

Subject name, address	Effective date	Subject name, address	Effective date
Phoenix, AZ Therivil, Yolette	6/20/2005	Chatsworth, CA	
Miami, FL Thurber, Pauline	6/20/2005	Owners of Excluded Entities	
Lakewood, CO Tidd, Miles	6/20/2005	Edoho-Ukwa, Grace	6/20/2005
Trenton, NJ Tiscornia, Kimberly	6/20/2005	McKinney, TX Greer, Leta	6/20/2005
W Milford, NJ Tofflemire, Andrew	6/20/2005	Dated: June 1, 2005.	
San Francisco, CA Trentacosta, Gregory	6/20/2005	Katherine B. Petrowski, <i>Director, Exclusions Staff, Office of Inspector General.</i>	
Wayne, NJ Trombley, Laurie	6/20/2005	[FR Doc. 05-12693 Filed 7-1-05; 8:45 am]	
Bradford, VT Vaughn-Bey, David	6/20/2005	BILLING CODE 4152-01-M	
Colorado Springs, CO Vitols, Britt	6/20/2005	DEPARTMENT OF HEALTH AND HUMAN SERVICES	
Essex Junction, VT Wells, Larry	6/20/2005	National Institutes of Health	
Louisville, KY Wheat, Patricia	6/20/2005	Notification of Request for Emergency Clearance; Evaluation of the Impact of the New Conflicts of Interest Regulations on the National Institutes of Health's Ability To Recruit and Retain Staff	
Louisville, KY Wheeler, Marsha	6/20/2005	<p>In accordance with Section 3507(j) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH) hereby publishes notification of request for Emergency Clearance for the information collection related to the Evaluation of the Impact of the New Conflicts of Interest Regulations on the National Institutes of Health's Ability to Recruit and Retain Staff.</p> <p>This information collection is essential to the mission of the NIH [42 U.S.C. 241 and 282(b)(1)]. In December 2003, the House Energy and Commerce Committee raised concerns about potential conflicts of interest at NIH. In response to these concerns, the NIH Director, Dr. Elias Zerhouni, ordered an internal investigation into consulting agreements at NIH and in June 2004 proposed changes to the agency's conflict-of-interest policies. Effective February 3, 2005, the new regulations (5 CFR parts 5501 and 5502, "Supplemental Standards of Ethical Conduct and Financial Disclosure Requirements for Employees of the Department of Health and Human Services," Federal Register, Vol. 70, No. 22 Thursday, February 3, 2005, 5543-5565) apply to all NIH employees and place limits on certain financial holdings of employees, their spouses, and minor children and on certain outside activities in which NIH staff may engage. In the brief time since the implementation of the new ethics rules, many key NIH senior scientists have</p>	
Cheshire, CT White, Jeannie	6/20/2005		
Fresno, CA Wilburn, Robert	6/20/2005		
North Point, FL Williamson, Christina	6/20/2005		
Chewelah, WA Willie, Dennis	6/20/2005		
Salt Lake City, UT Wimmer, Jan	6/20/2005		
Providence, RI Wood, Kristy	6/20/2005		
Hopbottom, PA Yancey, Dawn	6/20/2005		
Yerington, NV Yrigoyen, Florence	6/20/2005		
Denver, CO Zink, Tricia	6/20/2005		
Mt Vernon, IN			
Fraud/Kickbacks/Prohibited Acts/ Settlement Agreements			
Ahmad, Vimlesh	10/5/2004		
Seattle, WA Day, Floyd	3/7/2005		
Portland, OR			
Owned/Controlled By Convicted Entities			
Amgu, Inc	6/20/2005		
McKinney, TX Health & Wellness Medical Clinic, Inc	6/20/2005		
Los Angeles, CA Southern California Respiratory Care Services	6/20/2005		
Long Beach, CA			
Default on Heal Loan			
Bayles, Jay	6/20/2005		
Westlake Village, CA Duong, Chau	6/20/2005		
Brooklyn, NY Mohammadkhani, Alireza	6/20/2005		

chosen to leave NIH rather than comply with the new regulations.

In the preamble to the rule, HHS stated its intent to evaluate the impact of the new rules within the next year. Gauging both the immediate and longer term impact of these new rules is crucial to NIH's ability to develop and maintain a world-class staff. This project will produce data that will help NIH and HHS leaders determine the impact of the regulations and whether changes should be made, so it is essential that the data are collected while the review of the regulations is still in progress.

