

must be reviewed by the ATSDR Project Officer in draft before they are finalized and disseminated. ATSDR will return draft materials with comments within two weeks of receipt. All materials developed with cooperative agreement must contain acknowledgement of funding as follows:

This material was developed under a cooperative agreement from the Agency for Toxic Substances and Disease Registry, U.S. Department of Health and Human Services, with funding from the Comprehensive Environmental Response, Compensation and Liability Act (CERCLA) of 1980 as amended by the Superfund Amendment and Reauthorization Act (SARA) of 1986.

All materials developed with cooperative agreement funds will not be copyrighted and will remain in the public domain to encourage wide distribution. ATSDR will receive final paper and electronic copies (electronic files are to be compatible with ATSDR software) of all materials developed by the awardee.

Additional information on these requirements can be found on the CDC Web site at the following Internet address: <http://www.cdc.gov/od/pgo/funding/ARs.htm>.

VI.3. Reporting Requirements

You must provide CDC with an original, plus two hard copies of the following reports:

1. Interim progress report, no less than 90 days before the end of the budget period. The progress report will serve as your non-competing continuation application, and must contain the following elements:
 - a. Current Budget Period Objectives and Activities.
 - b. Current Budget Period Financial Progress.
 - c. New Budget Period Program Proposed Objectives and Activity.
 - d. Detailed Line-Item Budget and Justification.
 - e. Additional Requested Information.
 - f. Measures of Effectiveness.
2. Financial status report and annual progress report are due 60 after the end of the budget period.
3. Final financial and performance reports, no more than 90 days after the end of the project period.

These reports must be sent to the Grants Management Specialist listed in the "Agency Contacts" section of this announcement.

VII. Agency Contacts

For general questions about this announcement, contact: Technical Information Management Section, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, Telephone: 770-488-2700.

For program technical assistance, contact: Brenda L. Adams, Project Officer, CPET/PSB/DHEP/ATSDR, 1600 Clifton Road, NE., Mailstop E-33, Atlanta, Georgia 30333, Telephone: 404-498-0513, E-mail: badams@cdc.gov.

For budget assistance, contact: Edna Green, Grants Management Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, Telephone: 770-488-2743, E-mail: egreen@cdc.gov.

Dated: April 2, 2004.

William P. Nichols, MPA,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-47-04]

Proposed Data Collections Submitted for Public Comment and Recommendations

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) 498-1210. Send written comments to CDC, Desk Officer, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

Assessment Information about the National Center for Injury Prevention and Control (NCIPC) Publications—

New—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

This project will collect information from Internet users after they order or download a publication from the Web site of the Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. CDC, National Center for Injury Prevention and Control produces a variety of publications about injury prevention for a range of audiences, from public health professionals to the general public. Publications include reports to Congress, fact books, brochures, research articles, tool kits, and books. Most of these publications are available to the general public, and the chief distribution method is through the CDC, NCIPC Web site, www.cdc.gov/ncipc. On the Web site, people can order printed copies or view electronic copies of the publications.

It is critical for CDC to obtain feedback from users of their NCIPC publications, so that the information can be used to identify who uses the publications and how. This will help guide the development of future publications, revisions of current ones, as well as distribution of publications. As part of the effort to gain understanding about the audiences of the CDC, NCIPC publications, information will be collected through a web-based form. CDC, NCIPC Web site users will have the opportunity to fill out the form after ordering, downloading, or reading online publications through the Web site. The form contains questions about the demographic background of the users, how they found the Web site, how they plan to use the publication, their need for publications in other languages, the degree to which the publication offerings were useful to them, and space for their general comments. The results of the forms will be compiled and studied so CDC can better consider the needs of people who use the publications in future publication development, revisions, and distribution plans. The estimated annualized burden is 17,026 hours.

| Respondents | Number of respondents | Number of responses per respondent | Average burden per response (in hrs.) |
|--------------|-----------------------|------------------------------------|---------------------------------------|
| Form A | 200,000 | 1 | 5/60 |
| Form B | 21,600 | 1 | 1/60 |

Dated: April 1, 2004.
Alvin Hall,
*Director, Management Analysis and Services
 Office, Centers for Disease Control and
 Prevention.*
 [FR Doc. 04-7937 Filed 4-7-04; 8:45 am]
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**DEPARTMENT OF HEALTH AND
 HUMAN SERVICES**

**Centers for Disease Control and
 Prevention**

[30Day-32-04]

**Proposed Data Collections Submitted
 for Public Comment and
 Recommendations**

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) 498-1210. Send written comments to CDC, Desk Officer, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

Final Evaluation of the Effectiveness of Targeted Lookback for Identifying

Transfusion Recipients who receive Blood that may have been Contaminated with Hepatitis C Virus—New—National Center for Infectious Diseases (NCID), Centers for Disease Control and Prevention (CDC).

