VerDate jul<14>2003 14:47 Dec 18, 2003 Jkt 203001 PO 00000 Frm 00066 Fmt 4703 Sfmt 4703 E:\FR\FM\19DEN1.SGM 19DEN1

is not required to respond to, an
conduct or sponsor, and the respondent
National Institutes of Health may not
30 days for public comment. The
of this notice is to allow an additional
comments were received. The purpose
for public comment. No public
collection was previously published in
(OMB) a request for review and
Institutes of Health (NIH) has submitted
Alcoholism (NIAAA), the National
Section 3507(a)(1)(D) of the Paperwork
Conditions.
–
BILLING CODE 4165
DEPARTMENT OF HEALTH AND
HUMAN SERVICES
National Institutes of Health
Proposed Collection; Comment
Request; The National Epidemiologic
Survey on Alcohol and Related
Conditions
SUMMARY: Under the provisions of
Section 3507(a)(1)(D) of the Paperwork
Reduction Act of 1995, the National
Institute on Alcohol Abuse and
Alcoholism (NIAAA), the National
Institutes of Health (NIH) has submitted
to the Office of Management and Budget
(OMB) a request for review and
approval of the information collection
listed below. This proposed information
collection was previously published in
the Federal Register on September 25,
2003, page 55396 and allowed 60 days
for public comment. No public
comments were received. The purpose
of this notice is to allow an additional
30 days for public comment. The
National Institutes of Health may not
cconduct or sponsor, and the respondent
is not required to respond to an
information collection that has been
extended, revised, or implemented on or
after October 1, 1995, unless it displays
a currently valid OMB control number.

Proposed Collection
Title: The National Epidemiologic
Survey on Alcohol and Related
Conditions. Type of Information
Collection Request; REVISION, OMB
No. 0925–0484, expiration date, 3/31/
2004. Need and Use of Information
Collection: This study will determine
the incidence of alcohol use disorders in
a representative sample of the United
States population with the primary
purpose of estimating the extent and
distribution of alcohol consumption,
alcohol use disorders and their
associated psychological and medical
disabilities across major
sociodemographic subgroups. The
primary objectives of this second wave
of this longitudinal study is to
understand the relationships between
alcohol consumption, alcohol use
disorders and their related disabilities
with a view towards designing more
effective treatment and intervention
programs. The findings will provide
valuable information concerning: (1)
The relationship between alcohol use
disorders and disorders and their related
disabilities in subgroups of the
population of special concern; (2)
identification of subgroups at high risk
for alcohol use disorders that may be
complicated by associated psychological
and medical disabilities; (3) incidence
of alcohol use disorders and their
associated disabilities with a view
toward understanding their natural
history; (4) treatment utilization of
alcohol use disorders in order to
determine unmet treatment need and
linguistic, social, economic and cultural
barriers to treatment; (5) the college-
aged segment of the population at high
risk for binge drinking and its adverse
consequences; and (6) the identification
of safe and hazardous levels of drinking
as they relate to the development of
alcohol use disorders and their
associated disabilities. Frequency of
Response: On occasion. Affected Public:
Individuals. Type of Respondents:
Adults. The annual reporting burden is
as follows: Estimated Number of
Respondents: 43,093. Estimated Number
of Responses per Respondent: 1;
Average Burden Hours Per Response:
1.60; and Estimated Total Annual
Burden Hours Requested: 43,093. The
annualized cost to respondents is
estimated at: $776,000.00. There are no
Capital Costs to report. There are no
Operating or Maintenance Costs to
report.

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 CONTACT:
Written comments and/or suggestions
regarding the item(s) contained in this
notice, especially regarding the
estimated public burden and associated
response time, should be directed to the:
Office of Management and Budget,
Office of Regulatory Affairs, New
Executive Office Building, Room 10235,
Washington, DC 20503.
Address: Desk Officer for NIH. To request
more information on the proposed project
or to obtain a copy of the data collection
plans and instruments, contact Dr.
Bridget Grant, Chief, Laboratory of
Biometry and Epidemiology, Division of
Intramural Clinical and Biological
Research, NIAAA, NIH, Wilson
Building, Suite 514, 6000 Executive
Boulevard, Bethesda, Maryland 20892–
7003, or call non-toll-free number (301)
443–7370 or E-mail your request,
including your address to:
Bgrant@willco.niaaa.nih.gov.

Comments 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.

Stephen Long,
Executive Officer, NIAAA.

BILLING CODE 4140–01–M