Respondents	Number of respondents	Number of responses/ respondent	Avg. burden/ response (in hrs.)	Total burden (in hrs.)
Infants	300	7	0.524	1,100.40
Total				1,353.25

4. *Antivirals Usage in Nursing Homes*—New—Outbreaks of influenza A in nursing homes (NH) may result in the hospitalization of up to 25% of ill residents and the death of up to 30% of those who are hospitalized. The rapid diagnosis of influenza A and the timely administration of currently available antiviral medications, amantadine and rimantadine, can lessen the impact of these outbreaks. However, it is unknown how often laboratory tests for the rapid diagnosis of influenza A are utilized and how frequently antivirals are used to control nursing home outbreaks of influenza A.

The purpose of this survey is to determine how often rapid testing and antivirals are used to control influenza A outbreaks in NH's. A sample of NH's will be selected randomly from one state within each of nine influenza surveillance regions. The survey will be mailed to infection control personnel in the randomly selected NH's. The results will be used to identify where educational efforts should be directed to lessen the impact of influenza A on elderly institutionalized persons.

Respondents	Number of respondents	Number of responses/ respondent	Avg. burden/ responses (in hrs.)	Total burden (in hrs.)
NH infection control	918	1	0.16	147
Total				147

Dated: March 27, 1998.

Charles Gollmar,

Acting Associate Director for Policy, Planning, and Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 98–8613 Filed 4–1–98; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 95F–0174]

Ecolab, Inc.; Withdrawal of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the withdrawal, without prejudice to a future filing, of a food additive petition (FAP 5B4462) proposing that the food additive regulations be amended to provide for the safe use of nonanoic acid, lactic acid, citric acid, sodium 1-octane sulfonate, tertiary butylhydroquinone, and the sodium salt of tetrapropylene-1,1-oxybis-benzenesulfonic acid as components of a sanitizing solution intended for general use on food-contact surfaces.

FOR FURTHER INFORMATION CONTACT: John R. Bryce, Center for Food Safety and Applied Nutrition (HFS–215), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202–418–3023.

SUPPLEMENTARY INFORMATION: In a notice published in the **Federal Register** of July 18, 1995 (60 FR 36811), FDA announced that a food additive petition (FAP 5B4462) had been filed by H. B. Fuller Co. The petition proposed to amend the food additive regulations in § 178.1010 *Sanitizing solutions* (21 CFR 178.1010) to provide for the safe use of nonanoic acid, lactic acid, citric acid, sodium 1-octane sulfonate, tertiary butylhydroquinone, and the sodium salt of tetrapropylene-1,1-oxybis-benzenesulfonic acid as components of a sanitizing solution intended for general use on food-contact surfaces. Since publication of the filing notice, the division of H. B. Fuller Co. responsible for this petition has been purchased by Ecolab, Inc., 370 North Wabasha St., St. Paul, MN 55102. Ecolab, Inc. has now withdrawn the petition without prejudice to a future filing (21 CFR 171.7).

Dated: March 17, 1998.

Laura M. Tarantino,

Acting Director, Office of Premarket Approval, Center for Food Safety and Applied Nutrition.

[FR Doc. 98–8569 Filed 4–1–98; 8:45 am]

BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Vaccine Injury Compensation Program: Revised Amount of the Average Cost of a Health Insurance Policy

The Health Resources and Services Administration is publishing an updated monetary amount of the average cost of a health insurance policy as it relates to the National Vaccine Injury Compensation Program (VICP).

Subtitle 2 of Title XXI of the Public Health Service Act, as enacted by the National Childhood Vaccine Injury Act of 1986 and as amended, governs the VICP. The VICP, administered by the Secretary of Health and Human Services (the Secretary), provides that a proceeding for compensation for a vaccine-related injury or death shall be initiated by service upon the Secretary and the filing of a petition with the United States Court of Federal Claims. In some cases, the injured individual may receive compensation for future lost earnings, less appropriate taxes and the ''average cost of a health insurance policy, as determined by the Secretary.''

Section 100.2 of the VICP's implementing regulations (42 CFR part 100) provides that revised amounts of an average cost of a health insurance policy, as determined by the Secretary, are to be published from time to time in