addressing new facets of the risk assessment process as required by FQPA. In particular, the current document relies heavily on the Exposure Factors Handbook (USEPA, 1997b), the Residential SOPs (USEPA, 1997a), the Interim Guidance (Stasikowski, 1997a) and Guidance for Submission of Probabilistic Human Health Exposure Assessments to the Office of Pesticide Programs (USEPA, 1998c). These earlier documents provide substantial background to the information provided.

### IV. Policies Not Rules

The policy document discussed in this notice is intended to provide guidance to EPA personnel and decisionmakers, and to the public. As a guidance document and not a rule, the policy in this guidance is not binding on either EPA or any outside parties. Although this guidance provides a starting point for EPA risk assessments, EPA will depart from its policy where the facts or circumstances warrant. In such cases, EPA will explain why a different course was taken. Similarly, outside parties remain free to assert that a policy is not appropriate for a specific pesticide or that the circumstances surrounding a specific risk assessment demonstrate that a policy should not be applied.

### List of Subjects

Environmental protection, Administrative practice and procedure, Agricultural commodities, Pesticides and pests.

Dated: November 16, 2001.

**Susan B. Hazen,**

*Assistant, Assistant Administrator for Prevention, Pesticides and Toxic Substances.*

[FR Doc. 01–29386 Filed 11–27–01; 8:45 am]

**BILLING CODE 6560–50–S**

## FEDERAL COMMUNICATIONS COMMISSION

**[Report No. 2514]**

### Petition for Reconsideration of Action in Rulemaking Proceeding

November 20, 2001.

Petition for Reconsideration has been filed in the Commission's rulemaking proceeding listed in this Public Notice and published pursuant to 47 CFR section 1.429(e). The full text of this document is available for viewing and copying in Room CY–A257, 445 12th Street, SW., Washington, DC or may be purchased from the Commission's copy contractor, Qualex International (202) 863–2893. Oppositions to this petition must be filed by December 13, 2001. See section 1.4(b)(1) of the Commission's rules (47 CFR 1.4(b)(1)). Replies to an opposition must be filed within 10 days after the time for filing oppositions has expired.

Subject: Amendment of the Table of Allotments for FM Broadcast Stations (MM Docket No. 00–169, RM –9953).

Number of Petitions Filed: 1.

**Magalie Roman Salas,**

*Secretary.*

[FR Doc. 01–29575 Filed 11–27–01; 8:45 am]

**BILLING CODE 6712–01–M**

## FEDERAL MARITIME COMMISSION

### Notice of Agreement(s) Filed

The Commission hereby gives notice of the filing of the following agreement(s) under the Shipping Act of 1984. Interested parties can review or obtain copies of agreements at the Washington, DC offices of the Commission, 800 North Capitol Street, NW., Room 940. Interested parties may submit comments on an agreement to the Secretary, Federal Maritime Commission, Washington, DC 20573, within 10 days of the date this notice appears in the **Federal Register**.

*Agreement No.:* 011782.

*Title:* COSCON/HJS/SEN Slot Allocation & Sailing Agreement.

*Parties:* COSCO Container Lines Company, Ltd., Hanjin Shipping Co., Ltd., Senator Lines GMBH.

*Synopsis:* The proposed agreement authorizes the parties to charter container space to and from each other and rationalize port calls and sailings in the trade between ports in Asia, including China, Hong Kong, Taiwan, Korea, and Japan, and the U.S. Pacific coast.

Dated: November 23, 2001.

By Order of the Federal Maritime Commission.

**Theodore A. Zook,**

*Assistant Secretary.*

[FR Doc. 01–29589 Filed 11–27–01; 8:45 am]

**BILLING CODE 6730–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Notice of Meeting of the Advisory Committee on Blood Safety and Availability

**AGENCY:** Office of the Secretary, HHS.

**ACTION:** Notice of meeting.

The Advisory Committee on Blood Safety and Availability will meet on Thursday, January 31, 2002 and Friday, February 1, 2002 from 8 a.m. to 5 p.m. The meeting will take place at the Hyatt Regency Hotel on Capitol Hill, 400 New Jersey Ave., NW., Washington, DC 20001. The meeting will be entirely open to the public.

The purpose of this meeting will be to discuss what lessons can be learned from the events surrounding September 11, 2001 regarding the safety and the availability of the nation's blood supply.

Public comment will be limited to five minutes per speaker. Those who wish to have printed material distributed to Advisory Committee members should submit thirty (30) copies to the Executive Secretary prior to close of business January 17, 2002. In addition, anyone planning to comment on either item is encouraged to contact the Executive Secretary at her/his earliest convenience.

