

other agency entities upon request; (2) participates in the design, implementation, and impact evaluation of health promotion interventions at sites at the individual and community level to mitigate health effects from potential and actual exposures; provides leadership in using the best available science for health promotion products and activities in communities; advocates for public health promotion in support of community concerns and needs; (3) plans, designs and implements strategies for engaging (site entry) in site-specific community and tribal public health activities and, upon completion of activities strategies for disengagement; (4) provides leadership in developing, managing, and implementing the health education component of the ATSDR's state-based cooperative agreement program with external partners; ensures that the technical and administrative requirements of the health education component of the program are met; (5) provides leadership in establishing linkages between communities and technical and science staff; where appropriate, maintains and coordinates community contact; maintains database of site-specific community concerns and needs and actions taken to respond; and, advocates for the public health needs of the community and serves to mediate and assist in resolving areas of dispute or conflict; (6) in activities that involve communities, tribes, tribal governments and tribal organizations, collaborates with ATSDR programs to ensure cultural awareness and respect are observed and practiced.

Delete in its entirety the titles and functional statements for the *Division of Health Education and Promotion (TB7)*

Delete in its entirety the titles and functional statements for the *Division of Toxicology (TB9)* and inserting the following:

Division of Toxicology and Environmental Medicine (TB9). (1) Develops and applies innovative research methods to expand knowledge of the relationship between exposure to hazardous substances and adverse human health effects; (2) coordinates all activities associated with toxicological profiles including associated research; (3) develops and applies science-based health educational tools, methods and strategies to deliver messages, education, and training; (4) develops educational materials in support of environmental medicine; (5) provides expertise and service to site-specific activities across ATSDR including chemical-specific consultations as needed; (6) provides technical expertise and site specific support in addressing

the health issues presented by emergency or acute release events and threatened releases of hazardous materials; (7) coordinates agency toxicology and environmental medicine activities with the Environmental Protection Agency, National Toxicology Program, and other appropriate federal, state, local, or public programs.

Applied Toxicology Branch (TB94). (1) Provides scientific expertise for the development of toxicological information and disseminates educational information in multiple formats; (2) develops and disseminates toxicological profiles; (3) develops, implements, and coordinates a program of research designed to identify priority data needs and determine the health effects of those data needs for various hazardous substances; (4) works as an integral partner with other division branches to ensure that toxicological activities incorporate environmental medicine and emergency preparedness perspectives into their basic message; (5) coordinates toxicological information and research activities with the Environmental Protection Agency, the National Toxicology Program, the Interagency Testing Committee, other appropriate federal, state, and local programs, and other public and private concerns, as appropriate.

Prevention, Response and Medical Support Branch (TB95). (1) Provides technical expertise and site specific support in addressing the health issues presented by emergency or acute release events and threatened releases of hazardous materials; (2) conducts special priority setting and evaluation activities; (3) provides technical expertise to conduct special evaluation activities necessary for support of division programs; (4) provides infrastructure to support planning and evaluation activities for the toxicology programs of the division; (5) works within the National Response Program and CDC guidelines to collaborate with other federal, state, and local agencies during emergency response situations; (6) develops information resources and guidance for first responders and health care providers for use in responding to unplanned release and spills; (7) works as an integral partner with other division branches to ensure that environmental medicine activities incorporate toxicological and emergency preparedness perspectives into their basic message.

Environmental Medicine and Educational Services Branch (TB96). (1) Establishes program goals and objectives for health education and environmental medicine practices; (2) develops and applies science-based health education

strategies, services, and tools to deliver key messages, education, and training to state public health partners, other public health partners, health professionals, and community groups to improve environmental health outcomes at the local, state, and national levels; (3) coordinates and facilitates practice development in environmental medicine across ATSDR divisions and offices; (4) develops educational materials in support of health education and environmental medicine; (5) provides leadership in development, implementation, and evaluation of internal and external professional health education and environmental medicine activities; and (6) provides expertise and service to site-specific activities across ATSDR.

Dated: November 28, 2005.

