

**FOR FURTHER INFORMATION CONTACT:** Rob Miller, Designated Federal Officer, on (202) 501-4621, or Joddy Garner on (202) 501-4857, Per Diem Program Manager, General Services Administration. Also, inquiries may be sent to [robl.miller@gsa.gov](mailto:robl.miller@gsa.gov).

Dated: July 29, 2002.

**Peggy DeProspero,**

*Acting Director of Travel Management Policy, Office of Transportation and Personal Property.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration on Aging**

[Program Announcement No. AoA-02-11]

**Fiscal Year 2002 Program Announcement; Availability of Funds and Notice Regarding Applications**

**AGENCY:** Administration on Aging, HHS.

**ACTION:** Announcement of availability of funds and request for applications.

**SUMMARY:** The Administration on Aging announces that under this program announcement it will hold a competition for a grant award for one project at a federal share of approximately \$100,000 per year for a project period of one year.

*Legislative authority:* The Older Americans Act, Public Law 106-501 (Catalog of Federal Domestic Assistance 93.048, Title IV and Title II Discretionary Projects).

*Purpose of grant awards:* The purpose of the project is to support the development of an action plan to raise osteoporosis awareness in post-menopausal women. The grant will assist AoA in the development and implementation of effective strategies to raise awareness about osteoporosis in post-menopausal women.

*Eligibility for grant awards and other requirements:* Eligibility to apply under this announcement is limited to applications from public and non-profit organizations, including Indian tribes, tribal organizations, tribal faith groups, faith-based and community-based

organizations, with demonstrated expertise in osteoporosis education and awareness.

Grantees are required to provide a 25% non-federal match.

**DATES:** The deadline date for the submission of applications is September 16, 2002.

**ADDRESSES:** Application kits are available by writing to the U.S. Department of Health and Human Services, Administration on Aging, Center for Communication and Consumer Services, 330 Independence Ave., SW., Washington, DC 20201, Attn: Sherri Clark, or by calling 202/619-3955. Applications must be mailed or hand-delivered to the Office of Grants Management at the same address. Instructions for electronic mailing of grant applications are available at <http://www.aoa.gov/egrants>.

Dated: July 29, 2002.

**Josefina G. Carbonell,**

*Assistant Secretary for Aging.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30 DAY-37-02]

**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) 498-1210. 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**

National Hospital Discharge Survey (OMB No. 0920-0212)—Extension—

National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC). The National Hospital Discharge Survey (NHDS), which has been conducted continuously by the National Center for Health Statistics, CDC, since 1965, is the principal source of data on in-patient utilization of short-stay, non-Federal hospitals and is the only annual source of nationally representative estimates on the characteristics of discharges, the lengths of stay, diagnoses, surgical and non-surgical procedures, and the patterns of use of care in hospitals in various regions of the country. It is the benchmark against which special programmatic data sources are compared. Data collected through the NHDS are essential for evaluating health status of the population, for the planning of programs and policy to elevate the health status of the Nation, for studying morbidity trends, and for research activities in the health field. NHDS data have been used extensively in the development and monitoring of goals for the Year 2000 and 2010 Health Objectives. In addition, NHDS data provide annual updates for numerous tables in the Congressionally-mandated NCHS report, *Health, United States*. Data for the NHDS are collected annually on approximately 300,000 discharges from a nationally representative sample of noninstitutional hospitals, exclusive of Federal, military and Veterans' Administration hospitals. The data items collected are the basic core of variables contained in the Uniform Hospital Discharge Data Set (UHDDS) in addition to two data items (admission type and source) which are identical to those needed for billing of in-patient services for Medicare patients. Data for approximately forty-five percent of the responding hospitals are abstracted from medical records while the remainder of the hospitals supply data through commercial abstract service organizations, state data systems, in-house tapes or printouts. The estimated annual burden for this data collection is 2,653 hours.

Form	Number of Respondents	Number of Responses/ Respondents	Average Burden/Response (in hours)
Medical record abstracts—Primary Procedure Hospitals .....	68	250	5/60
Medical record abstracts—Alternate Procedure Hospitals .....	130	250	1/60
Medical record abstracts—In-house tape or printout hospitals .....	80	12	12/60
Update form (abstract service hospitals) .....	156	1	2/60
Induction form .....	15	1	2
Inpatient Drug Study .....	50	22	20/60