Gynecology Devices Panel of the Medical Devices Advisory Committee were available at this time, the Commissioner of Food and Drugs concluded that it was in the public interest to hold this meeting even if there was not sufficient time for the customary 15-day public notice.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: January 10,2000

Linda A. Suydam,

Senior Associate Commissioner [FR Doc. 00–981 Filed 1–13–00; 8:45 am] BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Peripheral and Central Nervous System Drugs Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration,

HHS.

ACTION: Notice.

SUMMARY: The Food and Drug
Administration (FDA) is announcing an amendment to the notice of a meeting of the Peripheral and Central Nervous
System Drugs Advisory Committee. This meeting was announced in the Federal
Register of December 27, 1999 (64 FR 72355). The amendment is being made to cancel the entire session on January 27, 2000. This meeting will be open to the public. There are no other changes.

FOR FURTHER INFORMATION CONTACT:

Sandra L. Titus, Center for Drug Evaluation and Research (HFD-21), Food and Drug Administration, 5600 Fishers Lane (for express delivery, 5630) Fishers Lane, rm. 1093) Rockville, MD 20857, 301-827-7001, or e-mail tituss@cder.fda.gov, or FDA Advisory Committee Information Line, 1-800-741-8138 (301-443-0572 in the Washington, DC area) code 12543. Please call the Information Line for upto-date information on this meeting. SUPPLEMENTARY INFORMATION: In the Federal Register of December 27, 1999 (64 FR 72355), FDA announced that a meeting of the Peripheral and Central Nervous System Drugs Advisory

Committee would be held on January 27 and 28, 2000. On page 72355, beginning in the first column, the *Date and Time*, *Agenda*, and *Procedure* portions of this meeting are amended to read as follows:

Date and Time: The meeting will be held January 28 from 8 a.m. to 5 p.m. Location: Hilton, 620 Perry Ave.,

Gaithersburg, MD.

Agenda: On January 28, the committee will consider the safety and efficacy of new drug NDA 21–120, Novantrone®, (mitoxantrone, Immunex Corporation) proposed to treat secondary progressive multiple sclerosis, including progressive relapsing disease.

Procedure: Interested persons may present data, information, or views. orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by January 20, 2000. Oral presentations from the public will be scheduled between approximately 1 p.m. and 2 p.m. on both days. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before January 20, 2000, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: January 7, 2000.

Linda A. Suydam,

Senior Associate Commissioner. [FR Doc. 00–889 Filed 1–13–00; 8:45 am] BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Request for Public Comment: 60-Day Notice; Proposed Collection: Evaluation of Indian Health Service/ Bureau of Indian Affairs Training Practitioners Project

SUMMARY: In compliance with Section 3506(c)(2)(A) of the Paperwork

Reduction Act of 1995, to provide a 60-day advance opportunity for public comment on proposed information collection projects, the Indian Health Service is publishing for comment a summary of a proposed information collection to be submitted to the Office of Management and Budget (OMB) for review.

PROPOSED COLLECTION: Title:

"Evaluation of Indian Health Service /Bureau of Indian Affairs Training Practitioners Project." Type of Information Collection Request: New collection. Form Number: None. Need and Use of Information Collection: The purpose of the proposed data collection is to evaluate and assess the overall effectiveness of the Indian Health Service (IHS) and Bureau of Indian Affairs (BIA) inter-agency sponsored national training project titled, "IHS/ BIA Training Practitioners in the Assessment and Treatment of Adolescent Sexual Perpetrators," conducted from 1993-1996 in 18 American Indian/Alaska Native (AI/AN) communities. The training project was established to provide mental health practitioners in AI/AN communities specialized training for the provision of mental health assessment and treatment services to juvenile sex offenders. The data collected is needed to assess respondent satisfaction/dissatisfaction with the training project, the clinical success/failure of the training on the juvenile sex offenders, the impact of using traditional healing treatment services with juvenile sex offenders, and to obtain recommendations for future clinical program planning. Affected Public: Individuals and households, State, Local or Tribal Government. Type of Respondents: Health care providers, juveniles, parent/caretakers, and various community members. Please see Table 1 for a listing of data collection instruments, estimated number of respondents, number of responses per respondent, annual number of responses, average burden hour per response, and total annual burden hour.

