practitioners in the NPDB. Unlike a
traditional query, PDS enrolled
practitioners are continuously
monitored and subscribed entities need
not pay for multiple queries each time
they want to access new information on
a practitioner. The following table
charts the growth of PDS enrollments
beginning in June 2007 through June
2010 for the NPDB and the HIPDB:

**NUMBER OF PRACTITIONERS ENROLLED IN PDS**

<table>
<thead>
<tr>
<th>Month/year</th>
<th>NPDB</th>
<th>HIPDB</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 2010</td>
<td>481,794</td>
<td>125,649</td>
</tr>
<tr>
<td>June 2009</td>
<td>311,275</td>
<td>101,720</td>
</tr>
<tr>
<td>June 2008</td>
<td>113,631</td>
<td>12,592</td>
</tr>
<tr>
<td>June 2007</td>
<td>47,641</td>
<td>2,005</td>
</tr>
</tbody>
</table>

The number of enrollments is steadily
climbing and re-enrollment rates for this
service are approximately 90 percent.
This service is quickly becoming the
benchmark for monitoring practitioner
credentials because it is designed and
developed to meet new accreditation
standards that require on-going
monitoring of practitioners. In light of
these developments, HRSA is making
this service a permanent feature. The
name change from PDS to Continuous
Query better captures the true nature of
this service, which is the continuous
monitoring of enrolled practitioners.
All aspects of the PDS querying
service as described in the March 7,
2007 notice are still in effect except for
the upgrade from prototype to
permanent status and the name change
set forth in this notice.

II. Revisions to Previous Notice

This notice is to inform the public
that the prototype status for PDS is
removed and that the name of the PDS
querying service has been changed to
Continuous Query.

Dated: September 16, 2011.

Mary K. Wakefield,
Administrator, Health Resources and Services
Administration.

[FR Doc. 2011–24403 Filed 9–22–11; 8:45 am]
BILLING CODE 4165–15–P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**Submission for OMB Review; Comment Request; NINR End-of-Life and Palliative Care Science Needs Assessment: Funding Source (Survey of Authors)**

**Summary:** Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institute of Nursing (NINR), 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 information collection was previously published in the Federal Register on June 16, 2011, page 35221 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.

5 CFR 1320.5 (General requirements) Reporting and Recordkeeping Requirements: Final Rule requires that the agency inform the potential persons who are to respond to the collection of information that such persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. This information is required to be stated in the 30-day Federal Register Notice.

**Proposed Collection: Title:** NINR End-of-Life and Palliative Care Science Needs Assessment: Funding Source (Survey of Authors). **Type of Information Collection Request:** NEW. Need and Use of Information Collection: The NINR End-of-Life Science Palliative Care (EOL PC) Needs Assessment: Funding Source Questionnaire will obtain information on funding sources of EOL PC research published studies for which a funding source is not cited or the information is unclear. Target participants are authors of publicly-available EOL PC research studies published between 1997–2010 for whom a funding source is unknown or unclear. The questionnaire inquires about the funding source of the published study, type of funding received, year of funding, and duration of funded study. This is a 7-item questionnaire that takes approximately 5 minutes to complete. Data collected is part of a needs assessment to address the breadth and depth of EOL PC scientific issues for use in stimulating research capacity in the field. Frequency of Response: One time. Affected Public: Individual authors of publicly available EOL PC research publications who do not list a funding source or the source is unclear within their publication. Type of Respondents: EOL PC researchers.

The annual reporting burden is as follows:

- Estimated Number of Respondents: 1840;
- Average Burden Hours Per Response: .08; and
- Estimated Total Annual Burden Hours Requested: 147.

There are no Capital Costs, Operating or Maintenance Costs to report.

**Request for comments:** Written comments and/or suggestions from the public and affected agencies should 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) 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.

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: 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. Amanda Greene, Office of Science Policy and Public Liaison, NINR, NIH, Democracy One, 6701 Democracy Blvd., Suite 710, Bethesda, MD 20892 or call non-toll-free number (301) 496–9601 or E-mail your request, including your address to: amanda.greene@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: September 16, 2011.

Amanda Greene,
Science Evaluation Officer, NINR, National Institutes of Health.

[FR Doc. 2011–24510 Filed 9–22–11; 8:45 am]
BILLING CODE 4140–01–P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Institute of Diabetes and Digestive and Kidney Diseases; Notice of Closed Meetings**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as