Web site at: *http://www.videocast.nih.gov/*.

If you have special needs for the meeting, please contact (202) 690–7151.

Dated: April 2, 2007.

Judith Sparrow,

Director, American Health Information Community, Office of Programs and Coordination, Office of the National Coordinator for Health Information Technology.

[FR Doc. 07–1762 Filed 4–9–07; 8:45 am]

BILLING CODE 4150–24–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institute for Occupational Safety and Health; Final Effect of Designation of a Class of Employees for Addition to the Special Exposure Cohort

AGENCY: National Institute for Occupational Safety and Health (NIOSH), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Department of Health and Human Services ((HHS) gives notice concerning the final effect of the HHS decision to designate a class of employees at the General Atomics facility, La Jolla, California, as an addition to the Special Exposure Cohort (SEC) under the Energy Employees Occupational Illness Compensation Program Act of 2000. On February 16, 2007, as provided for under 42 U.S.C. 7384q(b), the Secretary of HHS designated the following class of employees as an addition to the SEC:

Atomic Weapons Employer (AWE) employees who were monitored or should have been monitored for exposure to ionizing radiation while working at the General Atomics facility in La Jolla, California, at the following locations: Science Laboratories A, B, and C (Building 2); Experimental Building (Building 9); Maintenance (Building 10); Service Building (Building 11); Buildings 21 and 22; Hot Cell Facility (Building 23); Waste Yard (Buildings 25 and 26); Experimental Area (Buildings 27 and 27–1); LINAC Complex (Building 30); HTGR–TCF (Building 31); Fusion Building (Building 33); Fusion Doublet III (Building 34); SV–A (Building 37); SV–B (Building 39); and SV–D (no building number) for a number of work days aggregating at least 250 work days from January 1, 1960, through December 31, 1969, or in combination with work days within the parameters established for one or more other classes of employees in the Special Exposure Cohort.

This designation became effective on March 18, 2007, as provided for under 42 U.S.C. 7384*l*(14)(C). Hence, beginning on March 18, 2007, members of this class of employees, defined as reported in this notice, became members of the Special Exposure Cohort.

FOR FURTHER INFORMATION CONTACT: Larry Elliott, Director, Office of Compensation Analysis and Support, National Institute for Occupational Safety and Health (NIOSH), 4676 Columbia Parkway, MS C–46, Cincinnati, OH 45226, Telephone 513–533–6800 (this is not a toll-free number). Information requests can also be submitted by e-mail to *OCAS@CDC.GOV*.

Dated: April 5, 2007.

John Howard,

Director, National Institute for Occupational Safety and Health.

[FR Doc. 07–1761 Filed 4–9–07; 8:45 am]

BILLING CODE 4163–19–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institute for Occupational Safety and Health; Final Effect of Designation of a Class of Employees for Addition to the Special Exposure Cohort

AGENCY: National Institute for Occupational Safety and Health (NIOSH), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Department of Health and Human Services (HHS) gives notice concerning the final effect of the HHS decision to designate a class of employees at the Monsanto Chemical Company, Dayton, Ohio, as an addition to the Special Exposure Cohort (SEC) under the Energy Employees Occupational Illness Compensation Program Act of 2000. On February 16, 2007, as provided for under 42 U.S.C. 7384q(b), the Secretary of HHS designated the following class of employees as an addition to the SEC:

Atomic Weapons Employer (AWE) employees who were monitored or should have been monitored for exposure to ionizing radiation while working at Monsanto Chemical Company Units I, III, or IV in Dayton, Ohio, for a number of work days aggregating at least 250 work days during the period from January 1, 1943, through December 31, 1949, or in combination with work days within the parameters established for one or more other classes of employees in the Special Exposure Cohort.

This designation became effective on March 18, 2007, as provided for under 42 U.S.C. 7384*1*(14)(C). Hence, beginning on March 18, 2007, members of this class of employees, defined as reported in this notice, became members of the Special Exposure Cohort.

FOR FURTHER INFORMATION CONTACT: Larry Elliott, Director, Office of Compensation Analysis and Support, National Institute for Occupational Safety and Health (NIOSH), 4676 Columbia Parkway, MS C–46, Cincinnati, OH 45226, Telephone 513–533–6800 (this is not a toll-free number). Information requests can also be submitted by e-mail to *OCAS@CDC.GOV*.

Dated: April 5, 2007.

John Howard,

Director, National Institute for Occupational Safety and Health.

[FR Doc. 07–1763 Filed 4–9–07; 8:45 am]

BILLING CODE 4163–19–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–07–05BW]

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) 639–4794 or send an e-mail to *omb@cdc.gov*. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–6974. Written comments should be received within 30 days of this notice.

Proposed Project

Survey of Primary Care Physicians' Practices regarding Prostate Cancer Screening—New—National Center for Chronic Disease and Public Health Promotion (NCDDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Prostate cancer is the most common cancer in men and is the second leading cause of cancer deaths, behind lung cancer. The American Cancer Society estimated that there would be about 234,460 new cases of prostate cancer and about 27,350 deaths in 2006. Although prostate cancer deaths have declined over the past several years, it ranks fifth among deaths from all causes. The digital rectal examination (DRE) and prostate specific antigen

(PSA) test are used to screen for prostate cancer. Screening is controversial and many are not in agreement as to whether the potential benefits of screening outweigh the risks, that is, if prostate specific antigen (PSA) based screening, early detection, and later treatment increases longevity. Although major medical organizations are divided on whether men should be routinely screened for this disease, it appears that all of the major organizations recommend discussion with patients about the benefits and risks of screening.

