

and CNF and these biomarkers of early effect, considering potential confounding factors such as smoking, age, gender, and workplace co-exposures, including non-engineered ultrafine particles.

The proposed project supports the NIOSH legislatively mandated industrywide studies program that conducts epidemiological and exposure

assessment research studies to identify the occupational causes of disease in the working population and their offspring and to effectively communicate study results to workers, scientists, industry, and the public.

The questionnaire will be administered one time only, at the worksite, to 100 workers involved in the production and use of CNT or CNT. The

study will be carried out during the participants' regular work shift. There is no cost to respondents or their employers other than their time. We estimate that the average burden per response to be 22 minutes, and that the total burden to all respondents will be 37 hours (see table below).

**ESTIMATED ANNUALIZED BURDEN HOURS**

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Nanomaterials Workers .....	100	1	22/60	37
Total .....				37

Dated: September 14, 2012.

**Ron A. Otten,**

Director, Office of Scientific Integrity (OSI), Office of the Associate Director for Science (OADS), Office of the Director, Centers for Disease Control and Prevention.

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Healthcare Infection Control Practices Advisory Committee (HICPAC)**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting for the aforementioned committee:

*Times and Dates:* 9:00 a.m.–5:00 p.m., October 11, 2012; 9:00 a.m.–12:00 p.m., October 12, 2012

*Place:* Renaissance Washington, DC Dupont Circle Hotel, City Center Ballroom, 1143 New Hampshire Avenue NW., Washington, District of Columbia 20037.

*Status:* Open to the public, limited only by the space available. Please register for the meeting at [www.cdc.gov/hicpac](http://www.cdc.gov/hicpac).

*Purpose:* The Committee is charged with providing advice and guidance to the Secretary, Department of Health and Human Services (HHS); the Director, Centers for Disease Control and Prevention (CDC); the Deputy Director, Office of Infectious Diseases (OID), CDC; and the Director, National Center for Emerging and Zoonotic Infectious Disease (NCEZID), CDC, regarding (1) the practice of infection control; (2) strategies for surveillance, prevention, and control of healthcare-associated infections (e.g., nosocomial infections) antimicrobial resistance and related events in settings where healthcare is provided, including

hospitals, ambulatory and long-term care facilities, and home health agencies; and (3) periodic updating of existing guidelines, development of new guidelines, guideline evaluation; and other policy statements regarding the prevention of healthcare-associated infections an healthcare-related conditions.

*Matters To Be Discussed:* The agenda will include updates on CDC's activities for healthcare associated infections (HAI), an update on the draft guideline for prevention of infections among patients in neonatal intensive care units (NICU), draft guideline for the prevention of surgical site infections, draft guidance for facility adjudication of infection data, and an update from the HICPAC surveillance working group.

Agenda items are subject to change as priorities dictate.

*Contact Person for More Information:* Erin Stone, M.S., HICPAC, Division of Healthcare Quality Promotion, NCEZID, CDC, 1600 Clifton Road, NE., Mailstop A-07, Atlanta, Georgia 30333 Telephone (404) 639-4045. Email: [hicpac@cdc.gov](mailto:hicpac@cdc.gov)

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: September 12, 2012.

**Elaine L. Baker,**

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Advisory Committee to the Director (ACD), Centers for Disease Control and Prevention—Ethics Subcommittee (ES)**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting of the aforementioned subcommittee:

*Time and Date:* 8:30 a.m.–2:30 p.m., EDT, Thursday, October 11, 2012.

*Place:* CDC, Thomas R. Harkin Global Communications Center, Distance Learning Auditorium, 1600 Clifton Road, NE., Atlanta, GA 30333. This meeting is also available by teleconference. Please dial (877) 928-1204 and enter code 4305992.

*Status:* Open to the public, limited only by the space available. The meeting room accommodates approximately 60 people. To accommodate public participation in the meeting, a conference telephone line will be available. The public is welcome to participate during the public comment period. The public comment period is tentatively scheduled for 2 p.m.–2:10 p.m.

*Purpose:* The ES will provide counsel to the ACD, CDC, regarding a broad range of public health ethics questions and issues arising from programs, scientists and practitioners.

*Matters To Be Discussed:* Agenda items will include the following topics: Ethical considerations relating to use of travel restrictions for the control of communicable diseases; addition of ethics standards to the accreditation process for public health departments; approaches for evaluating the impact of public health ethics activities; progress on developing practical tools to assist state, tribal, local, and territorial health departments in their efforts to address public health ethics challenges; and strategies for