

• Request for Medical Records Form—Miners wishing to receive copies of their CWHSP chest x-rays and related files must fully complete, sign, and

email this form to cwhsp@cdc.gov. The form can also be mailed or faxed using the address and fax listed on the form. It is estimated that five minutes is

required for the coal miner to complete this form.

There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	No. of respondents	No. of responses per respondent	Average burden per response (in hours)	Total burden hours
Coal mine operator	2.10	268	1	30/60	134
Coal Mine Contractor	2.18	165	1	30/60	83
Radiograph Facility Supervisor	2.11	20	1	30/60	10
Coal Miner	2.9	4,345	1	20/60	1,448
Coal Miner—Radiograph	No form required	4,788	1	15/60	1,197
B Reader Physician	2.8	10	899	3/60	450
Qualified and Licensed Physician (NIOSH Approved Radiograph Facility)	2.8	4,788	1	3/60	240
Physicians taking the B Reader Examination	2.12	110	1	10/60	18
Spirometry Facility Supervisor	2.14	15	1	30/60	8
Spirometry Facility Employee	2.13	619	1	5/60	52
Spirometry Technician	2.15	619	1	20/60	206
Coal Miner—Spirometry	No form required	619	1	15/60	155
Request for Medical Records	Request for Medical Records Form ...	779	1	5/60	65
Pathologist	2.19	4	1	15/60	1
Pathologist	Invoice—No standard form	4	1	5/60	1
Pathologist	Pathology Report—No standard form	4	1	5/60	1
Next-of-kin for deceased miner	2.6	4	1	15/60	1
Total	4,070

Jeffrey M. Zirger,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–24–23IE]

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 “Social and Economic Barriers to Receiving Optimal Services Along the Cancer Care Continuum” 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 September 26, 2023 to obtain comments from the public and affected agencies. CDC did not receive 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. 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

Social and Economic Barriers to Receiving Optimal Services Along the Cancer Care Continuum—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The purpose of this project is to: (1) examine and better understand social and economic barriers faced by colorectal, breast, and cervical cancer survivors and their caregivers at each stage of the Cancer Care Continuum (CCC); and (2) quantify the impact of

individual and compounded barriers on health outcomes along the CCC for survivors. CDC will use a mixed methods data collection and analysis approach. First, CDC will pull our sample from cancer registry data in California, North Carolina, and Texas based on inclusion criteria (received first cancer diagnosis of either breast, cervical or colorectal cancer in 2021; 21–75 years of age at time of diagnosis; are non-Hispanic Black/African American, non-Hispanic White, or

Hispanic; alive at the time of data extraction/sample selection). Then, CDC will administer a Wave 1 (baseline) and Wave 2 (one-year follow-up) survey to cancer survivors, as well as a survey to their caregivers. Additionally, CDC will conduct interviews with selected survivors and caregivers as well as focus groups with representatives from patient/survivor advocacy organizations.

CDC will incorporate cancer registry data into the quantitative data analysis,

and triangulate findings from the quantitative and qualitative data collection efforts. Results will be used to inform efforts aimed at increasing access to cancer care services, reducing the burden of cancers and closing the disparities gap. CDC requests OMB approval for an estimated 1,681 annual burden hours. There are no costs to respondents other than their time to participate.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Wave 1 Survivor Survey Respondents	W1 Survey Instrument	3,000	1	20/60
Wave 2 Survivor Survey Respondents	W2 Survey Instrument	1,200	1	20/60
Survivor Interviewees	Survivor Interview Guide	20	1	1
Caregiver Survey Respondents	Caregiver Survey Instrument	900	1	15/60
Caregiver Interviewees	Caregiver Interview Guide	20	1	1
Patient Advocacy Group—Focus Group Participants.	Advocacy Representatives Focus Group Guide.	16	1	1

Jeffrey M. Zirger,
*Lead, Information Collection Review Office,
Office of Public Health Ethics and
Regulations, Office of Science, Centers for
Disease Control and Prevention.*
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DEPARTMENT OF HEALTH AND
HUMAN SERVICES

Centers for Disease Control and
Prevention

[Docket No. CDC–2024–0063]

Meeting of the Advisory Committee to
the Director (ACD), Centers for Disease
Control and Prevention

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

ACTION: Notice of meeting and request
for comment.

SUMMARY: In accordance with the
Federal Advisory Committee Act, the
Centers for Disease Control and
Prevention (CDC) announces the
following meeting for the Advisory
Committee to the Director, Centers for
Disease Control and Prevention (ACD,
CDC). This is a hybrid meeting,
accessible both in person and virtually
(webcast live via the World Wide Web).
It is open to the public and limited only
by the space available.

DATES: The meeting will be held on
October 22, 2024, from 9 a.m. to 3:30
p.m., EDT (times subject to change).
The public may submit written
comments from September 3, 2024
through October 7, 2024.

ADDRESSES: *Meeting address:* CDC
Roybal Campus, Building 19,
Auditorium B3, 1600 Clifton Road NE,
Atlanta, Georgia 30329–4027.

Please note that the meeting location,
the CDC Roybal Campus, is a federal
facility and in-person access is limited
to United States citizens unless prior
authorizations, taking up to 30 to 60
days, have been made.

Registration: You must register to
attend this meeting in person. If you
wish to attend in person, please submit
a request by email to ACDDirector@cdc.gov at least 5 business days in
advance of the meeting. No registration
is required to view the meeting via the
World Wide Web. Information for
accessing the webcast will be available
at [https://www.cdc.gov/about/advisory-
committee-director/](https://www.cdc.gov/about/advisory-committee-director/).

Written comments: You may submit
comments, identified by Docket No.
CDC–2024–0063 by either of the
following methods below. Do not
submit comments for the docket by
email. CDC does not accept comments
for the docket by email.

- *Federal eRulemaking Portal:*
<https://www.regulations.gov>. Follow the
instructions for submitting comments.
- *Mail:* Demetria Gardner, BA,
Centers for Disease Control and
Prevention, 1600 Clifton Road NE,

Mailstop H21–10, Atlanta, Georgia
30329–4027. Attn: Docket number CDC–
2024–0063.

Instructions: All submissions received
must include the Agency name and
Docket Number. All relevant comments
received in conformance with the
<https://www.regulations.gov>, suitability
policy will be posted without change to
<https://www.regulations.gov>, including
any personal information provided. For
access to the docket to read background
documents or comments received, go to
<https://www.regulations.gov>. Written
public comments submitted up to 72
hours prior to the ACD meeting will be
provided to ACD members before the
meeting. Written comments received in
advance of the meeting will be included
in the official record of the meeting.

FOR FURTHER INFORMATION CONTACT:
Demetria Gardner, BA, Office of the
Chief of Staff, Centers for Disease
Control and Prevention, 1600 Clifton
Road NE, Mailstop H21–10, Atlanta,
Georgia 30329–4027, Telephone: (770)
488–4745; Email Address: ACDDirector@cdc.gov.

SUPPLEMENTARY INFORMATION:
Purpose: The Advisory Committee to
the Director, CDC, shall (1) make
recommendations to the Director
regarding ways to prioritize the
activities of the agency in alignment
with the CDC Strategic Plan required
under section 305(c); H.R. 2617–1252;
(2) advise on ways to achieve or
improve performance metrics in relation
to the CDC Strategic Plan, and other
relevant metrics, as appropriate; (3)