

in knowledge, attitudes, and behaviors of three study groups; educational outreach only, education outreach plus chapter-based clinic, and a control group. Results will be used to assess the impact of the impact of the educational

outreach program, improve breast and cervical cancer screening, and to guide the IHS and Tribal health programs in the delivery of culturally appropriate intervention to reduce mortality rates from breast and cervical cancer among

Navajo women. *Affected Public:* Individuals. *Type of Respondents:* Individuals. The table below provides the estimated burden response for this information collection:

ESTIMATED BURDEN RESPONSE TABLE

| Data collection instrument | Estimated No. of respondents | Responses per respondent | Average burden hour per response | Total annual burden hrs |
|----------------------------|------------------------------|--------------------------|----------------------------------|-------------------------|
| KAB Pretest | 450 | 1 | 0.42 hr (25 minutes) | 188.0 |
| KAB Post test | 450 | 1 | 0.42 hr (25 minutes) | 188.0 |
| Interviews | 30 | 1 | 0.25 hr (15 minutes) | 8.0 |
| Total | 930 | 1 | | 384.0 |

¹ For ease of understanding, burden hours are also provided in actual minutes.

There are no Capital Costs, Operating Costs and/or Maintenance Costs to report for this information collection.

Request for Comments: Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the IHS processes the information collected in a useful and timely fashion; (c) the accuracy of the public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether methodology and assumptions used to determine the estimate are logical; (e) ways to enhance the quality, utility, and clarity of the information being collection; and (f) was to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Direct Comments to OMB: Send your written comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time, to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS.

To request more information on the proposed collection or to obtain a copy of the data collection plan(s) and/or instruction(s), contact: Mr. Lance Hodahkwen, Sr., M.P.H., IHS Reports Clearance Officer, 12300 Twinbrook Parkway, Suite 450, Rockville, MD 20852-1601, or call non-toll free (301) 443-5938, or send via facsimile to (301) 443-2613, or send your e-mail requests, comments, and return address to: lhodahkwen@hqe.ihs.gov.

Comment 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: March 3, 2002.

Michael H. Trujillo,

Assistant Surgeon General, Director, Indian Health Service.

[FR Doc. 02-7763 Filed 3-29-02; 8:45 am]

BILLING CODE 4160-16

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Consensus Development Conference on Management of Hepatitis C: 2002

Notice is hereby given of the National Institutes of Health (NIH) Consensus Development Conference on "Management of Hepatitis C: 2002" to be held June 10-12, 2002, in the NIH Natcher Conference Center, 45 Center Drive, Bethesda, Maryland 20892. The conference will begin at 8 a.m. on June 10 and 11, and at 9 a.m. on June 12 and will be open to the public.

The hepatitis C virus (HCV) is the leading cause of liver disease in the United States and certainly the most common cause of cirrhosis and hepatocellular carcinoma; it is also the most common reason for liver transplantation. Almost 4 million people in this country are believed to be infected with this virus. A Consensus Development Conference on hepatitis C was held at the National Institutes of Health in March 1997. This led to an important, widely distributed NIH Consensus Statement that, for several years, was broadly accepted as the standard of care.

In the five years since that time, there has been a dramatic increase in knowledge of the condition, indicating the need to re-examine the approaches to management and treatment. This conference is convened with the aim of

reviewing the most recent developments regarding management, treatment options, and the widening spectrum of potential candidates for treatment.

During the first day-and-a-half of the conference, experts will present the latest hepatitis C research findings to an independent, non-Federal panel. After weighing all of the scientific evidence, the panel will draft a statement, addressing the following key questions:

- What is the natural history of hepatitis C?
- What is the most appropriate approach to diagnose and monitor patients?
- What is the most effective therapy for hepatitis C?
- Which patients with hepatitis C should be treated?
- What recommendations can be made to patients to prevent transmission of hepatitis C?
- What are the most important areas for future research?

On the final day of the conference, the panel chairperson will read the draft statement to the conference audience and invite comments and questions. A press conference will follow, to allow the panel and chairperson to respond to questions from the media.

The primary sponsors of this meeting are the National Institute of Diabetes and Digestive and Kidney Diseases and the NIH Office of Medical Applications of Research. Cosponsors of the meeting are: Centers for Disease Control and Prevention (CDC), the U.S. Food and Drug Administration (FDA), the U.S. Department of Veterans Affairs (VA), the National Institute of Child Health and Human Development (NICHD), the National Cancer Institute (NCI), the National Center for Complementary and Alternative Medicine (NCCAM), the National Institute on Alcohol Abuse and Alcoholism (NIAAA), the National Institute of Allergy and Infectious Diseases (NIAID), and the National

Heart, Lung, and Blood Institute (NHLBI).

Advance information about the conference and conference registration materials may be obtained from AIR Prospect Center of Silver Spring, Maryland, by calling 301-592-3320 or by sending e-mail to <hepatitisc@prospectassoc.com>. AIR Prospect Center's address is 10720 Columbia Pike, Suite 500, Silver Spring, Maryland 20901-4437. A conference agenda and registration information are also available on the NIH Consensus Program Web site at <<http://consensus.nih.gov>>.

