

Prevention and the Agency for Toxic Substances and Disease Registry.

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**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

**Centers for Disease Control and
Prevention**

[Docket No. CDC-2021-0039]

**Draft Recommendations for Prevention
and Control of Infections in Neonatal
Intensive Care Unit Patients: Central
Line-Associated Blood Stream
Infections (CLABSI)**

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

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), in the Department of Health and Human Services (DHHS), announces the opening of a docket to obtain comment on the *Draft Recommendations for Prevention and Control of Infections in Neonatal Intensive Care Unit Patients: Central Line-associated Blood Stream Infections (CLABSI)*. (“*Draft Guideline*”). The *Draft Guideline* provides new, evidence-based recommendations specific to the prevention and control of central line-associated blood stream infections (CLABSI) in neonatal intensive care unit (NICU) patients.

DATES: Written comments must be received on or before June 8, 2021.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2021-0039, by any of the following methods:

- *Federal eRulemaking Portal:* <http://www.regulations.gov>. Follow the instructions for submitting comments.
- *Mail:* Division of Healthcare Quality Promotion, National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, Attn: Docket No. CDC-2021-0039, HICPAC Secretariat, 1600 Clifton Rd. NE, Mailstop H16-2, Atlanta, Georgia, 30329.

Instructions: All submissions received must include the agency name and Docket Number. All relevant comments received will be posted without change to <http://regulations.gov>, including any personal information provided. For access to the docket to read background

documents or comments received, go to <http://www.regulations.gov>.

FOR FURTHER INFORMATION CONTACT:

Marwan Wassef, M.P.H., Division of Healthcare Quality Promotion, National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop H16-2, Atlanta, Georgia, 30329; Email: IPCGuidelines@cdc.gov; Telephone: (404) 639-4000.

SUPPLEMENTARY INFORMATION:

Public Participation

Interested persons or organizations are invited to participate by submitting written views, recommendations, and data related to the *Draft Guideline*.

Please note that comments received, including attachments and other supporting materials, are part of the public record and are subject to public disclosure. Comments will be posted on <https://www.regulations.gov>. Therefore, do not include any information in your comment or supporting materials that you consider confidential or inappropriate for public disclosure. If you include your name, contact information, or other information that identifies you in the body of your comments, that information will be on public display. CDC will review all submissions and may choose to redact, or withhold, submissions containing private or proprietary information such as Social Security numbers, medical information, inappropriate language, or duplicate/near duplicate examples of a mass-mail campaign. CDC will carefully consider all comments submitted in preparation of the final *Guideline for Prevention and Control of Infections in Neonatal Intensive Care Unit Patients* and may revise the final document as appropriate.

Background

The *Draft Guideline*, located in the “Supporting & Related Material” tab of the docket, provides new, evidence-based recommendations specific to the prevention and control of CLABSI in NICU patients, including insertion and maintenance practices.

The *Draft Guideline* is intended for use by infection prevention staff, healthcare epidemiologists, healthcare administrators, nurses, neonatologists, other healthcare providers, and persons responsible for developing, implementing, and evaluating infection prevention and control programs for NICUs. The guideline can also serve as a resource for societies or organizations to develop more detailed implementation guidance for the prevention of infection in NICU patients.

The Healthcare Infection Control Practices Advisory Committee (HICPAC), a federal advisory committee chartered to provide advice and guidance to the CDC, worked with national partners, academicians, public health professionals, healthcare providers, and other partners to develop this *Draft Guideline*. HICPAC includes representatives from public health, infectious diseases, regulatory and other federal agencies, professional societies, and other stakeholders.

The draft recommendations in this *Draft Guideline* are informed by a systematic review of the best available literature through February 2017 and of relevant references published since February 2017 suggested by subject matter experts. This *Draft Guideline* will not be a federal rule or regulation.

Dated: April 6, 2021.

Sandra Cashman,

Executive Secretary, Centers for Disease Control and Prevention.

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**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

**Centers for Medicare & Medicaid
Services**

[Document Identifier: CMS-10209, CMS-10701, CMS-10516, CMS-8550 and CMS-216-94]

**Agency Information Collection
Activities: Proposed Collection;
Comment Request**

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS’ intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency’s functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and