

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day-17-17ABU]

**Agency Forms Undergoing Paperwork Reduction Act Review**

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled *Zika Reproductive Health Call-Back Survey (ZRHCS), Puerto Rico, 2017* to the Office of Management and Budget (OMB) for review and approval. CDC previously published a “Proposed Data Collection Submitted for Public Comment and Recommendations” notice on April 27, 2017 to obtain comments from the public and affected agencies. CDC received one general comment related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other

technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639-7570 or send an email to *omb@cdc.gov*. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW., Washington, DC 20503 or by fax to (202) 395-5806. Provide written comments within 30 days of notice publication.

**Proposed Project**

*Zika Reproductive Health Call-Back Survey (ZRHCS), Puerto Rico, 2017—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).*

*Background and Brief Description*

In May 2015, the World Health Organization reported the first local mosquito born transmission of Zika virus in the Western Hemisphere, with autochthonous cases identified in Brazil. In response to the Zika virus outbreak, and evidence that Zika virus infection during pregnancy is a cause microcephaly and other adverse pregnancy and infant outcomes, CDC activated its Emergency Operations Center to its highest level on February 8, 2016 and continues to engage in Zika virus operations.

To date, Puerto Rico has reported the highest number of Zika virus cases of any area within the United States, with the Puerto Rico Department of Health (PRDH) reporting more than 40,000 cases of Zika virus infection, including 3,757 cases in pregnant women. Given the adverse pregnancy and birth outcomes associated with Zika virus

infection during pregnancy and the current lack of a vaccine, it is important for women who are at risk of becoming pregnant unintentionally, or who are planning a pregnancy, to be knowledgeable about the potential outcomes of Zika virus infection. In addition, it is important for them to practice effective pregnancy prevention behaviors when they do not desire pregnancy and to prevent mosquito-borne and sexual transmission of Zika virus.

This is a request for a new information collection. CDC requests one additional year of clearance to continue the Emergency information collection, “Emergency Zika Package: Zika Reproductive Health Survey, Puerto Rico, 2017,” approved by the Office of Management and Budget (OMB) in July 2017 (OMB Control Number 0920-1188).

The objective of this assessment is to collect current information on various aspects of Zika knowledge and prevention behaviors from a representative sample of adult women in Puerto Rico. Information will be collected on the following topics: (1) Knowledge of and adherence to mosquito prevention strategies, and (2) use of condoms to minimize the risk of sexual transmission of Zika, and (3) behaviors practiced by women who wish to avoid or delay pregnancies that help them prevent unintended pregnancies that might otherwise be affected by Zika. CDC will rapidly summarize and analyze the information collected for the Puerto Rico Department of Health to determine the need for further refinements in educational messaging and allocation of resources, as established during the first season of the Zika outbreak. There is no cost to respondents other than the time to participate. The total estimated annual burden hours are 117.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Women aged 18–49 years who completed the main PR–BRFSS survey.	Recruitment text .....	645	1	1/60
Women aged 18–49 years who completed the main PR–BRFSS survey agree to participate in the call-back survey.	Call-back Survey and Consent.	581	1	10/60
PR–BRFSS Coordinators .....	Data Submission Layout .....	1	3	3

**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.

[FR Doc. 2017-19957 Filed 9-19-17; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day-17-1122; Docket No. CDC-2017-  
0070]

#### Proposed Data Collection Submitted for Public Comment and Recommendations

**AGENCY:** Centers for Disease Control and  
Prevention (CDC), Department of Health  
and Human Services (HHS).

**ACTION:** Notice with comment period.

**SUMMARY:** The Centers for Disease  
Control and Prevention (CDC), as part of  
its continuing efforts to reduce public  
burden and maximize the utility of  
government information, invites the  
general public and other Federal  
agencies to take this opportunity to  
comment on proposed and/or  
continuing information collections, as  
required by the Paperwork Reduction  
Act of 1995. This notice invites  
comment on reinstatement of the data  
collection project titled "Congenital  
Heart Surveillance to Recognize  
Outcomes, Needs and well-being  
(CHSTRONG)." CDC collects  
CHSTRONG data to provide public  
health question insight, aid in the  
development of services, and inform for  
the proper allocation of resources to  
improve long-term health and  
wellbeing.

