Dated: March 18, 2002.

Nancy Cheal,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.

[FR Doc. 02–7276 Filed 3–26–02; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–02–35]

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 the CDC Reports Clearance Officer on (404) 498–1210.

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. Send comments to Anne O'Connor, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS–D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project: Survey of Dentists to Obtain Information that will Improve the Reporting of Oral and Pharyngeal Cancers—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Legislation in most States requires the collection of incidence and mortality data on all types of cancers to identify cancer control needs and to track progress in reducing cancer incidence and deaths. These data include the counting of cancer cases as well as basic medical information about these cases such as the stage of the tumors at time of diagnosis. The goal of this project is to help the States of West Virginia and South Carolina to improve the accuracy, completeness and timeliness of oral and pharyngeal cancer data in their Central Cancer Registries. Oral and pharyngeal cancer is the focus of this project because it is suspected that many cases of these cancers are currently undercounted and the quality of available data is in need of improvement. In addition, oral and pharyngeal cancers have very poor 5-year survival (less than 50%), yet most are preventable. Therefore, control of oral and pharyngeal cancer is an important public health goal of these State Health Departments. These improved data will better meet the State's own legal mandate of cancer surveillance as part of the State public health infrastructure, and assist in the planning and evaluation of oral and pharyngeal cancer control efforts.

While cancer registries routinely receive pathology reports of tumor diagnoses, it is possible that for some cases of oral and pharyngeal cancer, the pathology specimens are sent to special pathology labs associated with dental schools, or to out-of-state laboratories. To ascertain these under-utilized pathology reporting sources, a simple survey will be sent to dental health providers (mostly dentists and oral surgeons). All such providers will be surveyed in West Virginia, while a sample of providers will be surveyed in South Carolina. The survey will ask if oral cancer screening is performed in the practice, if suspicious lesions are biopsied in the practice, and if not, to which specialists are referrals made. If the practice performs biopsies of oral lesions, the name and address of the pathology laboratory will be requested. These laboratories will be informed of their responsibility to report newly diagnosed tumors to the State Central Cancer Registry. There are no costs to respondents.

Respondents	Number of respondents	Number of responses per respondent	Average burden of response (in hours)	Total burden (in hours)
Dentist and Oral Surgeons	1600	1	12/60	320
Total	.....	.....	.....	320

Dated: March 18, 2002.

Nancy Cheal,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.

[FR Doc. 02–7277 Filed 3–26–02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY–19–02]

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) 498–1210. Send written comments to CDC, Desk Officer, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503. Written comments should be received within 30 days of this notice.

Proposed Project: Reactions to Canadian-style Cigarette Warning Labels—NEW—The National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC), proposes to conduct a national survey of young persons to assess their attitudes towards larger and more graphic cigarette warning labels, such as those currently used in Canada. Although the

purpose of cigarette warning labels is to alert consumers about the health hazards of smoking, research suggests that current U.S. warnings fail to get the attention of smokers, an important first step if warnings are to have any deterrent effect. Cigarette warning labels have not changed since 1984 in the United States.

The proposed study will be conducted through implementation of a web-based survey. We propose to administer a 10 minute survey to 2000 persons 18 to 24 years of age. The survey will include images of Canadian cigarette packs with their current warning labels and questions about reactions to these warnings, including acceptability, and perceived usefulness (perceived impact on starting to smoke or deciding to quit). The results of this study will be shared with policy makers and public health officials. The total burden for this data collection is 200 hours.

Respondents	Number of respondents	Responses/respondent	Avg. burden per Response (in hrs)
Persons 18–24 years old	1200	1	10/60

Dated: March 19, 2002.

Nancy Cheal,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.

[FR Doc. 02–7275 Filed 3–26–02; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: Preliminary Investigation of Health Effects of Occupational Exposures in Paducah Gaseous Diffusion Plant Workers, Program Announcement OH–99–143; Correction

AGENCY: Centers for Disease Control and Prevention, Department of Health and Human Services.

ACTION: Notice; correction.

SUMMARY: The Centers for Disease Control and Prevention, published a document in the **Federal Register**, March 19, 2002, (67 FR 12570), concerning Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: Preliminary Investigation of Health Effects of Occupational Exposures in Paducah Gaseous Diffusion Plant Workers, Program Announcement OH–99–143. The meeting time has changed.

CONTACT PERSON FOR MORE INFORMATION: Kathleen Goedel, National Institute for Occupational Safety and Health, CDC, 4676 Columbia Parkway, M/S R–6, Cincinnati, Ohio 45226, telephone 513–841–4560.

Correction: In the **Federal Register** of March 19, 2002, (Volume 67, Number 53) [Notices] Page 12570, correct the ''Times and Dates'' to read:

Times and Dates:

2 p.m.–2:15 p.m., April 2, 2002 (Open)

2:20 p.m.–4 p.m., April 2, 2002 (Closed)

The meeting place, status, and purpose, announced in the original notice remain unchanged.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: March 21, 2002.

Alvin Hall,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 02–7317 Filed 3–26–02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 01N–0458]

Agency Information Collection Activities; Submission for OMB Review; Comment Request; Guidance for Industry: Fast Track Drug Development Programs—Designation, Development, and Application Review

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that the proposed collection of information listed below has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

DATES: Submit written comments on the collection of information by April 26, 2002.

ADDRESSES: Submit written comments on the collection of information to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW., rm. 10235, Washington, DC 20503, Attn: Stuart Shapiro, Desk Officer for FDA.

FOR FURTHER INFORMATION CONTACT: JonnaLynn P. Capezzuto, Office of Information Resources Management (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.

Guidance for Industry: Fast Track Drug Development Programs—Designation, Development, and Application Review (OMB Control No. 0910–0389)—Extension

Section 112(a) of the Food and Drug Administration Modernization Act of 1997 (FDAMA) (Public Law 105–115) amended the Federal Food, Drug, and Cosmetic Act (the act) by adding section 506 (21 U.S.C. 356). The section authorizes FDA to take appropriate action to facilitate the development and expedite the review of new drugs, including biological products, intended to treat a serious or life-threatening condition and that demonstrates a potential to address an unmet medical need. Under section 112(b) of FDAMA, FDA issued guidance to industry on fast track policies and procedures outlined in section 506 of the act. The guidance discusses collections of information that are specified under section 506 of the act, other sections of the Public Health Service Act (the PHS Act), or implementing regulations. The guidance describes three general areas involving collections of information: (1) Fast track designation requests, (2) premeeting packages, and (3) requests to submit portions of an application. Of these, fast track designation requests and