Please Note: The NIH has recently instituted new security measures to ensure the safety of NIH employees and property. All visitors must be prepared to show a photo ID upon request. Visitors may be required to pass through a metal detector and have bags, backpacks, or purses inspected or x-rayed as they enter NIH buildings. Conference attendees may want to leave extra bags or personal materials at their hotel to minimize the time needed for inspection. For more information about the new security measures at NIH, please visit the Web site at <<http://www.nih.gov/about/visitorssecurity.htm>>.

Dated: March 25, 2002.

Ruth L. Kirschstein,

Acting Director, National Institutes of Health.

[FR Doc. 02-7814 Filed 3-29-02; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

State-of-the-Science Conference on Symptom Management in Cancer: Pain, Depression, and Fatigue

Notice is hereby given of the National Institutes of Health (NIH) State-of-the-Science Conference on "Symptom Management in Cancer: Pain, Depression, and Fatigue" to be held July 15-17, 2002, in the NIH Natcher Conference Center, 45 Center Drive, Bethesda, Maryland 20892. The conference will begin at 8 a.m. on July 15 and 16, and at 9 a.m. on July 17 and will be open to the public.

While research is producing increasingly hopeful insights into the causes and cures of cancer, efforts to manage the side effects of the disease and its treatments have not kept pace. Evidence suggests that pain, for example, is frequently under-treated in the oncology setting.

In the past three decades, scientific discoveries have transformed cancer from a usually fatal disorder to a curable illness for some and a chronic disease for many more. With this shift has come

a growing optimism about the future, but also a growing appreciation of the human costs of cancer care. As patients live longer with cancer, concern is growing about both the health-related quality of life of those diagnosed with cancer and the quality of care they receive. The challenge that faces us is how to increase awareness about the importance of recognizing and actively addressing cancer-related distress when it occurs. Specifically, we need to be able to identify who is at risk for cancer-related pain, depression, and/or fatigue; what treatments work best to address these symptoms when they occur; and how best to deliver interventions across the continuum of care.

This two-and-a-half-day conference will examine the current state of knowledge regarding the management of pain, depression and fatigue in individuals with cancer and identify directions for future research.

During the first day-and-a-half of the conference, experts will present the latest research findings on cancer symptom management to an independent non-Federal panel. After weighing all of the scientific evidence, the panel will draft a statement, addressing the following key questions:

- What is the occurrence of pain, depression, and fatigue, alone and in combination, in people with cancer?
- What are the methods used for clinical assessment of these symptoms throughout the course of cancer, and what is the evidence for their reliability and validity in cancer patients?
- What are the treatments for cancer-related pain, depression, and fatigue, and what is the evidence for their effectiveness?
- What are the impediments to effective symptom management in people diagnosed with cancer, and what are optimal strategies to overcome these impediments?
- What are the directions for future research?

On the final day of the conference, the panel chairperson will read the draft statement to the conference audience and invite comments and questions. A press conference will follow, to allow the panel and chairperson to respond to questions from the media.

The primary sponsors of this meeting are the National Cancer Institute and the NIH Office of Medical Applications of Research. Co-sponsors of the meeting are: the U.S. Food and Drug Administration (FDA), the National Institute on Aging (NIA), the National Institute of Dental and Craniofacial Research (NIDCR), the National Institute of Mental Health (NIMH), the National Institute of Nursing Research (NINR),

the National Institute of Neurological Disorders and Stroke (NINDS), and the National Center for Complementary and Alternative Medicine (NCCAM).

Advance information about the conference and conference registration materials may be obtained from AIR Prospect Center of Silver Spring, Maryland, by calling 301-592-3320 or by sending e-mail to <cancersymptoms@prospectassoc.com>. AIR Prospect Center's address is 10720 Columbia Pike, Suite 500, Silver Spring, Maryland 20901-4437. A conference agenda and registration information are also available on the NIH Consensus Program Web site at <<http://consensus.nih.gov>>.

Please Note: The NIH has recently instituted new security measures to ensure the safety of NIH employees and property. All visitors must be prepared to show a photo ID upon request. Visitors may be required to pass through a metal detector and have bags, backpacks, or purses inspected or x-rayed as they enter NIH buildings. Conference attendees may want to leave extra bags or personal materials at their hotel to minimize the time needed for inspection. For more information about the new security measures at NIH, please visit the Web site at <<http://www.nih.gov/about/visitorssecurity.htm>>.

Dated: March 25, 2002.

Ruth L. Kirschstein,

Acting Director, National Institutes of Health.

[FR Doc. 02-7815 Filed 3-29-02; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF THE INTERIOR

Submission of Information Collection to the Office of Management and Budget for Review Under the Paperwork Reduction Act

AGENCY: Bureau of Indian Affairs, Interior.

ACTION: Notice of renewal of a currently approved information collection.

SUMMARY: As required by the Paperwork Reduction Act of 1995, this notice announces that the Bureau of Indian Affairs has submitted to the Office of Management and Budget a request for renewal of a currently approved information collection titled The Indian Service Population and Labor Force Estimates, OMB Control No. 1076-0147. You are invited to send comments on this collection to the Office of Management and Budget at the address listed in the **ADDRESSES** section.

DATES: Submit comments on or before May 1, 2002.

ADDRESSES: Written comments should be sent directly to the Office of Management and Budget, Office of