HCFA, Office of Information Services, Information Technology Investment Management Group, Division of HCFA Enterprise Standards, Attention: John Rudolph, Room C2–26–17, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: September 19, 1997.

John P. Burke III,

HCFA Reports Clearance Officer, Division of HCFA Enterprise Standards, Health Care Financing Administration.

[FR Doc. 97–25909 Filed 9–29–97; 8:45 am] BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration [HCFA-R-192]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: New Collection; Title of Information Collection: Evaluation of the Oregon Medicaid Reform Demonstration: Adult Interview, Pediatric Asthma Interview, Insulin-Dependent Diabetes Interview, Low Back Pain Interview, Medical Provider Questionnaire; Form No.: HCFA-R-192; *Use:* The survey instruments listed above are for use in the Evaluation of the Oregon Medicaid Reform Demonstration. The Adult and Child Interviews are designed to collect information related to health status, access to care, satisfaction with care and past health insurance status for adult and child members of the Oregon Health Plan (OHP). The Pediatric Asthma

Interview, Insulin-Dependent Diabetes Interview and Low Back Pain Interview collect information on quality of care, utilization of care, satisfaction with care and health status of OHP members with selected "tracer conditions". The Medical Provider Questionnaire is designed to collect information on how both participating and non-participating physicians view OHP; Frequency: Other One-Time Submission; Affected Public: Not-for-profit institutions, individuals and households, business or other forprofit; Number of Respondents: 5,533; Total Annual Responses: 5,533; Total Annual Hours: 2,242.

To obtain copies of the supporting statement for the proposed paperwork collections referenced above, or to obtain the supporting statement and any related forms, E-mail your request, including your address and phone number, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: September 19, 1997.

John P. Burke III,

HCFA Reports Clearance Officer, HCFA, Office of Information Services, Information Technology Investment Management Group, Division of HCFA Enterprise Standards. [FR Doc. 97–25910 Filed 9–29–97; 8:45 am] BILLING CODE 4120–03–P

HEALTH RESOURCES AND SERVICES ADMINISTRATION

Guidelines for the Use of Antiretroviral Agents in Pediatric HIV Infection

AGENCY: Health Resources and Services Administration, Department of Health and Human Services.

ACTION: Request for comments.

SUMMARY: The Health Resources and Services Administration (HRSA) is requesting comments from all interested parties on the following document: "Guidelines for Use of Antiretroviral Agents in Pediatric HIV Infection". The document was developed by specialists in the care of HIV-infected infants, children and adolescents, family members of HIV-infected children, and governmental agency representatives at a meeting on July 9 and 10, 1997, convened by the National Pediatric and Family HIV Resource Center (NPHRC)

and HRSA. While the pathogenesis of HIV infection and the general virologic and immunologic principles underlying the use of antiretroviral therapy are similar for all HIV infected individuals, there are therapeutic and management considerations that are unique to HIV infected infants, children and adolescents. These include acquisition of infection through perinatal exposure for many infected children; in utero exposure to zidovudine (ZDV) and other antiretroviral medications in many perinatally-infected children; differences in diagnostic evaluation in perinatal infection; differences in immunologic markers (eg. CD4+ lymphocyte count) in young children; changes in pharmacokinetic parameters with age due to the continuing development and maturation of organ systems involved in drug metabolism and clearance; differences in the clinical and virologic manifestations of perinatal HIV infection secondary to the occurrence of primary infection in a still-developing, immunologically naive individual; and special considerations related to treatment adherence in children and adolescents. This document addresses the pediatricspecific issues related to antiretroviral treatment and provides general guidelines to physicians caring for infected children and adolescents. **DATES:** Comments on the proposed

pates: Comments on the proposed guidelines must be received on or before October 30, 1997 in order to ensure that HRSA will be able to consider the comments in preparing the final guidelines.

ADDRESSES: Written comments to this notice should be submitted to: The HIV/AIDS Treatment Information Service, P.O. Box 6303, Rockville, MD 20849–6303. Only written comments will be accepted. After consideration of the comments, the final document will be published in the Centers for Disease Control and Prevention (CDC) "Morbidity and Mortality Weekly Report" (MMWR).

FOR FURTHER INFORMATION CONTACT: Copies of the "Guidelines for the Use of Antiretroviral Agents in Pediatric HIV Infection" are available from the National AIDS Clearinghouse (1–800–458–5231) and on the Clearinghouse Web sites (http://www.cdcnac.org) and from the HIV/AIDS Treatment Information Service (1–800–448–0440; Fax: 301–519–6616; TTY: 1–800–243–7012) and on their Web site (http://www.hivatis.org).

