

DEPARTMENT OF HEALTH AND HUMAN SERVICES**National Institutes of Health****Submission for OMB Review; Comment Request Physician Survey on Genetic Testing**

SUMMARY: Under the provisions of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the National Cancer Institute (NCI), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the **Federal Register**, on January 21, 1999, Volume 64, pages 3305 and 3306 and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment.

Proposed Collection

Title: American Stop Smoking Intervention Study for Cancer Prevention (ASSIST) Final Evaluation: "Strength of Tobacco Control Survey".
Type of Information Request: New.
Need and Use of Information Collection: "The Strength of Tobacco Control Survey" will collect data on financial resources, capacity, and specific efforts to control tobacco use. The data will be collected from professionals working in the field, in project management, and in senior agency administration within major state-level organizations concerned with tobacco control, in all 50 states and the District of Columbia. The data will be used by the National Cancer Institute to evaluate the effectiveness of the American Stop Smoking Intervention Study for Cancer Prevention (ASSIST), a large-scale, 17-state demonstration project. Data will be used to develop a "strength of tobacco control" construct for use in evaluation of the overall ASSIST intervention. This study will also provide valuable information to Government agencies and to the general public necessary for tobacco control research. Data will be collected from September to November 1999, from approximately 1,428 individuals in 357 organizations in the 50 states and the District of Columbia.
Frequency of Response: One-time study.
Affected Public: Individuals. *Type of Respondents:* Professionals in tobacco control organizations. The annual reporting burden is as follows: Estimated Number of Respondents: 1,428; Estimated Number of Responses per Respondent: 1; Average Burden Hour per Response: .54; and Estimated

Total Annual Burden Hours Requested: 774. The annualized cost to respondents is estimated at \$31,852. There are no Operating or Maintenance Costs to report.

Request for Comments

Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriated automated, electronic, mechanical, or other technological collection techniques or other forms on information technology.

Direct Comments to OMB

Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Frances Stillman, Ed.D., Public Health Advisor, National Cancer Institute, Executive Plaza North, Room 241, 6130 Executive Boulevard MSC 7337, Bethesda, Maryland 20892-7337, or call non-toll free number (301) 496-8584, or FAX your request to (301) 496-8675.

Comments Due Date

Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

Dated: June 18, 1999.

Reesa L. Nichols,

NCI Project Clearance Liaison.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**National Institutes of Health****Submission for OMB Review; Comment Request; Physicians' Resolution of Ethical Problems and Use of Institutional Consultation Services****Summary**

Under the provisions of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Department of Clinical Bioethics, Warren G. Magnuson Clinical Center, the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the **Federal Register** on September 4, 1998, vol. 63, no. 172, pages 47310-47311 and allowed 60-days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection

Title: Physicians' Resolution of Ethical Problems and Use of Institutional Consultation Services.
Type of Information Collection Request: NEW. *Need and Use of Information Collection:* The survey asks for information about: (1) The ways that physicians address ethical problems that arise in their practice; (2) the types of questions that physicians perceive to raise ethical issues, and how often these arise; (3) how frequently physicians use the ethics consultation service (if any) at their primary institution; and (4) the reasons why physicians do and do not request formal ethics consultation through their institution's ethics consultation service. The information collected will help the NIH and other health care institutions to structure their ethics consultation service, and other ethics resources, to provide more helpful and responsive ways of addressing ethical problems and dilemmas. *Frequency of Response:* One time. *Affected Public:* Internal medicine doctors throughout the U.S. *Type of Respondents:* Clinical Oncologists, Critical Care Specialists and other Internal Medicine physicians. The