

- of Federal Claims No: 13-0804V
32. Patricia Okai, Oak Forrest, Illinois, Court of Federal Claims No: 13-0805V
 33. Kimberly Bowman, Staten Island, New York, Court of Federal Claims No: 13-0807V
 34. Jessica and Ryan Dean on behalf of Iris Dean, Phoenix, Arizona, Court of Federal Claims No: 13-0808V
 35. Mavis E. Luther, Le Mars, Iowa, Court of Federal Claims No: 13-0810V
 36. Tracy Fox, Southampton, Pennsylvania, Court of Federal Claims No: 13-0813V
 37. Leona Faye Thompson, Marshall County, Alabama, Court of Federal Claims No: 13-0815V
 38. Paul Grabarek, Chicago, Illinois, Court of Federal Claims No: 13-0817V
 39. Alanna Sullivan Barker, Littleton, Colorado, Court of Federal Claims No: 13-0818V
 40. Lisa Ann Hambleton, Tiffin, Ohio, Court of Federal Claims No: 13-0819V
 41. Cathy A. Liva, Honolulu, Hawaii, Court of Federal Claims No: 13-0820V
 42. Henry Simmons, Boston, Massachusetts, Court of Federal Claims No: 13-0825V
 43. Ronniesha Thomas, Waterbury, Connecticut, Court of Federal Claims No: 13-0827V
 44. Lisa Jones, Washington, District of Columbia, Court of Federal Claims No: 13-0828V
 45. David D. Leoce, Clermont, Florida, Court of Federal Claims No: 13-0829V
 46. Robin Harrison, Cincinnati, Ohio, Court of Federal Claims No: 13-0831V
 47. Robert N. Jacobson, Putnam, Connecticut, Court of Federal Claims No: 13-0832V
 48. Demetrice Bell-O'Neal on behalf of A.O., Sarasota, Florida, Court of Federal Claims No: 13-0835V
 49. Charles Kiklis, Somerville, Massachusetts, Court of Federal Claims No: 13-0836V
 50. Mae Miller, Pittsburgh, Pennsylvania, Court of Federal Claims No: 13-0837V
 51. Brad Colvis, Sacramento, California, Court of Federal Claims No: 13-0841V
 52. Kevin M. Meaney, Naples, Florida, Court of Federal Claims No: 13-0842V
 53. Thomas O'Keeffe, Falmouth, Massachusetts, Court of Federal Claims No: 13-0847V
 54. Debbie Harris, Boston, Massachusetts, Court of Federal Claims No: 13-0848V
 55. Kristin Cooper and Arthur Writsel on behalf of SW., Boston, Massachusetts, Court of Federal Claims No: 13-0849V
 56. Jeffrey Faucher and Filomena Faucher on behalf of C.F., Boston, Massachusetts, Court of Federal Claims No: 13-0850V
 57. Seechel Patel, Coral Springs, Florida, Court of Federal Claims No: 13-0851V
 58. Adam Luna on behalf of E.L., Court of Federal Claims No: 13-0852V
 59. Gary Abdulla, Boston, Massachusetts, Court of Federal Claims No: 13-0853V
 60. Douglas Andor, Chicago, Illinois, Court of Federal Claims No: 13-0858V
 61. Aaron Sandoval, Phoenix, Arizona, Court of Federal Claims No: 13-0860V

[FR Doc. 2013-28889 Filed 12-2-13; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; 60-Day Comment Request; Rapid Throughput Standardized Evaluation of Transmissible Risk for Substance Use Disorder in Youth

SUMMARY: 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 National Institute on Drug Abuse (NIDA), the National Institutes of Health (NIH), will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) 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; (2) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical or other technological collection techniques or other forms of information technology.

To Submit Comments and For Further Information: To obtain a copy of the data collection plans and instructions, contact Dr. Augie Diana, Health Scientist Administrator, Prevention Research Branch, Division of Epidemiology, Services, and Prevention Research, NIDA, NIH, 6001 Executive Boulevard, Room 5163, Bethesda, MD 20892, or call non-toll-free number (301) 443-1942 or Email your request, including your address to: dianaa@nida.nih.gov. Formal request for additional plans and instruments must be requested in writing.

DATES: *Comments Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

Proposed Collection: Rapid Throughput Standardized Evaluation of Transmissible Risk for Substance Use Disorder in Youth, 0925-New, National

Institute on Drug Abuse (NIDA), National Institutes of Health (NIH).