SUPPLEMENTARY INFORMATION: A Working Group on Antiretroviral Therapy and Medical Management of HIV-Infected Children composed of specialists in the care of HIV-infected infants, children and adolescents, family members of HIV-infected children, and governmental agency representatives was convened by the National Pediatric and Family HIV Resource Center (NPHRC), sponsored by the Health Resources and Services Administration (HRSA), on July 9 and 10, 1997, to establish and finalize a new set of guidelines for the treatment of HIV-infected infants, children and adolescents. The Working Group was co-chaired by Dr. James Oleske, University of Medicine and Dentistry of New Jersey (UMDNJ)-New Jersey Medical School, Newark, NJ and Dr. Gwendolyn Scott, University of Miami, Miami, FL. The treatment recommendations provided in this document are based on published and unpublished data on HIV infection and treatment in adults and children and, when no definitive data were available, the consensus of the Working Group participants in the treatment of pediatric HIV infection. It is the intent of the Working Group that the guidelines be regarded as flexible and not supplant the clinical judgement of experienced health care providers. It is recognized that these guidelines will need to be modified as new information and experience become available.

Dated: September 24, 1997.

Claude Earl Fox,

Acting Administrator.
[FR Doc. 97–25773 Filed 9–29–97; 8:45 am]
BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Statement of Organization, Functions, and Delegations of Authority

Part N, National Institutes of Health, of the Statement of Organization,

Functions, and Delegations of Authority for the Department of Health and Human Services (40 FR 22859, May 27, 1975, as amended most recently at 62 FR 37587, July 14, 1997, and redesignated from Part HN as Part N at 60 FR 56605, November 9, 1995), is amended as set forth below to reflect the reorganization of the National Library of Medicine as follows: The functional statements of the Division of Extramural Programs (DEP) and the DEP's Office of the Director are updated to reflect current responsibilities.

Section N–B, Organization and Functions, under the heading National Library of Medicine (NL, formerly HNL), is amended as follows: Delete the functional statements in their entirety for the Division of Extramural Programs (NL5, formerly HNL5) and its Office of the Director (NL51, formerly HNL51) and replace them with the following:

Division of Extramural Programs (NL5, formerly HNL5) (1) Administers programs to augment and strengthen the health sciences libraries of the Nation and to improve biomedical communications and information management through grants to, or contracts with, non-Federal and private institutions; (2) analyzes and evaluates extramural programs in relation to program objectives and national needs to achieve balanced and effective support; and (3) provides grants management, grants processing, and administrative management services.

Office of the Director (NL51, formerly HNL51) (1) Plans, directs, and administers the operations of the extramural programs; (2) coordinates collaborative efforts with other NIH components and Federal agencies in the general areas of informatics, information management, networking, health library support, and publications; and (3) provides technical and management assistance to advisory and review committees.

Dated: September 19, 1997.

Ruth Kirschstein,

Acting Director, National Institutes of Health. [FR Doc. 97–25822 Filed 9–29–97; 8:45 am] BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a list of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (301)443–0525.

1998 National Household Survey on Drug Abuse —Revision—The National Household Survey on Drug Abuse (NHSDA) is a survey of the civilian, noninstitutionalized population of the United States, age 12 and over. The data are used to determine the prevalence of use of cigarettes, alcohol, and illicit substances, and illicit use of prescription drugs. The results are used by SAMHSA, ONDCP, Federal government agencies, and other organizations and researchers to establish policy, direct program activities, and better allocate resources. For 1998, the core NHSDA questionnaire will remain unchanged. Special topic modules related to substance abuse prevention have been added. The total annual burden estimate is 34,662 hours as shown below:

Instrument	No. of re- spondents	Responses/ respondent	Hours/re- sponse	Total hour burden
Screening Form Questionnaire and Verification Form Screening Verification	82,741 25,089 2,482	1 1 1	0.050 1.200 0.067	4,137 30,107 166
Interview Verification	3,763	1	0.067	252
Total				34,662

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Dan Chenok, Human Resources and Housing Branch, Office of Management

and Budget, New Executive Office Building, Room 10235, Washington, D.C. 20503. Substance Abuse and Mental Health Services Administration Agency Information Collection Activities: Proposed Collection; Comment Request

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