purposes of [21 U.S.C. 824(a)(4)], consider the practitioner to have committed an act that renders the registration of the practitioner pursuant to subsection (f) to be inconsistent with the public interest." 21 U.S.C. 823(g)(2)(E)(i). Accordingly, I further hold that Respondent's prescribing of Subutex to the CI for detoxification purposes provides an additional and independent basis to support the Government's *prima facie* case.

Sanction

Under Agency precedent, where, as here, "the Government has proved that a registrant has committed acts inconsistent with the public interest, a registrant must 'present[] sufficient mitigating evidence to assure the Administrator that [he] can be entrusted with the responsibility carried by such a registration.' " *Medicine Shoppe-Jonesborough,* 73 FR 363, 387 (2008) (quoting *Samuel S. Jackson,* 72 FR 23848, 23853 (2007) (quoting *Leo R. Miller,* 53 FR 21931, 21932 (1988)). Moreover, because "past performance is the best predictor of future performance, *ALRA Labs, Inc.* v. *DEA,* 54 F.3d 450, 452 (7th Cir.1995), [DEA] has repeatedly held that where a registrant has committed acts inconsistent with the public interest, the registrant must accept responsibility for [his] actions and demonstrate that [he] will not engage in future misconduct." *Medicine Shoppe,* 73 FR at 387; *see also Jackson,* 72 FR at 23853; *John H. Kennedy,* 71 FR 35705, 35709 (2006); *Prince George Daniels,* 60 FR 62884, 62887 (1995). *See also Hoxie* v. *DEA,* 419 F.3d at 483 ("admitting fault" is "properly consider[ed]" by DEA to be an "important factor[]" in the public interest determination).

As part of this determination, this Agency also places great weight on a registrant's candor, both during an investigation and in any subsequent proceeding. *See, e.g., The Lawsons, Inc., t/a The Medicine Shoppe Pharmacy,* 72 FR 74334, 74338 (2007) (quoting *Hoxie,* 419 F.3d at 483) ("Candor during DEA investigations properly is considered by the DEA to be an important factor when assessing whether a * * * registration is consistent with the public interest."). *See also Rose Mary Jacinta Lewis, M.D.,* 72 FR 4035, 4042 (2007) (holding that lying under oath in proceeding to downplay responsibility supports conclusion that physician "cannot be entrusted with a registration").

Here, as the ALJ found, the evidence supports the conclusions that Respondent has failed to accept responsibility for his misconduct and gave false testimony in the proceeding. ALJ at 30. More specifically, based on the transcript of the April 24 visit, which clearly shows that Respondent falsely documented that the UC had osteoporosis, the ALJ found not credible Respondent's testimony that he genuinely believed the UC had osteoporosis. I agree.

Moreover, while the ALJ expressly declined to make any findings as to whether she found credible Respondent's testimony that the CI had phoned him and related that the UC had various conditions such as HIV and a history of bone fractures (which was offered to provide some medical justification for the steroid prescriptions), as explained above, as ultimate factfinder, I have rejected his testimony as not credible for multiple reasons. In short, the entirety of the evidence convincingly demonstrates that Respondent's testimony regarding the purported phone call was patently self-serving and disingenuous.

Respondent further argues that he refused to prescribe HGH to the UC and also refused the UC's request to accept the latter's friends as "patients." As for Respondent's refusal to prescribe HGH (which is not a controlled substance), it is far from clear that the UC was seeking HGH as he noted that it's "the most expensive stuff on earth" and that it had caused an acquaintance's head to swell.[26] GX 10, at 11. While it is true that Respondent told the UC of other serious side effects caused by HGH, this no more mitigates his misconduct in issuing the steroid prescriptions than would an argument that one had prescribed a slightly less dangerous narcotic rather than a more dangerous one sought by a drug abuser (for example OxyContin instead of Fentanyl), when there was no legitimate medical purpose for any such prescription. Put another way, the fact that a controlled substance causes less dangerous side effects than another drug which a drug abuser may have sought does not make a prescription for a controlled substance, which lacks a legitimate medical purpose, any less illegal.

As for Respondent's declining the UC's offer to refer his friends because he "usually" did not do "guys who are just looking for bodybuilding and stuff like that," he nonetheless was willing to issue illegal prescriptions to the UC. Moreover, that Respondent did not "usually" write steroid prescriptions for those into bodybuilding implies that, in some other instances, he did. *See* ALJ at 32.

In short, even were I to view the evidence as supporting both Respondent's contention that the UC sought HGH but he refused to prescribe it and that he declined the UC's offer to refer his friends, these circumstances are not sufficient to rebut the Government's *prima facie* case and demonstrate that he can be entrusted with a registration. Moreover, regarding his extensive violations of Federal law in prescribing Subutex for detoxification treatment, Respondent did not accept responsibility, but rather blamed his misconduct on the fact that no pharmacist told him that he needed a separate registration to do so.[27]

In conclusion, because Respondent has failed to accept responsibility for his misconduct and provided less than candid testimony in the proceeding, it is clear that his continued registration "would be inconsistent with the public interest." 21 U.S.C. 823(f). Accordingly, Respondent's registration will be revoked and his pending application to renew his registration will be denied.

Order

Pursuant to the authority vested in me by 21 U.S.C. 823(f) & 824(a), as well as 28 CFR 0.100(b) & 0.104, I hereby order that DEA Certificate of Registration, BH1292642, issued to Robert F. Hunt, D.O., be, and it hereby is, revoked. I further order that Respondent's pending application to renew his registration be, and it hereby is, denied. This Order is effective immediately.

Dated: July 30, 2010.

Michele M. Leonhart,

Deputy Administrator.

