and 7,500 ineligible screened persons during a 3-year period. Data collection will rotate such that interviews will be conducted among one group per year: MSM in year 1, IDU in year 2, and HET in year 3. The type of data collected for each group will vary slightly due to different sampling methods and risk characteristics of the group. Participation of respondents is voluntary and there is no cost 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 hours)	Total burden (in hours)
MSM:				
Screener only	5,000	1	5/60	417
Screener, survey, and testing	12,500	1	65/60	13,542
IDU:				
Screener only	1,250	1	5/60	104
Screener, survey, and testing	12,500	1	90/60	18,750
HET:				
Screener only	1,250	1	5/60	104
Screener, survey, and testing	12,500	1	75/60	15,625
Total				48,542

Dated: January 12, 2007.

Deborah Holtzman,

Reports Clearance Officer, Centers for Disease Control and Prevention. [FR Doc. E7–705 Filed 1–18–07; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Breast and Cervical Cancer Early Detection and Control Advisory Committee

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) announces the aforementioned committee meeting:

Times and Dates: 8:30 a.m.–5 p.m., February 6, 2007; 8:30 a.m.–3 p.m., February 7, 2007.

Place: Centers for Disease Control and Prevention, 1600 Clifton Road, NE., Tom Harkin Global Community Center, Building 19, Atlanta, Georgia 30333, Telephone: 404– 639–1717.

Status: Open to the public, limited only by the space available.

Purpose: The committee is charged with advising the Secretary, Department of Health and Human Services, and the Director, CDC, regarding the early detection and control of breast and cervical cancer. The committee makes recommendations regarding national program goals and objectives; implementation strategies; and program priorities including surveillance, epidemiologic investigations, education and training, information dissemination, professional interactions and collaborations, and policy. Matters to be Discussed: The agenda will include a review and discussion of the National Breast and Cervical Cancer Early Detection Program components; and discussion and review of related policies and emerging issues.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Debra Younginer, Executive Secretary, BCCEDCAC, Division of Cancer Prevention and Control, National Center for Chronic Disease Prevention and Health Promotion, CDC, 4770 Buford Highway, Mailstop K–57, Chamblee, Georgia 30316, Telephone: 770– 488–1074.

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 CDC and NCEH/ATSDR.

Dated: January 12, 2007.

Edward Schultz,

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

[FR Doc. E7–721 Filed 1–18–07; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Clinical Laboratory Improvement Advisory Committee

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) announces the following committee meeting.

Name: Clinical Laboratory Improvement Advisory Committee (CLIAC). Web site:

http://www.phppo.cdc.gov/CLIAC/ default.aspx.

Times and Dates: 8:30 a.m.–5 p.m., February 14, 2007; 8:30 a.m.–3 p.m., February 15, 2007.

Place: Omni Hotel at CNN Center, 100 CNN Center, Atlanta, Georgia 30303; Phone: (404) 659–0000, Fax: (404) 525–5050 (*http:// www.omnihotels.com/FindAHotel/ AtlantaCNNCenter.aspx*).

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 100 people.

Purpose: This committee is charged with providing scientific and technical advice and guidance to the Secretary of Health and Human Services, the Assistant Secretary for Health, and the Director, CDC, regarding the need for, and the nature of, revisions to the standards under which clinical laboratories are regulated, the impact on medical and laboratory practice of proposed revisions to the standards, and the modification of the standards to accommodate technological advances.

Matters to be Discussed: The agenda will include updates from the CDC, the Centers for Medicare & Medicaid Services, and the Food and Drug Administration; discussion of the status of the "Notice of Proposed Rulemaking" for genetic testing; presentations and discussion concerning the future of health laboratory practice specifically focusing on simple testing in diverse sites; reports and discussions addressing the impact of the Morbidity and Mortality Weekly Report (MMWR) Publication of "Good Laboratory Practices for Waived Testing Sites''; a report from the CLIAC Workgroup on "The Impact of Rapid and Molecular Tests for Infectious Disease Agents on Public Health" and discussion of the workgroup's proposals related to such; and presentations and discussion concerning rapid HIV testing. Agenda items are subject to change as priorities dictate.

Providing Oral or Written Comments: It is the policy of CLIAC to accept written public comments and provide a brief period for oral public comments whenever possible.