and information collection associated with our medical device recall authority (21 CFR part 810) is approved in OMB control numbers 0910-0073 and 0910-0432, respectively. We assume burden respondents may have incurred as the result of any product relabeling, as well as one-time burden that respondents may have incurred resulting from integrating requirements into current tracking and labeling activities, has since been realized and is now accounted for among our currently approved inventory. Here, we are accounting for burden associated with UDI requirements prescribed by part 830 not otherwise included in currently approved collections and subject to general medical device labeling requirements established in part 801, subpart B. Because the PRA defines a recordkeeping requirement to include retained records, third-party notifications and disclosures, and reporting to the Federal government as well as the public, we have accounted for these activities cumulatively, characterizing them as recordkeeping activities.

Dated: February 8, 2023.

Lauren K. Roth,

Associate Commissioner for Policy. [FR Doc. 2023–03071 Filed 2–13–23; 8:45 am] BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection
Activities: Proposed Collection; Public
Comment Request; Application and
Other Forms Used by the National
Health Service Corps Scholarship
Program, the NHSC Students to
Service Loan Repayment Program, and
the Native Hawaiian Health
Scholarship Program

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

ACTION: Notice.

SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR. **DATES:** Comments on this ICR should be received no later than April 17, 2023. **ADDRESSES:** Submit your comments to paperwork@hrsa.gov or mail the HRSA Information Collection Clearance Officer, Room 14N136B, 5600 Fishers Lane, Rockville, Maryland 20857.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email *paperwork@hrsa.gov* or call Samantha Miller, the acting HRSA Information Collection Clearance Officer, at 301–594–4394.

SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Application and Other Forms Used by the National Health Service Corps (NHSC) Scholarship Program (SP), the NHSC Students to Service Loan Repayment Program (S2S LRP), and the Native Hawaiian Health Scholarship Program (NHHSP), OMB No. 0915—0146—Revision.

Abstract: Administered by HRSA's Bureau of Health Workforce, the NHSC SP, NHSC S2S LRP, and the NHHSP provide scholarships or loan repayment to qualified students who are pursuing primary care health professions education and training. In return, students agree to provide primary health care services in underserved communities located in federally designated Health Professional Shortage Areas once they are fully trained and licensed health professionals. Awards are made to applicants who demonstrate the greatest potential for successful completion of their education and training as well as commitment to provide primary health care services to communities of greatest need. The

information from program applications, forms, and supporting documentation is used to select the best qualified candidates for these competitive awards, and to monitor program participants' enrollment in school, postgraduate training, and compliance with program requirements.

Although some program forms vary from program to program (see program-specific burden charts below), required forms generally include: a program application, academic and non-academic letters of recommendation, the authorization to release information, and the acceptance/verification of good academic standing report. The NHHSP is not seeking to change or add any forms or documentation.

Need and Proposed Use of the Information: The NHSC SP, S2S LRP, and NHHSP applications, forms, and supporting documentation are used to collect necessary information from applicants and schools that enable HRSA to make selection determinations for the competitive awards and monitor compliance (via training programs and sites) with program requirements.

Likely Respondents: Qualified students who are pursuing education and training in primary care health professions and are interested in working in health professional shortage areas and schools at which such students are enrolled.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours			
NHSC Scholarship Program Application								
NHSC Scholarship Program Application Letters of Recommendation Authorization to Release Information	2,575 2,575 2,575	1 2 1	2,575 5,150 2,575	2.00 1.00 .10	5150.00 5150.00 257.50			

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS—Continued

Porm name Number of respondents Porm name Number of responses Portal Por						
Verification of Disadvantaged Background Status 615 1 615 .25 153.75	Form name		responses per		burden per response	
NHSC awardees/schools/post graduate training programs/sites			1 1			
Data Collection Worksheet	Total	* 2,575		13,490		11,355.00
Post Graduate Training Verification Form	NHSC awardees/scl	hools/post gradu	ate training pro	grams/sites		
NHSC Students to Service Loan Repayment Program Application	Post Graduate Training Verification Form	100	1 1 2	100	.50	50
NHSC Students to Service Loan Repayment Program Application	Total	* 600		1,700		1,050
Dication 284 1 284 2.00 568.00	NHSC Students to S	ervice Loan Rep	ayment Program	Application		
Native Hawaiian Health Scholarship Program Application 310 1.00 310 2.00 620.00 Letters of Recommendation 310 2.00 620 .25 155.00 Authorization to Release Information 310 1.00 310 .25 77.50 Acceptance/Verification of Good Standing Report 40 1.00 40 .25 10.00 Scholar Enrollment Verification Form 40 7.50 300 .50 150.00 Change in Program Curriculum Form 40 2.00 80 .25 20.00 NHHSP Graduation Documentation Form 40 1.00 40 .25 10.00	plication	284 284 284 84	1 2 1 1 1	284 284 284 84	1.00 .10 .25 .25	568.00 28.40 71.00 21.00
Letters of Recommendation 310 2.00 620 .25 155.00 Authorization to Release Information 310 1.00 310 .25 77.50 Acceptance/Verification of Good Standing Report 40 1.00 40 .25 10.00 Scholar Enrollment Verification Form 40 7.50 300 .50 150.00 Change in Program Curriculum Form 40 2.00 80 .25 20.00 NHHSP Graduation Documentation Form 40 1.00 40 .25 10.00	Native Hawaiian	Health Scholars	hip Program Ap	plication		
Total	Letters of Recommendation	310 310 40 40 40	2.00 1.00 1.00 7.50 2.00	620 310 40 300 80	.25 .25 .25 .50 .25	155.00 77.50 10.00 150.00 20.00
	Total	*310		1700		1042.50

^{*} Certain documents are submitted by a subset of respondents consistent with program requirements.

** Please note that the same group of respondents may complete each form as necessary.

Maria G. Button,

Director, Executive Secretariat.
[FR Doc. 2023–03109 Filed 2–13–23; 8:45 am]
BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Center for Scientific Review; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant

applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Center for Scientific Review Special Emphasis Panel; RFA-OD-22-027: Advanced Training in Artificial Intelligence for Precision Nutrition Science Research (AIPrN)—Institutional Research Training Programs (T32).

Date: March 13–14, 2023.

Time: 10:00 a.m. to 6:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Allen B. Richon, Ph.D., BS, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 6184, MSC 7892, Bethesda, MD 20892, (240) 760–0517, allen.richon@nih.hhs.gov.

Name of Committee: Infectious Diseases and Immunology B Integrated Review Group; HIV Comorbidities and Clinical Studies Study Section.

Date: March 14–15, 2023. Time: 9:00 a.m. to 8:00 p.m. Agenda: To review and evaluate grant applications.

Place: Melrose Hotel, 2430 Pennsylvania Ave. NW, Washington, DC 20037.

Contact Person: David C. Chang, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 451–0290, changdac@ mail.nih.gov.

Name of Committee: Center for Scientific Review Special Emphasis Panel; Small Business: Drug Discovery Involving the Nervous System.

Date: March 14–15, 2023.

Time: 9:00 a.m. to 8:00 p.m.

Agenda: To review and evalue

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Lai Yee Leung, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 1011D, Bethesda, MD 20892, (301) 827–8106, leungl2@csr.nih.gov.

Name of Committee: Center for Scientific Review Special Emphasis Panel; PAR–20– 117: Maximizing Investigators' Research