TABLE 1—Continued

Committee name	Tentative date(s) of meeting(s)
CENTER FOR DEVICES AND RADIOLOGICAL HEALTH	
Medical Devices Advisory Committee (Comprised of 18 Panels)	
Anesthesiology and Respiratory Therapy Devices Panel	Date(s), if needed, to be determined.
Circulatory System Devices Panel	May 17, May 24, June 27, September 27, November 22.
Clinical Chemistry and Clinical Toxicology Devices Panel	April 25.
Dental Products Panel	Date(s), if needed, to be determined.
Ear, Nose, and Throat Devices Panel	July 12.
Gastroenterology-Urology Devices Panel	April 24, May 16.
General and Plastic Surgery Devices Panel	June 13.
General Hospital and Personal Use Devices Panel	June 28, August 30.
Hematology and Pathology Devices Panel	Date(s), if needed, to be determined.
Immunology Devices Panel	Date(s), if needed, to be determined.
Medical Devices Dispute Resolution Panel	Date(s), if needed, to be determined.
Microbiology Devices Panel	June 14.
Molecular and Clinical Genetics Panel	September 13.
Neurological Devices Panel	February 22.
Obstetrics and Gynecology Devices Panel	September 20.
Ophthalmic Devices Panel	June 14, August 23.
Orthopaedic and Rehabilitation Devices Panel	April 5, September 26.
Radiological Devices Panel	September 12.
Device Good Manufacturing Practice Advisory Committee	April 11.
National Mammography Quality Assurance Advisory Committee	October 25.
Technical Electronic Product Radiation Safety Standards Committee	Date(s), if needed, to be determined.
CENTER FOR FOOD SAFETY AND APPLIED NUTRITION	
Food Advisory Committee	July 15–16, August 29–30, September 23–24.
CENTER FOR TOBACCO PRODUCTS	
Tobacco Products Scientific Advisory Committee	Feb 11–12, April 30–May 1.
CENTER FOR VETERINARY MEDICINE	
Veterinary Medicine Advisory Committee	Date(s), if needed, to be determined.
NATIONAL CENTER FOR TOXICOLOGICAL RESEARCH (NCTR)	
Science Advisory Board to NCTR	December 10–11.

Dated: December 26, 2012.

Leslie Kux,

Assistant Commissioner for Policy.

[FR Doc. 2012–31475 Filed 12–31–12; 8:45 am]

BILLING CODE 4160–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES\

National Institutes of Health

Proposed Collection; Comment Request (60-Day FRN); A Generic Submission for Formative Research, Pretesting, and Customer Satisfaction of NCI's Communication and Education Resources (NCI)

SUMMARY: Under the provisions of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Written comments and/or suggestions from the public and affected agencies are invited to address one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) The quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

To submit comments in writing, request more information on the proposed project, or to obtain a copy of the data collection plans and instruments, contact: Nina Goodman, Public Health Advisor, Office of Communications and Education (OCE), NCI, NIH, 6116 Executive Blvd., Suite 400, Rockville, MD 20892, call non-toll-free number (301) 435–7789 or email your request, including your address to: *goodmann@mail.nih.gov*.

Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

Proposed Collection: A Generic Submission For Formative Research, Pretesting, and Customer Satisfaction of NCI's Communication and Education Resources, 0925–0046, Expiration Date 2/28/2013—EXTENSION—National Cancer Institute, National Institutes of Health (NIH).