In 1998 the Food and Drug Administration (FDA) issued guidelines to blood collection establishments and transfusion services for the notification of persons who received blood or blood components from donors who subsequently tested positive for antibody to hepatitis C virus (anti-HCV) using a licensed multiantigen screening assay. Blood collection establishments were to identify potentially HCV-contaminated blood products and inform transfusion services of these units. The transfusion services made an attempt to notify the recipients of these products and encouraged recipients to be tested for HCV infection. Recently, the FDA revised their original guidance to extend the lookback period for these multiantigen screened donors, and include in the lookback process donors who tested anti-HCV positive using the earlier single-antigen screening assay.¹

CDC, in collaboration with the FDA, has been charged with the responsibility of evaluating this nationwide notification process. An interim nationwide survey (Evaluation of the Effectiveness of Targeted Lookback for Identifying Transfusion Recipients who receive Blood that may have been Contaminated with Hepatitis C Virus,

OMB No. 0920-0462) of blood collection establishments and transfusion services was conducted in December 1999 to determine the progress that had been made to date, and to summarize the lookback results. The objective of this currently proposed study is to resurvey the blood collection establishments and transfusion services to obtain final results and assess the overall effectiveness of the targeted lookback for identifying persons infected with HCV. The evaluation has two specific aims:

1. Determine the effectiveness of targeted lookback for identifying prior transfusion recipients with HCV infection, including the proportion of recipients identified who are still alive, the proportion of those alive who were successfully notified, the proportion of those notified who have already been tested, the proportion of those notified who get tested as a result of the notification, and the proportion of those tested who are HCV positive.
2. Determine the cost-effectiveness of targeted lookback, including resources (person-hours, costs of recipient notification and testing, etc.) utilized by blood collection establishments and transfusion services for implementation of the lookback protocol.

The evaluation will include the following components: (1) A nationwide survey of blood collection establishments; (2) A nationwide survey of transfusion services. The estimated annualized burden is 15,480 hours.

| Survey site | Form name | Number of respondents | Number of responses per respondent | Average burden per response (in hrs) |
|--------------------------------------|---|-----------------------|------------------------------------|--------------------------------------|
| Blood Collection Establishment | HCV Targeted Lookback Blood Collection Establishment Final Questionnaire. | 160 | 1 | 3 |
| Transfusion Services | HCV Targeted Lookback Transfusion Service Final Questionnaire. | 5,000 | 1 | 3 |

Dated: April 1, 2004.
Alvin Hall,
*Director, Management Analysis and Services
 Office, Centers for Disease Control and
 Prevention.*
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**DEPARTMENT OF HEALTH AND
 HUMAN SERVICES**

**Centers for Disease Control and
 Prevention**

**Grants for Education Programs in
 Occupational Safety and Health; Notice
 of Availability of Funds**

Announcement Type: New and
 Competing Continuation.

Funding Opportunity Number: RFA
 OH05-001.

*Catalog of Federal Domestic
 Assistance Number:* 93.263.

Key Dates:

Letter of Intent Deadline: None.

*Pre-Application Technical Assistance
 Conference Call:* May 13, 2004 (see
 Section VIII of this announcement).

Application Deadline: July 1, 2004.

Executive Summary: The Centers for
 Disease Control and Prevention (CDC)

¹ Food and Drug Administration. Guidance For Industry. "Lookback" for Hepatitis C Virus (HCV): Product Quarantine, Consignee Notification, Further Testing, Product Disposition, and Notification of Transfusion Recipients Based on Donor Test Results Indicating Infection with HCV Rockville, MD: Center for Biologics Evaluation and Research (CBER), December 2001.