Act (CERCLA) (42 U.S.C. 9604(i)) and the Resource Conservation and Recovery Act (RCRA) (42 U.S.C. 6939a(b)). The Guidance Manual sets forth in detail the health assessment process as developed by ATSDR and clarifies the methodologies and guidelines that will be used by ATSDR staff and agents of ATSDR in conducting health assessments.

DATES: Comments concerning this manual must be received by November 30, 1990.

FOR FURTHER INFORMATION CONTACT: The Division of Health Assessment and Consultation, Agency for Toxic Substances and Disease Registry, Mailstop E-32, 1600 Clifton Road, NE., Atlanta, Georgia 30333. Telephone: 404-639-0610.

Dated: October 12, 1990.

William L. Roper,

Administrator, Agency for Toxic Substances and Disease Registry.

[FR Doc. 90-24740 Filed 10-18-90; 8:45 am]

BILLING CODE 4160-70-M

Centers for Disease Control

National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control (CDC), NIOSH Assessment of Performance Levels for Industrial Respirators: Prerulemaking Technical Conference: Meeting

NAME: NIOSH Assessment of Performance Levels for Industrial Respirators: Prerulemaking Technical Conference.

TIME AND DATE: 9 a.m.-5 p.m., January 9-11, 1991.

PLACE: Appalachian Laboratory for Occupational Safety and Health, room 138, NIOSH, CDC, 944 Chestnut Ridge Road, Morgantown, West Virginia 25605-2888.

STATUS: Open to the public, limited only by the space available.

PURPOSE: To solicit and present the available research and recommendations concerning the following technical issues and questions: (1) The feasibility and practicality of developing a detailed protocol (including analytical methods, facepiece sampling methods, statistical analysis of data, etc.) for conducting workplace protection factor tests that would apply to all workplace settings, all contaminants, and all respirator types, (2) the available techniques and procedures for measuring assigned protection factors for respirator types that offer very high levels of worker protection (such as positive pressure air-supplied respirators or high performance powered air-purifying respirators), (3) the need to standardize further the nomenclature associated with defining the workplace performance of respiratory protective devices, (4) the procedures and techniques for conducting workplace protection factor studies of gas and vapor respirators, (5) the procedures and techniques for conducting workplace protection factor studies of closed-circuit respirators, (6) the approaches for and benefits and limitations of assigning performance values to individual respirator models, and (7) any additional knowledge, gaps or issues relating to workplace performance testing as a condition of a respirator certification.

SUMARY: In an associated regulatory activity (Improved Standards for Respirator Devices), NIOSH has undertaken a substantial revision of certification tests and criteria for industrial respirators (currently 30 CFR part 11). The first Notice of Proposed Rulemaking (NPRM) for this revision was published in August 1987 (52 FR 32401) as a proposed 42 CFR part 84 to replace 30 CFR part 11. In addition to requiring laboratory performance testing, provisions in the first NPRM would have required workplace or validated simulated-workplace testing of industrial respirators as a part of the certification process. Associated with these provisions was a plan for certifying makes and models at quantitative performance levels. However, because commenters believed that suitable protocols for workplace or validated simulated-workplace testing are not available, and to avoid needless delay in implementing critical advances in laboratory performance tests, NIOSH will remove these provisions from its second NPRM, which is currently under development. Therefore, appropriate data required for certifying respirator protection levels will not be initially available under the new 42 CFR part 84. The National Institute for Occupational Safety and Health be proposing a separate rulemaking activity to include workplace or validated simulated-workplace testing in the NIOSH Respiratory Protective Devices Certification Program at a later time. The National Institute for Occupational Safety and Health remains convinced that respirators that appear to have achieved effective performance in laboratory performance tests must still demonstrate adequate performance under workplace or validated simulated-workplace conditions. Protection values based solely on laboratory fit testing should be viewed and applied with particular caution. Therefore, NIOSH believes that federal certification requirements must include workplace or validated simulated-workplace testing. Only when results of these tests are available can NIOSH accurately assess the protection afforded by individual makes and models of respirators.

CONTACT PERSON FOR ADDITIONAL INFORMATION: Dr. Alfred A. Amendola, Deputy Director, Division of Safety Research, NIOSH, CDC, 944 Chestnut Ridge Road, Mailstop S118B, Morgantown, West Virginia 26505-2888, telephone 304/291-4594 or FTS 923-4595.

Anyone wishing to make an oral presentation should submit their request, in writing, to Dr. Amendola by close of business, December 14, 1990. The request should include the name, address, and telephone number of the participant, the approximate time needed and a brief summary of the topics to be presented. For those persons who cannot participate at the meeting, written comments should be submitted to Dr. Amendola by close of business, December 14, 1990.

SUPPLEMENTARY INFORMATION: Federally-certified respirators are relied upon by up to 6.6 million American workers, either full-time or part-time, to protect themselves from hazards in their workplaces. This number could go as high as 10 million in the mid-1990s. Occupational Safety and Health Administration regulations (29 CFR 1910.134) require that NIOSH-certified respirators be used by many of these workers. Regulations of the Environmental Protection Agency and the Nuclear Regulatory Commission also require the use of NIOSH-certified respirators. The National Institute for Occupational Safety and Health certifications have become de facto premarket approvals for industrial respirators in the United States. Therefore, it is imperative that NIOSH certifications be based on the most relevant and reliable test procedures and criteria. The objectives of this proposed regulatory revision are to establish rigorous and realistic performance testing of respirators in the workplace or simulated-workplaces and provide purchasers and users with meaningful performance information that is relevant to actual conditions experienced by users.

There is ample precedent for requiring workplace or validated simulated-workplace testing for federally-certified respirators. For the past 14 years, the manufacturer of any medical device regulated by the Food and Drug Administration (FDA) under the 1976

Medical Device Amendments to the Food, Drug, and Cosmetic Act has had to demonstrate both the safety and efficacy (i.e., adequate performance) of the device to receive the necesssary government approval before marketing. For Class III devices, which are life-sustaining, life-supporting, or which are of substantial importance in preventing impairment of health (21 CFR part 860), FDA premarket approval depends upon the results of clinical studies showing the safety and efficacy of the device. Most, if not all, the respirators certified by NIOSH share the characteristics of Class III devices. The nature and complexity of industrial respirators prevent purchasers and users from personally assessing the safety and efficacy of the respirators they purchase or must wear. Thus, NIOSH believes that workplace or validated simulated-workplace testing requrements for federally-certified respirators are necessary to protect adequately the health and safety of respirator users.

Additionally, federal assessment of individual performance levels will stimulate market competition and result in both better-performing and more cost-effective respirators for purchasers and users. It will encourage manufacturers to develop and market better-performing and innovative respirators because better performance would be assessed by NIOSH and the information disseminated to the public. It will also enable purchasers and users to better protect themselves with respirators by providing them with information on the protection they might achieve with individual makes and models. The federal regulations for performance grading of automobile tires at multiple performance levels (49 CFR part 575) and noise reduction ratings for hearing protective devices (40 CFR part 211) are examples of this approach.

After the necessary technical methodologies are available, NIOSH will publish an NPRM presenting test requirements and evaluation criteria to implement requirements for workplace or validated simulated-workplace testing combined with NIOSH-assessed performance levels. This technical meeting and NPRM will provide ample opportunity for respirator manufacturers, pruchasers, and users to comment on these issues.

Dated: October 15, 1990.

Elvin Hilyer,

Associate Director for Policy Coordination, Centers for Disease Control.

[FR Doc. 90-24744 Filed 10-18-90; 8:45 am]

BILLING CODE 4160-19-M

CDC Advisory Committee on the Prevention of HIV Infection; Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control (CDC) announces the following committee meeting:

Name: CDC Advisory Committee on the Prevention of HIV Infection.

Time and date:

8:30 a.m.-5 p.m., November 7, 1990

8 a.m.-3 p.m., November 8, 1990.

Place: Colony Square Hotel, Peachtree and 14th Street, Atlanta, Georgia 30361.

Status: Open to the public, limited only by the space available.

Purpose: This committee is charged with advising the Director, CDC, regarding objectives, strategies, and priorities for HIV prevention efforts, including maintaining surveillance of AIDS and HIV infection, the epidemiologic and laboratory study of AIDS and HIV, information/education and risk reduction activities designed to prevent the spread of HIV infection, and other preventive measures that become available.

Matters to be discussed: The committee will discuss actions taken by CDC on the recommendations made by the committee during the May 16-17, 1990, meeting and current CDC approaches to HIV prevention for high-risk youth. In-depth discussions will lead to development of a preliminary list of recommendations regarding CDC methods and approaches.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Connie Granoff, Committee Assistant, Office of the Deputy Director (HIV), CDC, 1600 Clifton Road, NE., Mailstop E-40, Atlanta, Georgia 30333, telephone (404) 639-2918 or FTS 236-2918.

Dated: October 15, 1990.

Elvin Hilyer,

Associate Director for Policy Coordination Centers for Disease Control.

[FR Doc. 90-24743 Filed 10-18-90; 8:45 am]

BILLING CODE 4160-18-M

Family Support Administration

Forms Submitted to the Office of Management and Budget for Clearance

The Family Support Administration (FSA) will publish on Fridays information collection packages submitted to the Office of Management and Budget (OMB) for clearance, in compliance with the Paperwork Reduction Act (44 U.S.C. chapter 35). Following is the package submitted to OMB since the last publication.

(For a copy of a package, call the FSA, Report Clearance Officer 202-252-5604)

Periodic Reevaluation of AFDC Need and Payment Standards—Form-FSA-111 and FSA-112

In order to meet the requirements of section 404, of the Family Support Act, states are required to submit tri-annual reports on adjustments in the need and payment standards. The information from these forms will provide national data regarding frequency and the methods used by States to adjust AFDC need and payment standards, and special need amounts. *Respondents:* State or local governments; *Number of Respondents:* 54; *Frequency of Response:* 1; *Average Burden per Response:* 200 hours; *Estimated Annual Burden:* 10,800 hours.

OMB Desk Clearance Officer: Laura Oliven.

Written comments and recommendations for the proposed information collections should be sent directly to the appropriate OMB Desk Officers designated above at the following address: OMB Reports Management Branch, New Executive Office Building, room 3201, 725 17th Street NW., Washington, DC 20503.

Dated: October 11, 1990.

Naomi B. Marr,

Associate Administrator, Office of Management & Information Systems.

[FR Doc. 90-24271 Filed 10-18-90; 8:45 am]

BILLING CODE 4150-04-M

Forms submitted to the Office of Management and Budget for Clearance

The Family Support Administration (FSA) will publish on Fridays information collection packages submitted to the Office of Management and Budget (OMB) for clearance, in compliance with the Paperwork Reduction Act (44 U.S.C. chapter 35). Following is the package submitted to OMB since the last publication.

(For a copy of a package, call the FSA, Report Clearance Officer 202-252-5604)

JOBS Program Participant Data Collection—Form-FSA-108

The information received from this collection will provide the database to analyze and evaluate the JOBS program relevant to the degree in which States are assisting individuals and families to achieve self-sufficiency and reduce welfare dependency. *Respondents:* State or local governments; *Number of Respondents:* 51; *Frequency of Response:* 12; *Average Burden per Response:* 612 hours; *Estimated Annual Burden:* 1,224 hours.