## PICOTS (POPULATIONS, INTERVENTIONS, COMPARATORS, OUTCOMES, TIMING, SETTINGS)-Continued

PICOTS	Inclusion	Exclusion
Comparators	<ul> <li>Studies comparing eligible interventions to other eligible interventions or other management approaches (no intervention; waitlist; delayed intervention [radi- ation to be given at a later time]; placebo; observation, watchful waiting, or sur- veillance; supportive care, palliative care, or steroid treatment; usual care; sys- temic therapy, immunotherapy, or chemotherapy; WBRT; SRS; surgery; dif- ferent dose fractionation schedules; different radiation therapy approaches; dif- ferent intervention combinations).</li> </ul>	<ul> <li>Studies comparing only non-interven- tion features (<i>e.g.,</i> comparing two pa- tient subgroups).</li> </ul>
Outcomes	<ul> <li>Studies reporting on patient health outcomes, such as</li></ul>	<ul> <li>Studies reporting only on therapy acceptance, provider variables (<i>e.g.</i>, provider knowledge), organizational measures (<i>e.g.</i>, wait times), treatment utilization, or costs.</li> </ul>
Timing	<ul> <li>symptom burden, health status or health-related quality of life;         <ul> <li>functional status (physical, affective or neurocognition functions);.</li> <li>or adverse events, including acute and late toxicity (<i>e.g.</i>, radiation necrosis, hair loss, or nausea).</li> </ul> </li> <li>Patient health outcomes may include patient- and caregiver-reported outcomes as well as clinical, physician assessed, and hospital record outcomes and measures may include quantitative as well as qualitative reports and no restrictions will be imposed regarding the specific measurement, metric, aggregation method (<i>e.g.</i>, mean, proportion), or timepoint.</li> <li>Studies will not be limited by the duration of the intervention or the length of</li> </ul>	<ul> <li>No exclusions apply.</li> </ul>
0	follow up.	
Setting(s)	<ul> <li>Inpatient and outpatient settings</li> <li>Studies may include national and international settings</li> </ul>	<ul> <li>Studies in resource-limited settings such as developing countries will be reviewed for comparability with US settings.</li> </ul>
Study design	<ul> <li>All KQs</li> <li>RCTs</li> <li>Studies with results published in clinicaltrial.gov will be included regardless of whether a journal publication is available.</li> <li>English-language publications</li> <li>KQ4</li> </ul>	<ul> <li>Studies without comparator (<i>e.g.</i>, case studies).</li> <li>Evaluations reported only in abbreviated format (<i>e.g.</i>, in a conference abstract) and that are not registered in a research registry.</li> </ul>
	<ul> <li>Prospective experimental and observational studies (including non-ran- domized clinical trials and cohort studies comparing 2 or more intervention cohorts) of 200 patients or more or those that report a statistical power analysis for adverse events.</li> </ul>	<ul> <li>Studies exclusively reported in non- English publications will be retained as a resource but will not be eligible for inclusion.</li> <li>Systematic reviews will be retained for reference mining.</li> </ul>

Dated: January 29, 2020. Virginia L. Mackay-Smith, Associate Director, Office of the Director, AHRQ. [FR Doc. 2020–01996 Filed 1–31–20; 8:45 am] BILLING CODE 4160–90–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

### Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, 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, and the Determination of the Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, CDC, pursuant to Public Law 92–463. 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: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP)– SIP20–008, Validation of Self-Reported Vaccination among Adults.

*Date:* May 5, 2020.

*Time:* 11:00 a.m.–6:00 p.m., EDT. *Place:* Teleconference.

*Agenda:* To review and evaluate grant applications.

FOR FURTHER INFORMATION CONTACT: Jaya Raman, Ph.D., Scientific Review Officer, CDC, 4770 Buford Highway, Mailstop F80, Atlanta, Georgia 30341, Telephone: (770) 488–6511, *kva5@cdc.gov.* 

The Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, 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.

#### Kalwant Smagh,

Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention. [FR Doc. 2020–01964 Filed 1–31–20; 8:45 am]

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# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

#### Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as