

Individuals are particularly sought with experience and success in activities specified in the summary above.

**DATES:** Nominations should be received on or before June 14, 2006.

**ADDRESSES:** Nominations should be sent to Ms. Deborah Queenan, AHRQ, 540 Gaither Road, Room 3238, Rockville, Maryland 20850. Nominations also may be faxed to (301) 427-1341.

**FOR FURTHER INFORMATION CONTACT:** Ms. Deborah Queenan, AHRQ, at (301) 427-1330.

**SUPPLEMENTARY INFORMATION:** 42 U.S.C. 299c, section 931 of the PHS Act, provides that the National Advisory Council for Healthcare Research and Quality shall consist of 21 appropriately qualified representatives of the public appointed by the Secretary of Health and Human Services and, in addition, ex officio representatives from other Federal agencies specified in the authorizing legislation, principally agencies that conduct or support health care research, as well as Federal officials the Secretary may consider appropriate. The Council meets in the Washington, DC, metropolitan area, generally in Rockville, Maryland, approximately three times a year to provide broad guidance to the Secretary and AHRQ's Director on the direction of and programs undertaken by AHRQ.

Eight individuals will be selected presently by the Secretary to serve on the Council beginning with the meeting in the spring of 2007. Members generally serve 3-year terms. Appointments are staggered to permit an orderly rotation of membership.

Interested persons may nominate one or more qualified persons for membership on the Council. Nominations shall include: (1) A copy of the nominee's resume or curriculum vitae; and (2) a statement that the nominee is willing to serve as a member of the Council. Potential candidates will be asked to provide detailed information concerning their financial interests,

consultant positions and research grants and contracts, to permit evaluation of possible sources of conflict of interest.

The Department seeks a broad geographic representation and has special interest in assuring that women, minority groups, and the physically handicapped are adequately represented on advisory bodies, and therefore, extends particular encouragement to nominations for appropriately qualified female, minority, and/or physically handicapped candidates.

Dated: May 2, 2006.

**Carolyn M. Clancy,**  
*Director.*

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**BILLING CODE 4160-90-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day-06-05BQ]

**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) 639-5960 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

**Proposed Project**

Understanding the Community Context of the Diabetes Education in Tribal Schools Project—NEW—National Center for Chronic Disease Prevention

and Health Promotion/Division of Diabetes Translation (NCCDPHP/DDT), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

This study is part of a larger evaluation of the multi-year Diabetes Education in Tribal Schools (DETS) project to develop and pilot test a science based diabetes prevention curriculum for Native American school children. As part of the overall evaluation (before the curriculum is pilot tested), it will be important to understand the community context and identify implementation issues. Through a series of qualitative interviews with key informants, the study will obtain information about: (1) The community's experience with diabetes; (2) community readiness to adopt the DETS curriculum; (3) the connection between the DETS project and the community; and (4) the best fit between the curriculum and community schools.

The participants for this study will include key informants in five categories; Community leaders, DETS Advisory Board members, DETS Curriculum Subcommittee members, community teachers, and community parents. Potential participants will be identified by DETS Subcommittee members and invited to participate in this research activity. These individuals will be invited to participate because they are already involved in the project and are familiar with the curriculum.

A maximum of 18 individuals from each category will be interviewed for a total of 90 participants. All participants will be adults, both male and female, over the age of 18. It is expected that approximately 75 percent of participants will be Native American and 25 percent will be non-Native American. There is no cost to respondents other than their time. The total estimated burden hours are 70.

**ESTIMATE OF ANNUALIZED BURDEN HOURS**

Respondent	Number of respondents	Number of responses per respondent	Avg. burden per response (in hours)
Community Leaders/Elders .....	18	1	45/60
Parents .....	18	1	45/60
Teachers .....	18	1	45/60
DETS Project Subcommittee Members .....	18	1	45/60
DETS Project Advisory Board Members .....	18	1	45/60

Dated: March 22, 2006.

**Joan F. Karr,**  
Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E6-6796 Filed 5-4-06; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day-06-05CM]

**Agency Forms Undergoing Paperwork Reduction Act Review**

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**Proposed Project**

2006 Hispanic/Latino Adult Tobacco Survey (ATS)—new—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

The purpose of this project is to conduct a culturally appropriate Adult Tobacco Survey questionnaire with Hispanic/Latino persons. The survey results will expand data and existing knowledge of tobacco use among Hispanics/Latinos in order to benefit tobacco use surveillance and prevention programming at the local, state, and regional levels. The questions will help to narrow existing gaps in knowledge concerning tobacco use in the Hispanic/Latino population and inform development of Hispanic/Latino-specific interventions.

The Hispanic/Latino population is fast growing in the United States. It is expected that the number of Hispanic/Latino persons residing in the U.S. will increase from 39.9 million in the year 2003 to 102.6 million in the year 2050, almost 3 times the current population. The large expected growth in the

Hispanic/Latino population, especially in non-traditional states, will have important implications for tobacco control activities in the years to come.

The Office of Smoking and Health (OSH) is conducting a survey project that includes administering the Adult Tobacco Survey in three locations that have high concentrations of Hispanic/Latino persons, each location with a distinct Hispanic/Latino subpopulation. The locations are New York City (New York), Miami (Florida), and El Paso (Texas). Within each location, the survey will be conducted annually with approximately 750 participants, for a total of 2,250 survey participants. In order to select survey respondents, screeners will be administered to a larger number of household respondents. The estimated number of screener respondents depends on whether the screener is done over the telephone (New York and Florida) or in person (Texas). The screener and the survey will be conducted in both English and Spanish.

There are no costs to the respondents other than their time. The total estimated annualized burden hours are 1,833.

**ESTIMATED ANNUALIZED BURDEN**

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
New York—screener .....	1,500	1	10/60
New York—survey .....	750	1	30/60
Miami, Fl—screener .....	1,500	1	10/60
Miami, Fl—survey .....	750	1	30/60
El Paso, TX—screener .....	1,250	1	10/60
El Paso, TX—survey .....	750	1	30/60

Dated: March 22, 2006.

**Joan F. Karr,**  
Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day-06-0651]

**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) 639-5960 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

**Proposed Project**

Evaluation of Educational Materials Promoting Informed Decision-Making About Prostate Cancer Screening—Revision—National Center for Chronic Disease and Public Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

Prostate cancer is the second most commonly diagnosed cancer among men in the United States. Current estimates project that 234,460 new cases of prostate cancer will be diagnosed, and 27,350 men will die of this disease in 2006. The effectiveness of prostate cancer screening has not been established. A number of clinical guidelines recommend that the potential risks and benefits of prostate cancer screening be explained to patients so that they may make informed decisions about screening. The purpose of this study is to test the effectiveness of a decision aid intended as an informed decision making tool to impart knowledge and promote provider-patient discussion about prostate cancer screening.