NIH cannot reasonably comply with the normal clearance procedures for information collection, because the use of normal procedures will delay the collection and hinder the agency in accomplishing its mission, to the detriment of the public good. NIH has taken all practicable steps to consult with the scientific community and the public in reaching the determination. Several months have elapsed since the publication of the new conflict of interest regulations, and NIH has had several meetings with employees, interviewed senior scientists and has made plans to survey current NIH employees, as well as reviewed more than 1800 comments on the regulations. At this point, NIH intends to survey recent applicants, applicants who have declined to accept employment offers from NIH and potential applicants from scientific organizations from which NIH has traditionally drawn leading scientific personnel. This will allow NIH to determine whether the regulations impact an individual's attitudes about employment at NIH and the likelihood of their joining the agency.

NIH and HHS leaders are still examining and modifying some aspects of the rules. It is essential that these leaders obtain information on the impact of the rules on the career aims and choices of non-NIH scientists and the perception of the scientific community to inform their decision making.

Proposed Collection

Title: Evaluation of the Impact of the New Conflicts of Interest Regulations on the National Institutes of Health's Ability to Recruit and Retain Staff. *Type of Information Collection Request:* Emergency. *Need and Use of Information Collection:* To assess the impact of new NIH ethics regulations on the agency's ability to continue to attract and recruit highly qualified scientific personnel. *Frequency of Response:* One time. *Affected Public:* Individuals and households. *Type of Respondent:* Highly

trained and qualified scientists engaged in medicine and life sciences research. The annual reporting burden is as follows: *Estimated Number of Respondents: 900; Estimated Number of Responses per Respondent: One; Average Burden Hours Per Response: 10 minutes; and Estimated Total Annual Burden Hours Requested: 150 hours.* The annualized cost to respondents is estimated at \$4,950. There are no Capital Costs, Operating Costs, or Maintenance Costs to report.

Request for Comments

Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate 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) evaluate 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) enhance the quality, utility, and clarity of the information to be collected; and (4) 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.

Direct Comments to OMB

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, Attention: Desk Officer for NIH. To request more

information on the proposed project contact Michael Rosenthal; Building 31—Claude D Pepper Bldg, Room 3B43, 1 Center Drive, Bethesda, MD 20892; *rosenthm@od.nih.gov*; 301-496-3366.

Dated: June 24, 2005.

Raynard S. Kington,
Deputy Director, National Institutes of Health.
[FR Doc. 05-13153 Filed 7-1-05; 8:45 am]
BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Child Health and Human Development; Proposed Collection; Comment Request; Health Behaviors in School-Age Children

SUMMARY: In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Institute of Child Health and Human Development (NICHD), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Proposed Collection

Title: Health Behaviors in School-Age Children—United States.

Type of Information Collection

Request: Continuation.

Need and Use of Information

Collection: The goal of this research is to obtain data from a survey of adolescent health behavior conducted in the United States with a national probability sample of adolescents. This information will enable the improvement of health services and programs for youth. The study should

provide needed information about adolescents nationally and will also enable international comparisons.

This U.S. survey is linked to the broader Health Behaviors in School-Age Children (HBSC) study, in which surveys are conducted every four years among nationally representative samples of students at ages 11, 13, and 15 years of age in about 35 countries. The HBSC was conducted in the U.S. previously in 1997–1998 and 2001–2002. Previous HBSC–US surveys showed that U.S. 15-year-old youth are less likely to smoke than students in most other countries surveyed, even though 13-year-old U.S. students experiment with tobacco in comparable proportions to youth in other countries. The most recent survey demonstrated that U.S. youth are more likely to be overweight and obese than students in the other HBSC countries. U.S. eating habits were also shown to be somewhat less healthful than in other countries, with a comparatively high proportion of youth consuming high fat foods and soft drinks with sugar. The 2005–2006 U.S. survey will address a sample of health-related factors according to rigorous research protocols developed by the HBSC. The international HBSC survey requires at least 1,536 youth in each age group and a total of 5,000 students. In the U.S., a nationally representative sample of children in grades 6 through 10 will be surveyed and minority children will be over-sampled to permit comparisons across under-represented populations. The children will be students from approximately 340 schools; in order to assess health programs in those schools and how the school environment supports health behaviors, a school administrator and the lead health education teacher from each school will be surveyed.

Affected Public: School-age children.

Type of respondents	Estimated number of respondents	Estimated number of responses per hours	Average burden hours per response	Estimated total annual burden requested
Adolescents	14,350	1	0.75	10,763
School Administrators	340	1	0.33	112
Lead Health Educator	340	1	0.20	68

The estimated annualized cost to respondents is \$5,392. 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 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: To request more information on the proposed project or to obtain a copy of