DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Funding Opportunity Number: CE05–018]

Cooperative Agreement Program for the National Academic Centers of Excellence on Youth Violence Prevention; Notice of Availability of Funds-Amendment

A notice announcing the availability of fiscal year (FY) 2005 funds for cooperative agreements to to establish up to ten National Academic Centers of Excellence (ACE) on Youth Violence Prevention, serving as national models for the prevention of youth violence, was published in the **Federal Register** on November 22, 2004, Vol. 69, No. 224, pages 67915–67930.

The notice is amended as follows: On page 67917, Column 3, Section IV.1. Address to Request application Package, delete the first sentence and replace with "To apply for this funding opportunity, use application form PHS 398 (OMB number 0925–0001 rev. 9/2004).

Dated: January 28, 2005.

William P. Nichols,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention. [FR Doc. 05–2044 Filed 2–2–05; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Institute for Occupational Safety and Health; Advisory Board on Radiation and Worker Health

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), and pursuant to the requirements of 42 CFR 83.15(a), the Centers for Disease Control and Prevention (CDC) has announced the following committee meeting where petitions for designation of classes of employees as members of the Special Exposure Cohort (SEC) will be considered for the Mallinckrodt Destrehan Street Plant and the Iowa Army Ammunition Plant.

Name: Advisory Board on Radiation and Worker Health (ABRWH), National Institute for Occupational Safety and Health (NIOSH).

Committee Meeting Times and Dates: 1 p.m.–5 p.m., February 7, 2005, 8 a.m.–4:45 p.m., February 8, 2005, 7 p.m.–8:30 p.m., February 8, 2005, 8:30 a.m.–4:30 p.m., February 9, 2005. *Place:* Adam's Mark St. Louis, 4th and Chestnut Street, St. Louis, Missouri 63102, telephone (314) 241–7400, fax (314) 241– 9839.

Status: Open to the public, limited only by the space available. The meeting space accommodates approximately 500 people.

Matters to be Discussed: This notice provides further information regarding two items on the agenda for this meeting. First, NIOSH is seeking the ABRWH's guidance on dealing with dose reconstruction data when questions are raised about the authenticity and reliability of the data. Second, NIOSH is seeking guidance from the ABRWH on the findings of the SEC Petition Evaluation Reports-Mallinckrodt Chemical Company, Destrehan Street Plant, the entire uranium division, 1942-1957, St. Louis, Missouri, and Petitioners Comments on Report; and the NIOSH SEC Petition Evaluation Report-Iowa Army Ammunition Plant (IAAP), Line 1 and associated areas, 1947-1974, Burlington, Iowa, and Petitioners Comments on Report. The NIOSH SEC Petition Evaluation Report for Mallinckrodt 1942-1945 and for Mallinckrodt 1946–1957 find that radiation doses cannot be estimated with sufficient accuracy and that there is a reasonable likelihood that such radiation dose may have endangered the health for Mallinckrodt Chemical Company, Destrehan Street Plant uranium division employees from 1942-1948. The NIOSH SEC Petition Evaluation Report for Mallinckrodt 1946-1957 finds that dose reconstructions may or may not be feasible from 1949-1957. NIOSH also seeks the guidance of the ABRWH on the NIOSH SEC Petition Evaluation Report-Iowa Army Ammunition Plant that finds that records and/or information necessary to publicly evaluate part of the IAAP SEC Petition are not, and will not be available on a transparent and timely basis.

In the event an individual cannot attend, written comments may be submitted. Any written comments received will be provided at the meeting and should be submitted to the contact person below well in advance of the meeting.

Contact Person for More Information: Lewis Wade, Senior Science Advisor to the Director, NIOSH, CDC, 200 Independence Avenue, SW., Room 717H, Washington, DC 20201, telephone (202) 401–6997; fax (202) 205–2207.

Dated: February 1, 2005.

John Howard,

Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC).

 $[{\rm FR} \ {\rm Doc.} \ 05{-}2201 \ {\rm Filed} \ 2{-}1{-}05; \ 2{:}22 \ {\rm pm}]$

BILLING CODE 4163-19-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Draft Acute Injury Care Research Agenda for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Draft Acute Injury Care Research Agenda for the National Center for Injury Prevention and Control.

SUMMARY: The Centers for Disease Control and Prevention (CDC) announces the availability of the Draft Acute Injury Care Research Agenda for the National Center for Injury Control and Prevention (NCIPC) and solicits comments during the public comment period of February 3, 2005, through March 3, 2005. In June 2002, NCIPC released its current Injury Research Agenda, which outlines the Center's injury research direction through 2007. The NCIPC Research Agenda highlights seven key injury research areas: Injuries at home and in the community. recreation, transportation, violence, suicide, youth violence, and acute care, disability, and rehabilitation. The NCIPC Research Agenda was being completed when the events of September 11, 2001, occurred; that event led NCIPC to revisit the agenda and see what, if any, gaps existed and needed to be addressed. This analysis revealed that out of the thirteen priority areas for research in the area of acute care, disability, and rehabilitation, only three dealt specifically with acute injury care

Recognizing this limited focus, the NCIPC decided to supplement the current research agenda by extending the acute injury care portion of the agenda, focusing on the intersection between public health and acute injury care research.

