The DFARS clause at 252.204–7010, as prescribed at DFARS 204.470–3, is included in contracts for research and development or major defense acquisition programs involving fissionable materials (e.g., uranium, plutonium, neptunium, thorium, americium); other radiological source materials; or technologies directly related to nuclear power production, including nuclear or radiological waste materials.

The clause requires a contractor to provide written notification to the applicable DoD program manager and a copy of the notification to the contracting officer if the contractor is required to report its activities under the U.S.-IAEA Additional Protocol. Upon such notification, DoD will determine if access may be granted to IAEA inspectors, or if a national security exclusion should be applied.

Jennifer L. Hawes,

Regulatory Control Officer Defense Acquisition Regulations System.

[FR Doc. 2018–05185 Filed 3–13–18; 8:45 am]

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DEPARTMENT OF DEFENSE

Office of the Secretary

[Docket ID DOD-2018-HA-0009]

Proposed Collection; Comment Request

AGENCY: Office of the Assistant Secretary of Defense for Health Affairs, DoD.

ACTION: Information collection notice.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, the Office of the Assistant Secretary of Defense for Health Affairs announces a proposed public information collection and seeks public comment on the provisions thereof. Comments are invited on: Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; the accuracy of the agency's estimate of the burden of the proposed information collection; ways to enhance the quality, utility, and clarity of the information to be collected; and ways to minimize the burden of the information collection on respondents, including through the use of automated collection techniques or other forms of information technology.

DATES: Consideration will be given to all comments received by May 14, 2018.

ADDRESSES: You may submit comments, identified by docket number and title, by any of the following methods:

- Federal eRulemaking Portal: http://www.regulations.gov. Follow the instructions for submitting comments.
- Mail: Department of Defense, Office of the Chief Management Officer, Directorate for Oversight and Compliance, 4800 Mark Center Drive, Mailbox #24, Suite 08D09B, Alexandria, VA 22350–1700.

Instructions: All submissions received must include the agency name, docket number, and title for this Federal Register document. The general policy for comments and other submissions from members of the public is to make these submissions available for public viewing on the internet at http://www.regulations.gov as they are received without change, including any personal identifiers or contact information.

Any associated form(s) for this collection may be located within this same electronic docket and downloaded for review/testing. Follow the instructions at http://www.regulations.gov for submitting comments. Please submit comments on any given form identified by docket

FOR FURTHER INFORMATION CONTACT: To request more information on this proposed information collection or to obtain a copy of the proposal and associated collection instruments, please write to Defense Health Agency (DHA), Public Health Division, Health Care Operations Directorate (ATTN: Major Mary Bauza-Lawver), 7700 Arlington Blvd., Falls Church, VA 22042 or call 703–681–5870.

number, form number, and title.

SUPPLEMENTARY INFORMATION:

Title; Associated Form; and OMB Number: Screening and Monitoring of DoD Personnel Deployed to Ebola Outbreak Areas; DD Form 2990 and DD Form 2991; OMB Control Number 0720– 0056.

Needs and Uses: The information collection requirement is necessary to ensure DoD personnel deployed in support of Operation UNITED ASSISTANCE are promptly evaluated for possible exposure(s) to the Ebola virus during deployment to, and within 12 hours prior to departing from, an Ebola outbreak country or region. Ebola is a Quarantinable Communicable Disease as named in Executive Order 13295 and supported by several DoD regulations and Federal laws. This information will be used by DoD medical and public health officials to (1) ensure Ebola exposure risk is evaluated, (2) proper prevention and quarantine

efforts are implemented, (3) appropriate medical care is provided, (4) medical surveillance programs are robust and (5) the spread of Ebola beyond area of concern is minimized. The DoD has consulted with the Centers for Disease Control and Prevention, the Department of State, the Agency for International Development, and several Defense Agencies regarding disease control efforts and health surveillance in response to the public health emergency in West Africa and worldwide. DoD has also specifically discussed these new information collections with representatives of the various Military Services, representing deploying military members who have participated in the development of the content of these forms.

Affected Public: Individuals or Households.

Annual Burden Hours: 480. Number of Respondents: 1,200. Responses per Respondent: 2.

Annual Responses: 2400.

Average Burden per Response: 12 minutes.

Frequency: On occasion.

Respondents are DoD personnel (active duty service members, federal civilian employees and contractors). Using the DD2990 and DD2991, information will be collected from respondents during deployment and just prior to redeployment (return from deployment). This information will provide for health surveillance while deployed, removal from duty if representing a health risk to self or others, apprehension and detention, or conditional release of individuals to prevent the introduction, transmission, or spread of suspected communicable diseases, pursuant to section 361(b) of the Public Health Service Act (42 U.S.C. 264), UCMJ, DoD Directive 6490.02E, DoD Instruction 6490.03, 5 CFR 339.301. The information will also be collected in order to identify any health concerns and to refer individuals for additional assessment and/or care. The overall intent is to protect the health of the individual and public from EBV. This information will also be included in deployer's medical records.

Dated: March 9, 2018.

Aaron Siegel,

Alternate OSD Federal Register Liaison Officer, Department of Defense. [FR Doc. 2018–05192 Filed 3–13–18; 8:45 am]

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