

This notice is issued under the Federal Food, Drug, and Cosmetic Act (secs. 515(d), 520(h) (21 U.S.C. 360e(d), 360j(h))) and under authority delegated to the Commissioner of Food and Drugs (21 CFR 5.10) and redelegated to the Director, Center for Devices and Radiological Health (21 CFR 5.53).

Dated: October 16, 1997.

**Joseph A. Levitt,**

*Deputy Director for Regulations Policy, Center for Devices and Radiological Health.*

[FR Doc. 97-30030 Filed 11-13-97; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

**Psychopharmacologic Drugs Advisory Committee; Notice of Meeting**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). The meeting will be open to the public.

*Name of Committee:*

Psychopharmacologic Drugs Advisory Committee.

*General Function of the Committee:*

To provide advice and recommendations to the agency on FDA regulatory issues.

*Date and Time:* The meeting will be held on December 4, 1997, 8:30 a.m to 5 p.m.

*Location:* Holiday Inn, Versailles Ballrooms I and II, 8120 Wisconsin Ave., Bethesda, MD.

*Contact Person:* Rhonda W. Stover, or Robinette Taylor, Center for Drug Evaluation and Research (HFD-21), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-443-5455, or FDA Advisory Committee Information Line, 1-800-741-8138 (301-443-0572 in the Washington, DC area), code 12544. Please call the Information Line for up-to-date information on this meeting.

*Agenda:* On December 4, 1997, the committee will hear presentations from the Institute of Medicine on the marketed product Halcion® (triazolam, Pharmacia and Upjohn Co.).

*Procedure:* Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by December 1, 1997. Oral presentations from the public will be scheduled between approximately 8:30 a.m. and 9:30 a.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before December 1, 1997, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: November 10, 1997.

**Michael A. Friedman,**

*Deputy Commissioner for Operations.*

[FR Doc. 97-30034 Filed 11-13-97; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**Agency Information Collection Activities: Submission for OMB Review; Comment Request**

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget, in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301) 443-1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

*Proposed Project:* The Health Education Assistance Loan (HEAL)

*Program:* Application Form—0915-0038—Extension, No Change. The Health Education Assistance Loan (HEAL) program provides federally-insured loans to students in schools of allopathic medicine, osteopathic medicine, dentistry, veterinary medicine, optometry, podiatric medicine, pharmacy, public health, allied health, or chiropractic, and graduate students in health administration or clinical psychology. Eligible lenders, such as banks, savings and loan associations, credit unions, pension funds, State agencies, HEAL schools, and insurance companies, make HEAL loans which are insured by the Federal Government against loss due to borrowers' death, disability, bankruptcy, and default. The basic purpose of the program is to assure the availability of funds for loans to eligible students who need to borrow money to pay for their educational costs.

The HEAL program is being phased out and no new loans will be made after September 30, 1998, unless reauthorization is enacted. We are, however, requesting a 3-year extension of the OMB approval of the HEAL Application Form HRSA-700 because lenders will continue to use this form for consolidation loans through fiscal year (FY) 2000. Students use the application to apply for HEAL loans (through FY 1998) and consolidation of loans, schools use the application to determine a student's eligibility and maximum approval amount of each loan (through FY 1998 only), and lenders use the application to determine student eligibility and the amount of the installment or disbursement to be given to the borrower, and to process consolidation loans.

The estimate of burden for the application form for FY 1998 is as follows:

Type of respondent	Number of respondents	Responses per respondent	Total number of responses	Burden per response (minutes)	Total burden hours
Applicants .....	8,230	1	8,230	25	3,429
Schools .....	190	41	7,730	32	4,123
Lenders .....	11	748	8,230	35	4,801
Total .....	8,431	.....	24,190	.....	12,353

The estimate of burden for the application form for FY 1999 and 2000 (for consolidation loans only) is as follows:

Type of respondent	Number of respondents	Responses per respondent	Total number of responses	Burden per response (minutes)	Total burden hours
Applicants .....	500	1	500	25	208
Lenders .....	11	45	500	35	292
Total .....	511	.....	1,000	.....	500

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Laura Oliven, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: November 7, 1997.

**Jane M. Harrison,**

*Acting Director, Division of Policy Review and Coordination.*

[FR Doc. 97-30027 Filed 11-13-97; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### The Health Resources and Services Administration

#### Notice of a Cooperative Agreement with the American Public Health Association

The Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau announces that it will award a sole source cooperative agreement to the American Public Health Association (APHA).

The purpose of this cooperative agreement is to assist, collaboratively with APHA, in the development and dissemination of resource materials relating to the care and treatment of individuals with HIV/AIDS and the prevention of the disease among individuals who are at risk. In addition, this agreement will assist with the training of health professionals in the care, treatment, and prevention of HIV/AIDS. Specifically, these activities will include, but not be limited to, identifying areas where best practice standards need to be investigated and developed; identifying and developing science expertise in areas agreed to by HRSA as critical to the appropriate delivery of HIV/AIDS care; using that expertise to develop best practices; and disseminating to the public health community information on best practices.

HRSA will provide consultation, including administrative and technical assistance as needed, for the execution

and evaluation of all aspects of this cooperative agreement. HRSA may also participate and/or collaborate with the APHA in any workshops or symposia to exchange current information, opinions, and research findings during this agreement.

The goal of HRSA in entering into this cooperative agreement is to strengthen effective HIV/AIDS treatment programs at all levels throughout the United States and its territories; to prevent HIV transmission and effect, maintain, measure, and evaluate behavioral change among individuals whose behavior places them at risk of HIV infection; to reduce risks of further transmission and to maintain the health of asymptomatic clients; and to increase collaboration, support and technical competence among agencies, organizations, groups, and constituencies.

#### Authorizing Legislation

This cooperative agreement is authorized under Section 2692 of the Public Health Service Act.

#### Background

Assistance will be provided to the American Public Health Association. No other applications are solicited. The HIV/AIDS Bureau is committed to providing program expertise throughout the nation to ensure that the providers of HIV/AIDS services to underserved and vulnerable populations deliver appropriate and quality care. The Bureau believes that APHA is uniquely qualified to work with HRSA to meet this goal for the following reasons:

1. APHA has more than 50,000 members and affiliates from 50 occupations of public health, including medicine, social work, nursing, health education, epidemiology, and program evaluation. It represents all disciplines and specialties of public health. It stimulates and coordinates the development of the scientific basis for the Association's professional and public health policy programs. The development of a public health HIV/AIDS science and service delivery assistance program with APHA automatically covers all relevant disciplines and specialties needed for this effort. Because of the rapidly

changing field of HIV/AIDS service delivery, it is impossible to predict which expertise will be needed of the 50 public health occupations.

2. The mission of this organization is to "prevent disease and promote health" throughout the United States making APHA a national leader. APHA has a history of providing science expertise to develop best practices for the delivery of public health programs, including HIV/AIDS services. Currently, it provides professional education and services for its members in a variety of areas. The APHA has valuable experience with issues important to the delivery of HIV/AIDS care—health care in jails and prisons, outreach to underserved groups, women's health, and primary health care delivery in community settings. This experience enables the APHA to contribute significantly to this effort. APHA can identify areas needing best practices, identify experts in these areas, and assign individual experts and groups to develop best practices.

3. APHA has established relationships with the major associations that represent single public health disciplines, such as the American Medical Association, and associations that represent health profession schools, such as the Association of Schools of Public Health. It can use these ties to further identify needed experts in the HIV/AIDS service field.

Approximately \$100,000 is available in fiscal year 1997 for the first year of a 3-year project period for this cooperative agreement. Continuation awards within the project period will be made on the basis of satisfactory progress and the availability of funds.

#### Where To Obtain Additional Information

If you are interested in obtaining additional information regarding this project, contact Mr. William Aspden, HIV/AIDS Bureau, HRSA, 5600 Fishers Lane, Room 7-05, Rockville, Maryland 20857 or telephone (301) 443-1993.

Dated: November 7, 1997.

**Claude Earl Fox,**

*Acting Administrator.*

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