DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; 30-Day Comment Request; Special Volunteer and Guest Researcher Assignment, Office of the Director (OD)

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH), has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the Federal Register on April 1, 2014 (Volume 79, Number 62), page 18300, and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The Office of Intramural Research (OIR), National Institutes of Health (NIH), may not conduct or sponsor, and the respondent is not required to respond to, an information

collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Direct Comments To OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the Office of Management and Budget, Office of Regulatory Affairs, OIRA_submission@ omb.eop.gov; or sent by fax to 202–395– 6974, Attention: NIH Desk Officer.

Comment Due Date: Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

FOR FURTHER INFORMATION CONTACT: To obtain a copy of the data collection plans and instruments, to submit comments in writing, or to request more information on the proposed project, contact Mr. Larry Chloupek, Management Liaison Director, OIR, OD, NIH, 2 Center Drive MSC 0235, Bethesda, MD 20892–0235; or call nontoll-free number 301–594–3992; or email your request, including your

address to *larry.chloupek@nih.gov*. Formal requests for additional plans and instruments must be requested in writing.

Proposed Collection: Special Volunteer and Guest Researcher Assignment, 0925–0177, Expiration Date 07/31/2014, Extension, Office of Intramural Research (OIR), National Institutes of Health (NIH).

Need and Use of Information Collection: Form Number: NIH–590 is a single form completed by an NIH official for each Guest Researcher or Special Volunteer prior to his/her arrival at the NIH. The information on the form is necessary for the approving official to reach a decision on whether to allow a Guest Researcher to use NIH facilities or whether to accept volunteer services offered by a Special Volunteer. If the original assignment is extended, another form notating the extension is completed to update the file.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 166.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Number of respondents	Frequency of response	Average time per response	Annual hour burden
Special Volunteers	1,250	1	6/60	125
Guest Researchers	410		6/60	41

Dated: July 9, 2014. Lawrence A. Tabak, Deputy Director, NIH. [FR Doc. 2014–16527 Filed 7–14–14; 8:45 am] BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; 30-day Comment Request: The Hispanic Community Health Study/Study of Latinos (HCHS/ SOL)

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the **Federal Register** on March 25, 2014 (Vol. 79, No. 57, pages 16345–16347). Three comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Heart, Lung and Blood Institute (NHLBI), National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Direct Comments To OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, OIRA_submission@ omb.eop.gov or by fax to 202–395–6974, Attention: NIH Desk Officer.

DATES: *Comment Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 30-days of the date of this publication.

FOR FURTHER INFORMATION CONTACT: To obtain a copy of the data collection plans and instruments or request more

information on the proposed project contact either: Dr. Larissa Aviles-Santa, 6701 Rockledge, Epidemiology Branch, Program in Prevention and Population Sciences, Division of Cardiovascular Sciences, National Heart, Lung, and Blood Institute, National Institutes of Health, 6701 Rockledge Dr, MSC 7936, Bethesda, MD 20892–7936, or call nontoll-free number 301–435–0450, or Email your request, including your address to *avilessantal@nhlbi.nih.gov*. Formal requests for additional plans and instruments must be requested in writing.

Proposed Collection: The Hispanic Community Health Study/Study of Latinos (HCHS/SOL), Revision, National Heart, Lung and Blood Institute (NHLBI), National Institutes of Health (NIH).

Need and Use of Information Collection: The purpose and use of the information collection for this project is to study the prevalence of cardiovascular and pulmonary disease and other chronic diseases, and their risk and protective factors, understand their relationship to all-cause, cardiovascular and pulmonary morbidity and mortality, and understand the role of sociocultural factors (including acculturation) on the prevalence or onset of disease among over 16,400 Hispanics/Latinos of diverse origins, aged 18–74 years at enrollment, living in four U.S. communities: San Diego, California; Chicago, Illinois; Miami, Florida, and the Bronx, New York. In order to achieve these objectives, the HCHS/SOL had two integrated components: 1. Examination of the cohort following a standardized protocol, which consisted of interviews and clinical measurements to assess physiological and biochemical measurements including DNA/RNA extraction for ancillary genetic research studies.

2. Follow-up of the cohort, which consists of an annual telephone interview to assess vital status, changes in health status and medication intake, and new cardiovascular and pulmonary events (including fatal and non-fatal myocardial infarction and heart failure; fatal and non-fatal stroke; and exacerbation of asthma and chronic obstructive pulmonary disease). This component also includes contact with physicians and informants to obtain medical information about participants.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 75,305.

