- Pediatric services focusing on predominately African-American children from economically disadvantaged neighborhoods.
- Primary care programs which include a full range of medical care and educational programs promoting good health practices. These education programs are designed to meet the health care prevention needs of critical and chronically ill children.
- An established Center for Asthma Treatment that provides services primarily to African American children.
- An urban area with a predominant minority population which has a high rate of asthma among children and youth of African American descent, as evidenced by the 1,873 asthma related visits the hospital reported in 1995, with 1,540 of them being children of African-American descent.
- Commitment of neighborhood partners to provide sites for asthma related educational and prevention programs.
- Experience in conducting parent and teen focused programs.

This cooperative agreement will be awarded for a 3-year project period with funding at \$250,000 (including indirect cost) per 12-month budget period. Continuation awards within the project period will be made on the basis of satisfactory progress and the availability of funds.

Where To Obtain Additional Information

If you are interest in obtaining information regarding this project, contact Ms. Cynthia Amis, Office of Minority Health, 5515 Security Lane, Suite 1000, Rockville, Maryland 20852 or telephone (301) 594–0769.

Dated: January 23, 1997.

Clay E. Simpson, Jr.,

Deputy Assistant Secretary for Minority Health.

[FR Doc. 97–4287 Filed 2–20–97; 8:45 am] BILLING CODE 4160–17–M

Centers for Disease Control and Prevention

[INFO-97-03]

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 for other forms of information technology. Send comments to Wilma Johnson, CDC Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Projects

1. Technical Assistance to Enhance the Statistical and Analytic capacity of State and Local Public Health Professionals For Year 2000 Applications—(0920–0290)— Extension—Responsibility for identifying and providing data for monitoring the Year 2000 objectives is shared by agencies throughout the government, in State and local

governments and in the private sector. Each of the 22 health priority areas outlined in the Year 2000 Objectives provides an assessment of the availability of data for establishing baseline measures and potential data sources for tracking progress. A key set of provisions of the Year 2000 Health Objectives Planning Act of 1990 (Pub. L. 101-582) provided for grants to states for the development of plans to implement the Year 2000 Health Objectives within each state, including the assessment of health within each of the states. The Act further mandated the development of uniform health status indicators for use by federal, state and local health agencies and model methods of collecting and reporting data. In order to enhance state capacity to use data, the National Center for Health Statistics (NCHS/CDC) has provided training in the use of data for public health purposes through the **Applied Statistics Training Institute** (ASTI). ASTI presents a series of short focused courses on data collection, analysis and utilization. These courses are offered to professionals in state and local health departments. The attendees gain knowledge of practical applications and techniques for evaluating the Year 2000 health objectives. Also, by sponsoring these courses, CDC can expect certain standards of data analysis on the local level. An upgrading of methodological skills for those persons at the local level primarily responsible for analysis is vitally important in understanding the health status of a population and in planning effective prevention programs. Each year ASTI mails a Bulletin of Courses to state and local public health agencies informing them, of the curriculum of courses available. An application for training form is included in the Bulletin of Courses for use by individuals interested in attending a course. This collection of information consists solely of those application forms. The total cost to respondents is estimated at \$2,000.

Respondents	Number of respondents	Number of responses/ respondent	Average burden/ response (in hrs.)	Total burden (in hrs.)
Agencies and Individuals	600	1	0.167	100
Total				100

Wilma G. Johnson,

Acting Associate Director for Policy Planning And Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 97–4005 Filed 2–20–97; 8:45 am] BILLING CODE 4163–18–P

National Institute for Occupational Safety and Health; Request for Comments on the Toxicity of Carbonless Copy Paper

AGENCY: National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC), Department of Health and Human Services.

ACTION: Request for comments.

SUMMARY: NIOSH is requesting comments from all interested parties concerning possible adverse health effects among workers who have used carbonless copy paper. Interested parties may submit medical case reports, experimental data, or other information relating to the effects caused by such exposures. This information will be used by NIOSH to evaluate whether exposure to the chemical substances in carbonless copy paper poses health risks, and to determine the need for preventive health measures or additional research. **DATES:** Written comments to this notice should be submitted to Diane Manning, NIOSH Docket Office, 4676 Columbia Parkway, M/S C-34, Cincinnati, Ohio 45226 on or before April 22, 1997. Comments may also be faxed to Diane Manning at (513) 533–8285 or submitted by email to: dmm2@cdc.gov as WordPerfect 5.0, 5.1/5.2, 6.0/6.1, or ASCII files.

