assembled a subcommittee called the International Research Panel, which met three times in 2011. The proceedings of the International Research Panel are now available for public review and comment at the Commission’s Web site, www.bioethics.gov. Please address comments by e-mail to info@bioethics.gov, or by mail to the following address: Public Commentary, Presidential Commission for the Study of Bioethical Issues, 1425 New York Ave., NW., Suite C–100, Washington, DC 20005. Comments will be publicly available, including any personally identifiable or confidential business information that they contain. Trade secrets should not be submitted.

Dated: August 30, 2011.

Valerie H. Bonham,
Executive Director, Presidential Commission for the Study of Bioethical Issues.

[FR Doc. 2011–23030 Filed 9–8–11; 8:45 am]
BILLING CODE 4154–06–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–11–11BJ]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–5960 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

CDC Diabetes Prevention Recognition Program (DPRP)—New—Division of Diabetes Translation, National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) is establishing the CDC Diabetes Prevention Recognition Program (DPRP) as authorized by Section 399–V of Public Law 111–148, the Patient Protection and Affordable Care Act. The DPRP will provide a mechanism for recognizing organizations that deliver effective, community-based type 2 diabetes prevention programs according to written program standards. CDC will collect information to monitor, evaluate, and provide technical assistance to organizations that apply for recognition through the DPRP. Applicant organizations may be public- or private-sector entities. Information collection will include a one-time, online application form to verify the organization’s eligibility. Thereafter, each applicant organization will submit de-identified program evaluation (process and outcome) data to CDC every six months. Information will be collected electronically. CDC will use the information to monitor program fidelity to a CDC-approved diabetes prevention curriculum, to evaluate its effectiveness and to provide targeted technical assistance to applicant organizations. Contact information for organizations that fully meet DPRP standards will be made available on the DPRP Web site.

OMB approval is requested for three years. CDC anticipates seeking continued OMB approval throughout the lifetime of the DPRP. Participation in the DPRP is voluntary, and there are no costs to organizations other than their time. The total estimated annualized burden hours are 600.

Dated: August 31, 2011.

Daniel Holcomb,
Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. 2011–22789 Filed 9–8–11; 8:45 am]
BILLING CODE 4154–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Request for Nominations of Candidates to Serve on the Breast and Cervical Cancer Early Detection and Control Advisory Committee (BCCEDCAC)

The Centers for Disease Control and Prevention (CDC) is soliciting nominations for membership on the BCCEDCAC. The BCCEDCAC provides advice and guidance to the Secretary, the Assistant Secretary for Health, and the CDC on the early detection and control of breast and cervical cancer. The role of the BCCEDCAC is to provide advice and make recommendations regarding national program goals and objectives; implementation strategies; program priorities, including surveillance, epidemiologic investigations, education and training, information dissemination, professional interactions and collaborations, and policy.

Nominations are being sought for individuals who have expertise and qualifications necessary to contribute to the accomplishments of the committee’s objectives. Nominees will be selected based on expertise in the field of medicine, including public health,

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