

by NIOSH. All comments in the NORA Docket will be used to help shape sector-specific and related cross-sector research agendas for the nation.

These events are part of a series of public meetings which will occur in the months preceding the NORA Symposium (April 18–20, 2006 in Washington, DC). Upcoming meetings will include: Wholesale and Retail Trade; Manufacturing; Mining; Services; Regional Issues; and a summary session. Future **Federal Register** announcements will provide more information on these meetings. Previous meetings have discussed Transportation, Warehousing, and Utilities, and Construction.

*Contact Person for More Information:* Sid Soderholm, Ph.D., NORA Coordinator, (202) 401–0721.

*Address:* Comments may also be e-mailed to [niocindocket@cdc.gov](mailto:niocindocket@cdc.gov), or sent via postal mail to: Docket NIOSH–047, Robert A. Taft Laboratories (C–34), 4676 Columbia Parkway, Cincinnati, OH 45226.

Stakeholders are also invited to submit comments electronically at the NORA Web page <http://www.cdc.gov/niosh/nora>. Comments submitted to the Web page by others can also be viewed there.

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: December 27, 2005.

**B. Kathy Skipper,**

*Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.*

[FR Doc. E5–8192 Filed 12–30–05; 8:45 am]

**BILLING CODE 4163–19–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. 2005N–0500]

**Agency Information Collection Activities; Proposed Collection; Comment Request; Requirements for Collection of Data Relating to the Prevention of Medical Gas Mixups at Health Care Facilities—Survey**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on measures, taken by certain health care medical facilities that use medical oxygen, to prevent mixups with other gases.

**DATES:** Submit written or electronic comments on the collection of information by March 6, 2006.

**ADDRESSES:** Submit electronic comments on the collection of information to <http://www.fda.gov/dockets/ecomments>. Submit written comments on the collection of information to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, room 1061, Rockville, MD 20852. All comments should be identified with the docket number found in brackets in the heading of this document.

**FOR FURTHER INFORMATION CONTACT:**

Karen Nelson, Office of Management Programs (HFA–250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–1482.

**SUPPLEMENTARY INFORMATION:** Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. “Collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, FDA is publishing notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, FDA invites comments on these topics: (1) Whether the proposed collection of information is necessary for the proper performance of FDA’s functions, including whether the information will have practical utility; (2) the accuracy of FDA’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 respondents, including through the use of automated collection techniques, when appropriate, and other forms of information technology.

**Requirements for Collection of Data Relating to the Prevention of Medical Gas Mixups at Health Care Facilities—Survey (OMB Control Number 0910–0548)—Extension**

FDA has received four reports of medical gas mixups occurring during the past 7 years. These reports were received from hospitals and nursing homes and involved 7 deaths and 15 injuries to patients who were thought to be receiving medical grade oxygen, but who were actually receiving a different gas (e.g., nitrogen, argon) that had been mistakenly connected to the facility’s oxygen supply system. In 2001, FDA published guidance making recommendations to help hospitals, nursing homes, and other health care facilities avoid the tragedies that result from medical gas mixups and alerting these facilities to the hazards. This survey is intended to assess the degree of facilities’ compliance with safety measures to prevent mixups and to determine if further steps are warranted to ensure the safety of patients.

FDA estimates the burden of this collection of information as follows:

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN<sup>1</sup>

21 CFR Section	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Response	Total Hours
210 and 211	285	1	285	.25	71.25
Total					71.25

<sup>1</sup>There are no capital costs or operating and maintenance costs associated with this collection of information.

Dated: December 22, 2005.

**Jeffrey Shuren,**

*Assistant Commissioner for Policy.*

[FR Doc. E5-8113 Filed 12-30-05; 8:45 am]

**BILLING CODE 4160-01-S**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. 2005N-0220]

#### Agency Information Collection Activities; Announcement of Office of Management and Budget Approval; Current Good Manufacturing Practices and Related Regulations for Blood and Blood Components; and Requirements for Donor Testing, Donor Notification, and "Lookback"

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing that a collection of information entitled "Current Good Manufacturing Practices and Related Regulations for Blood and Blood Components; and Requirements for Donor Testing, Donor Notification, and 'Lookback'" has been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995.

**FOR FURTHER INFORMATION CONTACT:** Jonna Capezzuto, Office of Management Programs (HFA-250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-4659.

**SUPPLEMENTARY INFORMATION:** In the *Federal Register* of October 24, 2005 (70 FR 61447), the agency announced that the proposed information collection had been submitted to OMB for review and clearance under 44 U.S.C. 3507. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. OMB has now approved the information collection and has assigned

OMB control number 0910-0116. The approval expires on December 31, 2008. A copy of the supporting statement for this information collection is available on the Internet at <http://www.fda.gov/ohrms/dockets>.

Dated: December 22, 2005.

**Jeffrey Shuren,**

*Assistant Commissioner for Policy.*

[FR Doc. E5-8134 Filed 12-30-05; 8:45 am]

**BILLING CODE 4160-01-S**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institute of Health

#### Translational Research Working Group Public Comment Period

**AGENCY:** National Cancer Institute (NCI), National Institutes of Health (NIH), Department of Health and Human Services (DHHS).

**ACTION:** Request for public comment.

**SUMMARY:** The Translational Research Working Group (TRWG), a broad panel including advocates, researchers from academia, industry representatives, and government officials, was established in early 2005 to evaluate the status of the National Cancer Institute's (NCI) intramural and extramural investment in translational research in order to develop recommendations on ways to coordinate and optimally integrate activities. The TRWG is also charged with developing implementation strategies that will enable the scientific community and NCI leadership to appropriately prioritize its translational research opportunities. Recommendations will be made to the National Cancer Advisory Board by early 2007. To assist in its future planning efforts, TRWG is asking public stakeholders in the translational research enterprise for feedback on some of the key questions facing the panel and insights on how to proceed.

**DATES:** The TRWG public comment period will run from December 20, 2005 to January 20, 2006.

**ADDRESSES:** Comments may be submitted electronically at the TRWG Web site: <http://www.cancer.gov/trwg/>.

#### SUPPLEMENTARY INFORMATION:

##### Background

The National Cancer Institute is committed to speeding the development of new diagnostic tests, cancer treatments, and other interventions that benefit people with cancer and people at risk for cancer. Such development relies on strong translational research collaborations between basic and clinical scientists to generate novel approaches. Currently, NCI supports a variety of projects that build this bridge between basic science and patient care.

Over the next year, the Translational Research Working Group (TRWG) will review NCI's current intramural and extramural translational research portfolio (within the scope of the TRWG mission), facilitate broad community input, invite public comment, and recommend ways to improve and integrate efforts. The ultimate goal is to accelerate progress toward improving the health of the nation and cancer patient outcomes.

##### Request for Comments

To better understand the different viewpoints in the cancer research community, and to develop and reflect a common understanding about the challenges and opportunities in translational research, TRWG seeks input on six important areas:

- Barriers to/Incentives for Translational Research.
- Prioritization.
- Funding.
- System Organization.
- Facilities/Technologies.
- Manpower/Training.

Dated: December 22, 2005.

**Ernest Hawk,**

*Director, Office of Centers, Training and Resources, National Cancer Institute, National Institutes of Health.*

[FR Doc. 05-24687 Filed 12-30-05; 8:45 am]

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