The purpose of this project is to develop and administer a national survey to a sample of American primary care physicians to examine whether or not they: Screen for prostate cancer using (PSA and/or DRE), recommend testing and under what conditions, discuss the tests and the risks and benefits of screening with patients, and if their screening practices vary by factors such as age, ethnicity, and family history. This study will examine demographic, social, and behavioral characteristics of physicians as they relate to screening and related issues, including knowledge and awareness, beliefs regarding efficacy of screening and treatment, frequency of screening, awareness of the screening controversy, influence of guidelines from medical, practice and other organizations, and participation and/or willingness to participate in shared decision-making.

There are no costs to the respondents other than their time. The total estimated annualized burden hours are 1,032.5.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Primary Care Physicians (eligible) ...	Survey of Physicians' Practices	2,000	1	30/60	1,000
Primary Care Physicians (ineligible)	Survey of Physicians' Practices	390	1	5/60	32.5

Dated: April 4, 2007.

Joan F. Karr,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E7–6745 Filed 4–9–07; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

Privacy Act of 1974; Report of a New System of Records

AGENCY: Department of Health and Human Services (HHS), Center for Medicare & Medicaid Services (CMS).

ACTION: Notice of a New System of Records (SOR).

SUMMARY: In accordance with the requirements of the Privacy Act of 1974, we are proposing to establish a new system titled, ''Master Demonstration, Evaluation, and Research Studies (DERS) for the Office of Research, Development and Information (ORDI),'' System No. 09–70–0591. This notice serves as the Master system for all demonstration, evaluation, and research studies administered by ORDI. Sixteen existing ORDI demonstration, evaluation, and research studies will be included under this notice and the separate, existing systems of records notices for those studies will be deleted upon the effective date of this notice. DERS will become effective 30 days from the publication of the notice in the **Federal Register**, or 40 days from the date submitted to OMB and the Congress, whichever is later.

With the publication of this master system, ORDI will only be deleting the systems of records listed below as separate stand alone notices to the public. Retention and destruction of the data contained in these systems will follow the schedules listed in this DERS system notice. The existing ORDI systems of records to be included under DERS and which will be deleted by this notice are as follows:

- ''Municipal Health Services Program System No. 09–70–0022,'' 65 **Federal Register** (FR) 37792 (June 16, 2000);
- ''Monitoring of the Home Health Agency Prospective Payment Demonstration,'' System No. 09–70–0048, 65 FR 37792 (June 16, 2000);
- ''Person-Level Medicaid Data System, System No. 09–70–0507'' last published at 71 FR 60726 (October 16, 2006);
- ''Medicare Cancer Registry Record System,'' System No. 09–70–0509, last published at 71 FR 67133 (November 20, 2006);
- ''End Stage Renal Disease Program Management and Medical Information System,'' System No. 09–70–0520, last published at 67 FR 41244 (June 17, 2002);
- ''Evaluations of the Medicaid Reform Demonstrations,'' System No. 09–70–0523, last published at 71 FR 60540 (October 13, 2006);
- ''MMA Section 641 Prescription Drug Benefit Demonstration,'' System No. 09–70–0545, last published at 69 FR 32587 (June 10, 2004);
- ''Medicare Physician Group Practice Demonstration,'' System No. 09–70–0559, last published at 70 FR 58432 (October 6, 2005);
- ''Cancer Prevention and Treatment Demonstration for Ethnic and Racial Minorities,'' System No. 09–70–0560, last published at 70 FR 57602 (October 3, 2005);
- ''Medicare Care Management Performance Demonstration,'' System No. 09–70–0562, last published at 70 FR 58442 (October 6, 2005);
- ''Rural Hospice Demonstration,'' System No. 09–70–0563, last published at 71 FR 57968 (October 2, 2006);
- ''Medicare Chiropractic Coverage Demonstration and Evaluation,'' System No. 09–70–0577, last published at 71 FR 41450 (July 21, 2006);
- ''Low Vision Rehabilitation Demonstration,'' System No. 09–70–0582, last published at 71 FR 58621 (October 4, 2006);
- ''Medicare Lifestyle Modification Program Demonstration,'' System No. 09–70–0585, last published at 71 FR 41807 (July 24, 2006);
- ''Competitive Bidding for Clinical Laboratory Services,'' System No. 09–70–0589, last published at 71 FR 60713 (October 16, 2006); and
- ''Senior Risk Reduction Demonstration and Evaluation,'' System No. 09–70–0592, last published at 71 FR 60718 (October 16, 2006).

The purpose of this system is to document, track, monitor, evaluate, and conduct ORDI-administered demonstration, evaluation, and research studies. Information retrieved from this system may be disclosed to: (1) Support regulatory, reimbursement, and policy