Individuals or Households, Federal Government, State, local, and tribal government; *Number of Respondents:* 10,000; *Total Annual Responses:* 10,000; *Total Annual Hours:* 2,500.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web Site address at *http://cms.hhs.gov/regulations/pra/default.asp,* or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, 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 60 days of this notice directly to the CMS Paperwork Clearance Officer designated at the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, *Attention:* Dawn Willinghan, *Room:* C5–14–03, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: January 30, 2003.

John P. Burke, III,

CMS Reports Clearance Officer, Office of Strategic Operations and Strategic Affairs, Division of Regulations Development and Issuances.

[FR Doc. 03–2999 Filed 2–6–03; 8:45 am]

BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Advisory Committees; Tentative Schedule of Meetings for 2003; Amendment of Notice

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is amending the notice announcing the tentative schedule of public advisory committee meetings for 2003. This notice appeared in the **Federal Register** of December 19, 2002 (67 FR 77793 through 77796).

FOR FURTHER INFORMATION CONTACT: Theresa Green, Advisory Committee Oversight and Management Staff (HF–4), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–1220.

SUPPLEMENTARY INFORMATION: The following list revises FDA's tentatively scheduled advisory committee meetings for 2003. You may also obtain up-to-date meeting information by calling the Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area):

Committee Name	Dates of Meetings	Advisory Committee 5-Digit Information Line Code
OFFICE OF THE COMMISSIONER		
Science Board to the Food and Drug Administration	April 9, November 6	12603
CENTER FOR BIOLOGICS EVALUATION AND RESEARCH		
Allergenic Products Advisory Committee	April 8, November 18	12388
Biological Response Modifiers Advisory Committee	February 27–28, June 9–10, October 9–10	12389
Blood Products Advisory Committee	March 13–14, June 19–20, September 18–19, December 11–12	19516
Transmissible Spongiform Encephalopathies Advisory Committee	February 20, July 17–18, October 30–31	12932
Vaccines and Related Biological Products Advisory Committee	February 20, May 8–9, September 22–23, November 19–20	12391
CENTER FOR DRUG EVALUATION AND RESEARCH		
Advisory Committee for Pharmaceutical Science	March 12–13, March 21, April 22–23, September 17, October 21–23	12539
Advisory Committee for Reproductive Health Drugs	August 18–19, November 13–14	12537
Anesthetic and Life Support Drugs Advisory Committee	June 26–27, December 11–12	12529
Anti-Infective Drugs Advisory Committee	March 4–5–6, June 10–11, October 15–16	12530
Antiviral Drugs Advisory Committee	April 29–30, September 19	12531
Arthritis Advisory Committee	September 5	12532
Cardiovascular and Renal Drugs Advisory Committee	May 29–30, September 15–16, December 11–12	12533
Dermatologic and Ophthalmic Drugs Advisory Committee	March 6–7, April 15–16, July 17–18, September 10–11	12534
Drug Safety and Risk Management Advisory Committee	April 24–25, September 18–19	12535
Endocrinologic and Metabolic Drugs Advisory Committee	June 12–13, September 11–12	12536

