FEDERAL RETIREMENT THRIFT INVESTMENT BOARD

Employee Thrift Advisory Council

TIME AND DATE: 9 a.m. (Eastern Time), June 30, 2008.

PLACE: 2nd Floor, Training Room, 1250 H Street, NW., Washington, DC 20005.

STATUS: Open.

MATTERS TO BE CONSIDERED:

1. Approval of the minutes of the December 19, 2007 meeting.
2. Report of the Executive Director on Thrift Savings Plan Status.
3. Discussion Draft Legislation.
4. Other proposals.
5. New business.

FOR FURTHER INFORMATION CONTACT: Thomas K. Emswiler, Committee Management Officer, (202) 942–1660.

Dated: June 10, 2008.

Thomas K. Emswiler,

General Counsel, Federal Retirement Thrift Investment Board.

[FR Doc. 08–1353 Filed 6–10–08; 1:59 pm]

BILLING CODE 6760–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Pediatric Medical Device Stakeholders Workshop

AGENCIES: Agency for Healthcare Research and Quality (AHRQ); U.S. Food and Drug Administration (FDA); and National Institutes of Health (NIH).

ACTION: Notice.

SUMMARY: The Interagency (AHRQ–FDA–NIH) Pediatric Devices Working Group is holding a workshop to gather information about the development of pediatric devices.

DATES: The workshop will be held on July 23, 2008 from 8 a.m. until 5 p.m. EDT.

ADDRESSES: The workshop will be held in Natcher Auditorium, located in Building 45, NIH Main Campus, Bethesda, Maryland 20814.

FOR FURTHER INFORMATION CONTACT: Steven Hirschfeld, MD, PhD, Associate Director for Clinical Research, Eunice Kennedy Shriver National Institute of Child Health and Human Development, 31 Center Drive, Room 2A03, Bethesda, Maryland 20814; Tel: 301–496–3454; Fax: 301–402–1104; E-mail: *hirschfs@mail.nih.gov.*

SUPPLEMENTARY INFORMATION: In September 2007, the Congress passed Title III of the FDA Amendments Act, called the Pediatric Medical Device Safety and Improvement Act. The legislation requires that the DHHS Secretary submit a plan to Congress for expanding pediatric medical device research and development. In developing the plan, the DHHS Secretary shall consult with individuals and organizations with appropriate expertise in pediatric medical devices. The plan shall include the current status of federally funded pediatric medical device research; any gaps in such research, which may include a survey of pediatric medical providers regarding unmet pediatric medical device needs, as needed; and a research agenda for improving pediatric medical device development and Food and Drug Administration clearance or approval of pediatric medical devices, and evaluating the short- and long-term safety and effectiveness of pediatric medical devices.

This meeting of the Interagency Pediatric Devices Working Group, which includes AHRQ, FDA, and NIH, seeks to elicit feedback about expanding pediatric device research and development from interested communities and the public to help inform the plan that the DHHS Secretary will submit in accordance with the legislation.

The purpose of this workshop is to:

- Inform the community of the current status of pediatric device development;
- Describe available mechanisms for device product registration;
- Describe available mechanisms for pediatric device project funding;
- Understand what stakeholders see to be important areas of study;
- Determine gaps in knowledge and where the needs for research are; and
- Discuss ways to gather the information needed to move ahead, such as overcoming barriers, handling logistics, determining classes of devices to study, and identifying available databases, registries, surveillance systems.

You are not required to preregister for this meeting to attend. However, preregistering allows you to receive current information about the meeting, its agenda, and other details (such as how to prepare statements, participating in working lunch sessions, etc.). To register, please send an e-mail to *hirschfs@mail.nih.gov* with ''Device Workshop Registration'' in the subject line. Please also include the following information. (Note: Incomplete information may limit the organizers' ability to keep you informed about the workshop; please provide accurate and complete information):

- First and Last Name
- Degree (optional)
- Professional Title (optional)
- Organization and Department
- Type of Organization (e.g., government agency, non-profit hospital, for-profit company, etc.)
- Address
- City, State, and ZIP Code
- Country
- Phone (Main contact number):
- Fax:
- E-mail:

The agenda; logistics; legislation; background material and information; and a link to the Request for Information (RFI) issued for this topic can be found at *http://www.nichd.nih.gov/about/meetings/2008/devices.cfm.*

Duane Alexander,

Director, Eunice Kennedy Shriver Institute of Child Health and Human Development, National Institutes of Health.

