opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–5960 and send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an e-mail to *omb@cdc.gov*.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

National Coal Workers Autopsy Study (42 CFR 37.204)—Extension (0920–0021)—National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention.

Background and Brief Description

Under the Federal Coal Mine Health and Safety Act of 1977, PL 91–173 (amended the Federal Coal Mine and Safety Act of 1969), the Public Health Service has developed a nationwide autopsy program for underground coal miners, the National Coal Workers Autopsy Study (NCWAS). The consent release and history form is primarily used to obtain written authorization from the next-of-kin to perform an autopsy on the deceased miner. The basic reason for the post-mortem examination is both epidemiological and clinical research. A minimum of essential information is collected regarding the deceased miners, including occupational history and smoking history. The data collected will be used by the staff at NIOSH for research purposes in defining the diagnostic criteria for coal workers' pneumoconiosis (black lung disease) and pathologic changes and will be correlated with x-ray findings.

It is estimated that only 5 minutes is required for the pathologist to generate a statement on the invoice affirming that no other compensation is received for the autopsy. The consent release and history form takes the next-of-kin approximately 15 minutes to complete. Since an autopsy report is routinely completed by a pathologist, the only additional burden is the specific request of abstract of terminal illness and final diagnosis relating to pneumoconiosis. Therefore, only 5 minutes of additional burden is estimated for the autopsy report. There are no costs to the respondents, other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)	Total burden hours
Pathologist Invoice	50	1	5/60	4
Pathologist Report	50	1	5/60	4
Next-of-Kin	50	1	15/60	13
Total				21

Dated: May 10, 2006.

Joan F. Karr,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E6–7478 Filed 5–16–06; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–06–06BF]

Proposed Data Collections Submitted for Public Comment and Recommendations

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 Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–5960 and send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an e-mail to *omb@cdc.gov*.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Assessment and Evaluation of the Role of Care Coordination (Case Management) in Improving Access and Care within the Spina Bifida Clinic System—New—National Center on Birth Defects and Developmental Disabilities (NCBDDD), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Spina bifida is one of the most common birth defects, affecting approximately 2 per 10,000 live births in the United States annually. Providing care for people who are born with spina bifida is complex and challenging. Studies have shown that care coordination is beneficial for individuals with complex health conditions such as cystic fibrosis and sickle cell anemia. However, the extent to which care coordination is effective for assisting individuals with spina bifida is currently unknown. To learn more about what factors may help or act

as barriers to the provision of effective care coordination for individuals with spina bifida, CDC's National Center on Birth Defects and Developmental Disabilities proposes to conduct a study using focus groups and interviews. The proposed activity is part of the National Spina Bifida Program mandated in Section 317C of the Public Health Service Act (42 U.S.C. 247b–4)

Researchers will visit 10 spina bifida clinics nationwide. At each clinic, 1 focus group with approximately 8 caregivers of children with spina bifida will be conducted. Each focus group will last about 2 hours. At each clinic, approximately 5 clinical staff will be interviewed; each interview will take approximately 45 minutes. Focus group and interview respondents will be asked a variety of questions related to care coordination for individuals with spina bifida including how care is coordinated in the clinic, barriers and facilitators to the provision of care coordination, the effectiveness of care coordination, and recommendations for improving care coordination. All responses to the focus groups and interviews will be treated in a private manner.

There will be no costs to the respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Number of respondents	Number of reponses per respondent	Average burden per response	Total burden hours
Caregiver screener	100	1	15/60	25
Caregiver focus group	80	1	2	160
Clinic staff telephone screener	55	1	10/60	9
Clinic staff interview	50	1	45/60	38
Total				232

Dated: May 10, 2006.

Joan F. Karr,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E6–7482 Filed 5–16–06; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Committee on Immunization Practices: Teleconference

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announce the following Federal Committee meeting.

Name: Advisory Committee on Immunization Practices (ACIP).

Time and Date: 10 a.m.–11 a.m., May 17, 2006.

Place: The conference call will originate at the National Immunization Program (NIP), in Atlanta, Georgia. Please see **SUPPLEMENTARY INFORMATION** for details on accessing the conference call.

Status: Open to the public, limited only by the availability of telephone ports.

Purpose: The Committee is charged with advising the Director, CDC, on the appropriate uses of immunizing agents. In addition, under 42 U.S.C. 1396s, the Committee is mandated to establish and periodically review and, as appropriate, revise the list of vaccines for administration to vaccine-eligible children through the Vaccines for Children (VFC) program, along with schedules regarding the appropriate periodicity, dosage, and contraindications applicable to the vaccines.

Matters To Be Discussed: To discuss the absence of an official 2-dose recommendation for mumps vaccine.

Supplementary Information: This conference call is scheduled to begin at 10 a.m., Eastern Standard Time. To participate in the conference call, please dial 1–800–857–5009 and reference passcode 9393375.

As provided under 41 CFR 102–3.150(b), the public health urgency of this agency business requires that the meeting be held prior to the first available date for publication of this notice in the **Federal Register**.

For Further Information Contact: Demetria Gardner, Epidemiology and Surveillance Division, National Immunization Program, CDC, 1600 Clifton Road, NE, E–05, Atlanta, Georgia 30333, telephone 404/639–8836, fax 404/639–8616.

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 CDC and ATSDR.

Dated: May 12, 2006.

Alvin Hall,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. E6–7555 Filed 5–16–06; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF THE INTERIOR

Bureau of Land Management

[AK–930–5420–FR–L030; AA–85443, AA–85444, AA–85445, AA–85447]

Notice of Applications for Recordable Disclaimers of Interest for Lands Underlying Chilkat Lake, Chilkat River, Tsirku River, and Klehini River in Southeast Alaska

AGENCY: Bureau of Land Management, Interior.

ACTION: Notice.

SUMMARY: The State of Alaska has filed applications for recordable disclaimers of interest in certain lands underlying Chilkat Lake, Chilkat River, Tsirku River, and Klehini River in Southeast Alaska by the United States.

DATES: Comments on the State of Alaska's applications should be submitted on or before August 15, 2006. Comments on the BLM Draft Navigability Report should be submitted on or before July 17, 2006.

ADDRESSES: Comments should be sent to the Chief, Branch of Lands and Realty, BLM Alaska State Office, 222 West 7th Avenue #13, Anchorage, Alaska 99513–7599.

FOR FURTHER INFORMATION CONTACT: Callie Webber at 907–271–3167 or you may visit the BLM recordable disclaimer of interest Web site at *http://www.ak.blm.gov*.

SUPPLEMENTARY INFORMATION: On May 12, 2004, the State of Alaska (State) filed applications for recordable disclaimers of interest pursuant to Section 315 of the Federal Land Policy and