

Dated: April 22, 2020.  
**Lawrence A. Tabak,**  
*Principal Deputy Director, National Institutes of Health.*  
 [FR Doc. 2020-09138 Filed 4-29-20; 8:45 am]  
**BILLING CODE 4140-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**Proposed Collection; 60-Day Comment Request; Bench to Bedside: Integrating Sex and Gender To Improve Human Health & Sex as a Biological Variable: A Primer (Office of the Director)**

**AGENCY:** National Institutes of Health, HHS.  
**ACTION:** Notice.

**SUMMARY:** In compliance with the requirement of the Paperwork Reduction Act of 1995 to provide opportunity for public comment on proposed data collection projects, the National Institutes of Health Office of Research on Women’s Health (ORWH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

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

**FOR FURTHER INFORMATION CONTACT:** To obtain a copy of the data collection plans and instruments, submit comments in writing, or request more

information on the proposed project, contact: Dr. Chyren Hunter, Associate Director, Basic and Translational Research, 6707 Democracy Blvd., Room 437, Bethesda, Maryland 20817 or call non-toll-free number (301) 402-1770 or email your request to *ORWHinfo@mail.nih.gov*. Formal requests for additional plans and instruments must be requested in writing.

**SUPPLEMENTARY INFORMATION:** Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 requires: written comments and/or suggestions from the public and affected agencies are invited to address 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; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize’s 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.

*Proposed Collection Title:* Bench to Bedside: Integrating Sex and Gender to Improve Human Health & Sex as a Biological Variable: A Primer, 0925-NEW, expiration date XX/XX/XXXX, Office of Research on Women’s Health (ORWH), Office of the Director (OD), National Institutes of Health (NIH).

*Need and Use of Information Collection:* Bench to Bedside: Integrating Sex and Gender to Improve Human Health” is an online course developed by ORWH, the FDA Office of Women’s Health, and other non-federal subject matter experts. “Sex as a Biological Variable: A Primer” is an online course developed by ORWH, NIGMS, and other non-federal subject matter experts. Together, these two courses will provide learners a rationale for the study of biological differences between the sexes, the impact of sex and gender difference on illness, guidance on incorporating the NIH policy on sex as a biological variable (SABV) into studies, and an exploration of sex- and gender-related differences in key disease areas. The Bench to Bedside course will also offer free continuing medical education credits.

In conjunction with these two courses, ORWH will collect information through registration information and surveys (knowledge checks, attitude assessments, and course evaluations). The information collected will be used in the following ways: 1. To assess uptake and learning of concepts in each lesson; 2. To identify demographic trends across learners in order to inform targeted outreach 3. To assess effectiveness of course materials; and 4. To identify areas of focus for future course improvement, modifications, and expansion.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 970.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Form name	Type of respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hours
<b>Bench to Bedside: Immunology Module</b>					
Attitude survey pre-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module completion .....	Private sector .....	25	1	1	25
	Federal government .....	60	1	1	60
	Individual .....	15	1	1	15
Knowledge check .....	Private sector .....	25	1	10/60	4
	Federal government .....	60	1	10/60	10
	Individual .....	15	1	10/60	3
Attitude survey post-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module evaluation .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1

## ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Form name	Type of respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hours
<b>Bench to Bedside: Cardiovascular Module</b>					
Attitude survey pre-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module completion .....	Private sector .....	25	1	1	25
	Federal government .....	60	1	1	60
	Individual .....	15	1	1	15
Knowledge check .....	Private sector .....	25	1	10/60	4
	Federal government .....	60	1	10/60	10
	Individual .....	15	1	10/60	3
Attitude survey post-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module evaluation .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
<b>Bench to Bedside: Pulmonary Module</b>					
Attitude survey pre-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module completion .....	Private sector .....	25	1	1	25
	Federal government .....	60	1	1	60
	Individual .....	15	1	1	15
Knowledge check .....	Private sector .....	25	1	10/60	4
	Federal government .....	60	1	10/60	10
	Individual .....	15	1	10/60	3
Attitude survey post-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module evaluation .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
<b>Bench to Bedside: Neurology Module</b>					
Attitude survey pre-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module completion .....	Private sector .....	25	1	1	25
	Federal government .....	60	1	1	60
	Individual .....	15	1	1	15
Knowledge check .....	Private sector .....	25	1	10/60	4
	Federal government .....	60	1	10/60	10
	Individual .....	15	1	10/60	3
Attitude survey post-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module evaluation .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
<b>Bench to Bedside: Endocrinology Module</b>					
Attitude survey pre-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module completion .....	Private sector .....	25	1	1	25
	Federal government .....	60	1	1	60
	Individual .....	15	1	1	15
Knowledge check .....	Private sector .....	25	1	10/60	4
	Federal government .....	60	1	10/60	10
	Individual .....	15	1	10/60	3
Attitude survey post-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module evaluation .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Form name	Type of respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hours
	Individual .....	15	1	5/60	1
<b>Bench to Bedside: Mental Health Module</b>					
Attitude survey pre-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module completion .....	Private sector .....	25	1	1	25
	Federal government .....	60	1	1	60
	Individual .....	15	1	1	15
Knowledge check .....	Private sector .....	25	1	10/60	4
	Federal government .....	60	1	10/60	10
	Individual .....	15	1	10/60	3
Attitude survey post-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Module evaluation .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
<b>Sex as a Biological Variable: A Primer</b>					
Attitude survey pre-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Course completion .....	Private sector .....	25	1	1	25
	Federal government .....	60	1	1	60
	Individual .....	15	1	1	15
Attitude survey post-test .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Course evaluation .....	Private sector .....	25	1	5/60	2
	Federal government .....	60	1	5/60	5
	Individual .....	15	1	5/60	1
Total .....		100	3400		970

Dated: April 22, 2020.  
**Lawrence A. Tabak**,  
*Principal Deputy Director, National Institutes of Health.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Institute of Dental & Craniofacial Research; 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. 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:* NIDCR Special Grants Review Committee.

*Date:* June 18–19, 2020.

*Time:* 9:00 a.m. to 5:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institute of Dental and Craniofacial Research, National Institutes of Health, 6701 Democracy Boulevard, Room 672, Bethesda, MD 20892 (Virtual Meeting).

*Contact Person:* Latarsha J. Carithers, Scientific Review Officer, Scientific Review Branch, National Institute of Dental and Craniofacial Research, National Institutes of Health, 6701 Democracy Boulevard, Room 672, Bethesda, MD 20892, 301-594-4859, [latarsha.carithers@nih.gov](mailto:latarsha.carithers@nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.121, Oral Diseases and Disorders Research, National Institutes of Health, HHS)

Dated: April 27, 2020.  
**Melanie J. Pantoja**,  
*Program Analyst, Office of Federal Advisory Committee Policy.*  
 [FR Doc. 2020-09245 Filed 4-29-20; 8:45 am]  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Institute of Allergy and Infectious Diseases; 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. The grant applications and the discussions could disclose confidential trade secrets or commercial