William H. Gimson,

Chief Operating Officer, Centers for Disease Control and Prevention (CDC).

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

[ATSDR-217]

Notice of the Revised Priority List of Hazardous Substances That Will Be the Subject of Toxicological Profiles

AGENCY: Agency for Toxic Substances and Disease Registry (ATSDR), U.S. Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or Superfund), as amended by the Superfund Amendments and Reauthorization Act (SARA), requires that ATSDR and the Environmental Protection Agency (EPA) revise the Priority List of Hazardous Substances. This list includes substances most commonly found at facilities on the CERCLA National Priorities List (NPL) which have been determined to be of greatest concern to public health at or around these NPL hazardous waste sites. This announcement provides notice that the agencies have developed and are making available a revised CERCLA Priority List of 275 Hazardous Substances, based on the most recent information available. Each substance on the priority list is a candidate to become the subject of a toxicological profile prepared by ATSDR and

subsequently a candidate for the identification of priority data needs.

In addition to the Priority List of Hazardous Substances, ATSDR has developed a Completed Exposure Pathway Site Count Report. This report lists the number of sites or events with ATSDR activities where a substance has been found in a completed exposure pathway (CEP). This report is included in the Support Document of the Priority List.

ADDRESSES: Requests for a printed copy of the report, the 2005 CERCLA Priority List of Hazardous Substances That Will Be The Subject of Toxicological Profiles and Support Document, including the CEP report, should bear the docket control number ATSDR-217, and should be submitted to: Ms. Olga Dawkins, Division of Toxicology and Environmental Medicine, Mail Stop F-32, 1600 Clifton Road, NE., Atlanta, GA 30333. Requests must be in writing.

Electronic Availability: The 2005 Priority List of Hazardous Substances and Support Document will be posted on ATSDR's Web site located at <http://www.atsdr.cdc.gov/clist.html>. The CEP Report will also be posted at <http://www.atsdr.cdc.gov/cep.html>.

This is an informational notice only, and comments are not being solicited at this time. However, any comments received will be considered for inclusion in the next revision of the list and placed in a publicly accessible docket; therefore, please do not submit confidential business or other confidential information.

FOR FURTHER INFORMATION CONTACT: ATSDR, Division of Toxicology and Environmental Medicine, 1600 Clifton Road, NE., Mail Stop F-32, Atlanta, GA 30333, telephone 888-422-8737.

SUPPLEMENTARY INFORMATION: CERCLA establishes certain requirements for ATSDR and EPA with regard to hazardous substances that are most commonly found at facilities on the CERCLA NPL. Section 104(i)(2) of CERCLA, as amended [42 U.S.C. 9604(i)(2)], required that the two agencies prepare a list, in order of priority, of at least 100 hazardous substances that are most commonly found at facilities on the NPL and which, in their sole discretion, have been determined to pose the most significant potential threat to human health (see 52 FR 12866, April 17, 1987). CERCLA also required the agencies to revise the priority list to include 100 or more additional hazardous substances (see 53 FR 41280, October 20, 1988), and to include at least 25 additional hazardous substances in each of the three

successive years following the 1988 revision (see 54 FR 43619, October 26, 1989; 55 FR 42067, October 17, 1990; 56 FR 52166, October 17, 1991). CERCLA also requires that ATSDR and EPA shall, at least annually thereafter, revise the list to include additional hazardous substances that have been determined to pose the most significant potential threat to human health. In 1995, the agencies altered the publication schedule of the priority list by moving to a 2-year publication schedule, reflecting the stability of this listing activity (60 FR 16478, March 30, 1995). As a result, the priority list is now on a 2-year publication schedule with a yearly informal review and revision. Each substance on the CERCLA Priority List of Hazardous Substances is a candidate to become the subject of a toxicological profile prepared by ATSDR and subsequently a candidate for the identification of priority data needs.

