FDA's Center for Drug Evaluation and Research (CDER), Center for Biologics Evaluation and Research, Office of the Commissioner, and any other Centers will use this mechanism to test communications and social and behavioral methods about regulated drug products on a variety of subjects related to consumer, patient, or healthcare professional perceptions, beliefs, attitudes, behaviors, and use of drug and biological products and related materials. These subjects include social and behavioral research, decision-making processes, and communication and behavioral change strategies.

Further, in addition to overseeing the safety of drug products when used according to approved drug labeling or as directed by a healthcare provider, CDER conducts studies on topics related to the safe and effective use of drug products, and emerging safety issues in areas such as: (1) nonmedical use of approved drug products; (2) use of unapproved and falsified (*i.e.,* counterfeit, fake) drug products; (3) use of botanical substances (*e.g.,* cannabis derived products); (4) controlled substance prescribing decisions; (5) bystander response to drug overdoses; and (6) potentially false or misleading information about drug products. Reliable data on these and related topics are a critical first step to understanding whether further studies or action is needed to protect public health.

Because often data on these topics are not collected as part of routine healthcare delivery or via established Federal surveys, FDA requires the development and validation of novel instruments (*i.e.,* interview and focus group guides, questionnaires) and approaches to gathering data on emerging safety issues the methods used to create and validate these instruments may include interviews, focus groups, small group discussions, pilot and test/re-test survey launches, and external validation against benchmark surveys. In conducting research in these areas, FDA will need to employ the following validation methodology: (1) research to assess knowledge, perceptions, and experiences related to topics in the above-mentioned areas with specific target populations; (2) techniques to evaluate sampling and recruitment methods; and (3) evaluations of the validity and reliability of survey questionnaires in target populations.

In accordance with 5 CFR 1320.8(d), FDA published a 60-day notice for public comment on the proposed collection of information in the **Federal Register** of April 23, 2024 (89 FR 30381). Although one comment was received, it was not responsive to the four collection of information topics solicited and therefore will not be discussed in this document.

Annually, FDA projects about 25 social and behavioral studies using the variety of test methods listed in this document. FDA is revising this burden to account for the number of studies we have received in the last 3 years and to better reflect the scope of the information collection.

FDA estimates the burden of this collection of information as follows:

TABLE 1—ESTIMATED ANNUAL REPORTING BURDEN [1]

Activity	Number of respondents	Number of responses per respondent	Total annual responses	Average burden per response	Total hours
Interviews and Surveys	126,770	1	126,770	0.25 (15 minutes)	31,693

[1] There are no capital costs or operating and maintenance costs associated with this collection of information.

Based on a review of the information collection since our last request for OMB approval, our burden estimate for this information collection reflects an overall increase of 17,300 responses with a corresponding increase of 4,325 hours. We attribute this adjustment to the need to validate information in specific areas.

Dated: December 11, 2024.

P. Ritu Nalubola,

Associate Commissioner for Policy.

[FR Doc. 2024–30224 Filed 12–18–24; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Meetings of the Council on Graduate Medical Education

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, this notice announces that the Council on Graduate Medical Education (COGME or Council) will hold public meetings for the 2025 calendar year (CY). Information about COGME, agendas, and materials for these meetings can be found on the COGME website at: *https://www.hrsa.gov/advisory-committees/graduate-medical-edu.*

DATES: COGME meetings will be held on:

- April 10, 2025, 8 a.m.–5 p.m. eastern time (ET) and April 11, 2025, 8 a.m.–2 p.m. ET.
- September 11, 2025, 8 a.m.–5 p.m. ET and September 12, 2025, 8 a.m.–4 p.m. ET.

ADDRESSES: Meetings will be held in-person, by teleconference, and/or on a video conference platform. In-person meetings will be held at 5600 Fishers Lane, Rockville, Maryland 20857. For updates on how the meetings will be held, instructions for joining meetings, and any other updates, visit the COGME website 30 business days before the date of the meeting at *https://www.hrsa.gov/advisory-committees/graduate-medical-edu/meetings.*

FOR FURTHER INFORMATION CONTACT: Shane Rogers, Designated Federal Officer, Division of Medicine and Dentistry, Bureau of Health Workforce, HRSA, 5600 Fishers Lane, Room 15N39, Rockville, Maryland 20857; 301–443–5260; or *SRogers@hrsa.gov.*

SUPPLEMENTARY INFORMATION: COGME provides advice and recommendations to the Secretary of HHS and Congress on policy, program development, and other matters of significance regarding the issues listed in section 762(a)(1) of the Public Health Service Act. Issues addressed by the COGME include the supply and distribution of the physician workforce in the United States, including any projected shortages or excesses, issues related to foreign medical school graduates, the nature and financing of undergraduate and graduate medical education, appropriation levels for certain programs under title VII of the Public Health Service Act, and deficiencies in databases concerning the supply and distribution of the physician workforce and postgraduate programs for training

physicians. COGME submits reports not less than every 5 years to the Secretary of HHS; the Senate Committee on Health, Education, Labor, and Pensions; and the House of Representatives Committee on Energy and Commerce. Additionally, COGME encourages entities providing graduate medical education to conduct activities to voluntarily achieve the recommendations of the Council related to appropriate efforts to be carried out by hospitals, schools of medicine, schools of osteopathic medicine, and accrediting bodies with respect to the supply and distribution of physicians in the United States; current and future shortages or excesses of physicians in medical and surgical specialties and subspecialties; and issues relating to foreign medical school graduates, including efforts for changes in undergraduate and graduate medical education programs.

