

Independence Avenue SW., Washington DC, 20201. Written comments should be received within 60 days of this notice

Dated: February 10, 2000.

Dennis P. Williams,

Deputy Assistant Secretary, Budget.

[FR Doc. 00-4278 Filed 2-23-00; 8:45 am]

BILLING CODE 4150-4-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-18-00]

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

Exposure to Volatile Organic Compounds and Childhood Leukemia Incidence at MCB Camp Lejeune, North Carolina—Extension—Agency for Toxic Substances and Disease Registry (ATSDR). There is limited evidence that in utero exposure to volatile organic compounds (VOCs) such as trichloroethylene and tetrachloroethylene (PCE) in drinking water may be strongly associated with

childhood leukemia (CL). In 1982, VOC contamination was identified in certain groundwater supply wells which supplied drinking water to housing units at U.S. Marine Corps Base Camp Lejeune in Jacksonville, North Carolina. In a previous health study of approximately 6,000 infants exposed in utero to this contaminated water and 6,000 unexposed births, it was shown that gestational PCE exposure was related to lower birth weights for certain subgroups. The purpose of the proposed nested case-control study is to investigate the potential relationship between exposure to VOCs in drinking water and incidence of CL at Camp Lejeune. A secondary objective of the proposed study is to investigate the potential relationship between VOCs in drinking water and birth defects in this population.

During this phase of the proposed study, an attempt will be made to locate as many of the children born to base residents between 1968 and 1985 as well as offspring from pregnancies that occurred during this time period but were not delivered at Camp Lejeune. A brief screening questionnaire will be interviewer-administered to identify potential cancer and birth defect cases. Some of the data to be collected by the questionnaire includes: confirmation of the name(s) of children and date(s) of birth; dates and location of residence on base during the pregnancy and/or at the time of delivery; current vital status of each child; the determination of diagnosis with cancer or birth defects before age 20. As a result of delays in obtaining data necessary to trace potential respondents, a renewal for this project has been requested.

It is necessary to identify each respondent in order to assess place of residence at Camp Lejeune as a measure of possible VOC exposure as well as to

determine possible case status, *i.e.* reported diagnosis of childhood cancer or birth defect. This information will be used during the next study phase to identify potential cases and controls for the proposed nested case-control study.

With help from the U. S. Navy and U. S. Marine Corps sources, we will obtain current address information and attempt to contact respondents directly. For respondents with unknown current addresses, tracing efforts will include advertising in the general media as well as in publications directed toward Marine Corps and Navy personnel. Once the respondent is located, the questionnaire will be administered by trained interviewers over the telephone.

Respondents will be one of the following: (1) A parent who gave birth or was pregnant while residing at MCB Camp Lejeune between 1968 and 1985; (2) a parent who was pregnant while residing at MCB Camp Lejeune between 1968 and 1985 but gave birth elsewhere; or (3) an offspring of said parents. The number of births that occurred at MCB Camp Lejeune during this period is approximately 12,000. It has been estimated that approximately one-third of women who seek prenatal care while residing at Camp Lejeune are relocated before delivery. Therefore, attempts will be made to contact and interview up to an additional 4,000 respondents. Of the 16,000 total possible respondents, a conservative estimate of the number that will be located and subsequently interviewed is 13,000 (about 80%).

The hourly burden has been modified since the first submittal. This was a result of pretesting of the data collection instrument. It was found that the average completion time per survey was closer to 15 minutes as opposed to the original estimate of 9 minutes. The total annual burden hours are 1,083.

Type of respondents	Number of respondents	Number of responses/respondent	Avg. burden of response (in hrs.)
Parent/Child born at Camp Lejeune; 1968-1985	9,650	1	0.25
Pregnancy at Camp Lejeune, delivery else-where; 1968-1985	3,350	1	0.25

Dated: February 14, 2000.

Charles Gollmar,

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

[FR Doc. 00-4197 Filed 2-23-00; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-19-00]

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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

Follow-Up Study of Children With Developmental Disabilities (0920-0436)—Revision—National Center for Environmental Health (NCEH). In the mid-1980s, a number of 10-year-old children were identified as having one or more of five developmental disabilities: mental retardation, cerebral palsy, epilepsy, hearing impairment, or vision impairment. These children were identified (mainly from special

education records in the public schools) in the metro-Atlanta area as part of a study to develop surveillance methods for these conditions in school-age children. A follow-up study was initiated to trace, locate and interview these children, who are now in their early twenties, to assess their status with regard to educational attainment, employment, living arrangements, services received, functional limitations, adaptive behavior, social participation, health, and quality of life.

This study proposes to continue with the one-time, in-person interview and

includes a contemporaneous comparison group of persons who, at age 10 years, were in regular education classes in the same schools as were the persons with developmental disabilities. The data generated from this study will continue to be used to estimate the burden of secondary health conditions, limited social participation, and economic disadvantage among young adults with long-standing, developmental impairments. This request is for a one-year renewal of the currently-approved study. The total annual burden hours are 1,093.

Respondents	No. of respondents	No. of responses/respondent	Avg. burden of response (in hrs.)
Contacting	1,056	1	10/60
Interview	898	1	60/60
Call backs	90	1	10/60

Dated: February 14, 2000.

Charles Gollmar,

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

[FR Doc. 00-4200 Filed 2-23-00; 8:45 am]

BILLING CODE 4163-18-M

are introduced each year. Yet the list of environmental chemicals and agents that have been investigated to determine whether they have adverse effects on reproductive health is still limited. With the growing number of women in the work force, it is becoming increasingly important to evaluate the potential female reproductive health effects of occupational and physical agents.

This study will examine reproductive disorders among female flight attendants. Approximately 66,000 flight attendants are currently employed by U.S. commercial airlines and are potentially exposed to ionizing radiation and disruption of circadian rhythms, two exposures that may adversely affect reproductive function. Teachers will be enrolled as an external comparison group for this study.

Data from company personnel records containing demographic and work history information will be used to estimate workplace exposures. Each woman will be asked to complete a telephone questionnaire on reproductive history and other factors (such as cigarette smoking) that may influence reproductive function. Each questionnaire will take approximately 60 minutes to complete. Medical records will be requested to confirm adverse reproductive outcomes reported by the participants. The risk of adverse reproductive outcomes between the two groups of women will then be compared. The total annual burden hours are 6200.

Respondents	No. of respondents	No. of re-sponses/respondent	Avg. burden per response
Workers	6,200	1	1.0
Medical providers	1,200	1	0.5

Dated: February 14, 2000.

Charles Gollmar,

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

[FR Doc. 00-4201 Filed 2-23-00; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-16-00]

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Proposed Project

Studies of Adverse Reproductive Outcomes in Female Occupational Groups (0920-0367)—EXTENSION—National Institute for Occupational Safety and Health (NIOSH). An estimated 50,000 to 60,000 chemicals are in common use throughout society today and hundreds of new chemicals

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-17-00]

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