The initial priority lists of hazardous substances (1987-1990) were based on the most comprehensive and relevant information available when the lists were developed. More comprehensive sources of information on the frequency of occurrence and the potential for human exposure to substances at NPL sites became available for use in the 1991 priority list with the development of ATSDR's HazDat database. Utilizing this database, a revised approach and algorithm for ranking substances was developed in 1991, and a notice announcing the intention of ATSDR and EPA to revise and rerank the Priority List of Hazardous Substances was published on June 27, 1991 (56 FR 29485). The subsequent 1991 Priority List and revised approach used for its compilation was summarized in the "Revised Priority List of Hazardous Substances" **Federal Register** notice published October 17, 1991 (56 FR 52166). The same approach and the same basic algorithm have been used in all subsequent activities, including the 2005 listing activity. The algorithm used in ranking hazardous substances on the priority list consists of three criteria, which are combined to result in the total score. The three criteria are: Frequency of occurrence at NPL sites; toxicity; and potential for human exposure.

Since HazDat is a dynamic database with ongoing data collection, additional information from the HazDat database became available for the 2005 listing activity. This additional information has been entered into HazDat since the development of the 2003 Priority List of Hazardous Substances. The site-specific information from HazDat that is used in

the listing activity has been collected from ATSDR public health assessments and from site file data packages that are used to develop these public health assessments. The new information may include more recent NPL frequency of occurrence data, additional concentration data, and more information on exposure to substances at NPL sites. With these additional data, 10 substances have been replaced on the list of 275 substances since the 2003 publication. Of the 10 replacement substances, 2 are new candidate substances, and 8 are substances that were previously under consideration. These replacement substances and changes in the order of substances appearing on the CERCLA Priority List of Hazardous Substances will be reflected in the program activities that rely on the list for future direction.

The 2005 Priority List of Hazardous Substances includes 275 substances that have been determined to be of greatest concern to public health based on the criteria of CERCLA section 104(i)(2) [42 U.S.C. 9604(i)(2)]. A total of 861 candidate substances have been analyzed and ranked with the current algorithm. Of these candidates, the 275 substances on the priority list may become the subject of toxicological profiles in the future. The top 25 substances on the 2005 Priority List of Hazardous Substances are listed below.

Rank	Substance name
1	Arsenic
2	Lead
3	Mercury
4	Vinyl Chloride
5	Polychlorinated Biphenyls
6	Benzene
7	Polycyclic Aromatic Hydrocarbons
8	Cadmium
9	Benzo (A) Pyrene
10	Benzo (B) Fluoranthene
11	Chloroform
12	Ddt, P,P'
13	Aroclor 1254
14	Aroclor 1260
15	Dibenzon (A,H) Anthracene
16	Trichloroethylene
17	Dieldrin
18	Chromium, Hexavalent
19	Phosphorus, White
20	Dde, P,P'
21	Chlordane
22	Hexachlorobutadiene
23	Coal Tar Creosote
24	Ddd, P,P'
25	Aldrin

ATSDR intends to publish the next revised list of hazardous substances in two years, with an informal review and revision performed in one year. These revisions will reflect changes and improvements in data collection and

availability. Additional information on the existing methodology used in the development of the CERCLA Priority List of Hazardous Substances can be found in the Support Document to the List and in the **Federal Register** notices mentioned above.

In addition to the revised priority list, ATSDR is also releasing a Completed Exposure Pathway Site Count Report. A completed exposure pathway (CEP) is an exposure pathway that links a contaminant source to a receptor population. The CEP ranking is very similar to a sub-component of the potential-for-human-exposure component of the listing algorithm. The CEP ranking is based on a site frequency count, and thus lists the number of sites at which a substance has been found in a CEP. ATSDR's HazDat database contains this information which is derived from ATSDR public health assessments and health consultations. Because exposure to hazardous substances is of significant concern, ATSDR is publishing this CEP report along with the CERCLA Priority List of Hazardous Substances. Since this CEP report focuses on documented exposure, it provides an important prioritization based on substances to which people are exposed.

