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Office of Public Health Ethics and
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Disease Control and Prevention.

[FR Doc. 2024–30480 Filed 12–19–24; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Safety and Occupational Health Study Section; Notice of Solicitation of Nominations for Appointment; Correction

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

ACTION: Notice; correction.

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 Safety and
Occupational Health Study Section
(SOHSS). SOHSS consists of 20 experts
in fields associated with occupational
medicine and nursing, industrial
hygiene, occupational safety and
engineering, toxicology, chemistry,
safety and health education,
ergonomics, epidemiology, economic
science, psychology, pulmonary
pathology/physiology, and social
science.

DATES: Nominations for membership on
SOHSS must be received no later than
January 31, 2025. Packages received
after this time will not be considered for
the current membership cycle.

ADDRESSES: All nominations should be
mailed to Dr. Michael Goldcamp, 1095
Willowdale Road, Morgantown, West
Virginia 26505 or emailed to
MGoldcamp@cdc.gov.

FOR FURTHER INFORMATION CONTACT:
Michael Goldcamp, Ph.D., Scientific
Review Officer, Office of Extramural
Programs, National Institute for
Occupational Safety and Health, Centers
for Disease Control and Prevention,
1095 Willowdale Road, Morgantown,
West Virginia 26505. Telephone: (304)
285–5951; email: MGoldcamp@cdc.gov.

SUPPLEMENTARY INFORMATION:

Correction

Notice is hereby given of a correction
in the **SUPPLEMENTARY INFORMATION**
section of the original solicitation of
nominations notice, which was

published in the **Federal Register** on
December 2, 2024, 89 FR 95214.

The notice is being amended to
remove the sentence concerning Special
Government Employees, since members
of the Safety and Occupational Health
Study Section serve as Peer Review
Consultants. The **SUPPLEMENTARY
INFORMATION** section should read as
follows:

SUPPLEMENTARY INFORMATION:

Nominations are sought for individuals
who have the expertise and
qualifications necessary to contribute to
the accomplishment of the objectives of
the Safety and Occupational Health
Study Section (SOHSS). Nominees will
be selected based on expertise in the
fields of occupational medicine and
nursing, industrial hygiene,
occupational safety and engineering,
toxicology, chemistry, safety and health
education, ergonomics, epidemiology,
economic science, psychology,
pulmonary pathology/physiology, and
social science. Members may be invited
to serve up to four-year terms. Selection
of members is based on candidates'
qualifications to contribute to the
accomplishment of SOHSS objectives
([https://www.cdc.gov/faca/committees/
sohss.html](https://www.cdc.gov/faca/committees/sohss.html)).

Department of Health and Human
Services (HHS) policy stipulates that
committee membership be balanced in
terms of points of view represented and
the committee's function. Appointments
shall be made without discrimination
on the basis of age, race, ethnicity,
gender, sexual orientation, gender
identity, HIV status, disability, and
cultural, religious, or socioeconomic
status. Nominees must be U.S. citizens
and cannot be full-time employees of
the U.S. Government. Current
participation on Federal workgroups or
prior experience serving on a Federal
advisory committee does not disqualify
a candidate; however, HHS policy is to
avoid excessive individual service on
advisory committees and multiple
committee memberships. The Centers
for Disease Control and Prevention
(CDC) reviews potential candidates for
SOHSS membership each year and
provides a slate of nominees for
consideration to the Secretary of HHS
for final selection. HHS notifies selected
candidates of their appointment near
the start of the term in October 2025, or
as soon as the HHS selection process is
completed. Note that the need for
different expertise varies from year to
year and a candidate who is not selected
in one year may be reconsidered in a
subsequent year.

Candidates should submit the
following items:

- Current curriculum vitae, including
complete contact information
(telephone numbers, mailing address,
email address).

- At least one letter of
recommendation from person(s) not
employed by HHS. Candidates may
submit letter(s) from current HHS
employees if they wish, but at least one
letter must be submitted by a person not
employed by an HHS agency (e.g., CDC,
National Institutes of Health, Food and
Drug Administration).

Nominations may be submitted by the
candidate or by the person/organization
recommending the candidate.

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.

[FR Doc. 2024–30410 Filed 12–19–24; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award of a Sole Source Cooperative Agreement to Fund Secretaría Ejecutiva del Consejo de Ministros de Salud de Centroamerica y Republica Dominicana (SE–COMISCA)

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

ACTION: Notice.

SUMMARY: The Centers for Disease
Control and Prevention (CDC), located
within the Department of Health and
Human Services (HHS), announces the
award of approximately \$5,000,000,
with an expected total funding of
approximately \$25,000,000 over a 5-year
period, to SE–COMISCA. The award
will build upon previous efforts by the
CDC in collaboration with Ministries of
Health of Central America and the
Dominican Republic (SE–COMISCA).

DATES: The period for this award will be
September 30, 2025 through September
29, 2030.

FOR FURTHER INFORMATION CONTACT:

Broderick Yoerg, Division of Global Health Protection, Global Health Center, Centers for Disease Control and Prevention, 1600 Clifton Rd., Atlanta, GA 30329, email: DGHPNOFOs@cdc.gov, telephone: 404–234–0666.

SUPPLEMENTARY INFORMATION: The sole source award will target increased capacity at the national and subnational level to implement and achieve outbreak/epidemic/pandemic control in line with US Government (USG) and CDC strategy. This collaborative effort has led to significant progress in various areas under the Global Health Strategic Framework, including One Health workshops in multiple countries to prioritize zoonotic diseases and the development of a joint action plan for Central America.