**DATES:** Written comments must be  
received on or before November 20,  
2017.

**ADDRESSES:** You may submit comments,  
identified by Docket No. CDC-2017-  
0070 by any of the following methods:

- *Federal eRulemaking Portal:*  
*Regulations.gov.* Follow the instructions  
for submitting comments.
- *Mail:* Leroy A. Richardson,  
Information Collection Review Office,  
Centers for Disease Control and  
Prevention, 1600 Clifton Road NE., MS-  
D74, Atlanta, Georgia 30329.

*Instructions:* All submissions received  
must include the agency name and  
Docket Number. All relevant comments  
received will be posted without change  
to *Regulations.gov*, including any  
personal information provided. For

access to the docket to read background  
documents or comments received, go to  
*Regulations.gov*.

*Please note: All public comment  
should be submitted through the  
Federal eRulemaking portal  
(Regulations.gov) or by U.S. mail to the  
address listed above.*

**FOR FURTHER INFORMATION CONTACT:** To  
request more information on the  
proposed project or to obtain a copy of  
the information collection plan and  
instruments, contact Leroy A.  
Richardson, Information Collection  
Review Office, Centers for Disease  
Control and Prevention, 1600 Clifton  
Road NE., MS-D74, Atlanta, Georgia  
30329; phone: 404-639-7570; Email:  
*omb@cdc.gov*.

**SUPPLEMENTARY INFORMATION:** Under the  
Paperwork Reduction Act of 1995 (PRA)  
(44 U.S.C. 3501-3520), Federal agencies  
must obtain approval from the Office of  
Management and Budget (OMB) for each  
collection of information they conduct  
or sponsor. In addition, the PRA also  
requires Federal agencies to provide a  
60-day notice in the **Federal Register**  
concerning each proposed collection of  
information, including each new  
proposed collection, each proposed  
extension of existing collection of  
information, and each reinstatement of  
previously approved information  
collection before submitting the  
collection to OMB for approval. To  
comply with this requirement, we are  
publishing this notice of a proposed  
data collection as described below.

*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; (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; and (e) estimates of capital  
or start-up costs and costs of operation,  
maintenance, and purchase of services  
to provide information. Burden means  
the total time, effort, or financial  
resources expended by persons to  
generate, maintain, retain, disclose or  
provide information to or for a Federal  
agency. This includes the time needed  
to review instructions; to develop,  
acquire, install and utilize technology  
and systems for the purpose of  
collecting, validating and verifying  
information, processing and

maintaining information, and disclosing  
and providing information; to train  
personnel and to be able to respond to  
a collection of information, to search  
data sources, to complete and review  
the collection of information; and to  
transmit or otherwise disclose the  
information.

#### Proposed Project

Congenital Heart Survey To Recognize  
Outcomes, Needs, and well-being (CH  
STRONG) (OMB Control Number: 0920-  
1122, Expiration 07/31/2017)—  
Reinstatement with change—National  
Center on Birth Defects and  
Developmental Disabilities (NCBDDD),  
Centers for Disease Control and  
Prevention (CDC).

#### Background and Brief Description

Congenital heart defects (CHDs) are  
the most common type of structural  
birth defects, affecting approximately 1  
in 110 live-born children. In prior  
decades, many CHDs were considered  
fatal during infancy or childhood, but  
with tremendous advances in pediatric  
cardiology and cardiac surgery, at least  
85% of patients now survive to  
adulthood and there are approximately  
1.5 million adults with CHD living in  
the United States.

With vast declines in mortality from  
pediatric heart disease over the past 30  
years, it is vital to evaluate long-term  
outcomes and quality of life issues for  
adults with CHD. However, U.S. data on  
long-term outcomes, quality of life  
issues, and comorbidities of adults born  
with CHD are lacking. U.S. data is  
needed to provide insight into the  
public health questions that remain for  
this population and to develop services  
and allocate resources to improve long-  
term health and wellbeing.

The initial request for this project was  
one year, but there was a delay in  
recruitment that results in a change in  
the recruitment process. Therefore, an  
additional 24 months is being requested.  
The three sites decided to conduct more  
intensive and time-consuming tracking  
and tracing to identify more accurate  
contact information for all eligible  
individuals. In addition to more  
intensive tracking and tracing, the sites  
decided to send recruitment materials in  
batches rather than all at once. This  
ensured that problems with the  
recruitment process were caught  
immediately and could be modified in  
subsequent rounds of recruitment. Due  
to these delays and changes in  
recruitment process, CH STRONG data  
collection is expected to last an  
additional 24 months and conclude two  
years after receiving an extension from  
OMB.