

Form name	No. of respondents	No. responses per respondent	Average burden per response (in hrs.)
Phase 3: attempt to get an interview	800	1	5/60
Phase 3: Completed Follow-up Study Interviews	600	1	300

Dated: September 26, 2000.

Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-71-00]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-7090. Send written comments to CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503. Written comments should be received within 30 days of this notice.

Proposed Project

A Message-Based Intervention for Technology Transfer—New—National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention. The mission of the National Institute for Occupational Safety and Health (NIOSH) is to promote safety and health at work for all people through

research and prevention. Over 6 million American workers are at risk for inhalation exposure of potentially harmful metals. Workers in mining, construction, and related industries are potentially exposed to airborne contaminants such as silver, lead, nickel, manganese, chromium and zinc which can cause health problems ranging from metal fume fever and asthma to cancer and parkinsonism. NIOSH has developed analytical methods for portable field exposure assessment that would help reduce metals exposure. The goal of this project is to increase the self-reported use of NIOSH developed analytical methods for field portable exposure assessment by American industrial hygienists across the five-year period from 2000 to 2004. To achieve this technology transfer goal, NIOSH proposes three aims: (1) to create, (2) implement, and (3) evaluate a message-based intervention targeted toward American industrial hygienists. If this project is successful then NIOSH will also have developed and validated a communication strategy that could be adapted to other technology transfer problems.

First, NIOSH will develop a message-based intervention targeted toward American industrial hygienists. To do this, NIOSH will create and pretest the message, channel, and receiver variables that will compose the intervention. Pretesting of the intervention will occur via mailout surveys and on-site pretesting with industrial hygienists attending conferences sponsored by AIHA (the American Industrial Hygiene Association), ABIH (the American Board

of Industrial Hygiene), and ACGIH. Pretesting will occur during the first two years of the project (2000-1), with a total of 1,000 industrial hygienists.

Second, NIOSH will implement the multi-channel, multi-exposure, message-based intervention that was created through pretesting. NIOSH intends to employ the following four channels of: (1) Trade print sources (journal and magazine), (2) web site, (3) direct personalized mailings, and (4) face-to-face interaction through trade show demonstrations. The entire population of American industrial hygienists (approximately 13,000) will be targeted by this intervention. The intervention will occur across four years, applying modifications as needed during the time period.

Finally, NIOSH will conduct annual surveys of randomly selected samples of American industrial hygienists on their self reported use of NIOSH developed analytical methods for field portable exposure assessment through mail-in surveys based on standard HCRB communication and outcome protocols. During Year 1 (2000), a survey of 700 randomly selected industrial hygienists will be conducted to assess baseline levels of attitudes, knowledge and behaviors with regard to the use of the NIOSH developed analytical methods prior to receiving the intervention. During the next three years (2001-2003), an annual survey of 700 randomly selected industrial hygienists will be conducted to evaluate the impact of the message-based intervention on the use of NIOSH analytical methods.

The estimated annualized burden is 1905 hours.

Respondents	Number of respondents	Number of responses	Average hour burden per response
Industrial Hygienist	1000 pretesting	1	.33
	700 Baseline Survey	1	.25
	2100 Annual Survey	1	5

Dated: September 26, 2000.

Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Statement of Organization, Functions, and Delegations of Authority

Part C (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 67772-76, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 65 FR 41079, dated July 3, 2000) is amended to reflect the retitling of the Division of Public Health Systems and the Division of Media and Training Services, Public Health Practice Program Office, to the Division of Public Health Systems Development

and Research and the Division of Professional Development and Evaluation respectively.

Section C-B, Organization and Functions, is hereby amended as follows:

Delete the title *Division of Public Health Systems (CH5)* and insert the title *Division of Public Health Systems Development and Research (CH5)*.

Delete the title *Division of Media and Training Services (CH7)* and insert the title *Division of Professional Development and Evaluation (CH7)*.

Dated: September 20, 2000.

Martha Katz,

Acting Director.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 00N-1516]

Apothecon, Inc., et al.; Withdrawal of Approval of 76 Abbreviated New Drug Applications

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is withdrawing approval of 76 abbreviated new drug applications (ANDA's). The holders of the applications notified the agency in writing that the drug products were no longer marketed and requested that the approval of the applications be withdrawn.

EFFECTIVE DATE: October 10, 2000.

FOR FURTHER INFORMATION CONTACT:

Olivia A. Pritzlaff, Center for Drug Evaluation and Research (HFD-7), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-594-2041.

SUPPLEMENTARY INFORMATION: The holders of the applications listed in the table in this document have informed FDA that these drug products are no longer marketed and have requested that FDA withdraw approval of the applications. The applicants have also, by their request, waived their opportunity for a hearing.

ANDA No.	Drug	Applicant
60-100	Crysticillin (Penicillin G Procaine Suspension USP).	Apothecon, Inc., P.O. Box 4500, Princeton, NJ 08543.
60-618	Grifulvin V (Griseofluvin Microsize) Tablets, 125 milligrams (mg), 250 mg, and 500 mg.	Johnson & Johnson Consumer Co, Inc., 199 Grandview Rd., Skillman, NJ 08858.
61-220	Ophthochlor (Chloramphenicol Ophthalmic Solution USP) 5 mg/milliliter (mL).	Parkedale Pharmaceuticals, Inc., 501 Fifth St., Bristol, TN 37620.
61-334	Bactocill (Oxacillin Sodium for Injection).	SmithKline Beecham Pharmaceuticals, One Franklin Plaza, P.O. Box 7929, Philadelphia, PA 19101.
61-449	Staphcillin (Methicillin Sodium).	Apothecon, Inc.
61-452	Cloxacillin Sodium Capsules USP, 250 mg and 500 mg.	Do.
61-739	Garamycin Pediatric Injection (Gentamicin Sulfate Injection USP).	Schering Corp., 2000 Galloping Hill Rd., Kenilworth, NJ 07033.
62-328	Erythromycin Topical Solution USP, 1.5%.	Alpharma, 333 Cassell Dr., suite 3500, Baltimore, MD 21224.
62-727	Totacillin-N (Ampicillin Sodium) for Injection.	Smithkline Beecham Pharmaceuticals.
62-755	Nalpen (Nafcillin Sodium Powder for Injection USP).	Do.
70-356	Diazepam Tablets USP, 2 mg.	Roxane Laboratories, Inc., P.O. Box 16532, Columbus, OH 43216.
70-357	Diazepam Tablets USP, 5 mg.	Do.
70-358	Diazepam Tablets USP, 10 mg.	Do.
71-010	Acetominophen Suppositories, 120 mg.	Do.
71-011	Acetominophen Suppositories, 650 mg.	Do.
71-018	Metaproterenol Sulfate Inhalation Solution USP, 0.6%.	AstraZeneca, L.P.
71-275	Metaproterenol Sulfate Inhalation Solution USP, 0.4%.	Do.
72-018	Droperidol Injection USP, 2.5 mg/mL.	Do.
72-019	Droperidol Injection USP, 2.5 mg/mL.	Do.
72-021	Droperidol Injection USP, 2.5 mg/mL.	Do.
72-648	Timolol Maleate Tablets USP, 5 mg.	Novopharm Limited, c/o Novopharm NC, Inc., 4700 Novopharm Blvd., Wilson, NC 27893.
72-649	Timolol Maleate Tablets USP, 10 mg.	Do.
72-650	Timolol Maleate Tablets USP, 20 mg.	Do.