[FR Doc. E8–13278 Filed 6–11–08; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–08–07BJ]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–5960 or send an e-mail to *omb@cdc.gov*. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–6974. Written comments should be received within 30 days of this notice.

Proposed Project

Economic Analysis of the National Program of Cancer Registries—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The National Program of Cancer Registries (NPCR) is a comprehensive, federally sponsored public health program involving cancer registries in 45 States and the District of Columbia. The NPCR was established to collect data on the occurrence of cancer; the type, extent, and location of the cancer; and the type of initial treatment.

CDC proposes to conduct a systematic analysis of the economic costs incurred by the NPCR. Additional information will be collected on registry activities, activity-based costs, other sources of funding and in-kind contributions. Information will be submitted to CDC once per year for three years using a Web-based system. There is no overlap with information currently collected from NPCR awardees through the Annual Program Evaluation Instrument (OMB No. 0920–0706, exp. 12/31/2008).

The proposed information collection will allow CDC to assess the true cost of registry operations in relation to the benefits of those operations, identify factors that impact cost, perform cost-effectiveness analysis, and improve the efficiency of resource allocation within the NPCR.

There are no costs to respondents except their time. The total estimated annualized burden hours are 1,012.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
NPCR funded registries	46	1	22

Dated: June 5, 2008.

Maryam I. Daneshvar,

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

[FR Doc. E8–13181 Filed 6–11–08; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–08–0621]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–5960 or send an e-mail to *omb@cdc.gov*. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–6974. Written comments should be received within 30 days of this notice.

Proposed Project

2009 and 2011 National Youth Tobacco Surveys (NYTS)—Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

CDC requests OMB approval to conduct the National Youth Tobacco Survey (NYTS) in 2009 and 2011 (OMB No. 0920–0621; exp. date December 31, 2008). The NYTS is a school-based survey that that has been conducted in 1999, 2000, 2002, 2004, and 2006. To improve the coordination and efficiency of school-based surveillance activities within CDC, the proposed revision will establish a routine data collection schedule to occur in the Spring of odd-numbered years. Minor changes to the survey instrument and the burden estimate also are proposed.

The NYTS provides national estimates for middle and high school students of tobacco use behaviors, information about exposure to pro- and anti-tobacco influences, and information about racial and ethnic disparities in these tobacco-related behaviors and behavioral determinants. Information collected through the NYTS is used to identify trends over time, to inform the development of tobacco cessation programs for youth, and to evaluate the effectiveness of existing interventions and programs. The NYTS covers the following topics related to youth tobacco use: Use of cigarettes, smokeless tobacco, cigars, pipes, bidis, and kreteks; knowledge and attitudes; media and advertising; access to tobacco products and enforcement of restrictions on access; school curriculum; environmental tobacco smoke exposure; and cessation.

The NYTS will be conducted among nationally representative samples of students in grades 6–12 attending public and private schools. Responding students will complete a self-administered optically scannable questionnaire that includes multiple-choice questions. Information supporting the NYTS also will be collected from state-, district-, and school-level administrators and teachers. The table below reports the combined total number of respondents for the 2009 and 2011 NYTS annualized over the requested three-year OMB approval period.

There are no costs to respondents except their time. The estimated annualized burden hours are 10,213.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State Administrators	State-level Recruitment Script for the NYTS	17	1	30/60
District Administrators	District-level Recruitment Script for the NYTS	80	1	30/60
School Administrators	School-level Recruitment Script for the NYTS	133	1	30/60
Teachers	Data Collection Checklist for the NYTS	635	1	15/60
Students	National Youth Tobacco Survey (NYTS)	13,251	1	45/60