

Dated: January 12, 2006.

Michelle Shortt,

Director, Regulations Development Group,
Office of Strategic Operations and Regulatory
Affairs.

[FR Doc. E6-628 Filed 1-19-06; 8:45 am]

BILLING CODE 4120-01-P

**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

National Institutes of Health

**Proposed Data Collection; Comment
Request; National Survey of Primary
Care Physicians' Recommendations
and Practice for Breast, Cervical,
Colorectal, and Lung Cancer
Screening**

SUMMARY: In compliance with the
provisions of Section 3506(c)(2)(A) of

the Paperwork Reduction Act of 1995,
for opportunity for public comments on
proposed data collection projects, the
National Institutes of Health (NIH),
National Cancer Institute (NCI) will
publish periodic summaries of proposed
projects to be submitted to the Office of
Management and Budget (OMB) for
review and approval.

Proposed Collection: Title: National
Survey of Primary Care Physicians'
Recommendations and Practice for
Breast, Cervical, Colorectal, and Lung
Cancer Screening. *Type of Information
Collection Request:* New. *Need and Use
of Information Collection:* This study
will obtain current, national data on
primary care physicians' knowledge,
attitudes, recommendations, and
practices related to screening for breast,
cervical, colorectal, and lung cancer.
There have been substantial changes in

guidelines and/or technologies for these
types of cancer screening in recent
years. The data collected in this study
will support and further NCI work in
monitoring and evaluating providers'
cancer control knowledge, attitudes, and
practices and their impact on
population health, as well as enable
monitoring of progress toward major
cancer control goals. Two
questionnaires, one covering breast and
cervical cancer screening and the other
colorectal and lung cancer screening,
will be administered by mail or
telephone to a randomly-selected
national sample of primary care
physicians. *Frequency of Response:* One
Time. *Affected Public:* Medical
practices, clinics, or other health care
organizations. *Type of Respondents:*
Primary Care Physicians. *Burden
estimates* are as follows:

Questionnaire	Estimated number of respondents	Estimated number of responses per respondent	Average burden hours per response	Estimated total annual burden hours
Breast and cervical cancer screening	1250	1	0.333	416.25
Colorectal and lung cancer screening	1250	1	0.333	416.25
Total				832.5

There are no Capital Costs to report.
There are no Operating or Maintenance
Costs to report.

Request for Comments: Written
comments and/or suggestions from the
public and affected agencies are invited
on one or more of the following points:
(a) Whether the proposed collection of
information is necessary for the
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.

FOR FURTHER INFORMATION CONTACT:

Send comments to Carrie N. Klabunde,
Ph.D., Epidemiologist, Division of
Cancer Control and Population
Sciences, National Cancer Institute,
Executive Plaza North 4005, 6130
Executive Boulevard, Bethesda,
Maryland 20892-7344 or call non-toll-
free (301) 402-3362 or E-mail:
klabundc@mail.nih.gov.

Comments Due Date: Comments
regarding this information collection are
best assured of having their full effect if

received within 60 days of the date of
this publication.

Dated: January 11, 2006.

Rachelle Ragland-Greene,

NCI Project Clearance Liaison, National
Institutes of Health.

[FR Doc. 06-512 Filed 1-19-06; 8:45 am]

BILLING CODE 4101-01-P

**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

**National Institutes of Health/National
Institute of Environmental Health
Sciences**

**Laboratory of Pulmonary
Pathobiology; Submission for OMB
Review; Comment Request; Use of In-
Home Test Kits in Dust Mite Allergen
Reduction**

SUMMARY: Under the provisions of
Section 3507(a)(1)(D) of the Paperwork
Reduction Act of 1995, the National
Institute of Environmental Health
Sciences (NIEHS), the National
Institutes of Health (NIH) has submitted
to the Office of Management and Budget
(OMB) a request to review and approve
the information collection listed below.
This proposed information collection
was previously published in the **Federal
Register** on October 21, 2004, pages

61853-61854, and allowed 60 days for
public comment. No public comments
were received although one person sent
an e-mail expressing interest in the
study and asking if she could
participate. She was told this was a pilot
study to be carried out in a specific
location in North Carolina. The purpose
of this notice is to allow an additional
30 days for public comment. The
National Institutes of Health may not
conduct or sponsor, and the respondent
is not required to respond to, an
information collection that has been
extended, revised, or implemented on or
after October 1, 1995, unless it displays
a currently valid OMB control number.

