

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).

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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 responses/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).

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-16-00]

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

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]

Agency Forms Undergoing Paperwork Reduction Act Review

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Proposed Project

National Program of Cancer Registries—Cancer Surveillance System—NEW—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP). The American Cancer Society estimates that 8.2 million Americans have a history of cancer and that in 1999, about 1.2 million new cases will be diagnosed. At the national level, cancer incidence data are available for only 14% of the population of the United States. While

this is appropriate for analyses of major cancers in large population subgroups, it is not always adequate for minority populations and rare cancer analyses. Further, to plan and evaluate state and national cancer control and prevention efforts, national data are needed. Therefore, the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Control, Division of Cancer Prevention and Control, proposes to aggregate existing cancer incidence data from states funded by the National Program

of Cancer Registries into a national surveillance system.

These data are already collected and aggregated at the state level. Thus the additional burden on the states would be small. Program implementation would require funded states to report data to the Centers for Disease Control on an annual basis twelve months after the close of a diagnosis year and again at twenty-four months to obtain more complete incidence data and vital status from mortality data. The total annual burden hours are 126.

Respondents	Number of respondents	Number of responses/respondent	Average burden/response (in hrs.)
State, territorial, and District of Columbia cancer registries	63	1	2

Dated: February 14, 2000.

Charles Gollmar,

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

Elimination of Endemic Measles From the United States: Meeting

The Centers for Disease Control and Prevention (CDC) announces the following meeting:

Name: Elimination of Endemic Measles from the United States.

Times and Dates: 8:30 a.m.–6 p.m., March 16, 2000 and 8 a.m.–12 p.m., March 17, 2000.

Place: Hyatt Regency Atlanta, 265 Peachtree Street, Atlanta, Georgia 30303.

Status: Open to the public, limited only by the space available.

Purpose: To evaluate progress toward the national goal of elimination of measles as an endemic disease in the United States. The Centers for Disease Control and Prevention is convening a meeting of a panel of measles and public health experts serving as simultaneous individual consultants. The experts will review the information pertaining to the epidemiology and surveillance of measles in the United States and give their opinions as to whether the Healthy People 2000 objective of elimination of endemic measles from the United States has been met.

Matters to be Discussed: The agenda will include a working definition of measles elimination for the United States; simple mathematical concepts related to measles elimination; using basic surveillance data to evaluate measles elimination; measles epidemiology in the United States 1997–1999; measles virologic surveillance; adequacy of measles surveillance; lack of evidence for transmission of measles virus from people with inapparent measles infection; measles vaccination coverage levels and population immunity to measles in the United States and global perspective of measles elimination. Other matters of relevance to the panel’s objectives may be discussed.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Ed Yacovone, Deputy Branch Chief, Child Vaccine Preventable Diseases Branch, Epidemiology and Surveillance Division, National Immunization Program, CDC, 1600 Clifton Road, NE, m/s E61, Atlanta, Georgia 30333. Telephone 404/639-8855.

The Director, Management Analysis and Services office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: February 17, 2000.

Carolyn J. Russell,

Director, Management Analysis and Services Office Centers for Disease Control and Prevention (CDC).

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Study Team for the Los Alamos Historical Document Retrieval and Assessment Project

The Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR) announce the following meeting.

Name: Public Meeting of the Study Team for the Los Alamos Historical Document Retrieval and Assessment Project.

Time and Date: 5 p.m.–7 p.m., Wednesday, March 8, 2000.

Place: Taos Convention Center, El Taoseno Room, 120 Civic Plaza Drive, Taos, New Mexico, telephone 505/758-5792.

Status: Open to the public, limited only by space available. The meeting room accommodates approximately 100 people.

Background: Under a Memorandum of Understanding (MOU) signed in December 1990 with Department of Energy (DOE) and replaced by an MOU signed in 1996, the Department of Health and Human Services (HHS) was given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production use. HHS delegated program responsibility to CDC.

In addition, an MOU was signed in October 1990 and renewed in November 1992 between ATSDR and DOE. The