

Catalog of Federal Domestic Assistance number is 93.161.

I. Where To Obtain Additional Information

To receive additional written information and to request an application kit, call 1-888-GRANTS4 (1-888-472-6874). You will be asked to leave your name and address and will be instructed to identify the announcement number of interest.

See also the CDC home page on the Internet for a complete copy of the announcement: <http://www.cdc.gov>.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from: Nelda Y. Godfrey, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Announcement 99076, Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Suite 3000, Atlanta, GA 30341-4146, telephone (770) 488-2722, E-mail address NAG9@cdc.gov.

For program technical assistance, contact: Jeffrey A. Lybarger, M.D., Director, Division of Health Studies, Agency for Toxic Substances and Disease Registry, Executive Park, Building 4 Suite 2300, Atlanta, GA 30305, telephone (404) 639-6200, E-mail address JAL2@cdc.gov.

Dated: March 26, 1999.

Georgi Jones,

Director, Office of Policy and External Affairs, Agency for Toxic Substances and Disease Registry.

Background

Since 1993, ATSDR has applied this paradigm to the evaluation of seven priority health conditions. This purpose of these evaluations was to support the development of a body of knowledge about the interrelationships of the model parameters and thus the relationship between exposures to hazardous substances and adverse health effects. Health studies were conducted and supported predominantly evaluating a cross-section of the general public living near waste sites. It is possible, however, that the occurrence of adverse health effects and subclinical toxic effects are more common among a small number of sensitive people. People may be more likely to experience adverse health effects resulting from exposures to hazardous substances if they have underlying illnesses, suffer effects of poverty such as poor diet or education about health seeking behaviors, have limited physiological reserve of organ function due to being very young or very old, or are limited by environmental injustices. The application of this paradigm to selected groups of persons with hypothesized sensitivities would assist in identifying

affected people and evaluating risk modifying factors.

[FR Doc. 99-8004 Filed 3-31-99; 8:45 am]

BILLING CODE 4163-70-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substance and Disease Registry

Inter-Tribal Council on Hanford Health Projects; Notice of Meeting

Public meeting of the Inter-tribal Council on Hanford Health Projects (ICHHP) in association with the Citizens Advisory Committee on Public Health Service (PHS) Activities and Research at Department of Energy (DOE) Sites: Hanford Health Effects Subcommittee (HHES).

The Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC) announce the following meeting.

Name: Public meeting of the ICHHP in association with the Citizens Advisory Committee on PHS Activities and Research at DOE Sites: HHES.

Time and Date: 9 a.m.-4 p.m., May 12, 1999.

Place: Tamastslikt Cultural Institute, Umatilla Indian Reservation, 72777 Highway 331, Pendleton, Oregon 97801.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 35 people.

Background: Under a Memorandum of Understanding (MOU) signed in October 1990 and renewed in November 1992 between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or "Superfund"). These activities include health consultations and public health assessments at DOE sites listed on, or proposed for, the Superfund National Priorities List and at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles.

In addition, under an MOU signed in December 1990 with DOE and replaced by an MOU signed in 1996, the Department of Health and Human Services (HHS) has been given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production and use. HHS has delegated program responsibility to CDC.

Community Involvement is a critical part of ATSDR's and CDC's energy-related research and activities and input from members of the ICHHP is part of these efforts. The ICHHP will work with the HHES to provide input on American Indian health effects at the Hanford, Washington site.

Purpose: The purpose of this meeting is to address issues that are unique to tribal involvement with the HHES, including discussion on Hanford Thyroid Disease Study results, update on tribal cooperative agreements, and development of a National Research Agenda with tribal input.

Matters to Be Discussed: Agenda items will include a dialogue on issues that are unique to tribal involvement with the HHES. This will include updating tribal members of the cooperative agreement activities in environmental health capacity building and providing support for tribal involvement in and representation on the HHES.

Agenda items are subject to change as priorities dictate.

Contact Persons for More Information:

Leslie C. Campbell, Executive Secretary HHES, or Marilyn Palmer, Committee Management Specialist, Division of Health Assessment and Consultation, ATSDR, 1600 Clifton Road, NE, M/S E-56, Atlanta, Georgia 30333, telephone 1-888/42-ATSDR (28737), fax 404/639-6075.

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 25, 1999.

Carolyn J. Russell,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99-8007 Filed 3-31-99; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

Citizens Advisory Committee on Public Health Service (PHS) Activities and Research at Department of Energy (DOE) Sites: Hanford Health Effects Subcommittee

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC) announce the following meeting.

