

eligible for submission for other generic mechanisms that are designed to yield quantitative results.

No comments were received in response to the 60-day notice published in the **Federal Register** of December 22, 2010 (75 FR 80542).

Below we provide NIDA's projected average estimates for the next three years:¹

Current Actions: New collection of information.

Type of Review: New Collection.

Affected Public: Individuals and Households, Businesses and Organizations, State, Local or Tribal Government.

Average Expected Annual Number of activities: 4.

Respondents: 740.

Annual responses: 740.

Frequency of Response: Once per request.

Average minutes per response: 50.

Burden hours: 516.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget control number.

Dated: October 6, 2011.

Mary Affeldt,

Executive Officer (OM Director), NIDA.

[FR Doc. 2011-26906 Filed 10-17-11; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; The Hispanic Community Health Study (HCHS)/Study of Latinos (SOL)

Summary: Under the provisions of Section 3507(a)(1)(D) of the Paperwork

Reduction Act of 1995, the National Heart, Lung, and Blood Institute (NHLBI), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval the information collection listed below. This proposed information collection was previously published in the **Federal Register** on August 9, 2011, pages 48872-48873, and allowed 60 days for public comment. Two public comments were received. One comment questioned why government resources are being devoted to studying the health of Hispanic groups. The comment was acknowledged by NHLBI. The second comment, from an advocacy group, inquired about exploring the availability of paid sick leave and its relationship to Hispanic health. NHLBI acknowledged and followed-up on this comment.

The purpose of this notice is to allow an additional 30 days for public comment. The 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.

Proposed Collection: Title: Hispanic Community Health Study (HCHS)/Study of Latinos (SOL). *Type of Information Collection Request:* Revision of currently approved collection (OMB# 0925-0584). *Need and Use of Information Collection:* The Hispanic Community Health Study (HCHS)/Study of Latinos (SOL) will identify risk factors for cardiovascular and lung disease in Hispanic populations and determine the role of acculturation in the prevalence and development of these diseases. Hispanics, now the largest minority population in the U.S., are influenced by factors associated

with immigration from different cultural settings and environments, including changes in diet, activity, community support, working conditions, and health care access. This project is a multicenter, six-and-a-half-year epidemiologic study and will recruit 16,000 Hispanic men and women aged 18-74 in four community-based cohorts in Chicago, Miami, San Diego, and the Bronx. The study will examine measures of obesity, physical activity, nutritional habits, diabetes, lung and sleep function, cognitive function, hearing, and dental conditions. Closely integrated with the research component will be a community and professional education component, with the goals of bringing the research results back to the community, improving recognition and control of risk factors, and attracting and training Hispanic researchers in epidemiology and population-based research. *Frequency of Response:* The participants will be contacted annually. *Affected Public:* Individuals or households; Businesses or other for profit; Small businesses or organizations. *Type of Respondents:* Individuals or households; physicians. The annual reporting burden is as follows: Estimated Number of Respondents: 17,284; *Estimated Number of Responses per Respondent:* 1; *Average Burden Hours Per Response:* 0.3072; and *Estimated Total Annual Burden Hours Requested:* 5,309. The annualized cost to respondents is estimated at \$104,718, assuming respondents time at the rate of \$15 per hour and physician time at the rate of \$55 per hour. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

ESTIMATE OF RESPONDENT BURDEN [HCHS/SOL]

| Type of respondents | Number of respondents | Frequency of response | Average time per response | Annual hour burden |
|---|-----------------------|-----------------------|---------------------------|--------------------|
| <i>Participant Telephone Interviews</i> | | | | |
| a. Follow-Up Call, Year 1 | 1,333 | 1 | 0.75 | 1,000 |
| b. Follow-Up Call, Year 2 | 5,333 | 1 | 0.25 | 1,333 |
| c. Follow-Up Call, Years 3, 4, 5, 6 | 9,334 | 1 | 0.25 | 2,334 |
| Subtotal | | | | 4,667 |

¹ The 60-day notice included the following estimate of the aggregate burden hours for this generic clearance federal-wide:

Average Expected Annual Number of activities: 25,000.
Average number of Respondents per Activity: 200.

Annual responses: 5,000,000.
Frequency of Response: Once per request.
Average minutes per response: 12.
Burden hours: 2,500,000.

| | | | | |
|--|--|---|------|-------|
| <i>Non-participant components</i> ¹ | | | | |
| a. Physician, hospital and nursing home contacts for outcomes ascertainment (total = 1,254). | Deaths: 60 CHF: 90 Stroke: 132 CHD: 650 COPD: 210 Asthma: 112 | 1 | 0.50 | 627 |
| b. Informant contact | 30 | 1 | 0.50 | 15 |
| Subtotal | | | | 642 |
| Grand total | | | | 5,309 |

Request for Comments: Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate 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) Evaluate 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) Enhance 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.

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, 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. Larissa Aviles-Santa, Project Officer, NIH, NHLBI, 6701 Rockledge Drive, MSC 7936, Bethesda, MD 20892-7936, or call non-toll-free number 301-435-1284 or E-mail your request, including your address to: AvilessantaL@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: October 6, 2011.
Michael S. Lauer,
Director, Division of Cardiovascular Sciences, NHLBI, National Institutes of Health.
 Dated: October 6, 2011.
Lynn Susulke,
NHLBI Project Clearance Liaison, National Institutes of Health.
 [FR Doc. 2011-26949 Filed 10-17-11; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Allergy and Infectious Diseases; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.) notice is hereby given of the following meeting. The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Allergy and Infectious Diseases Special Emphasis Panel, Beyond HAART: Innovative Therapies to Control HIV-1.
Date: November 14-16, 2011.
Time: 8 a.m. to 5 p.m.
Agenda: To review and evaluate grant applications.
Place: Residence Inn—Bethesda Downtown Hotel, 7335 Wisconsin Avenue, Bethesda, MD 20814.
Contact Person: Roberta Binder, PhD, Scientific Review Officer, Scientific Review Program, Division of Extramural Activities, NIAID/NIH/DHHS, 6700B Rockledge Drive, Room 3130, Bethesda, MD 20892-7616, 301-496-7966, rbinder@niaid.nih.gov.
 (Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology,

and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS)
 Dated: October 12, 2011.
Jennifer S. Spaeth,
Director, Office of Federal Advisory Committee Policy.
 [FR Doc. 2011-26908 Filed 10-17-11; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Diabetes and Digestive and Kidney Diseases; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting. The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Diabetes and Digestive and Kidney Diseases Special Emphasis Panel, PAR09-247: Ancillary Studies in Liver Disease and Digestive Disease.
Date: November 10, 2011.
Time: 1:30 p.m. to 3 p.m.
Agenda: To review and evaluate grant applications.
Place: National Institutes of Health, Two Democracy Plaza, 6707 Democracy Boulevard, Bethesda, MD 20892, (Telephone Conference Call).
Contact Person: Ann A. Jerkins, PhD, Scientific Review Officer, Review Branch, DEA, NIDDK, National Institutes of Health, Room 759, 6707 Democracy Boulevard, Bethesda, MD 20892-5452, 301-594-2242, jerkinsa@nidDK.nih.gov.
 (Catalogue of Federal Domestic Assistance Program Nos. 93.847, Diabetes,