

**Register** on May 6, 2003, page 24007 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 number.

**Proposed Collection: Title:** Re-contacting Participants in the Observing Protein and Energy Nutrition (Re-OPEN)

**Study. Type of Information Collection Request:** Reinstatement with change (OMB #0925-0465, expiration 07/31/02). **Need and Use of Information Collection:** The agency conducts and funds studies examining the relationship between diet and chronic diseases. The study will collect food intake and physical activity data and body weight measurements on a cohort of approximately 482 free-living men and women, 43 to 72 years of age, who have participated in the 1999 Biologic Specimen-Based Study of Dietary Measurement Error for Nutritional Epidemiology and Surveillance.

Participants will complete a food frequency questionnaire, two 4-day food intake records, one 7-day food intake checklist, a physical activity questionnaire, and a body weight measurement. The data will be used to assess the magnitude and structure of dietary measurement error in dietary assessment instruments for dietary surveillance and nutritional epidemiologic studies.

**Frequency of Response:** One-time study. **Affected Public:** Individuals or households. **Type of Respondents:** U.S. adults 43–72 years. The annual reporting burden is as follows:

Data collection task	Estimated number of respondents	Estimated number of responses per respondent	Average burden hours per response	Estimated total hour burden	Estimated total annual burden hours requested
Enrollment Form .....	482	1	0.083	40	13
Food frequency questionnaire .....	482	1	1	482	161
4-Day food record 1 .....	482	1	1.332	642	214
4-Day food record 2 .....	482	1	1.332	642	214
Food Checklist .....	482	7	.117	395	132
Physical activity questionnaire .....	482	1	.25	120	40
Weight measurement .....	482	1	.25	120	40
<b>Total .....</b>	<b>482</b>	<b>.....</b>	<b>.....</b>	<b>2443</b>	<b>814</b>

The annualized cost to respondents is estimated at \$13,024. There are no Capital Costs to report. There are no Operating and/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 of 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: Amy Subar, Ph.D., Project Officer, National Cancer Institute, EPN 313, 6130 Executive Blvd MSC 7344, Bethesda, MD 20892-7344, or call non-toll-free number (301) 496-8500, or FAX your request to (301) 435-3710, or E-mail your request, including your address, to: [subara@mail.nih.gov](mailto:subara@mail.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: September 2, 2003.

**Reesa Nichols,**

*NCI Project Clearance Liaison.*

[FR Doc. 03-22828 Filed 9-8-03; 8:45 am]

**BILLING CODE 4140-01-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Proposed Collection; Comment Request; the National Diabetes Education Program Comprehensive Evaluation Plan

**SUMMARY:** 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 National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

**Proposed Collection: Title:** The National Diabetes Education Program Comprehensive Evaluation Plan. **Type of Information Collection Request:** NEW. **Need and Use of Information Collection:** The National Diabetes Education Program (NDEP) is a partnership of the National Institutes of Health (NIH) and the Centers for Disease Control and Prevention (CDC) and more than 200 public and private organizations. The long-term goals of the NDEP are to improve the treatment and health outcomes of people with diabetes, to promote early diagnosis, and, ultimately, to prevent the onset of diabetes. The NDEP objectives are: (1) To increase awareness of the seriousness of diabetes, its risk factors, and strategies for preventing diabetes and its complications among people at risk for diabetes; (2) to improve understanding about diabetes and its control and to promote better self-management behaviors among people with diabetes; (3) to improve health care providers' understanding of diabetes

and its control and to promote an integrated approach to care; (4) to promote health care policies that improve the quality of and access to diabetes care.

Multiple strategies have been devised to address the NDEP objectives. These have been described in the NDEP Strategic Plan and include: (1) Creating partnerships with other organizations concerned about diabetes; (2) developing and implementing awareness and education activities with special emphasis on reaching the racial and ethnic populations disproportionately affected by diabetes; (3) identifying, developing, and disseminating educational tools and resources for the program's audiences; (4) promoting policies and activities to improve the quality of and access to diabetes care.

The NDEP evaluation will document the extent to which the NDEP program has been implemented, and how successful it has been in meeting program objectives. The evaluation relies heavily on data gathered from existing national surveys such as National Health and Nutrition Examination Survey (NHANES), the National Health Interview Survey (NHIS), the Behavioral Risk Factor Surveillance System (BRFSS), among others for this information. This generic clearance request is for the collection of additional primary data from NDEP target audiences on some key process and impact measures that are necessary to effectively evaluate the program. Approval is requested for up to 4 surveys of audiences targeted by the National Diabetes Education Program including people at risk for diabetes,

people with diabetes and their families, health care providers, payers and purchasers of health care and health care system policy makers.

*Frequency of Responses:* On occasion.

*Affected public:* Individuals or households; businesses or other for-profit organizations; not-for-profit institutions; Federal government; and state, local or tribal government. *Type of Respondents:* Adults. The annual reporting burden is as follows:

*Estimated Number of Respondents:* 2200, *Estimated Number of Responses per Respondent:* 1; *Average Burden Hours Per Response:* .25; and *Estimated Total Annual Burden Hours Requested:* 200. The annualized cost to respondents is estimated at: \$5,437.50. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

#### ESTIMATES OF HOUR BURDEN

Type of respondents	Number of respondents	Frequency of response	Average time per response	Total hour burden
Patients and their family members .....	1,000	1	.25	250
People at risk for diabetes .....	600	1	.25	150
Physicians or other health care providers .....	600	1	.25	150
Health care systems .....	200	1	.25	50
<b>Total .....</b>	<b>2,400</b>	<b>.....</b>	<b>.....</b>	<b>600</b>

#### COST TO RESPONDENTS

Type of respondents	Number of respondents	Frequency of response	Hourly wage rate	Respondent cost
Patients and their family members .....	1,000	1	\$20.00	\$5,000.00
People at risk for diabetes .....	600	1	20.00	3,000.00
Physicians or other health care providers .....	600	1	75.00	11,250.00
Health care systems .....	200	1	50.00	2,500.00
<b>Total .....</b>	<b>.....</b>	<b>.....</b>	<b>.....</b>	<b>21,750.00</b>

**Note:** On an annual basis, the average number of respondents is 800; the average number of hours is 200 and the average annual respondent cost is \$5,437.50.

*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 of 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.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Joanne Gallivan, M.S., R.D., Director, National Diabetes Education Program, NIDDK, NIH, Building 31, Room 9A04, 31 Center Drive, Bethesda, MD 20892, or call non-toll-free number (301) 494-6110 or E-mail your request, including your address to: [Joanne\\_Gallivan@nih.gov](mailto:Joanne_Gallivan@nih.gov).

*Comments Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 60-days of the date of this publication.

Dated: August 14, 2003.

**Barbara Merchant,**  
Executive Officer, NIDDK, National Institutes of Health.

[FR Doc. 03-22831 Filed 9-8-03; 8:45 am]

**BILLING CODE 4140-01-M**

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

##### National Institutes of Health

##### National Heart, Lung, and Blood Institute Proposed Collection; Comment Request Exam 2—The Jackson Heart Study, Annual Follow-Up Component

**SUMMARY:** In compliance with the requirement of section 3506(c)(2)(A) of