Since priorities dictate meeting times, be advised that start times, end times, and agenda items are subject to change. For CY 2025 meetings, agenda items may include, but are not limited to: discussions on team-based care and the Senate Finance Committee's Medicare Graduate Medical Education draft policy document. Refer to the COGME website listed above for all current and updated information concerning the CY 2025 COGME meetings, including agendas and meeting materials that will be posted 30 calendar days before the meeting.

Members of the public will have the opportunity to provide comments. Public participants may submit written statements in advance of the scheduled meeting. Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to submit a written statement or make oral comments to COGME should be sent to Shane Rogers using the contact information above at least 5 business days before the meeting date. Individuals who need special assistance or another reasonable accommodation should notify Shane Rogers using the contact information listed above at least 10 business days before the meeting(s) they wish to attend. Since all in-person meetings will occur in a federal government building at 5600 Fishers Lane, Rockville, MD 20857, attendees must go through a security check to enter the building. Members of the public must notify the Designated Federal Officer of their intent to attend the in-person meeting 10 business days before the meeting. Non-U.S. citizen attendees must notify the Designated Federal Officer of their planned attendance at least 20 business days prior to the meeting to facilitate their entry into the building. All attendees are required to present government-issued identification prior to entry.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2024–30076 Filed 12–18–24; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Meetings of the National Advisory Council on Nurse Education and Practice

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, this notice announces that the National Advisory Council on Nurse Education and Practice (NACNEP) will hold public meetings for the 2025 calendar year (CY). Information about NACNEP, agendas, and materials for these meetings can be found on the NACNEP website at: *https://www.hrsa.gov/advisory-committees/nursing/meetings.*

DATES: NACNEP meetings will be on (all in Eastern Time):

- March 5, 2025, 10 a.m.–4 p.m. and March 6, 2024, 10 a.m.–4 p.m.
- May 14, 2025, 10 a.m.–4 p.m.
- August 6, 2025, 10 a.m.–4 p.m. and August 7, 2025, 10 a.m.–4 p.m.
- December 4, 2024, 8 a.m.–5 p.m. and December 4, 2025, 8 a.m.–2 p.m.

ADDRESSES: Meetings may be held in-person, by teleconference, and/or video conference. For updates on how the meeting will be held, visit the NACNEP website 30 business days before the date of the meeting, where instructions for joining meetings either in-person or remotely will also be posted. In-person NACNEP meetings will be held at 5600 Fishers Lane, Rockville, Maryland, 20857. For meeting information updates, go to the NACNEP website meeting page at *https://www.hrsa.gov/advisory-committees/nursing/meetings.*

FOR FURTHER INFORMATION CONTACT: Justin Bala-Hampton, Designated Federal Officer, Bureau of Health Workforce, HRSA, 5600 Fishers Lane, Rockville, Maryland, 20857; 301–945–9880; or *JBala-Hampton@hrsa.gov.*

SUPPLEMENTARY INFORMATION: NACNEP provides advice and recommendations to the Secretary of Health and Human Services on policy, program development, and other matters of significance concerning the activities under Title VIII of the Public Health Service Act, including the range of issues relating to the nurse workforce, education, and practice improvement. NACNEP also prepares and submits an annual report to the Secretary of Health and Human Services and Congress describing its activities, including NACNEP's findings and recommendations concerning activities under Title VIII, as required by the Public Health Service Act.

Since priorities dictate meeting times, be advised that start times, end times, and agenda items are subject to change. For CY 2025 meetings, agenda items may include, but are not limited to, the nursing workforce (*e.g.,* nursing shortage, distribution, supply, and access) nursing practice improvement, nursing education, nursing work environment and support, and other Title VIII program activities. Refer to the NACNEP website listed above for all current and updated information concerning the CY 2025 NACNEP meetings, including draft agendas and meeting materials that will be posted 30 calendar days before the meeting.

Members of the public will have the opportunity to provide comments. Public participants may submit written statements in advance of the scheduled meeting(s). Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to submit a written statement or make oral comments to NACNEP should be sent to Justin Bala-Hampton using the contact information above at least 5 business days before the meeting date(s).

Individuals who need special assistance or another reasonable accommodation should notify Justin Bala-Hampton using the contact information listed above at least 10 business days before the meeting(s) they wish to attend. Since all in-person meetings will occur in a federal government building, attendees must go through a security check to enter the building. Non-U.S. citizen attendees must notify HRSA of their planned attendance at least 20 business days prior to the meeting to facilitate their entry into the building. All attendees are required to present government-issued identification prior to entry.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2024–30070 Filed 12–18–24; 8:45 am]

BILLING CODE 4165–15–P