Dated: April 24, 2001.

David W. Feigal, Jr.,

Director, Center for Devices and Radiological Health.

[FR Doc. 01–11329 Filed 5–4–01; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; Application for the Pharmacology Research Associate Program

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institute of General Medical Sciences (NIGMS), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the **Federal Register** on February 6, 2001, pages 9089–9090, and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection: Title: Application for the Pharmacology Research Associate Program. *Type of Information Collection Request:* Extension of a currently approved collection. *Need and Use of Information Collection:* The Pharmacology Research Associate (PRAT) Program will use the applicant and referee information to award opportunities for training and experience in laboratory or clinical investigation to individuals with a PhD. degree in pharmacology or a related science, M.D., or other professional degree through appointments as PRAT Fellows at the National Institutes of Health or the Food and Drug Administration. The goal of the program is to develop leaders in pharmacological research for key positions in academic, industrial, and Federal research laboratories. *Frequency of Response:* Once a year. *Affected Public:* Individuals or households; Businesses or other for-profit.

The annual reporting burden is as follows:

Type and numbers of respondents	Estimated number of responses per respondent	Estimated total responses	Average burden hours per responses	Estimated total annual burden hours requested
Applicants—50	1	50	2.00	100
Referees—150	1	150	0.167	25

Total Number of Respondents: 200
Total Number of Responses: 200
Total Hours: 125
The annualized cost to respondents is estimated at:
Applicants: $5,500.00
Referees: $1,250.00

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

Request for Comments:

Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical or other technological collection techniques or other forms of information technology.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, D.C. 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Ms. Sally Lee, NIGMS, NIH, Natcher Building, Room 2AN–18H, 45 Center Drive, MSC 6200, Bethesda, MD 20892–6200. Phone (301) 594–2755, facsimile (301) 402–0156, or electronic mail: LeeS@nigms.nih.gov.

Comments Due Date:

Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

Dated: April 30, 2001.

Martha Pine,

Associated Director for Administration and Operations, National Institute of General Medical Sciences.

[FR Doc. 01–11392 Filed 5–4–01; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; Case-Cohort Study of Cancer and Related Disorders Among Benzene-Exposed Workers in China

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Cancer Institute (NCI), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the **Federal Register** on December 28, 2000, pages 82382–82383 and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection: Title: Case-Cohort (formerly Case-Control) Study of Cancer and Related Disorders Among

Benzene-Exposed Workers in China, OMB Number 0925–0454, Revised. *Need and Use of Information Collection:* A case-cohort study will be performed to examine the risks of lymphohematopoietic cancers, other lymphohematopoietic disorders, benzene poisoning, and lung cancer among workers exposed to benzene. The study will attempt to determine with greater precision the risks of these disorders at low levels of benzene exposure, and to characterize the dose and time-specific relationship between benzene exposure and disease risk. Cases and controls will be selected from an existing cohort of 75,000 benzene-exposed workers and 36,000 comparison workers in 12 Chinese cities. There are 3 changes to the 60-day **Federal Register** notice for this study published on December 28, 2000: (1) more subjects will be evaluated in the currently planned case-cohort study (N=1,770, including 225 with benzene poisoning) than in the previously described case-control study (N=1,545); (2) each subject (or their next of kin will be asked fewer questions (average hours per response will decrease from 0.42 to 0.3674 hours); and (3) the more efficient case-cohort design will be used, rather than an individually-matched case-control study design. *Frequency of Response:* Single-time study. *Affected Public:* Individuals or households. *Type of Respondents:* Cases with lymphohematopoietic malignancies and related disorders, benzene poisoning and lung cancer among Chinese benzene-exposed and comparison workers; controls consist of a random sample of the Chinese worker cohort without these disorders. The annual reporting burden is as follows: *Estimated Number of Respondents:* 590; *Estimated Number of Respondents per Respondent:* 1; *Average Burden Hours per Response:* 0.3674; and *Estimated Total Annual Burden Hours Requested:* 216. The annualized cost to respondents is estimated at $216. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

Request for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection or information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Dr. Richard Hayes, OEB/EBP/DECEG/NCI 6120 Executive Blvd., EPS Room 8114, Bethesda, MD 20892, or call non-toll-free number (301) 435–3973 or E-mail your request, including your address to: *HayesR@mail.nih.gov*

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received on or before June 6, 2001.

Dated: April 27, 2001.

Reesa Nichols,

NCI Project Clearance Liaison.

[FR Doc. 01–11401 Filed 5–4–01; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Center for Complementary & Alternative Medicine; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Center for Complementary and Alternative Medicine Special Emphasis Panel NCCAM SEP C–11.

Date: May 23–25, 2001.

Time: 8:30 a.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: Courtyard by Marriott, 805 Russell Avenue, Gaithersburg, MD 20879.

Contact Person: John C. Chah, PhD, Scientific Review Administrator, National Center for Complementary and Alternative Medicine, National Institutes of Health, 6707 Democracy Boulevard, Rm. 106, Bethesda, MD 20892–5495, 301–402–4334, chahj@mail.nih.gov.

Dated: April 30, 2001.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 01–11393 Filed 5–4–01; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Center for Research Resources; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the National Advisory Research Resources Council, May 17, 2001, 9:15 a.m. to May 17, 2001, 5 p.m., National Center for Research Resources, National Institutes of Health, Conference Room 10, Building 31, Bethesda, MD 20892 which was published in the **Federal Register** on March 14, 2001, 66 FR 14911.

The meeting of the Executive Subcommittee scheduled for 8 a.m. to 9 a.m. on May 17, 2001, in Conference Room 3B13 has been cancelled. The meeting is partially Closed to the public.

Dated: April 30, 2001.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 01–11394 Filed 5–4–01; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Child Health and Human Development; Notice of Meeting

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of a meeting of the National Advisory Board on Medical Rehabilitation Research.