Over the past year, NCIPC has been developing an Acute Injury Care Research Agenda based on input from external experts in the field of acute injury care (*e.g.*, emergency medical services, emergency medicine, trauma surgery, public health), Federal partners, and internal staff. The objectives presented will be appended to the acute care section of the NCIPC Research Agenda. The proposed six research objectives and four infrastructure objectives are as follows:

Research Objectives

(1) Evaluate how mass casualty and disaster situations impact the provision of acute injury care.

(2) Evaluate strategies to translate, disseminate and implement sciencebased recommendations and guidelines for the care of the acutely injured.

(3) Develop and evaluate new or existing health quality measures to better assess outcomes for persons treated in a pre-hospital or hospital acute injury care setting.

(4) Identify individual, sociocultural and community factors that impact on the immediate and long-term care of the acutely injured.

(5) Develop and evaluate acute injury treatment strategies that will result in evidence-based management for persons who sustain a life-threatening injury or one that could lead to significant disability.

(6) Determine and evaluate the components of pre-hospital and hospital trauma systems that lead to improvements in outcome for the acutely injured.

Infrastructure Objective

(1) Build the acute injury care research infrastructure through the development of an Acute Injury Care Research Network (AICRN).

(2) Determine how existing databases can best be utilized to assess and improve systems of acute injury care.

(3) Develop new training programs and expand and restructure existing training and education for health professionals in injury care, prevention and research.

(4) Determine, evaluate, and address current obstacles in conducting acute injury care research.

Interested persons are invited to comment on the Draft Acute Injury Care Research Agenda. NCIPC will not be able to respond to individual comments, but all comments received by March 3, 2005; will be considered before the final Acute Injury Care Research Agenda is published. A more detailed background document is available upon request. Send requests and comments electronically to DARDInfo@cdc.gov.

Dated: January 27, 2005.

James D. Seligman,

Associate Director for Program Services, Centers for Disease Control and Prevention. [FR Doc. 05–2041 Filed 2–2–05; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10139]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Center for Medicare & Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

We are, however, requesting an emergency review of the information collection referenced below. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, we have submitted to the Office of Management and Budget (OMB) the following requirements for emergency review. We are requesting an emergency review because the collection of this information is needed before the expiration of the normal time limits under OMB's regulations at 5 CFR part 1320. This is necessary to ensure compliance with an initiative of the Administration. We cannot reasonably comply with the normal clearance procedures because the normal procedures are likely to cause a statutory deadline to be missed. It is critical to complete the survey and analysis for a Report to Congress due June 2005.

Section 704(C)(2) requires CMS to conduct a study on how non-Medicare/ Medicaid Outcome and Assessment Information Set (OASIS) is used by large and small home health agencies (HHA's). The study will investigate whether there are unique benefits from the analysis of such information, the value of collecting such information by small HHA's compared to the administrative burden, a comparison of outcomes for non-Medicare/non-Medicaid patients and Medicare/ Medicaid patients, and obtain the opinions of quality assessment experts. The study will consist of a mailed survey of 1200 home health agencies.

CMS is requesting OMB review and approval of this collection by March 7, 2005, with a 180-day approval period. Written comments and recommendation will be accepted from the public if received by the individuals designated below by March 4, 2005.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web site address at *http://www.cms.hhs.gov/ regulations/pra* or e-mail your request, including your address, phone number, OMB number, and CMS document identifier, to *Paperwork@cms.hhs.gov,* or call the Reports Clearance Office on (410) 786–1326.

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of information requirements. However, as noted above, comments on these information collection and recordkeeping requirements must be mailed and/or faxed to the designees referenced below by March 4, 2005:

Centers for Medicare and Medicaid Services, Office of Strategic Operations and Regulatory Affairs, Room C5–13–27, 7500 Security Boulevard, Baltimore, MD 21244–1850, Fax Number: (410) 786– 0262, Attn: William N. Parham, III, CMS–10139 and, OMB Human Resources and Housing Branch, Attention: Christopher Martin, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: January 28, 2005.

John P. Burke, III,

CMS Paperwork Reduction Act Reports Clearance Officer, Office of Strategic Operations and Regulatory Affairs, Regulations Development Group. [FR Doc. 05–2074 Filed 2–2–05; 8:45 am] BILLING CODE 4120-03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Food and Drug Administration Drug Educational Forum; Public Workshop

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of public workshop.