

**Comments Due Date**

Comments regarding this information collection are best assured of having their full effect if received on or before February 28, 2000.

Dated: December 22, 1999.

**Peter Savage,**

*Acting Director, Division of Epidemiology and Clinical Applications.*

[FR Doc. 99-33910 Filed 12-29-99; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Heart, Lung, and Blood Institute; Proposed Collection; Comment Request, the Framingham Study**

**Summary**

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 National Heart, Lung, and Blood Institute (NHLBI), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

**Proposed Collection**

*Title:* The Framingham Study.

*Type of Information Collection*

*Request:* Revision of a currently approved collection (OMB NO. 0925-0216).

*Need and Use of Information*

*Collection:* This project involves physical examination and testing of the surviving members of the original Framingham Study cohort and the surviving members of the offspring cohort. Investigators will contact doctors, hospitals, and nursing homes to ascertain participants' cardiovascular events occurring outside the study clinic. Information gathered will be used to further describe the risk factors, occurrence rates, and consequences of

cardiovascular disease in middle aged and older men and women.

*Frequency of Response:* The cohort participants respond every two years; the offspring participants respond every four years.

*Affected Public:* Individuals or households; Businesses or other for profit; Small businesses or organizations.

*Type of Respondents:* Middle aged and elderly adults; doctors and staff of hospitals and nursing homes.

The annual reporting burden is as follows:

*Estimated Number of Respondents:* 2,865;

*Estimated Number of Responses per Respondent:* 3,398;

*Average Burden Hours Per Response:* 0.6321; and

*Estimated Total Annual Burden Hours Requested:* 6,154.

The annualized cost to respondents is estimated at \$61,540, assuming respondents time at the rate of \$10 per hour. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

**ESTIMATE OF HOUR BURDEN**

Type of response	Number of respondents	Frequency of response	Average time per response	Annual hour burden
Framingham Original Cohort .....	340	3,912	0.3496	465
Framingham Offspring Cohort .....	1,267	5,642	0.7300	5,218
Physician, hospital, nursing home staff <sup>1</sup> .....	629	1.0	0.6700	421
Framingham next-of-kin <sup>1</sup> .....	629	1.0	0.0800	50
Total .....	2,865	—	—	6,154

<sup>1</sup> Annual burden is placed on doctors, hospitals, nursing homes, and respondent relatives/informants through requests for information which will help in the compilation of the number and nature of new fatal and nonfatal events occurring outside the Framingham examining clinic.

**Request For Comments**

Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) 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 appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

**For Further Information**

To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Dr. Paul Sorlie, Project Officer, NIH, NHLBI, 6701 Rockledge Drive, MSC 7934, Bethesda, MD 20892-7934, or call non-toll-free number (301) 435-0456 or E-mail your request, including your address to: SorlieP@nih.gov.

**Comments Due Date**

Comments regarding this information collection are best assured of having their full effect if received on or before February 28, 2000.

Dated: December 14, 1999.

**Lawrence Friedman,**

*Director, Division of Epidemiology and Clinical Applications.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Center for Complementary and Alternative Medicine; Notice of Meeting**

Pursuant to Section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. appendix 2), notice is hereby given of the National Advisory Council for Complementary and Alternative Medicine (NACCAM).

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.