**FOR FURTHER INFORMATION CONTACT:** Stephen D. Nightingale, MD, Executive Secretary, Advisory Committee on Blood Safety and Availability, Department of Health and Human Services, Office of Public Health and Science, 200 Independence Ave., SW., Room 736–E, Washington, DC 20201. Phone (202) 690–5558, FAX (202) 260–9372, e-mail *StephenDNightingale@osophs.dhhs.gov.*

Dated: November 21, 2001.

**Stephen D. Nightingale,**

*Executive Secretary, Advisory Committee on Blood Safety and Availability.*

[FR Doc. 01–29604 Filed 11–27–01; 8:45 am]

**BILLING CODE 4150–28–M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

**[60Day–02–12]**

### 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) 639–7090.

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:* Adolescents At Risk for HIV: Planning for a Community-Level Intervention—New—National Center for HIV, STD, and TB Prevention (NCHSTP), Centers for Disease Control and Prevention (CDC). The purpose of this request is to obtain approval to conduct a formative research study to understand the prevalence of HIV prevention and drug use behaviors and their influences among adolescent children of women who use crack. Adolescent children of parents who use crack experience a range of individual and environmental risk factors that increase their susceptibility to HIV due to their parents' drug and sexual risk behaviors and resource-poor environments. Despite the multiple risk factors, these adolescents often do not receive community-level HIV prevention services that promote their healthy development into young adults.

The goals of the study are to identify individual, parent, peer, school, and community influences on HIV prevention and risk behaviors of adolescent children of crack users in an urban North Carolina community and to develop a community-level HIV prevention intervention plan targeting these adolescents. The objectives of the study are to (a) conduct adolescent interviews and observations of their neighborhoods; (b) to conduct maternal interviews; (c) to administer mailed teacher questionnaires; and (d) to interview community providers.

The sample will be drawn from mothers participating in an HIV prevention intervention tailored to African-American women reporting current crack use. To be eligible for the proposed study, women must (1) be mothers; (b) report that they have at least one child between 12 and 17 years old who is currently living in the same household; (c) provide written consent for their adolescent child(ren) to participate in this study; and (d) provide written consent to gather information from their child(ren)'s teacher about his/her behavior and school performance. Mothers will be asked about their drug use and risk behaviors, parenting, and their adolescents' behaviors and school performance. Adolescents will be asked about their current drug use, abstinence and/or sexual experience, behaviors, school performance, HIV/AIDS-related beliefs, and other perceived influences from family, school, and peers. During individual interviews, adolescent participants will be asked for the name of the teacher with whom they spend the most time at school. These teachers will be invited to complete a mailed questionnaire about the target adolescents' behavior and school performance, as well as a brief survey about school-level HIV prevention resources and barriers, and perceptions of student substance abuse and health behaviors. Maternal, adolescent, and teacher questions will be drawn from the Achenbach behavior rating system and other youth surveys (e.g., the National Household Survey on Drug Abuse) with national comparison data. Community providers from local organizations that provide formal and informal services to adolescents will be interviewed to assess current services, resources, utilization, accessibility, and barriers to care. Community observations will also be conducted in settings identified by adolescents as places and neighborhoods they frequent to identify geographic information that may serve to mobilize community resources toward an HIV prevention intervention.

The data will be summarized to understand the prevalence of HIV prevention and drug use behaviors and their influences within the study sample of adolescent children of mothers who use crack. Together, these data will be presented at a planning meeting with key community providers near the close of the study. The purpose of this meeting will be to facilitate community-level collaboration and to develop a community intervention plan to prevent HIV among high-risk adolescent children of crack users.

There is no cost to respondents.

| Respondents | Number of respondents | Number of responses per respondent | Average response/burden (in hours) | Total burden (in hours) |
|---|---|---|---|---|
| Mothers | 154 | 1 | 75/60 | 192.5 |
| Adolescents | 154 | 1 | 75/60 | 192.5 |
| Teachers | 154 | 1 | 30/60 | 77 |
| Community Providers | 20 | 1 | 75/60 | 25 |
| Total | | | | 487 |

Dated: November 23, 2001.

**Julie Fishman,**

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

[FR Doc. 01–29620 Filed 11–27–01; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

**[Docket No. 01D–0435]**

### International Conference on Harmonisation; Draft Guidance on Electronic Common Technical Document Specification; Availability

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

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing the availability of a draft guidance entitled ''Electronic Common Technical Document Specification'' (eCTD). The draft guidance was prepared under the auspices of the International Conference on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use (ICH). The draft guidance defines the means for industry-to-agency transfer of regulatory information that will facilitate the creation, review, life cycle