

infectious agents, baseline information on the exposed HCWs, as well as the underreporting and hospital surveys.

A new component of NaSH will be forms for collecting information on exposures and injuries associated with smallpox vaccination. It uses a reporting form based on the blood exposure form already approved for use in NaSH and a root-cause analysis form. This is a paper-based reporting system that can be used by NaSH and non-NaSH facilities.

A different number of facilities will be completing each of the separate forms

listed in the table. The number of respondents is the number of facilities. The number of responses per respondent varies with the form.

The maximum total burden hours may reach 86,720. (The total estimated maximum cost to respondents may be \$1,300,800 [\$15 an hour for hospital personnel who will collect/input the data]). Since all of the data collection activities except the HCW survey, outlined in the modules are currently routinely done by infection control practitioners and employee health, personnel health, and/or occupational

medicine personnel in hospitals with existing well established surveillance programs, the only additional burden for some hospitals participating in the NaSH system is the time needed for data entry and transmission of data to CDC. Thus, the real burden hours and burden cost could be significantly less. The only activity that may not be routinely performed by the hospitals is the survey to assess underreporting of needlesticks (HCW survey).

This study is scheduled for implementation in late 2003 and 2004. There are no costs to respondents.

Form	Number of respondents (hospitals)	Number of responses/respondent	Avg. burden/response (in hours)	Total burden (in hours)
Baseline Information	75	250	10/60	3,125
TST:				
TST Result	30	200	10/60	1,000
Positive TST	20	100	30/60	1,000
Exposure to Blood:				
Exposure	50	100	60/60	5,000
Exposure (NaSH "Lite/abbreviated form")	10	20	30/60	100
Postexposure prophylaxis	50	80	20/60	1,333
Follow-up	50	60	15/60	750
Exposure during smallpox vaccination:				
Exposure event	20	1	10/60	3
Root cause analysis	20	1	60/60	20
Exposure to VPD:				
Summary	50	3	20/60	50
HCW	50	10	20/60	167
Exposure to TB	25	3	60/60	75
Noninfectious Injury	25	20	20/60	167
HCW Survey	25	500	10/60	2,083
Hospital Survey	75	1	2	150
Total	14,986

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 04003]

Health Promotion and Disease Prevention Research Centers; Notice of Availability of Funds; Amendment

A notice announcing the availability of fiscal year 2004 funds for Cooperative Agreements to support Health Promotion and Disease Prevention Research Centers was published in the **Federal Register** on March 27, 2003, Volume 68, Number 59, pages 14984-14990. A fully amended version of the original program announcement is

posted on the Centers for Disease Control and Prevention (CDC) Web site at: <http://www.cdc.gov>. Click on "Funding" then "Grants and Cooperative Agreements."

The notice is amended as follows:

Page 14984, third column, "Application Deadline: June 16, 2003" should be removed and replaced with: "Application Deadline: March 1, 2004." Page 14985, first column, Section C. Eligible Applicants, subsection First Round of Competition, delete this subsection. Second column, subsection, Second Round of Competition, delete the subsection header and the first paragraph.

Page 14985, second column, Section D. Funding, subsection Availability of Funds, line 1, delete the sentence, "Approximately \$14,000,000 will be available in FY 2004 to fund approximately 18 awards." Replace it with "Approximately \$9,000,000 is available in FY 2004 to fund approximately 12 awards."

Page 14985, second column, Section D. Funding, insert a second paragraph

with heading and text as follows: Optional Funding In addition, special interest projects related to chronic disease prevention and health promotion will be announced and funded in fiscal year 2004. Award of these projects, which are funded by centers, institutes, or offices within CDC or by other federal agencies, can be made to Prevention Research Centers only. Thus, applicants selected to be funded as a Prevention Research Center under this announcement will be eligible to compete for this optional funding of new special interest projects whenever they are announced by CDC. However, all applicants to this announcement can simultaneously apply for special interest projects. Those applicants not selected as Prevention Research Centers will then automatically be excluded from the competition for special interest projects. Specific guidance related to fiscal year 2004 special interest projects will be published in a separate **Federal Register** announcement in March, 2004.