SE–COMISCA is the only entity that can carry out this work, as it will improve outbreak control capacity, better integration between health systems, and increased equity in healthcare access for all populations, especially those historically marginalized.

Summary of the Award

Recipient: SE–COMISCA

Purpose of the Award: The purpose of this award is to support Global Health Security goals in Central America and the Dominican Republic by collaborating with MOH and other partners. Efforts will focus on reaching underserved populations, prioritizing equity to build resilient health systems that protect vulnerable groups.

Amount of Award: \$5,000,000 in Federal Fiscal Year (FFY) 2025 funds, with a total estimated \$25,000,000 for the 5-year period of performance, subject to availability of funds.

Authority: This program is authorized under section 307 of the Public Health Service Act [42 U.S.C. 24I] and Section 301(a)[42 U.S.C. 24I(a)] of the Public Health Service Act.

Period of Performance: September 30, 2025 through September 29, 2030.

Dated: December 10, 2024.

Terrance Perry,

Acting Director, Office of Grants Services, Centers for Disease Control and Prevention.
[FR Doc. 2024–30223 Filed 12–19–24; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Disease Control and Prevention**

[Docket No. CDC–2020–0046; NIOSH–233–C]

Hazardous Drugs: NIOSH List of Hazardous Drugs in Healthcare Settings, 2024 and Final Reevaluation Determinations for Liraglutide and Pertuzumab

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

ACTION: General notice.

SUMMARY: The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), in the Department of Health and Human Services (HHS), announces the publication of the *NIOSH List of Hazardous Drugs in Healthcare Settings, 2024*, as well as final reevaluation determinations removing the drugs liraglutide and pertuzumab from the *NIOSH List of Hazardous Drugs in Healthcare Settings*.

DATES: The documents announced in this notice are available on December 20, 2024.

ADDRESSES: The documents announced in this notice are available in the docket at www.regulations.gov and through the NIOSH Hazardous Drug Exposures in Healthcare website at <https://www.cdc.gov/niosh/healthcare/hazardous-drugs/index.html>.

FOR FURTHER INFORMATION CONTACT: Jerald Ovesen, NIOSH, Robert A. Taft Laboratories, 1090 Tusculum Avenue, MS–C15, Cincinnati, OH 45226, telephone: (513)533–8472 (not a toll-free number), email: jovesen@cdc.gov.

SUPPLEMENTARY INFORMATION: This notice is organized as follows:

- I. Public Participation
- II. Background
- III. NIOSH Response to Public Comment in the May 2020 **Federal Register** Notice and Request for Comment
 - A. General Characteristics of the List
 1. Timing of the List
 2. Drugs That Did Not Meet the NIOSH Hazardous Drug Criteria
 - B. General Drug Descriptors
 1. Unique Identifiers
 2. Use of AHFS Classifications
 3. Use of AHFS Code for Hormone Drug Classification
 4. Monoclonal Antibodies as a Class of Drugs
 5. Progestins
 6. Additional Information Requested
- C. General Reorganization of the List
 1. Content of Tables

2. DailyMed and DrugBank Links
- D. Drugs Not on the Draft 2020 List
 1. Drugs Proposed in February 2018 and Not Added to the Draft 2020 List
 2. Bacillus Calmette-Guerin (BCG)
 3. Botulinum Toxins
- E. Requests for Specific Drugs To Be Removed From the List
 1. Blinatumomab
 2. Carfilzomib
 3. Eslicarbazepine, Lomitapide, Mifepristone
 4. Hazardous Drugs Listed for Reproductive and Developmental Effects: Cabergoline, Clonazepam, Fluconazole, Plerixafor, Riociguat, and Ziprasidone
 5. Icatibant
 6. Leuprolide
 7. Olaparib and Teriflunomide
 8. Oxytocin and Other Oxytocic Drugs
 9. Paroxetine
 10. Spironolactone
 11. Topiramate
 12. Ulipristal
 13. Vigabatrin
- F. Placement of Specific Drugs Within the List
 1. Carfilzomib
 2. Dasatinib and Imatinib
 3. Eribulin
 4. Exenatide
 5. Ganciclovir and Valganciclovir
 6. Hormonal Agents: Goserelin, Degarelix, Leuprolide, Estrogens, and Progesterone
 7. Mycophenolate Mofetil and Mycophenolic Acid
 8. Sirolimus and Other Related mTOR Targeting Drugs
 9. Thalidomide, Lenalidomide, and Pomalidomide
 10. Vandetanib
- G. Specific Drugs Classification/Identification
 1. Triptorelin
 2. Ziv-Aflibercept, Ado-Trastuzumab Emtansine, Fam-Trastuzumab Deruxtecan
- H. Suggested Copyedits
- IV. NIOSH Response to Public Comment and Peer Review in the January 2024 Federal Register Notice and Request for Comment on Proposed Removal of Liraglutide and Pertuzumab From the List
 - A. Public Comment
 1. General Comments
 2. Liraglutide
 3. Pertuzumab
 - a. Is this an appropriate method for evaluating the potential for exposure to pertuzumab?
 - b. Is oligohydramnios the best health effect to evaluate? If not, what other health effect(s) should be evaluated and why?
 - c. Is a needlestick injury the only reasonable route of exposure for healthcare workers?
 - d. Are the assumptions about the amount of exposure to pertuzumab in a healthcare setting reasonable?
 - i. Inhalation
 - ii. Percutaneous Exposure
 - iii. Oral exposure
 - e. What alternatives could be considered to this approach for monoclonal antibodies to characterize the potential hazard to workers?