Need and Use of Information Collection: This study will finalize the development of the Transmissible Liability Index (TLI), thereby advancing the TLI from a research tool to a practical instrument. The TLI is a psychometric tool for detecting youth at elevated risk for substance use disorder (SUD). The TLI, a web-based platform for assessing risk of SUD, is a highly efficient tool both in terms of the limited time commitment required as well as its low cost. The inexpensive and high efficiency of the TLI for identifying youths in need of prevention, and the strong cost-benefits to society for SUD prevention, portend strong demand for use in a variety of populations including family and social services, schools, mental health facilities, and youth protection agencies. To transform the TLI prototype into a practical instrument, three core tasks remain: (1) Standardization on a sample (N=5,000) that is representative of the general population to generate norms that are specific to age, gender and ethnicity; (2) Construct validity analysis using standard parametric modeling techniques to show that heritability accounts for the major portion of variance on TLI scores; the sample (150 identical and 150 fraternal twins) will be representative of the same general population characteristics identified above; and (3) Psychometric analysis of validity and reliability based on the above data. Validating the TLI furthers NIDA's mission by legitimating the tool for exploring the attitudes and social predictors of addictive behaviors with the intention of reducing or eliminating drug-taking behavior. This research is squarely within NIDA's mission of research on drug abuse and addiction, as well as its focus on ensuring the rapid and effective dissemination and use of the results to significantly improve efforts to stem substance use disorder. To move the TLI from the research domain to practical use through commercial dissemination, the research and development team ("the R&D team") needs to satisfy professional quality standards consistent with American Psychological Association regulations. To satisfy those standards, the R&D team must demonstrate the reliability and internal validity of the TLI against existing standardized psychometric studies for youth populations, ages 14 to 18. The 14-to-18 year old age range was selected because it encompasses the years typically spent in high school, which are known to be the timeframe when substance use is

likely to begin and accelerates, often leading to substance abuse disorder. Notably, the peak period for the manifestation of cannabis-use disorder is age 18–19, and the past-year-prevalence for alcohol-use disorder is age 20–22. The TLI is designed to identify the propensity for these and other substance abuse prior to manifestation; as such, collecting data from the high school age group (14–18

years old) is critical to identifying at-risk youths for the purposes of early intervention. Thus, the TLI must be tested with data collected from youth populations, ages 14 to 18, comparable to those in existing studies. Moreover, the R&D team must provide psychometric external validation for the TLI through data collection from sets of identical and fraternal twins. Psychometric analyses are required to

show that the TLI performs according to expectations. Accordingly, studies will be performed on the collected information to demonstrate i) construct, ii) discriminative, iii) concurrent, and iv) predictive validity.

OMB approval is requested for 2 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 3,083.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent: individuals and households	Number of respondents	Responses per respondent	Average burden per response (in hours)	Annual hour burden
Parent of 14–17 year-old students: Consent Form	5,000	1	1/60	83
14–18 year-old students: School Survey (TLI)		1	30/60	2,500
14–18 year-old youths or their parents: Consent Form	600	1	1/60	10
14–18 year-old youths: Twins Survey (Demo/D&A)		1	10/60	100
14–18 year-old youths: Twins Survey (Dysregulation)		1	10/60	100
14–18 year-old youths: Twins Survey (TLI)		1	29/60	290

Dated: November 20, 2013.

Glenda J. Conroy,

Executive Officer (OM Director), NIDA, NIH.

[FR Doc. 2013–28985 Filed 12–2–13; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Neurological Disorders and Stroke; Notice of Closed Meeting

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 meeting.

The meeting 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 materials, 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: National Institute of Neurological Disorders and Stroke, Special Emphasis Panel, Stroke Trials Network-NDMC.

Date: December 18, 2013.

Time: 9:00 a.m. to 2:30 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Neuroscience Center, 6001 Executive

Boulevard, Rockville, MD 20852, (Telephone Conference Call).

Contact Person: Natalia Strunnikova, Ph.D., Scientific Review Officer, Scientific Review Branch, Division of Extramural Research, NINDS, NIH, NSC, 6001 Executive Blvd., Suite 3208, MSC 9529, Bethesda, MD 20892–9529, 301–402–0288, *Natalia.Strunnikova@nih.gov.*

(Catalogue of Federal Domestic Assistance Program Nos. 93.853, Clinical Research Related to Neurological Disorders; 93.854, Biological Basis Research in the Neurosciences, National Institutes of Health, HHS)

Dated: November 26, 2013.

Carolyn Baum,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2013–28854 Filed 12–2–13; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Diabetes and Digestive and Kidney Diseases; Notice of Closed Meeting

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 meeting.

The meeting 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: National Institute of Diabetes and Digestive and Kidney Diseases Special Emphasis Panel, PAR13–228: Biomarkers for Diabetes, Digestive, Kidney and Urologic Diseases using Repository Biosamples.

Date: February 20, 2014.

Time: 2:00 p.m. to 5:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Two Democracy Plaza, 6707 Democracy Boulevard, Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Najma Begum, Ph.D., Scientific Review Officer, Review Branch, DEA, NIDDK, National Institutes of Health, Room 749, 6707 Democracy Boulevard, Bethesda, MD 20892–5452, (301) 594–8894, *begumn@nidDK.nih.gov.*

(Catalogue of Federal Domestic Assistance Program Nos. 93.847, Diabetes, Endocrinology and Metabolic Research; 93.848, Digestive Diseases and Nutrition Research; 93.849, Kidney Diseases, Urology and Hematology Research, National Institutes of Health, HHS)

Dated: November 26, 2013.

David Clary,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2013–28851 Filed 12–2–13; 8:45 am]

BILLING CODE 4140–01–P