Committee Name	Dates of Meetings	Advisory Committee 5-Digit Information Line Code
Gastrointestinal Drugs Advisory Committee	March 6, July 17	12538
Nonprescription Drugs Advisory Committee	June 12–13, September 16–17	12541
Oncologic Drugs Advisory Committee	March 3–4, March 12–13, June 10–11	12542
Peripheral and Central Nervous System Drugs Advisory Committee	July 18	12543
Psychopharmacologic Drugs Advisory Committee	September 4–5	12544
Pulmonary-Allergy Drugs Advisory Committee	May 15–16, November 6–7	12545
CENTER FOR FOOD SAFETY AND APPLIED NUTRITION		
Food Advisory Committee	February 24–26, August 18–20	10564
Biotechnology Sub-Committee	March 24–25, October 15–16	10564
Dietary Supplements Sub-Committee	March 27–28, September 22–23	10564
Contaminants and Natural Toxicants Sub-Committee	March 6–7, September 4–5	10564
Nutrition Sub-Committee	April 28–29, November 3–4	10564
Food Additives Sub-Committee	June 19–20	10564
CENTER FOR DEVICES AND RADIOLOGICAL HEALTH		
Device Good Manufacturing Practice Advisory Committee	No meetings planned	12398
Medical Devices Advisory Committee		
Anesthesiology and Respiratory Therapy Devices Panel	May 7–8, September 4–5, November 10–11	12624
Circulatory System Devices Panel	March 6, April 24–25, June 26–27, August 28–29, October 23–24, December 11–12	12625
Clinical Chemistry and Clinical Toxicology Devices Panel	May 19, September 8–9, December 11–12	12514
Dental Products Panel	May 22–23, August 7–8, October 9–10	12518
Ear, Nose, and Throat Devices Panel	April 8–9, June 2–3, August 4–5, October 9–10, December 4–5	12522
Gastroenterology and Urology Devices Panel	January 17, April 4, July 25, October 17	12523
General and Plastic Surgery Devices Panel	February 27, April 10–11, July 23–24, October 23–24	12519
General Hospital and Personal Use Devices Panel	May 15–16, August 18–19, November 20–21	12520
Hematology and Pathology Devices Panel	June 20, October 3	12515
Immunology Devices Panel	March 17–18, June 9–10, September 15–16	12516
Medical Devices Dispute Resolution Panel	No meetings planned	10232
Microbiology Devices Panel	March 27–28, May 5–6, August 7–8, October 16–17	12517
Molecular and Clinical Genetics Panel	April 24–25, July 17–18, November 13–14	10231
Neurological Devices Panel	June 23–24, September 18–19, December 8–9	12513
Obstetrics and Gynecology Devices Panel	June 9–10, September 8–9, November 3–4	12524
Ophthalmic Devices Panel	May 22–23, July 10–11, September 11–12, November 6–7	12396
Orthopedic and Rehabilitation Devices Panel	May 29–30, August 27–28, November 20–21	12521
Radiological Devices Panel	May 20, August 12, November 18	12526

Committee Name	Dates of Meetings	Advisory Committee 5-Digit Information Line Code
National Mammography Quality Assurance Advisory Committee	April 28, September 8–9	12397
Technical Electronic Product Radiation Safety Standards Committee	June 18	12399
CENTER FOR VETERINARY MEDICINE		
Veterinary Medicine Advisory Committee	May 15, September 15	12548
NATIONAL CENTER FOR TOXICOLOGICAL RESEARCH		
Advisory Committee on Special Studies Relating to the Possible Long-Term Health Effects of Phenoxy Herbicides and Contaminants	March 12–13–14, June 23–25	12560
Science Advisory Board to the National Center for Toxicological Research	June 3–5	12559

Dated: January 29, 2003.

Linda Arey Skladany,

Associate Commissioner for External Relations.

[FR Doc. 03–3076 Filed 2–6–03; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; Assessment for NIH Minority Research/Training Programs: Phase 3

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 Research Council, on behalf of 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: Assessment for NIH Minority Research/Training Programs: Phase 3. *Type of Information Collection Request:* NEW. *Need and Use of Information Collection:* The goal of this study is to assess and analyze NIH minority trainee educational and career outcomes to determine which programs and which features of programs have been most successful in helping individual students and faculty members move toward productive careers as research scientists. The primary objectives of the study are to determine how well NIH minority research/training programs are working and what additional factors contribute to minority trainee success, including characteristics of individual participants and the academic institutions where they received NIH research/training support and/or obtained their terminal degree.

In addition to conducting an assessment and analysis of the programs based upon information in existing NIH databases, current and former NIH trainees will be asked to participate in a voluntary telephone interview in which they will be asked to comment on aspects of their research training experience. Trainees asked to participate in the survey will include individuals who received research training in underrepresented minority-targeted programs and non-targeted programs, and who received support at academic levels ranging from their undergraduate years to the faculty level. This data collection will involve the use of computer-assisted telephone interviewing (CATI) software.

Program administrators at training grant recipient institutions will be interviewed by telephone to obtain their perspectives on the training programs. The results of the program administrator interviews will help NIH determine (1) The ways and extent to which NIH minority research/training programs work; (2) which features of minority programs have been the most successful in helping individual students and faculty members move forward toward productive careers as research scientists; (3) what programmatic, environmental, or other factors increase the likelihood of minority training programs and their participating trainees achieving success; and (4) how to better assess NIH minority training programs in the future. These interviews will provide a depth and quality of data that are not available through database query alone.

Frequency of response: one-time. *Affected Public:* Individuals. *Type of Respondent:* Individuals who have participated in NIH minority training programs. *Estimated Number of Respondents:* 1,200; *Estimated Number of Responses per Respondent:* 1; *Average Burden Hours Per Response:* .5; and *Estimated Total Annual Burden Hours Requested:* 600. 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 should address 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: Dr. Joan Esnayra, Program Officer, Board on Higher Education and the Workforce, National Research Council National Academies, 2101 Constitution Ave. NW., Washington, DC 20418, or call non-toll-