms of resistance will be studied on specific antibiotic-resistant isolates that will be sent to CDC from these laboratories. A successful pilot study involving eight NNIS hospitals was conducted between August 1994 and January 1995 to study the feasibility of collecting such information.

After initially setting up the project with information on the different intensive care units (ICUs) and wards, the hospital will provide three different types of data each month: (1) summary of the amount of parenteral and oral antibiotics, by generic group, reported by the pharmacy, (2) summary of the number of isolates, by species, susceptible, intermediate or resistant to various antibiotics reported by the microbiology laboratory, and (3) actual isolates of resistant pathogens to be sent to by the microbiology laboratory to CDC. For antibiotics used and number of isolates in each of the susceptibility categories, separate data are to be reported for each ICU, all other inpatients, and outpatients (antibiotic use among outpatients is not collected). Data collection forms for summary data from the microbiology laboratory and pharmacy have been created to assist in recording the data; however, the data