Name: Citizens Advisory Committee on PHS Activities and Research at DOE Sites: Hanford Health Effects Subcommittee (HHES).

Times and Dates: 8:30 a.m.-5 p.m., May 13, 1999; 8:30 a.m.-4 p.m., May 14, 1999.

Place: Tamastlikt Cultural Institute, Umatilla Indian Reservation, 72777 Highway 331, Pendleton, Oregon 97801.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 100 people.

Background: Under a Memorandum of Understanding (MOU) signed in October 1990 and renewed in November 1992 between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or "Superfund"). These activities include health consultations and public health assessments at DOE sites listed on, or proposed for, the Superfund National Priorities List and at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles.

In addition, under an MOU signed in December 1990 with DOE and replaced by an MOU signed in 1996, the Department of Health and Human Services (HHS) has been given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production and use. HHS has delegated program responsibility to CDC.

Purpose: This subcommittee is charged with providing advice and recommendations to the Director, CDC, and the Administrator, ATSDR, regarding community, American Indian Tribes, and labor concerns pertaining to CDC's and ATSDR's public health activities and research at this DOE site. The purpose of this meeting is to receive an update from the Inter-tribal Council on Hanford Health Projects; to review and approve the Minutes of the previous meeting; to receive updates from ATSDR/NCEH and NIOSH; to receive reports from the Outreach, Public Health Assessment, Public Health Activities, and the Studies Workgroups; and to address other issues and topics, as necessary.

Matters to be Discussed: Agenda items include a presentation and discussion on Native American Risk Scenario, question and answer session with Hanford Thyroid Disease Study researchers, and agency updates.

Agenda items are subject to change as priorities dictate.

Contact Persons for More Information: Leslie C. Campbell, Executive Secretary HHES, or Marilyn Palmer, Committee Management Specialist, Division of Health Assessment and Consultation, ATSDR, 1600 Clifton Road, NE, M/S E-56, Atlanta, Georgia 30333, telephone 1-888/42-ATSDR(28737), fax 404/639-6075.

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 25, 1999.

Carolyn J. Russell,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99-8008 Filed 3-31-99; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-10-99]

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) 639-7090. 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:

1. Mammography Rescreening Rates and Risk Factor Assessment—New—The National Center for Chronic Disease Prevention and Health Promotion, Division of Cancer Control and Prevention proposes to conduct mammography research to reduce breast cancer deaths by detecting tumors while

they are still small and easier to treat. Because new tumors can develop in women previously free of breast cancer, older women who face higher risks of developing breast cancer should complete mammography screening every one to two years. To provide cancer screening for low income women, Congress passed the Breast and Cervical Cancer Mortality Prevention Act (Pub. L. 101-354) in 1990. The Division of Cancer Prevention and Control (DCPC) in the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC) was given funding to establish the National Breast and Cervical Cancer Early Detection Program (NBCCEDP). The NBCCEDP now provides mammography and cervical cancer screening services to low income and medically under-served women in all 50 states, the District of Columbia, 4 territories, and 13 tribes. To assist state, territorial, and tribal programs with efficient service delivery, new data are needed to (1) estimate scientifically valid, statistically precise estimates of mammography rescreening rates and (2) identify the factors associated with timely rescreening among NBCCEDP-enrollees.

To obtain data on mammography rescreening rates and risk factors, DCPC plans to conduct telephone interviews with a random sample of 2,250 NBCCEDP-enrollees from four states. Consenting women will complete a 35 minute telephone interview about their knowledge, attitudes, and experiences with mammography screening. Those who report having received a mammogram during the study period (April 1, 1997 through September 30, 2000) will be asked to sign a release of information form so a copy of the mammography report can be obtained to verify the date the procedure was completed. All women invited to participate in the survey will be 50-73 years of age. Each telephone interview will be scheduled for a time (day, evening, or weekend) and place that is convenient to the participant. The total annual burden hours are 2,223.

Respondents (forms)	No. of respondents	No. of responses/ respondent	Average burden/response (in hrs.)	Total burden (in hrs.)
Telephone Script for Project Coordination	2,500	1	0.167	417
Telephone Interview	2,250	1	0.50	1,125
Consent Form to Release Mammography Reports	1,350	1	0.167	225
Mammography Reports	1,215	1.5	0.25	456