*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 science-based 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.