Need and Use of Information Collection: In order to carry out NCI's

legislative mandate to educate and disseminate information about cancer prevention, detection, diagnosis, and treatment to a wide variety of audiences and organizations, it is beneficial for NCI through its Office of Communications and Education (OCE), to pretest NCI communications strategies, concepts, and messages while they are under development. This pretesting, or formative evaluation, helps ensure that the messages, communication materials, and information services created by NCI have the greatest capacity of being received, understood, and accepted by their target audiences. Since NCI's OCE also is responsible for the design, implementation, and evaluation of education programs over the entire cancer continuum, and management of NCI initiatives that address specific challenges in cancer research and treatment, it is also necessary to ensure that customers are satisfied with programs. This customer satisfaction research helps ensure the relevance, utility, and appropriateness of the many educational programs and products that OCE and NCI produce. OCE will use a variety of qualitative (focus groups, interviews) and quantitative (paper, phone, in-person, and web surveys) methodologies to conduct this formative and customer satisfaction research, allowing NCI to: (1) Understand characteristics (attitudes, beliefs, and behaviors) of the intended target audience and use this information in the development of effective communication tools and strategies; (2) use a feedback loop to help refine, revise, and enhance messages, materials, products, and programs—ensuring that they have the greatest relevance, utility, appropriateness, and impact for/to target audiences; and (3) expend limited program resource dollars wisely and effectively. The participants may include, but are not limited to, cancer patients, their families, the general public, health providers, the media, voluntary groups, scientific and medical organizations (affected public could include individuals or households; businesses or other for profit; not-for-profit institutions; and Federal Government; State, Local, or Tribal Government).

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 6,600.

ESTIMATED ANNUALIZED BURDEN HOURS

Category of respondents	Number of respondents	Frequency of response per respondent	Time per response (in hours)	Burden hours
Individuals, Households, Local, State, and Federal Governments, and Private Sector	33,000	1	12	6,600
Totals	33,000			6,600

Dated: December 20, 2012.

Vivian Horovitch-Kelley,

NCI Project Clearance Liaison, NCI, NIH.

[FR Doc. 2012–31503 Filed 12–31–12; 8:45 am]

BILLING CODE 4101–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Neurological Disorders and Stroke, Interagency Pain Research Coordinating Committee; Call for Committee Membership Nominations

The Department of Health and Human Services (Department) has created the Interagency Pain Research Coordinating Committee and is seeking nominations for this committee. As specified in Public Law 111–148 (''Patient Protection and Affordable Care Act'') the Committee will: (a) Develop a summary of advances in pain care research supported or conducted by the Federal agencies relevant to the diagnosis, prevention, and treatment of pain and diseases and disorders associated with pain; (b) identify critical gaps in basic and clinical research on the symptoms and causes of pain; (c) make recommendations to ensure that the activities of the National Institutes of Health and other Federal agencies are free of unnecessary duplication of effort; (d) make recommendations on how best to disseminate information on pain care; and (e) make recommendations on how to expand partnerships between public entities and private entities to expand collaborative, cross-cutting research.

Membership on the committee will include six (6) non-Federal members from among scientists, physicians, and other health professionals and six (6) non-Federal members of the general public who are representatives of leading research, advocacy, and service organizations for individuals with pain-related conditions. Members will serve overlapping three year terms. It is anticipated that the committee will meet at least once a year.

The Department strives to ensure that the membership of HHS Federal advisory committees is fairly balanced in terms of points of view represented and the committee's function. Every effort is made to ensure that the views of women, all ethnic and racial groups, and people with disabilities are represented on HHS Federal advisory committees and, therefore, the Department encourages nominations of qualified candidates from these groups. The Department also encourages geographic diversity in the composition of the Committee. Appointment to this Committee shall be made without discrimination on the basis of age, race, ethnicity, gender, sexual orientation, disability, and cultural, religious, or socioeconomic status.

The Department is soliciting nominations for two non-federal members from among scientists, physicians, and other health professionals and for two non-federal members of the general public who are representatives of leading research, advocacy, and service organizations for people with pain-related conditions. These candidates will be considered to fill positions opened through completion of member terms. Nominations are due by COB, January 25, 2013, and should be sent to Linda Porter, Ph.D., NINDS/NIH, 31 Center Drive, Room 8A03, Bethesda, MD 20892, *porterl@ninds.nih.gov* by either USPS mail or email. Nominations should include contact information, and a current curriculum vitae or resume.

Dated: November 18, 2012.

Linda L. Porter,

Health Science Policy Advisor for Pain, National Institute of Neurological Disorders and Stroke, National Institutes of Health.

[FR Doc. 2012–31508 Filed 12–31–12; 8:45 am]

BILLING CODE 4140–01–P