The substances on the CEP report are similar to the substances on the CERCLA Priority List of Hazardous Substances. However, there are some substances that are on the CEP report because they are frequently found in completed exposure pathways, but are not on the CERCLA Priority List because they have a very low toxicity (e.g., sodium). Since the CERCLA Priority List incorporates three different components (toxicity, frequency of occurrence, and potential for human exposure) to determine its priority substances, substances with very low toxicity are not on the CERCLA Priority List and consequently are not the subject of toxicological profiles. In addition, since the Priority List is mandated by CERCLA, it only uses data from sites on the CERCLA National Priorities List, whereas the CEP report uses data from all sites with ATSDR activities that have a CEP. Of the 100 substances on the CEP report, the 25 substances found at the most number of sites in a CEP are presented below.

Substance name	Number of sites with substance in a CEP	
	All sites	NPL sites
Trichloroethylene	363	286
Arsenic	341	208
Tetrachloroethylene	280	207
Benzene	210	137
Cadmium	207	136
Volatile Organic Compounds, Unspecified	193	132
Chromium	193	129
Polychlorinated Biphenyls	177	116
Mercury	167	93
Manganese	164	95
Zinc	158	95
Copper	143	83
1,1,1-Trichloroethane	135	110
Chloroform	124	92
Benzo(A)Pyrene	122	58
1,1-Dichloroethene	117	96
Polycyclic Aromatic Hydrocarbons	117	79
Nickel	112	70
Methylene Chloride	111	73
Toluene	111	68
Antimony	108	69
Vinyl Chloride	103	84
Barium	102	56
1,2-Dichloroethane	96	77

Note: Sorted by the All Sites column.
 All Sites = all sites with ATSDR activities that have a CEP; NPL.
 Sites = current and former sites on the National Priorities List, as mandated.

Dated: November 29, 2005.

Ken Rose,

Acting Director, Office of Policy, Planning and Evaluation, National Center for Environmental Health/Agency for Toxic Substances and Disease Registry.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Statement of Organization, Functions, and Delegations of Authority

Part C (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 67772-76, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 70 FR 70617-18, dated November 22, 2005) is amended to reflect the reorganization of the Facilities Planning and Management Office, within the Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

Section C-B, Organization and Functions, is hereby amended as follows:

Delete in its entirety the titles and functional statements for the *Facilities Planning and Management Office (CAJ3)* and insert the following:

Buildings and Facilities Office (CAJC).

(1) Operates, maintains, repairs, and modifies CDC's Atlanta area plant facilities, and conducts a maintenance and repair program for CDC's program support equipment; (2) carries out facilities planning functions for CDC, including new or expanded facilities, and a major repair and improvement program; (3) develops services for new, improved, and modified equipment to meet program needs, *i.e.*, building related and installed equipment such as HVAC, bio safety cabinets, chemical fume hoods, walk-in freezers, etc; and (4) conducts CDC's real property and space management activities, including the acquisition of leased space, the purchase and disposal of real property, and provides technical assistance in space planning to meet programmatic needs.

Office of the Director (CAJC1). (1) Plans, directs, and coordinates the functions and activities of the Buildings and Facilities Office (BFO); (2) provides management and administrative direction for budget planning and execution, property management, and personnel management within BFO; (3) provides leadership and strategic support to senior managers in the determination of CDC's long-term facilities needs; (4) coordinates the operations of BFO staff involved in the planning, evaluation, design, construction, and management of facilities and acquisition of property; (5) provides centralized value engineering (VE) services, policy development and coordination, and global acquisition planning for BFO; (6) develops and maintains the Integrated Facilities Management System to process data for management and control systems, and develop reports and analyses; and (7) assists and advises senior CDC officials in the development, coordination, direction, and assessment of facilities and real property activities throughout CDC's facilities and operations, and assures consideration of facilities management implications in program decisions.

Capital Improvements Management Office (CAJCB). (1) Provides professional architectural/engineering capabilities, and technical and administrative project support to CDC and the national centers (NC) for renovations and improvements to CDC-owned facilities and construction of

Substance name	Number of sites with substance in a CEP	
	All sites	NPL sites
Lead	431	267