

Respondents	Number of respondents	Number of responses/respondent	Avg. burden per response (in hrs.)	Total burden (in hrs.)
State and local health department	65 areas	Varies—cases are reported by occurrence.	.25/hour (15 minutes)	1.083
Total	1.083

Dated: December 21, 1999.

Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-07-00]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) 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 Officer at (404) 639-7090. Send written comments to CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503. Written

comments should be received within 30 days of this notice.

Proposed Project

1. Management of Occupational Blood Exposures and Antibiotic Prescription Practices Among United States Dentists—NEW—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP). In U.S. health care facilities, both occupational transmission of bloodborne pathogens and antimicrobial resistance are important problems with significant morbidity and costs. Several public health initiatives have been undertaken or are being developed to increase compliance with recently published recommendations to reduce occupational transmission of bloodborne pathogens and to assess current antibiotic use by physicians, hospital and other medical health-care workers. However, to date, there are limited data on dentists' implementation and knowledge of postexposure recommendations or on their antibiotic use. Therefore, the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Oral Health, intends to conduct a survey of the

management of occupational blood exposures and antibiotic prescription practices among United States dentists. Information provided by these data are critical to the Division of Oral Health's ongoing efforts to protect dental workers from infection with bloodborne diseases and to target educational efforts aimed at increasing awareness of and compliance with current CDC recommendations. Information on antibiotic prescribing practices will help identify the most effective strategies for promoting appropriate use of antibiotics among dentists, provide an epidemiologic baseline on which to measure future behaviors, and assess the need for comprehensive guidelines.

A random sample of currently practicing U.S. dentists will be mailed questionnaires with two follow-up mailings to non-respondents. The information collected will include demographic information, office policies for management of occupational blood exposures and training of dental staff, the weekly number of antibiotic prescriptions, the most commonly prescribed antibiotics, and the most common oral conditions for which antibiotics are prescribed. The total annual burden hours are 3600.

Respondents	Number of respondents	Number of responses/respondent	Average burden/response (in hours)
Practicing U.S. Dentists	3,600	1	0.25

Dated: December 21, 1999.

Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Refugee State-of-Origin Report ORR-11.

OMB No.: 0970-0043.

Description: The information collection of the ORR-11 (Refugee State-of-Origin Report) is designed to satisfy the statutory requirements of the Immigration and Nationality Act. Section 412(a)(3) of the Act requires ORR to compile and maintain data on the secondary migration of refugees within the United States after arrival.

In order to meet this legislative requirement, ORR requires each State to submit an annual count of the number of refugees who were initially resettled in another State. The State does this by counting the number of refugees with social security numbers indicating residence in another State at the time of arrival in the U.S. (The first three digits

of the social security number indicate the State of residence of the applicant.)

Data submitted by the States are compiled and analyzed by the ORR statistician, who then prepares a summary report which is included in ORR's annual Report to Congress. The primary use of the data is to quantify and analyze refugee secondary migration among the 50 States. ORR uses these data to adjust its refugee arrival totals in order to calculate the ORR social services formula allocation.

Respondents: State, Local or Tribal Government.

Annual Burden Estimates: