

By direction of the Commission,  
Commissioner Wright not participating.  
**Donald S. Clark,**  
*Secretary.*

[FR Doc. 2013-21158 Filed 8-28-13; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day-13-13JQ]

**Agency Forms Undergoing Paperwork Reduction Act Review**

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call (404) 639-7570 or send an email to *omb@cdc.gov*. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

**Proposed Project**

Health Professional Application for Training (HPAT)—New —National Center for HIV/AIDS, Viral Hepatitis,

STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

**Background and Brief Description**

CDC/NCHHSTP is requesting OMB approval to collect data that will be used to monitor and evaluate performance of CDC funded grantees that offer Sexually Transmitted Disease (STD) and Human immunodeficiency virus (HIV) prevention training, training assistance, and capacity building assistance to physicians, nurses, disease intervention specialists, health educators and other public health professionals. Information collection approval is sought for three years.

CDC/NCHHSTP will use the Health Professional Application for Training (HPAT) for this data collection. This instrument was previously approved under OMB clearance #0920-0017 as a Participant Information Form, but was removed from that information collection request upon its most recent revision. The HPAT allows CDC grantees to use a single instrument when partnering with other Health and Human Services (HHS) funded training programs and does not duplicate information collection efforts. The HPAT will serve as the official training application form used for training activities conducted by the CDC-funded STD/HIV Prevention Training Centers’

(PTCs) and the HIV Capacity Building Assistance (CBAs) grantees who offer classroom and experiential training, web-based training, clinical consultation, and capacity building assistance to maintain and enhance the capacity of health care professionals to control and prevent STDs and HIV.

The HPAT will also be used to collect information from the training participants regarding their: (1) Occupations, professions, and functional roles; (2) principal employment settings; (3) location of their work settings; and (4) programmatic and population foci of their work. This data collection provides CDC with information to determine whether the training grantees are reaching their target audiences in terms of provider type, the types of organizations in which participants work, the focus of their work and the population groups and geographic areas served; the data collection is also used to triage and assign CBA provider requests.

The 7,400 respondents represent an average of the number of health professionals trained by the CBA and PTC grantees during the years 2010 and 2011. There are no costs to respondents other than their time.

It is estimated that this collection will involve a total of 617 annual burden hours.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Type of respondent	Form name	Number of respondents	Number responses per respondent	Average burden per response (in hours)
Healthcare Professionals .....	Health Professional Application for Training (HPAT) .....	7,400	1	5/60

**LeRoy Richardson,**  
*Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[60Day-13-0910]

**Proposed Data Collections Submitted for Public Comment and Recommendations**

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and

instruments, call 404-639-7570 or send comments to Leroy Richardson, 1600 Clifton Road, MS D-74, Atlanta, GA 30333 or send an email to *omb@cdc.gov*.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency’s estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should

be received within 60 days of this notice.

**Proposed Project**

Message Testing for Tobacco Communication Activities (OMB No. 0920–0910, exp. 1/31/2015)—Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

Tobacco use remains the leading preventable cause of death in the United States. Recent legislative developments highlight the importance of tobacco control—including the dissemination of appropriate tobacco control messages—in efforts to improve the nation’s health. These developments include the Prevention and Public Health Fund, established by the Affordable Care Act (ACA), which supports initiatives designed to reduce the health and financial burden of tobacco use through prevention and cessation approaches. An essential component of this initiative is a national campaign to increase awareness of the health consequences of tobacco use and exposure to secondhand smoke. The campaign is being planned and implemented by the Office on Smoking and Health (OSH) at the Centers for Disease Control and Prevention (CDC). OSH serves as a resource for tobacco and health information for the public, health professionals, various branches of government, and other interested groups.

In 2012, OSH obtained OMB approval of a generic clearance that established a unified information collection framework for the development of tobacco-related health messages, including messages related to the ACA-funded tobacco education campaign

(Message Testing for Tobacco Communication Activities (MTTCA), OMB No. 0920–0910, exp. 1/31/2015). Since that time, CDC has employed the MTTCA clearance to collect information about smokers’ and non-smokers’ attitudes and perceptions, and to pre-test draft messages and materials for clarity, salience, appeal, and persuasiveness. A variety of information collection strategies are supported through this mechanism, including in-depth interviews, in-person focus groups, online focus groups, computer-assisted, in-person, or telephone interviews, and online surveys. CDC requests OMB approval for each data collection by submitting an Information Collection Request that describes project purpose, use, and methodology. CDC’s authority to collect information for public health purposes is provided by the Public Health Service Act (41 U.S.C. 241) Section 301.

CDC plans to revise the generic MTTCA clearance, which was initially approved with the following estimates: 5,775 annualized burden hours and 14,974 annualized responses. The initial estimates were based on the number of respondents who were likely to participate in information collection activities such as focus groups, interviews, and surveys. The initial estimates did not account for specific screening activities that are necessary to identify respondents from key target audiences. As a result, the initial MTTCA clearance underestimated the total number of respondents involved in CDC-sponsored information collection. The planned revision will adjust for screening and recruitment by allocating 20,000 additional respondents, and 667 additional burden hours, to the annualized estimates.

The generic MTTCA clearance will continue to support the development

and testing of tobacco-related health messages for the general public and subpopulations. For example, screening activities may be conducted to involve individuals who are Lesbian, Gay, Bisexual, and Transgender (LGBT); individuals who are active military or veterans; individuals who suffer from depression and/or anxiety, and individuals who are English-speaking Hispanics. CDC may also request information about smoking status (e.g., current non-smoker, current smoker, ex-smoker). Screening results will be used to segment target audiences, interpret findings, and explore the development of tailored messages for population subgroups. The estimated burden per response for screening is 2–3 minutes.

