

PICOTS (POPULATIONS, INTERVENTIONS, COMPARATORS, OUTCOMES, TIMING, AND SETTING)—Continued

KQ1	Inclusion	Exclusion
Outcome Timing	Post-operative period ≤3 months subdivided into 72 hours or less; >72 hours or discharge up to <30 days; 30 days up to ≤3 months.	Other timing.
Setting	Post-operative period 3–12 months. Perioperative (inpatient or outpatient) setting for intervention.	Nerve blocks performed in the outpatient clinic.
Study design	Perioperative and all follow-up settings for outcomes. Randomized controlled trials (RCTs). Minimum sample size per arm of ≥30 participants. If a particular intervention/comparator is not represented in the studies of 30/arm or greater, we will include studies of smaller size for that unique intervention/comparator.	Nerve blocks performed outside of the preoperative day-of-surgery to the 24-hours postoperative.
Publications	English-only peer-reviewed publications from 2013. (Consistent with other current ASA systematic reviews on regional anesthesia.)	Non-randomized, observational, non-controlled study designs, cross-sectional, prevalence, qualitative, case reports, opinions/letters, pilot studies, feasibility studies. Studies with a sample size <30 participants analyzed in any arm. Comments, editorials, and letters.

* EMERGENCY—A surgical, therapeutic, or diagnostic procedure that cannot be delayed without causing a significant risk of death or permanent impairment. *Note:* The American Society of Anesthesiologists (ASA) Physical Status should include “E”. The designation of a procedure as an emergency is determined by a surgeon and/or an anesthesiologist.

URGENT—A surgical, therapeutic, or diagnostic procedure that must be performed to prevent death or permanent impairment but that can be delayed. *Note:* The procedure may be delayed to allow for medical optimization of the patient or to permit better availability of resources (e.g., personnel or equipment).

ELECTIVE—A surgical, therapeutic, or diagnostic procedure that can be performed at any time or date with an agreement between the surgeon and the patient.

Dated: May 22, 2024.

Marquita Cullom,

Associate Director.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Solicitation of Nominations for Appointment to the Advisory Committee to the Director, Centers for Disease Control and Prevention; Notice of Extension

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

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), is seeking nominations for membership on the Advisory Committee to the Director, Centers for Disease Control and Prevention (ACD, CDC). The ACD, CDC consists of up to 15 experts knowledgeable in areas pertinent to the CDC mission, such as public health, global health, health disparities, biomedical research, and other fields, as applicable.

DATES: The deadline for submission of nominations for membership on the ACD, CDC published May 8, 2024, at 89 FR 38900, is extended. Nominations for

membership on the ACD, CDC must be received no later than July 8, 2024. Late nominations will not be considered for membership.

ADDRESSES: All nominations (cover letters, reference letters, and curriculum vitae/resumes) should be emailed to ACDDirector@cdc.gov with the subject line: “Nomination for CDC ACD.”

FOR FURTHER INFORMATION CONTACT:

Tiffany Brown, J.D., M.P.H., Office of the Chief of Staff, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop H21–10, Atlanta, Georgia 30329–4027. Telephone: (404) 498–6655; Email: ACDDirector@cdc.gov.

SUPPLEMENTARY INFORMATION: The deadline for nominations for appointment to the Advisory Committee to the Director, Centers for Disease Control and Prevention has been extended from June 7, 2024, to July 8, 2024. The original solicitation of nominations notice was published in the **Federal Register** on May 8, 2024, Volume 89, Number 90, page 38900.

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for Office of Management and Budget Review; Family Violence Prevention and Services Grants to States; Native American Tribes and Alaskan Native Villages; and State Domestic Violence Coalitions (Office of Management and Budget #0970–0280)

AGENCY: Office of Family Violence Prevention and Services; Administration for Children and Families; Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Family Violence Prevention and Services Act (FVPSA) program within the Office of Family Violence Prevention and Services (OFVPS) plans revised program announcements and minor changes to the previously approved Performance Progress Report for States and Tribes (Office of Management and Budget (OMB) #0970–0280; Expiration Date: May 31, 2024). Minor changes are