TABLE 1

Date collection instruments	Estimated No. of respondents	Reponses per respondent	Annual Number of respondents*	Average burden hour per response*	Total annual burden hours
Practitioner Trainee Questionnaire	159	1	159	0.50 (30 mins).	79.5

TABLE 1—Continued

Date collection instruments	Estimated No. of respondents	Reponses per respondent	Annual Number of respondents*	Average burden hour per response*	Total annual burden hours
Practitioner Trainee Assessment	16	4	64	. ` .	10.9
Practitioner Trainee Interview	8	1	8	mins). 1.00 (60 mins).	8.0
Juvenile/Adult	61	1	61	0.50 (30	30.5
J/A Re-Offense	61	1	61	mins). 0.17 (10	10.4
Parent/Caretaker	122	1	122	(61.0
Community Key Information Questionnaire	24	1	24	mins). 1.50 (90 mins).	36.0
Community Key Informational Interview	24	1	24	,	24.0
Medical (Treatment and Health Review)	61	1	61	0.75 (45	45.7
Agency Record Review	61	1	61	mins). 1.00 (60 mins).	61.0
Total	597				367.0

^{*} For ease of understanding, burden hours are also provided in actual minutes.

There are no Capital Costs, Operating Costs and/or Maintenance Costs to report.

Request for comments

Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function: (b) whether the agency processes the information collected in a useful and timely fashion; (c) the accuracy of public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimate are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Send Comments and Requests For Further Information: Send your written comments or requests for more information on the proposed collection or requests to obtain a copy of the data collection instrument(s) and instructions to: Mr. Lance Hodahkwen, Sr., M.P.H., IHS Reports Clearance Officer, 12300 Twinbrook Parkway, Suite 450, Rockville, MD 20852.1601: call non-toll free (301) 433–5938, send via facsimile to (301) 443–2316, or send your e-mail requests, comments, and

return address to: lhodahkw@hqe.ihs.gov.

Comment Due Date: Your comments regarding this information collection are best assured of having their full effect if received on or before March 14, 2000.

Dated: January 7, 2000.

Michael H. Trujillo,

Assistant Surgeon General Director, Indian Health Service.

[FR Doc. 00–887 Filed 1–13–00; 8:45 am] BILLING CODE 4160–16–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Request for Public Comment: 60-Day Notice; Proposed Collection: Evaluation of Indian Health Service/ Bureau of Indian Affairs Training Practitioners Project

SUMMARY: In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, to provide a 60-day advance opportunity for public comment on proposed information collection projects, the Indian Health Service is publishing for comment a summary of a proposed information collection to be submitted to the Office of Management and Budget (OMB) for review.

PROPOSED COLLECTION: Title:

"Evaluation of Indian Health Service/ Bureau of Indian Affairs Training Practitioners Project." Type of

Information Collection Request: New collection. Form Number: None. Need and Use of Information Collection: The purpose of the proposed data collection is to evaluate and assess the overall effectiveness of the Indian Health Service (IHS) and Bureau of Indian Affairs (BIA) inter-agency sponsored national training project titled, "IHS/ BIA Training Practitioners in the Assessment and Treatment of Adolescent Sexual Perpetrators," conducted from 1993–1996 in 18 American Indian/Alaska Native (AI/AN) communities. The training project was established to provide mental health practitioners in AI/AN communities specialized training for the provision of mental health assessment and treatment services to juvenile sex offenders. The data collected is needed to assess respondent satisfaction/dissatisfaction with the training project, the clinical success/failure of the training on the juvenile sex offenders, the impact of using traditional healing treatment services with juvenile sex offenders, and to obtain recommendations for future clinical program planning. Affected Public: Individuals and households, State, Local or Tribal Government. Type of Respondents: Health care providers, juveniles, parent/caretakers, and various community members. Please see Table 1 for a listing of data collection instruments, estimated number of respondents, number of responses per respondent, annual number of responses, average burden hour per response, and total annual burden hour.