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: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Dr. Simone Glynn, Project Officer, NHLBI, Two Rockledge Center, Room 9142, 6701 Rockledge Drive, Bethesda, MD 20892–7950, or call 301–435–0065, or E-mail your request to *glynnsa@nhlbi.nih.gov.*

Comments 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.

Dated: December 16, 2010.

Simone Glynn,

Branch Chief, Transfusion Medicine and Cellular Therapeutics Branch, Division of Blood Diseases and Resources, National Heart, Lung, and Blood Institute, NIH.

[FR Doc. 2010–31734 Filed 12–16–10; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; Study of Substance Abuse doc.com Module Project

SUMMARY: In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the National Institute on Drug Abuse (NIDA), 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.

Proposed Collection: Title: Study of Substance Abuse doc.com Module Project. *Type of Information Collection Request:* NEW. *Need and Use of Information Collection:* This is a request for a two-year generic clearance to a conduct research study to assess the efficacy of a specific interactive web-based teaching module in the field of professional education of healthcare providers. This online module was developed as a work product by the same team of investigators from Drexel University College of Medicine (DUCOM) and University of Pennsylvania School of Medicine (Penn Med) under a contract as part of NIDA's Center of Excellence (CoE) for Physician Information. This project will assess efficacy of the NIDA CoE online teaching module with educational interventions in enhancing: (1) The knowledge of healthcare professionals about substance use disorders; (2) attitudes of healthcare professionals toward patients with these disorders and (3) communication skills in providing assessment and referral to treatment for patients who abuse substances. The overall goal of this project is to assess the efficacy of an educational intervention, which should result in an increase in the involvement of primary care providers in the screening, managing and, when appropriate, referring patients with substance use disorders. This effort is made according to Executive Order 12862, which directs Federal agencies that provide significant services directly to the public to survey customers to determine the kind and quality of services they want and their level of satisfaction with existing services.

The project will utilize a randomized cluster controlled trial design that compares the group that receives educational exposure to the set of new educational interventions (NIDA online teaching module plus educational adjuncts) to a control group that receives exposure to the standard medical school or residency educational curriculum related to substance use disorders. The project will use a repeated measures approach to assess the educational intervention's efficacy (*i.e.,* individuals will take surveys before and after exposure to the intervention or to the control curriculum). The outcomes of the study will be based on changes in knowledge, attitudes and indirect measures of communication skills before and after the intervention, compared to the changes in these parameters in the control group.

Frequency of Response: This project will be conducted annually or biennially. *Affected Public:* Individuals and businesses. *Type of Respondents:* medical students and resident physicians. The annual reporting burden is calculated as follows: *Estimated Total Annual Number of Respondents:* 708; *Estimated Number of Responses per Respondent:* 4 for medical students; 2 for resident physicians; *Average Burden Hours per Response:* 0.17. *Estimated Total Annual Burden Hours Requested:* 377; There are no Capital Costs to report. There are no Operating or Maintenance Costs to report. The estimated annualized burden is summarized below.

Respondents	Estimated number of subjects	Estimated number of surveys per subject	Average burden hours per survey	Estimated total burden hours
Medical Students	400	4	0.17	272
Primary Care Resident Physicians	308	2	0.17	105
Total	708			377

Request for Comments: 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 functions of the agency, including whether the information shall have practical utility; (2) the accuracy of the agency's estimate of the burden of the proposed collection of information; (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 respondents, including through the use of automated collection techniques or other forms of information technology.

FOR FURTHER INFROMATION CONTACT: To request more information on the proposed projects or to obtain a copy of the information collection plans, contact Elisabeth Davis, Project Officer, National Institute on Drug Abuse, NIDA/NIH/DHHS, 6001 Executive Boulevard, MSC 9591, Bethesda, MD 20852; or call non-toll-free number (301) 594–6317; fax (301) 480–2485; or e-mail your request, including your address to: *davise2@nida.nih.gov.*

Comments 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.

Dated: December 9, 2010.

Mary Affeldt,

Executive Officer, (OM Director) NIDA.

[FR Doc. 2010–31737 Filed 12–16–10; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; Questionnaire Cognitive Interview and Pretesting (NCI)

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), 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.

Proposed Collection: Title: Questionnaire Cognitive Interview and Pretesting. Type of Information Collection Request: Extension. Need and Use of Information Collection: The purpose of the data collection is to conduct cognitive interviews, focus groups, Pilot household interviews, and experimental research in laboratory and field settings, both for applied questionnaire evaluation and more basic research on response errors in surveys. The most common evaluation method is the cognitive interview, in which a questionnaire design specialist interviews a volunteer participant. The interviewer administers the draft survey questions as written, but also probes the participant in depth about interpretations of questions, recall processes used to answer them, and adequacy of response categories to express answers, while noting points of confusion and errors in responding. Interviews are generally conducted in small rounds of 10–15 interviews. When possible, cognitive interviews are conducted in the survey's intended mode of administration. Cognitive interviewing provides useful information on questionnaire performance at minimal cost and respondent burden. Similar methodology has been adopted by other Federal agencies, as well as by academic and commercial survey organizations. There are no costs to respondents other than their time. The total estimated annualized burden hours are 600. Frequency of Response: Once. Affected Public: Individuals and households, Private Sector (business or other for-profits, not-for-profit institutions) and possibly, State, Local or Tribal Governments. The table below represents the burden over a three-year data collection period, which is a typical request for a generic submission.

Type of respondents	Projects	Number of respondents	Frequency of responses/participant	Average hours per response	Burden hours over 3 years
Questionnaire Development Volunteers.	(1) Survey questionnaire development.	1,200	1	75/60 1.25)	1,500.0
General Volunteers	(2) Research on the cognitive aspects of survey methodology.	600	1	75/60 (1.25)	750.0
Computer User Volunteers	(3) Research on computer-user interface design.	600	1	75/60 (1.25)	750.0
Household Interview Volunteers	(4) Pilot Household interviews	1,200	1	30/60 (0.5)	600.0
Totals		3,600			3,600.0

The estimated total annual burden hours requested is 1,200 which amounts to approximately 3,600 hours over three years. There are no annualized costs to respondents. The annualized costs to the Federal Government are estimated at $264,000 and include cost of NCI staff to plan, conduct, and analyze outcomes of questionnaire development, contracting for pretesting activities and research, travel costs, and additional materials needed to conduct and recruit participants for the research.

Request for Comments: 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.

For Further Information Contact: To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Dr. Gordon Willis, Ph.D., Cognitive Psychologist, Applied Research Program, DCCPS, NCI/NIH, 6130 Executive Blvd., MSC 7344, EPN 4005, Bethesda, MD 20892 or call non-toll-free number 301–594–6652 or e-mail your request, including your address to: *willis@mail.nih.gov*.

Comments 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.

Dated: December 13, 2010.

Vivian Horovitch-Kelley,

NCI Project Clearance Liaison, National Institutes of Health.

[FR Doc. 2010–31735 Filed 12–16–10; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the NCI Special Emphasis Panel, Experimental Therapeutics Program (NExT), January 6, 2011, 8:30 a.m.–4:30 p.m., Doubletree Hotel Bethesda, 8120 Wisconsin Avenue, Rockville, MD 20852 which was published in the **Federal Register** on November 24, 2010, 75 FR 71712.

This notice is amending the location of the meeting from the Doubletree Hotel Bethesda, 8120 Wisconsin Avenue, Bethesda, MD 20814 to the