FOR FURTHER INFORMATION CONTACT:

Technical information may be obtained from Dr. Paul A. Schulte, NIOSH, CDC, 4676 Columbia Parkway, Mailstop C-14, Cincinnati, Ohio 45226, telephone (513) 533–8303.

SUPPLEMENTARY INFORMATION: Pursuant to sections 20 and 22 of the Occupational Safety and Health Act of 1970 [29 U.S.C. 669 and 671], NIOSH is authorized to gather information in order to develop recommendations for improving occupational safety and health. NIOSH has been concerned about reported undesirable health effects in workers occupationally exposed to chemicals contained in or released from carbonless copy paper. On June 12, 1987, NIOSH published a Federal Register Notice (52 FR 22534) requesting comments and secondary data on the toxicity of carbonless copy paper. At that time it was determined, based on the submitted information,

that insufficient data were available to conclude that the relationship between exposure to carbonless copy paper and the suggested health effects was a causal one.

Carbonless copy paper is used to simultaneously make multiple paper copies of an original document. This system eliminates the need for carbon paper by using paper with a microencapsulated undercoating containing dyes and solvents. Writing, typing, or printing on the top sheet breaks the microcapsules immediately underneath, releasing the dyes and solvents to form the image on the paper surface below. Some substances used in carbonless copy paper include aliphatic compounds (C_{10} – C_{14}), aromatic compounds such as alkyl substituted biphenyls (polychlorinated biphenyls have not been used in carbonless copy paper in the United States since the early 1970's), phenyl methyl benzenes and hydrogenated terphenyls, diaryl ethanes, alkyl benzenes, benzyl xylene, isoparaffins, diisopropyl naththalenes, dibutyl phthalate, glutaraldehyde, formaldehyde, organic dyes, phenolformaldehyde resin, kaolin, starch, styrene, butadiene-latex, hydrogenated aluminum silicate, mineral oil, and sanatasol oil.

Carbonless copy paper chemicals can be absorbed dermally or by inhalation. Several factors such as chemical composition and volume of the paper used, ambient temperature and ventilation rates in work or storage areas, and work practices may affect the extent of exposure. Adverse health effects in exposed workers were first reported in the scientific literature in the late 1960's. The signs and symptoms attributed to dermal exposure have included dryness, redness, irritation, eczema, tingle, and itchiness of the skin. The signs and symptoms attributed to inhalation exposures have included nasal congestion, drainage, bleeding, and irritation; upper respiratory tract irritation; asthma; throat tickle and hoarseness; and joint pain, fatigue, and headache.

In order to update the information on carbonless copy paper, NIOSH is interested in obtaining existing and available information published or developed since 1987, including reports and research findings, to evaluate whether recommendations for health protection or further research on carbonless copy paper chemicals are needed. Examples of requested information include, but may not be limited to, the following:

1. Adverse health signs or symptoms associated with occupational exposure

to carbonless copy paper or its components.

- 2. Epidemiology data assessing the incidence of health effects associated with occupational exposure to carbonless copy paper.
- 3. Medical case reports and studies of adverse health effects associated with occupational exposure to carbonless copy paper. These medical case reports and studies should be submitted without personal identifiers.
- 4. Industrial hygiene data and reports from work places where carbonless copy paper is used or handled.
- 5. *In Vivo* or *In Vitro* toxicity data and studies on the components of carbonless copy paper.

All information received in response to this notice, except that designated as trade secret and protected by section 15 of the Occupational Safety and Health Act, will be available for public examination and copying at the above address.

Dated: February 12, 1997.

Linda Rosenstock,

Director, National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

[FR Doc. 97–4280 Filed 2–20–97; 8:45 am]

BILLING CODE 4163-19-P

Availability of Draft Guidance on Childhood Lead Screening

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services.

ACTION: Notice of availability and request for comments.

SUMMARY: This notice announces the availability for review and comment of a draft document entitled, "Screening Young Children for Lead Poisoning. The document was prepared by CDC staff with advice from CDC's Advisory Committee on Childhood Lead Poisoning Prevention, a group of non-Federal experts on childhood lead poisoning prevention. The document also reflects the comments of many other persons involved in scientific and programmatic aspects of childhood lead poisoning prevention and child health. **DATES:** To ensure consideration, written or verbal comments on this draft document must be received by April 7,

ADDRESSES: Requests for copies of the draft document must be made by calling the toll free telephone number: (888) 232–6789. Verbal comments on the draft document may be made by calling the same toll free telephone number. Written comments on the draft