ESTIMATED ANNUALIZED BURDEN HOURS

A.12.1 ESTIMATES OF HOUR BURDEN

[Appendices 11, 14 and 15]

Type of respondents	Survey instrument	Number of respondents	Number of responses per respondent	Average time per response (in hours)	Total burden hours
Participants Visit 2 Examination (Appendices 11 and 14).	Pre-visit scheduling & safety screen- ing (Appendix 14 —Procedures— ELE bilingual).	13878	1	2/60	463
	Reception, informed consent (Appendix 11), medical releases.	13878	1	20/60	4626
	Ppt. disability screening	13878	1	4/60	925
	Ppt. safety update and routing (Appendix 14—Procedures—PSE bi- lingual).	13878	1	2/60	463
	Change clothes, urine specimen (Appendix 14 — Procedures —BIO)*.	13878	1	10/60	2313
	Updated personal information	13878	1	5/60	1157
	Anthropometry	13878	1	7/60	1619
	Determination of fasting & blood draw (Appendix 14 — Proce- dures—BIO)*.	13878	1	11/60	2544
	Determination of blood glucose, OGTT (Appendix 14 — Proce- dures—BIO)*.	13878	1	6/60	1388
	Seated BP	13878	1	9/60	2082
	Echocardiography	8000	1	30/60	4000
	2-hour blood draw, snack (Appendix 14—Procedures—BIO)*.	13878	1	12/60	2776
	Personal Medical History	13878	1	10/60	2313
	Reproductive Medical History	9000	1	9/60	1350
	Pregnancy Complications History	9000	1	6/60	900
	Socio-economic Status—Occupation	13878	1	3/60	694
	Health Care Access and Utilization	13878	1	15/60	3470
	Chronic Stress	13878	1	4/60	925
	Family Cohesion	13878	1	5/60	1157
	Social Support	13878	1	3/60	694
	Acculturation	13878	1	3/60	694
	Well Being	13878	1	4/60	925
	Abbreviated Medication Use	13878	1	4/60	925
	Tobacco Use	13878	1	7/60	1619
	Alcohol Use	13878	1	3/60	694
	Participant Feedback	13878	1	12/60	2776
Total			206/60	43492	
Participants AFU Phone Interview (Appendix 15).	AFU Year 3	3146	1	15/60	787
	AFU Year 4	9033	1	15/60	2258
	AFU Year 5	14259	1	15/60	3565
	AFU Year 6	16222	1	15/60	4055
	AFU Year 7	16222	1	15/60	4055
	AFU Year 8	16222	1	15/60	4055
	AFU Year 9	16222	1	15/60	4055
	AFU Year 10	16222	1	15/60	4055

ESTIMATED ANNUALIZED BURDEN HOURS—Continued A.12.1 ESTIMATES OF HOUR BURDEN

[Appendices 11, 14 and 15]

Type of respondents	Survey instrument	Number of respondents	Number of responses per respondent	Average time per response (in hours)	Total burden hours
	AFU Year 11	16222	1	15/60	4055
Total			120/60	30940	
Physicians and/or other health care providers.	Hospitalization records/physician interview (Appendix 16, PQE).	1591	1	30/60	796
Informants	Informant Interview Deaths (Appen- dix 16, IIE/IIS).	154	1	30/60	77
Total				60/60	873

Dated: June 18, 2014. Michael Lauer,

Director, DCVS, NHLBI, NIH.

Dated: June 18, 2014.

Lynn Susulske,

NHLBI Project Clearance Liaison, National Institutes of Health. [FR Doc. 2014–16528 Filed 7–14–14; 8:45 am] BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; 60-Day Comment Request; Evaluation of Cancer Control Leadership Forums at the Center for Global Health

Summary: In compliance with the requirement 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 Cancer Institute (NCI), 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 on 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) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to 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 And For Further Information: To obtain a copy of the data collection plans and instruments, or request more information on the proposed project, contact: Brenda Kostelecky, Center for Global Health, National Cancer Institute, 9609 Medical Center Dr., RM 3W276, Rockville MD, 20850 or call non-tollfree number 240–276–5585 or Email your request, including your address to: brenda.kostelecky@nih.gov. Formal requests for additional plans and instruments must be requested in writing.

Comment Due Date: 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: Evaluation of Cancer Control Leadership Forums at the Center for Global Health (CGH) (NCI), 0925–NEW, National Cancer Institute (NCI), National Institutes of Health (NIH).

Need and Use of Information Collection: This submission is a request for OMB to approve the Cancer Control Leadership Forums. These workshops are organized and funded by the National Cancer Institute's CGH in

conjunction with various partners ranging from foreign Ministries of Health and research institutions, to international non-governmental organizations (NGOs) and U.S. academic institutions. The goal of the U.S. National Cancer Institute (NCI) Cancer Control Leadership Forums is to increase the capacity of participating countries to initiate or enhance cancer control planning and implementation in their respective countries. The Forums are an opportunity for countries to exchange experiences and ideas about creating and implementing comprehensive cancer control plans. The proposed evaluation requests information about the outcomes of the forums including (1) status of cancer control planning and implementation in each participating country, (2) outcomes related to the action plans (e.g. developing written materials, completion of action items, resources and support acquired),(3) successes and challenges related to the action plans, and (4) new cancer control partnerships and networks. Baseline information regarding the status of cancer control planning and implementation will be collected 3 months prior to the Forums in order to inform the development of each Forum. The evaluation information will be collected 3-24 months after each forum and is needed to evaluate the effectiveness of these workshops in order to inform future programming and funding decisions.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 108.