[FR Doc. 2010–20243 Filed 8–13–10; 8:45 am]

BILLING CODE 4410–09–P

[26] In her opinion, the ALJ found that the UC had "hinted that he would like a prescription for" HGH. ALJ at 22. This does not seem to be an accurate reading of the evidence in light of the UC's complaint that HGH is "the most expensive stuff on earth." GX 10, at 39.

[27] I have also considered Respondent's evidence regarding his volunteer activities related to persons with HIV. While his activities are laudable, they do not negate the fact that Respondent knowingly diverted steroids and repeatedly violated Federal law in prescribing Subutex. Nor are his activities relevant in determining whether Respondent has accepted responsibility for his misconduct.

DEPARTMENT OF LABOR

Office of the Secretary

Submission for OMB Review; Comment Request

August 3, 2010.

The Department of Labor (DOL) hereby announces the submission of the following public information collection request (ICR) to the Office of

Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104–13, 44 U.S.C. chapter 35). A copy of this ICR, with applicable supporting documentation; including, among other things, a description of the likely respondents, proposed frequency of response, and estimated total burden may be obtained from the RegInfo.gov Web site at *http://www.reginfo.gov/public/do/PRAMain* or by contacting Linda Watts Thomas on 202–693–4223 (this is not a toll-free number) and e-mail mail to: *DOL_PRA_PUBLIC@dol.gov.*

Interested parties are encouraged to send comments to the Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for the Department of Labor—Office of Workers' Compensation Programs (OWCP), Room 10235, Washington, DC 20503, Telephone: 202–395–7316/Fax 202–395–5806 (these are not toll-free numbers), e-mail: *OIRA_submission@omb.eop.gov* within 30 days from the date of this publication in the **Federal Register.** In order to ensure the appropriate consideration, comments should reference the applicable OMB Control Number (see below).

The OMB is particularly interested in comments which:

(1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(2) Evaluate 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) Enhance the quality, utility, and clarity of the information to be collected; and

(4) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.,* permitting electronic submission of responses.

Agency: Office of Workers' Compensation Programs.

Type of Review: Extension.

Title of Collection: Survivor's Form for Benefits.

OMB Control Number: 1240–0027.

Agency Form Number: CM–912.

Affected Public: Individuals or Households.

Cost to Federal Government: $27,324.

Total Estimated Number of Respondents: 1,750.

Total Estimated Number of Responses: 1,750.

Total Burden Hours: 233.

Total Hour Burden Cost (operating/maintaining): $681.50.

Description: This collection of information is required to administer the benefit payment provisions of the Black Lung Act for survivors of deceased miners. Completion of this form constitutes the application for benefits by survivors and assists in determining the survivor's entitlement to benefits. Form CM–912 is authorized for use by the Black Lung Benefits Act 30 U.S.C. 901, *et seq.,* 20 CFR 410.221 and CFR 725.304 and is used to gather information from a survivor of a miner to determine if the survivor is entitled to benefits. For additional information, see related notice published in the **Federal Register** on March 12, 2010 (Vol. 75 page 11912).

Dated: August 3, 2010.

Linda Watts Thomas,

Acting Departmental Clearance Officer.

[FR Doc. 2010–20090 Filed 8–13–10; 8:45 am]

BILLING CODE 4510–CK–P

DEPARTMENT OF LABOR

Office of the Secretary

Notice of Public Information Collection Request

ACTION: Submission for OMB Review; Comment Request.

SUMMARY: The Department of Labor (DOL) hereby announces the submission of the following public information collection request (ICR) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104–13, 44 U.S.C. chapter 35). A copy of this ICR, with applicable supporting documentation; including, among other things, a description of the likely respondents, proposed frequency of response, and estimated total burden may be obtained from the RegInfo.gov Web site at *http://www.reginfo.gov/public/do/PRAMain* or by contacting Linda Watts Thomas on 202–693–4223 (this is not a toll-free number) and e-mail mail to: *DOL_PRA_PUBLIC@dol.gov.*

Interested parties are encouraged to send written comments to the Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for the Department of Labor—Bureau of Labor Statistics (BLS), Room 10235, Washington, DC 20503, Telephone: 202–395–7316/Fax 202–395–5806 (these are not toll-free numbers), E-mail: *OIRA_submission@omb.eop.gov* within 30 days from the date of this publication in the **Federal Register**. In order to ensure the appropriate consideration, comments should reference the applicable OMB Control Number (*see* below).

The OMB is particularly interested in comments which:

(1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(2) Evaluate 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) Enhance the quality, utility, and clarity of the information to be collected; and

(4) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.,* permitting electronic submission of responses.

Agency: Bureau of Labor Statistics.

Type of Review: Revision of a currently approved collection.

Title of Collection: Survey of Occupational Injuries and Illnesses.

OMB Control Number: 1220–0045.

Affected Public: Businesses or other for-profits; Not-for-profit institutions; Farms; State, Local or Tribal Governments.

Frequency: Annually.

Estimated Number of Respondents: 240,000.

Total Number of Responses: 240,000.

Total Burden Hours: 350,266.

Total Hour Burden Cost (operating/maintaining): $0.

Description: The Survey of Occupational Injuries and Illnesses is the primary indicator of the Nation's progress in providing every working man and woman safe and healthful working conditions. The survey produces the overall rate of occurrence of work injuries and illnesses by industry which can be compared to prior years to produce measures of the rate of change. Survey data are used to evaluate the effectiveness of the Federal and State programs for improving work place safety and health and to prioritize scarce resources. For additional information, see related notice published in the **Federal Register** on April 16, 2010, (Vol. 75, page 20004).