

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Adult Family Member	Family Core	45,000	1	23/60
Sample Adult	Adult Core	36,000	1	15/60
Adult Family Member	Child Core	14,000	1	10/60
Adult Family Member	Supplements	45,000	1	20/60
Adult Family Member	Followback	12,000	1	20/60
Adult Family Member	Reinterview Survey	5,000	1	5/60

Leroy A. Richardson,

Chief, Information Collection Review Office,
Office of Scientific Integrity, Office of the
Associate Director for Science, Office of the
Director, Centers for Disease Control and
Prevention.

[FR Doc. 2014–28233 Filed 12–1–14; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC–2014–0012]

Recommendations for Providers Counseling Male Patients and Parents Regarding Male Circumcision and the Prevention of HIV Infection, STIs, and Other Health Outcomes

AGENCY: Centers for Disease Control and
Prevention (CDC), Department of Health
and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease
Control and Prevention (CDC), located
within the Department of Health and
Human Services (HHS), is seeking
public comment on draft
recommendations for health care
providers who deliver information and
counseling about elective male
circumcision and the prevention of HIV
and other adverse health outcomes to
male patients and parents in the United
States. The draft recommendations
include information about the health
benefits and risks of elective male
circumcision performed by health care
providers.

DATES: Written comments must be
received on or before January 16, 2015.

ADDRESSES: You may submit comments
identified by Docket Number CDC–
2014–0012 by any of the following
methods:

- Federal eRulemaking Portal: <http://www.regulations.gov>. Follow the instructions for submitting comments.
- Mail: Division of HIV/AIDS
Prevention, National Center for HIV/

AIDS, Viral Hepatitis, STD, and TB
Prevention, Centers for Disease Control
and Prevention, 1600 Clifton Road NE.,
Mailstop D–21, Atlanta, Georgia 30333.
Attn: Male Circumcision
Recommendations.

Instructions: All submissions received
must include the agency name and
docket number or RIN. All relevant
comments received will be posted
without change to [http://
regulations.gov](http://regulations.gov), including any personal
information provided. CDC will not
consider or post any comments that
contain vulgar or offensive language,
threats, personal accusations, and/or
statements intended to promote
commercial products or services, or
images. Additionally, CDC will not post
any pictures that are submitted. For
access to the docket to read the
recommendations, background
document, or comments received, go to
<http://www.regulations.gov>.

FOR FURTHER INFORMATION CONTACT:
Division of HIV/AIDS, National Center
for HIV/AIDS, Viral Hepatitis, STD, and
TB Prevention, Centers for Disease
Control and Prevention, 1600 Clifton
Road NE., MS D–21, Atlanta, Georgia
30329, phone: 404–639–5200. Email:
circumcision@cdc.gov.

SUPPLEMENTARY INFORMATION: These
recommendations are intended to assist
health care providers in the United
States who are counseling men and
parents of male infants, children and
adolescents in decision making about
male circumcision. Such decision
making is made in the context of not
only health considerations, but also
other social, cultural, ethical, and
religious factors. Although data have
been accumulating about infant male
circumcision for many years, clinical
trials conducted between 2005–2010
have demonstrated safety and
significant efficacy of voluntary adult
male circumcision performed by
clinicians for reducing the risk of
acquisition of human
immunodeficiency virus (HIV) by a
male during penile-vaginal sex
("heterosexual sex"). Three randomized

clinical trials showed that adult male
circumcision reduced HIV infection risk
by 50–60% over time. These trials also
found that adult circumcision reduced
the risk of men acquiring two common
sexually transmitted infections (STIs),
herpes simplex virus type-2 (HSV–2)
and types of human papilloma virus
(HPV) that can cause penile and other
anogenital cancers, by 30%. Since the
release of these trial data, various
organizations have updated their
recommendations about adult male and
infant male circumcision.

In addition to obtaining public
comment on the draft
Recommendations, CDC considers this
document to be important information
as defined by the Office of Management
and Budget's (OMB) 2004 Information
Quality Bulletin for Peer Review and,
therefore, subject to peer review. CDC
will share the summary of public
comments with external experts who
conduct a peer review of the evidence
on this topic. Their review will include
an evaluation of completeness,
accuracy, interpretation, and
generalizability of the evidence to the
United States and whether the evidence
is sufficient to support the draft
counseling recommendations.

After considering all public comment
and the results of the peer review, CDC
will publish a notice in the **Federal
Register** announcing the final
recommendations.

Dated: November 19, 2014.

Ron A. Otten,

Acting Deputy Associate Director for Science,
Centers for Disease Control and Prevention.

[FR Doc. 2014–27814 Filed 11–28–14; 4:15 pm]

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