| Respondents & percent of form name use   | Form name                          | Number of respondents                    | Number of responses per respondent | Average<br>burden per<br>response<br>(in hours) | Total burden<br>(in hours)      |
|--|------------------------------------|--|------------------------------------|---|---------------------------------|
| ATSDR Web site Visitors (50%) ATSDR Web site Visitors (15%) ATSDR Web site Visitors (15%) ATSDR Web site Visitors (5%) ATSDR Web site Visitors (8%) ATSDR Web site Visitors (7%) | WSUS TPUS TFUS PHSUS TCCUS TP-CDUS | 1,000<br>300<br>300<br>100<br>160<br>140 | 1<br>1<br>1<br>1<br>1              | 5/60<br>5/60<br>5/60<br>5/60<br>5/60<br>5/60    | 83<br>25<br>25<br>8<br>13<br>12 |
| Total  |                                    |  |                                    |   | 166                             |

Dated: December 14, 2006.

#### Joan F. Karr,

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

[FR Doc. E6–21718 Filed 12–19–06; 8:45 am] BILLING CODE 4163–18–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[60Day-07-06BU]

### 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**

The Effectiveness of Teen Safe Driving Messages and Creative Elements on Parents and Teens—New—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Car crashes are the number one killer of teens, accounting for approximately one-third of all deaths within this age group. The National Center for Health Statistics reports that in 2004, a total of 3,620 young drivers were killed and an additional 303,000 were injured in motor vehicle crashes.

In order to reduce these preventable deaths and injuries, parental awareness and education about Graduated Driver's Licensing (GDL) laws and the ways that parents can influence their children's safe driving are necessary. In preparation for a national campaign to educate parents about their role in their teens' driver education, it is necessary to determine the most effective messages and channels through which to communicate with parents.

Ogilvy Public Relations Worldwide, on behalf of CDC, will conduct two studies to assess the appropriateness and impact of messages and creative materials intended to (a) increase parental involvement in their teen's driving education and experience, and (b) encourage teens to adopt safer driving practices.

The first information collection will be accomplished through focus group testing of campaign messages and materials with representatives from our target audiences, parents and teens, in two cities in the U.S. The findings will provide valuable information regarding parents' and teens' levels of awareness and concern about safe driving; motivators for behavior change, especially GDL compliance; and message/channel preferences. The information collected will be used to develop final creative materials to implement the teen safe driving campaign in pilot cities.

The second information collection will be accomplished through pilot city testing, which will evaluate knowledge, attitude and behaviors of intended audiences both pre- and postcommunications campaign. The campaign will target parents of newlylicensed drivers. It will encourage parents to understand state regulations regarding new drivers, talk with their teens about safe driving practices, and both manage and monitor their teens' driving behavior. Testing will be conducted through brief telephone surveys intended to assess knowledge, attitudes and behaviors of parents and teens related to safe driving practices, GDL laws, and parental management of new drivers before and after the campaign; with the goal of observing a marked increase in parental management at the time of the postcampaign survey. CDC anticipates screening 1,777 individuals and that 45% of these will qualify for the survey testing. Pending CDC's decision whether or not to include teens in survey testing, the breakdown of the groups shown in the tables below may change. However, the total number of respondents and screeners will remain the same.

There is no cost to the respondents other than their time.

Estimated Annualized Burden Hours:

### PHASE 1.—FOCUS GROUP TESTING

| Type of respondents                                 | Estimated number of respondents | Estimated<br>number of re-<br>sponses per<br>respondent | Average<br>burden per re-<br>sponse<br>(in hours) | Annual total<br>burden<br>requested<br>(in hours) |
|---|---------------------------------|---|---|---|
| Rejected Screeners Accepted Screeners Parents Teens | 152<br>48<br>32<br>16           | 1.0<br>1.0<br>1.0<br>1.0                                | 1/60<br>5/60<br>2.0<br>2.0                        | 2<br>4<br>64<br>32                                |
| Total   |                                 |   |   | 102   |

# PHASE 2.—PRE- AND POST-INTERVENTION PILOT CITY SURVEY TESTING [based on two cities]

| Type of respondents | Estimated number of respondents | Estimated<br>number of re-<br>sponses per<br>respondent | Average<br>burden per<br>response<br>(in hours) | Estimated an-<br>nual total bur-<br>den hours<br>requested |
|---------------------|---------------------------------|---|---|--|
| Screeners Parents   | 1,777<br>600                    | 2.0<br>2.0  | 1/60<br>15/60                                   | 59<br>300  |
| Teens               | 200                             | 2.0   | 15/60   | 100  |
| Total               |                                 |   |   | 459  |

Dated: December 13, 2006.

### Joan F. Karr,

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

[FR Doc. E6–21719 Filed 12–19–06; 8:45 am]

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. 2006N-0237]

Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Product Jurisdiction: Assignment of Agency Component for Review of Premarket Applications

**AGENCY:** Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995. DATES: Fax written comments on the collection of information by January 19, 2007.

**ADDRESSES:** To ensure that comments on the information collection are received, OMB recommends that written

comments be faxed to the Office of Information and Regulatory Affairs, OMB, Attn: FDA Desk Officer, FAX: 202–395–6974.

### FOR FURTHER INFORMATION CONTACT:

Jonna Capezzuto, Office of the Chief Information Officer (HFA–250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857,301–827– 4659.

**SUPPLEMENTARY INFORMATION:** In compliance with 44 U.S.C. 3507, FDA has submitted the following proposed collection of information to OMB for review and clearance.

### Product Jurisdiction: Assignment of Agency Component for Review of Premarket Applications—(OMB Control Number 0910–0523)—Extension

This regulation relates to agency management and organization and has two purposes. The first is to implement section 503(g) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 353(g)), as added by the Safe Medical Devices Act of 1990 (Public Law 101-629), and amended by the Medical Device User Fee and Modernization Act of 2002 (Public Law 107-250), by specifying how FDA will determine the organizational component within FDA assigned to have primary jurisdiction for the premarket review and regulation of products that are comprised of any of the following combinations: (1) A drug and a device; (2) a device and a biological; (3) a biological and a drug; or

(4) a drug, a device, and a biological. The second purpose of this regulation is to enhance the efficiency of agency management and operations by providing procedures for classifying and determining which agency component is designated to have primary jurisdiction for any drug, device, or biological product where such jurisdiction is unclear or in dispute. The regulation establishes a procedure by which an applicant may obtain an assignment or designation determination. The regulation requires that the request include the identity of the applicant, a comprehensive description of the product and its proposed use, and the applicant's recommendation as to which agency component should have primary jurisdiction, with an accompanying statement of reasons. The information submitted would be used by FDA as the basis for making the assignment or designation decision. Most information required by the regulation is already required for premarket applications affecting drugs, devices, biologicals, and combination products. The respondents will be businesses or other for-profit organizations.

In the **Federal Register** of June 22, 2006 (71 FR 35916), FDA published a 60-day notice requesting public comment on the information collection provisions. No comments were received.

FDA estimates the burden of this collection of information as follows: