

Healthy People 2010. Conference Edition
November 30, 1999.

Institute of Medicine. Enabling America
Assessing the Role of Rehabilitation Science
and Engineering. Brandt EN, Pope AM,
Editors. National Academy Press,
Washington, DC 1997. Published
epidemiological studies of TBI are also
reviewed in the section entitled
"Epidemiology of Traumatic Brain Injury in
the United States" located at the Internet
Website of the CDC National Center for Injury
Prevention and Control <<http://www.cdc.gov/nccipc/dacrrdp/tbi.htm>>.

Definitions:

Traumatic brain injury (TBI) and essential
data elements for TBI surveillance are fully
defined in CDC's Guidelines for Surveillance
of Central Nervous System Injury. (For
ordering a copy of the Guidelines, see
Section J.—Where to Obtain Additional
Information.)

Surveillance is the ongoing, systematic
collection, analysis, and interpretation of
health data necessary for designing,
implementing, and evaluating public health
programs.

Impairment: Any loss or abnormality of
physiological, or anatomical structure or
function.

Restriction in Activity (Disability): Any
restriction or lack (resulting from an
impairment) of ability to perform an activity
in the manner or within the range considered
normal for a human being.

Restriction in participation (Handicaps): a
disadvantage for a given individual, resulting
from an impairment or a disability, that
limits or prevents the fulfillment of a role
that is normal (depending on age, sex, and
social and cultural factors) for that
individual.

A population-based follow-up system is
defined as a system of ongoing registration of,
and collection of information about, all or a
representative sample of all cases of a
condition in a defined population, such that
cases can be related to the population base.

Elements of Disability:

Impairment: Any loss or abnormality of
physiological, or anatomical structure or
function.

Restriction in Activity (Disability): Any
restriction or lack (resulting from an
impairment) of ability to perform an activity
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social and cultural factors) for that
individual.

[FR Doc. 02-11359 Filed 5-7-02; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Health Statistics; ICD-9-CM E Code Revisions

AGENCY: National Center for Health
Statistics, Centers for Disease Control
and Prevention (CDC), HHS.

ACTION: Notice.

SUMMARY: The National Center for
Health Statistics has approved the
following expansion to the External
Cause Codes in the International
Classification of Diseases, Ninth-
Revision, Clinical Modification (ICD-9-
CM). These ICD-9-CM E-Code revisions
will become effective October 1, 2002.
The official government version of the
ICD-9-CM that will include all of the
code revisions can be found on the ICD-
9-CM CD-ROM available through the
Government Printing Office. Guidelines
for the use of the new E-codes will
appear on the CD-ROM and on the
NCHS website <http://www.cdc.gov/nchs/icd9.htm>.

- E885.0 Fall from (nonmotorized)
scooter
- E922.5 Accidental injury caused by
paintball gun
- E955.7 Suicide/self-inflicted injury
caused by paintball gun
- E979.0 Terrorism involving explosion
of marine weapons
- E979.1 Terrorism involving
destruction of aircraft
- E979.2 Terrorism involving other
explosions and fragments
- E979.3 Terrorism involving fires,
conflagration and hot substances
- E979.4 Terrorism involving firearms
- E979.5 Terrorism involving nuclear
weapons
- E979.6 Terrorism involving biological
weapons
- E979.7 Terrorism involving chemical
weapons
- E979.8 Terrorism involving other
means
- E979.9 Terrorism, secondary effects
- E985.7 Injury caused by paintball gun,
undetermined whether accidentally
or purposely inflicted
- E999.0 Late effect of injury due to war
operations
- E999.1 Late effect of injury due to
terrorism

FOR FURTHER INFORMATION CONTACT:

Donna Pickett, R.H.I.A., Co-chair, ICD-
9-CM Coordination and Maintenance
Committee, National Center for Health
Statistics, CDC, telephone (301)-458-
4200.

The Director, Management Analysis
and Services Office, has been delegated

the authority to sign **Federal Register**
notices pertaining to announcements of
meetings and other committee
management activities, for both the
Centers for Disease Control and
Prevention and the Agency for Toxic
Substances and Disease Registry.

Dated: May 2, 2002.

Alvin Hall,

*Acting Director, Management Analysis and
Services Office, Centers for Disease Control
and Prevention.*

[FR Doc. 02-11358 Filed 5-7-02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

National Toxicology Program (NTP); National Institute of Environmental Health Sciences (NIEHS)

The NTP Center for the Evaluation of
Risks to Human Reproduction (CERHR)
*Expert Panel Report on the
Developmental and Reproductive
Toxicity of Methanol:* Notice of
Availability and Request for Public
Comments

Summary

Notice is hereby given of the
availability of the *Expert Panel Report
on the Developmental and Reproductive
Toxicity of Methanol*. This report
includes the summaries and
conclusions of the expert panel's
evaluation of the scientific data for
potential reproductive and/or
developmental hazards associated with
exposure to methanol. The CERHR held
this expert panel meeting in October
2001. CERHR is seeking public
comment on these reports and
additional information about recent,
relevant toxicology or human exposure
studies.

Availability of Reports

The expert panel report is available
electronically on the CERHR web site
(<http://cerhr.niehs.nih.gov>) and in
printed copy by contacting the CERHR
(PO Box 12233, MD EC-32, Research
Triangle Park, NC 27709; telephone:
(919) 541-3455; fax: (919) 316-4511; or
e-mail: shelby@niehs.nih.gov).

Request for Public Comments

The CERHR invites public comments
on the expert panel report and input
regarding any recent, relevant
toxicology or human exposure studies.
The CERHR asks that all comments and
other information be submitted to the