CDC will continue to use the MTTCA clearance to develop and test messages and materials for current and future phases of the ACA-funded media campaign, OSH’s ongoing programmatic initiatives including the Media Campaign Resource Center (MCRC) and reports from the Office of the Surgeon General, and collaborative efforts within CDC. The MTTCA generic clearance may also be used to facilitate the development of tobacco-related health communications of interest to CDC and other federal partners, including the Food and Drug Administration (FDA), the Substance Abuse and Mental Health Services Administration (SAMHSA), the National Institutes of Health (NIH), and the National Cancer Institute (NCI).

The revision request does not affect the current expiration date of January 31, 2015. The estimated annualized number of responses will increase from 14,974 to 34,974 and the estimated annualized burden hours will increase from 5,775 to 6,442. Participation is voluntary and there are no costs to respondents other than their time.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Type of respondents	Data collection method	Number of respondents	Number of responses per respondent	Average burden per response	Total burden (in hours)
General Public and Special Populations.	Screening and Recruitment .....	20,000	1	2/60	667
	In-depth Interviews (In Person, telephone, etc.).	67	1	1	67
	Focus Groups (In Person) .....	160	1	1.5	240
	Focus Groups (Online) .....	120	1	1	120
	Short Surveys (Online, Bulletin Board, etc.).	6,001	1	10/60	1,000
	Medium Surveys (Online) .....	7,334	1	25/60	3,056
	In-depth Surveys (Online) .....	1,292	1	1	1,292
<b>Total .....</b>	.....	<b>34,974</b>	.....	.....	<b>6,442</b>

**Leroy A. Richardson,**  
Chief, Information Collection Review Office,  
Office of Scientific Integrity, Office of the  
Associate Director for Science, Office of the  
Director, Centers for Disease Control and  
Prevention (CDC).

[FR Doc. 2013-21048 Filed 8-28-13; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Center for Scientific Review; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Member Conflict: Population Sciences and Epidemiology.

*Date:* September 19, 2013.

*Time:* 12:30 p.m. to 3:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Fungai Chanetsa, MPH, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 3135, MSC 7770, Bethesda, MD 20892, 301-408-9436, [fungai.chanetsa@nih.hhs.gov](mailto:fungai.chanetsa@nih.hhs.gov).

*Name of Committee:* Molecular, Cellular and Developmental Neuroscience Integrated Review Group; Neurotransmitters, Receptors, and Calcium Signaling Study Section.

*Date:* September 26, 2013.

*Time:* 8:00 a.m. to 7:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Lorien Hotel & Spa, 1600 King Street, Alexandria, VA 22314.

*Contact Person:* Peter B Guthrie, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4182, MSC 7850, Bethesda, MD 20892, (301) 435-1239, [guthriep@csr.nih.gov](mailto:guthriep@csr.nih.gov).

*Name of Committee:* Oncology 2—Translational Clinical Integrated Review Group; Drug Discovery and Molecular Pharmacology Study Section.

*Date:* September 30, 2013.

*Time:* 8:00 a.m. to 6:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Renaissance Seattle Hotel, 515 Madison Street, Seattle, WA 98104.

*Contact Person:* Jeffrey Smiley, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 6194, MSC 7804, Bethesda, MD 20892, 301-594-7945, [smileyja@csr.nih.gov](mailto:smileyja@csr.nih.gov).

*Name of Committee:* Healthcare Delivery and Methodologies Integrated Review Group; Health Services Organization and Delivery Study Section.

*Date:* September 30–October 1, 2013.

*Time:* 8:30 a.m. to 5:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Embassy Suites at the Chevy Chase Pavilion, 4300 Military Road NW., Washington, DC 20015.

*Contact Person:* Jacinta Bronte-Tinkew, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 3164, MSC 7770, Bethesda, MD 20892, (301) 806-0009, [brontetinkewjm@csr.nih.gov](mailto:brontetinkewjm@csr.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: August 23, 2013.

**Anna Snouffer,**

Deputy Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2013-21026 Filed 8-28-13; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Cancer Institute; Notice of Meeting

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of a meeting of the National Cancer Institute Clinical Trials and Translational Research Advisory Committee.

The meeting will be open to the public, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

*Name of Committee:* National Cancer Institute Clinical Trials and Translational Research Advisory Committee.

*Date:* November 06, 2013.

*Time:* 9:00 a.m. to 4:00 p.m.

*Agenda:* Strategic Discussion of NCI's Clinical and Translational Research Programs.

*Place:* National Institutes of Health, Building 31, C-Wing, 6th Floor, 31 Center Drive, Conference Rooms 10, Bethesda, MD 20892.

*Contact Person:* Sheila A. Prindiville, MD, MPH, Director, Coordinating Center for Clinical Trials, National Cancer Institute, National Institutes of Health, 9609 Medical Center Drive Room 6W136, Rockville, MD 20850, 240-276-6173, [prindivs@mail.nih.gov](mailto:prindivs@mail.nih.gov).

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

In the interest of security, NIH has instituted stringent procedures for entrance onto the NIH campus. All visitor vehicles, including taxicabs, hotel, and airport shuttles will be inspected before being allowed on campus. Visitors will be asked to show one form of identification (for example, a government-issued photo ID, driver's license, or passport) and to state the purpose of their visit.

Information is also available on the Institute's/Center's home page: <http://deainfo.nci.nih.gov/advisory/ctac/ctac.htm>, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: August 23, 2013.

**Melanie J. Gray,**

Program Analyst, Office of Federal Advisory Committee Policy.

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