Proposed Collection: Title: Use of In-
home Test Kits in Dust Mite Allergen
Reduction. *Type of Information
Collection Request:* New. *Need and Use
of Information Collection:* This request
for OMB review and approval of the
information collection is required by
regulation 42 CFR part 65(a)(6).
Asthmatics and others with dust mite
allergies often implement strategies to
avoid dust mite exposure, but have little
objective evidence that their
interventions are successful in reducing
dust mite populations. Recently
developed in-home test kits have
introduced the capability to monitor the
effectiveness of allergen reduction
strategies by providing an affordable,

simple way to measure dust mite allergens on a regular basis. The primary objective of this study is to determine if use of in-home test kits results in decreased dust mite allergen levels in home of children sensitive or allergic to dust mites. A secondary objective is to determine if use of in-home test kits result in additidual and behavioral changes related to implementing and maintaining dust mite reduction strategies. This study is a randomized intervention trial designed to test the efficacy of an in-home test kit in influencing behaviors to reduce dust mite allergen levels. Households will be recruited through flyers and will be screened for eligibility through a recruitment call line and a home visit to determine baseline dust mite levels in the household. Study participants will

be randomly assigned to a treatment or control group. The treatment group will receive educational materials and an in-home test kit at set intervals, while the control group will receive educational materials alone. Vacuumed dust samples will be collected and delivered to the NIEHS laboratory for ELISA-based measurements of the dust mite allergens Der f2 and Der p 2. A questionnaire will be used to collect information on home characteristics and on dust mite reduction attitudes and behaviors. Data will be collected at baseline, 6 months and 12 months. The results from this study will be used by NIEHS to plan future primary and secondary asthma prevention trials. *Frequency of Response:* After the two stages of eligibility screening, data will be collected at baseline, 6-months, and 12-

months. *Type of Respondents:* Parents of children with dust-mite allergies. The annual reporting burden is as follows: *Estimated Number of Respondents:* See table below; *Estimated Number of Responses per Respondent:* See table below; *Average Burden Hours Per Response:* 0.25 hour for initial screening, 0.5 hour for dust mite eligibility screening, 1.5 hours for each baseline visit, and 1 hour for each follow-up home visit (6- and 12-month); and *Estimated Total Annual Burden Hours Requested:* 690.5. The annualized cost to respondents is estimated at: \$13,810 (assuming \$20 hourly wage × 690.5 hours). There are no Capital Costs, Operating Costs and/or Maintenance Costs to report.

CALCULATION FOR DATA BURDEN OF DUST MITE ALLERGEN REDUCTION STUDY

Type of data collection	Number of respondents	Hours per response	Total hours
Eligibility Screening	450	0.25	112.5
Dust Mite Level Eligibility Screening	280	0.5	140.0
Baseline Visit	144	1.5	216.0
6-month follow-up	122	1.0	122.0
12-month follow-up	100	1.0	100.0
Total hours			690.5

Request for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk

Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Dr. Darryl Zeldin, NIEHS, Laboratory of Pulmonary Pathobiology, P.O. Box 12233, Research Triangle Park, NC 27709 or call non-toll-free number (919) 541-1169 or e-mail your request, including your address to dz20a@niehs.nih.gov.

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

Dated: January 11, 2006.
Richard A. Freed,
Associate Director for Management, NIEHS, National Institutes of Health.
 [FR Doc. 06-513 Filed 1-19-06; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health/National Institute of Environmental Health Sciences

Proposed Collection; Comment Request; Environmental Factors in the Development of Polycystic Ovary Syndrome

SUMMARY: 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 National Institute of Environmental Health Sciences (NIEHS), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Proposed Collection: Title: Environmental Factors in the Development of Polycystic Ovary Syndrome. *Type of Information Collection Request:* Revision of OMB No. 0925-0483 and expiration date 3/31/2006. *Need and Use of Information Collection:* The purpose of this study is to identify a cohort of living female twin pairs in which at least one member is