Officer, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an e-mail to *omb@cdc.gov.*

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper 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. Written comments should be received within 60 days of this notice.

Proposed Project

Formative Research to Inform the Routine HIV Testing for gynecologists providing primary care services and Prevention Is Care (PIC) Social Marketing Campaigns—New—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)[Proposed], Coordinating Center for Infectious Diseases (CCID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

This project involves formative research to inform the development of two Centers for Disease Control and Prevention (CDC)-sponsored social marketing campaigns: Social Marketing Campaign to Make HIV Testing a Routine Part of Medical Care for Gynecologists Providing Primary Care Services (Routine HIV Testing), and Prevention Is Care (PIC). The goal of the Routine HIV Testing Campaign is to increase HIV testing rates among women seeking gynecological primary care services and the objective of the campaign is to make HIV testing a routine part of primary care provided by obstetrician/gynecologists (OB/GYN). PIC entails encouraging primary care physicians (PCP) and Infectious Disease Specialists who deliver care to patients living with HIV and screen them for HIV transmission behaviors and deliver brief messages on the importance of protecting themselves and others by reducing their risky behaviors. The long-term objective of the campaign is to establish PIC as the standard of care for persons living with HIV. The study entails conducting focus groups and interviews to test creative materials with a sample of Obstetrician/Gynecologists (OB/GYN) for Routine HIV Testing and with PCP and Infectious Disease Specialists for PIC. Findings from this study will be used by CDC and its partners to inform current and future program activities.

For Routine HIV Testing, we expect a total of 81 physicians to be screened for eligibility. Of the 81 physicians who are screened, we expect that 27 will participate in a focus group and 27 will participate in an interview.

For PIC, we expect a total of 162 physicians to be screened for eligibility. Of the 162 physicians who are screened, we expect that 54 will participate in a focus group and 54 will participate in an interview. There are no costs to the respondents other than their time.

Estimate of Annualized Burden Hours

Respondents	Number of respondents	Responses per respondent	Average burden per response (in hours)	Total burden hours
Routine HIV Testing Screener	81	1	10/60	14
Routine HIV Testing Focus Group	27	1	2	54
Routine HIV Testing Interview	27	1	1	27
PIC Screener	162	1	10/60	27
PIC Focus Group	54	1	2	108
PIC Interview	54	1	1	54
Total				284

Dated: December 6, 2006.

Joan F. Karr,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E6–21124 Filed 12–11–06; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–07–07AD]

Proposed Data Collections Submitted for Public Comment and Recommendations

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 Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–5960 and send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an e-mail to *omb@cdc.gov*.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper 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. Written comments should be received within 60 days of this notice.

Proposed Project

Formative Research to Inform an HIV Testing Social Marketing Campaign for African American Heterosexual Men—New—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)[Proposed], Coordinating Center for Infectious Diseases (CCID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

This project involves formative research to inform the development of the HIV Testing Social Marketing Campaign for African American Heterosexual Men, a CDC-sponsored social marketing campaign aimed at increasing HIV testing rates among

young, single, African American men. The study entails conducting focus groups and interviews with a sample of single African American heterosexual men, ages 18 to 45, with less than 4 years of college education to: (1) Explore participants' knowledge, attitudes and beliefs about HIV and HIV testing to inform the development of campaign messages; (2) identify the most motivating approach, supporting data, and key messages for materials development; (3) test creative concepts, potential campaign themes, logos and names; and (4) test creative materials developed based on the findings from the previous phases of the research. Findings from this study will be used by CDC and its partners to inform current and future program activities.

We expect a total of 306 participants to be screened for eligibility. Of the 306 participants who are screened, we expect that 81 people will participate in a focus group and 72 people will participate in an interview. There are no costs to the respondents other than their time.

Estimated Annualized Burden Hours and Burden Table:

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Screener	306	1	10/60	51
Focus Group	81	1	2	162
Interview	72	1	1	72
Total				285

Dated: December 6, 2006.

Joan F. Karr,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E6–21125 Filed 12–11–06; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Medical Devices Dispute Resolution Panel of the Medical Devices Advisory Committee; Amendment of Notice

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

The Food and Drug Administration (FDA) is announcing an amendment to the notice of meeting of the Medical Devices Dispute Resolution Panel of the Medical Devices Advisory Committee. This meeting was originally announced in the **Federal Register** of November 24, 2006 (71 FR 67879). The amendment is being made to reflect a change in the *Date and Time* portion of the document, specifically, a change in the start time of the meeting. There are no other changes.

FOR FURTHER INFORMATION CONTACT: Nancy Collazo-Braier, Office of the Center Director (HFZ–1), Food and Drug Administration, 9200 Corporate Blvd., Rockville, MD 20850, 240–276–3959, *nancy.braier@fda.hhs.gov*, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 3014510232. Please call the Information Line for up-to-date information on this meeting.

SUPPLEMENTARY INFORMATION: In the **Federal Register** of November 24, 2006, FDA announced that a meeting of the Medical Devices Dispute Resolution Panel of the Medical Devices Advisory Committee would be held on December 15, 2006. On page 67879, in the second column, the *Date and Time* portion of the document is amended to read as follows:

Date and Time: The meeting will be held on December 15, 2006, from 8 a.m. to 5 p.m.

This notice is issued under the Federal Advisory Committee Act (5 U.S.C. app. 2) and 21 CFR part 14, relating to the advisory committees.

Dated: December 5, 2006.

Randall W. Lutter,

Associate Commissioner for Policy and Planning.

[FR Doc. E6–21020 Filed 12–11–06; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

[Funding Opportunity Number HHS–2006–IHS–SP–0001; CFDA Numbers: 93.971, 93.123, and 93.972]

Health Professions Preparatory, Health Professions Pregraduate and Indian Health Professions Scholarship Programs; Announcement Type: Initial

Key Dates: Application Deadline: February 28, 2007; *Application Review:* March 26–30, 2007; *Application Notification:* First week of July, 2007; *Award Start Date:* August 1, 2007.

I. Funding Opportunity Description

The Indian Health Service (IHS) is committed to encouraging American Indians and Alaska Natives to enter the health professions and to assuring the availability of Indian health professionals to serve Indians. The IHS is committed to the recruitment of students for the following programs:

- The Indian Health Professions Preparatory Scholarships authorized by section 103 of the Indian Health Care Improvement Act (IHCIA), as amended.
- The Indian Health Professions Pregraduate Scholarships authorized by section 103 of the IHCIA, as amended.
- The Indian Health Professions Scholarships authorized by section 104 of the IHCIA, as amended.

Full-time and part-time scholarships will be funded for each of the three scholarship programs.

II. Award Information

Awards under this initiative will be administered using the grant mechanism of the IHS.

Estimated Funds Available: An estimated $14.3 million will be available for FY 2007 awards.

Anticipated Number of Awards: Approximately 194 awards will be made under the Health Professions Preparatory and Pregraduate Scholarship Programs for Indians. The awards are for 10 months in duration and the average award to a full-time student is approximately $24,366. An estimated 338 awards will be made under the Indian Health Scholarship (Professions) Program. The awards are for 12 months in duration and the average award to a full-time student is for approximately $38,236. In FY 2007, an estimated $5,130,000 is available for continuation awards, and an estimated $9,170,000 is available for new awards.

Project Period—The project period for the Health Professions Preparatory Scholarship support is limited to 2 years