

**Jeffrey M. Zirger,**

*Lead, Information Collection Review Office,  
Office of Public Health Ethics and  
Regulations, Office of Science, Centers for  
Disease Control and Prevention.*

[FR Doc. 2024-27468 Filed 11-22-24; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day-25-1255; Docket No. CDC-2024-  
0096]

#### 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 effort to reduce public  
burden and maximize the utility of  
government information, invites the  
general public and other Federal  
agencies the opportunity to comment on  
a continuing information collection, as  
required by the Paperwork Reduction  
Act of 1995. This notice invites  
comment on a proposed information  
collection project titled Emergency  
Cruise Ship Outbreak Investigations  
(CSOIs). The Vessel Sanitation Program  
(VSP) conducts CSOIs in response to  
acute gastroenteritis (AGE) outbreaks on  
cruise ships within the VSP's  
jurisdiction.

**DATES:** CDC must receive written  
comments on or before January 24,  
2025.

**ADDRESSES:** You may submit comments,  
identified by Docket No. CDC-2024-  
0096 by either of the following methods:

- *Federal eRulemaking Portal:*  
[www.regulations.gov](http://www.regulations.gov). Follow the  
instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information  
Collection Review Office, Centers for  
Disease Control and Prevention, 1600  
Clifton Road NE, MS H21-8, Atlanta,  
Georgia 30329.

*Instructions:* All submissions received  
must include the agency name and  
Docket Number. CDC will post, without  
change, all relevant comments to  
[www.regulations.gov](http://www.regulations.gov).

*Please note:* Submit all comments  
through the Federal eRulemaking portal  
([www.regulations.gov](http://www.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 Jeffrey M. Zirger,  
Information Collection Review Office,  
Centers for Disease Control and  
Prevention, 1600 Clifton Road NE, MS  
H21-8, Atlanta, Georgia 30329;  
telephone: 404-639-7570; email: [omb@  
cdc.gov](mailto: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 the OMB for approval. To  
comply with this requirement, we are  
publishing this notice of a proposed  
data collection as described below.

The OMB is particularly interested in  
comments that will help:

1. 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;
2. Evaluate 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. Enhance the quality, utility, and  
clarity of the information to be  
collected;
4. 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 submissions  
of responses; and
5. Assess information collection costs.

#### Proposed Project

Emergency Cruise Ship Outbreak  
Investigations (CSOIs (OMB Control No.  
0920-1255, Exp. 3/31/2025)—  
Extension—National Center for  
Environmental Health (NCEH), Centers  
for Disease Control and Prevention  
(CDC).

#### Background and Brief Description

Established in 1975 as a cooperative  
activity with the cruise ship industry,  
the Centers for Disease Control and

Prevention (CDC) Vessel Sanitation  
Program (VSP) develops and  
implements comprehensive operational  
public health programs to minimize the  
risk of gastrointestinal illness. VSP  
coordinates and conducts public health  
inspections, ongoing surveillance of  
gastrointestinal illness, and outbreak  
investigations on cruise ships.

Under the authority of the Public  
Health Service Act (42 U.S.C. 264 and  
269), VSP is requesting a three-year  
Extension Information Collection  
Request (ICR) for an existing Generic  
Clearance. This ICR will provide for the  
quick turnaround necessary to conduct  
emergency Cruise Ship Outbreak  
Investigations (CSOIs) in response to  
acute gastroenteritis (AGE) outbreaks.  
CSOIs are used to determine causative  
agents and their sources, modes of  
transmission, or risk factors. VSP's  
jurisdiction includes passenger vessels  
carrying 13 or more people sailing from  
foreign ports and within 15 days of  
arriving at a U.S. port.

VSP uses its syndromic surveillance  
system called the Maritime Illness and  
Death Reporting System (MIDRS) (OMB  
Control No. 0920-1260, expiration date  
03/31/2026) to collect aggregate data  
about the number of people onboard  
ships in VSP's jurisdiction who are  
experiencing AGE symptoms. When the  
levels of illness meet VSP's alert  
threshold (*i.e.*, at least 2% in either the  
passenger or crew populations), a  
special report is made to VSP via  
MIDRS and VSP provides  
environmental health and  
epidemiologic assistance. VSP considers  
an outbreak to be  $\geq 3\%$  of reportable  
AGE cases in either passenger or crew  
populations.

When a cruise ship has an AGE  
outbreak, VSP often must deploy a  
response team to meet the ship in port  
within 24 hours of reaching the  
outbreak threshold. In some cases, the  
response team must board the ship  
before its U.S. arrival and sail back to  
the U.S. port of disembarkation to  
conduct a more detailed and  
comprehensive epidemiologic and  
environmental health evaluation of the  
outbreak.

VSP can ascertain a causative agent,  
sources of exposure, modes of  
transmission, and risk factors by  
gathering the following types of  
information from both the affected and  
(seemingly) unaffected populations:

- Demographic information,
- Pre-embarkation travel information,
- Symptoms, including type, onset,  
duration,
- Contact with people who were sick  
or their body fluids,

- Participation in ship and onshore activities,
- Locations of eating and drinking, and
- Foods and beverages consumed both on the ship and on shore. Rapid and flexible data collection is imperative given the mobile environment, the remaining duration of the voyage left for investigation, and the loss to follow-up if delays allow passengers to disembark and leave the ship, including those returning to locations outside of the United States.

This Generic Clearance will cover investigations that meet all the following criteria:

- The investigation is urgent in nature (*i.e.*, timely data are needed to

inform rapid public health action to prevent or reduce morbidity or mortality).

- The investigation is characterized by undetermined agents, undetermined sources, undetermined modes of transmission, or undetermined risk factors.

- One or more CDC staff (including trainees and fellows) will be deployed to the field.

- Data collection is completed in 30 days or less (most CSOIs involve two to five days of data collection).

This Generic Clearance excludes each of the following:

- Investigations related to non-urgent outbreaks or events.

- Investigations conducted for the primary purpose of program evaluation, surveillance, needs assessment, or research (*e.g.*, to contribute to generalizable knowledge).

- Investigations with data collection expected for greater than 30 days.

VSP estimates 10 CSOIs annually in response to cruise ship AGE outbreaks. The estimated number of respondents is 1,300 per CSOI, for a total of 13,000 respondents per year. The average time burden is 15 minutes for each respondent. Therefore, the total estimated annual burden in hours is 4,063. There is no cost to respondents other than their time.

*Estimated Annualized Burden Hours*

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Cruise ship crew .....	Self-administered questionnaire ....	3,000	1	15/60	750
Cruise ship crew .....	Interview .....	450	1	15/60	113
Cruise ship crew .....	Biospecimen collection .....	300	1	15/60	75
Cruise ship passenger .....	Self-administered questionnaire ....	10,000	1	15/60	2,500
Cruise ship passenger .....	Interview .....	1,500	1	15/60	375
Cruise ship passenger .....	Biospecimen collection .....	1,000	1	15/60	250
<b>Total .....</b>					<b>4,063</b>

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day-25-0792]

**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 “Environmental Health Specialists Network (EHS-Net) Program” 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 August 9, 2024, to obtain comments from the public and affected agencies. CDC received three comments 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.

Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. 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**

Environmental Health Specialists (EHS-Net) Program (OMB Control Number 0920-0792, Exp. 1/31/2025)—Revision—National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

The National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC), is requesting a three-year Paperwork Reduction Act (PRA) approval for a Revision of this Generic