

*C. NIOSH List of Hazardous Drugs in Healthcare Settings, 2020—Title, Reorganization, and Removals*

NIOSH has retitled and reorganized the *List* in response to comments received. Many of the drugs currently used to fight cancer function differently than those previously used. Antineoplastic drugs are no longer all cytotoxic, genotoxic, and highly hazardous chemicals. Therefore, when drugs are grouped by their function (*i.e.*, antineoplastic), as they were in earlier versions of Table 1, drugs that required different protective measures were grouped together (non-cytotoxic drugs with cytotoxic drugs). NIOSH has determined that grouping all antineoplastic drugs together in one table is no longer the most useful or informative for users. Therefore, NIOSH has regrouped the tables by hazard. The *List* now comprises only two tables:

Table 1: Drugs that contain MSHI in the package insert and/or meet the NIOSH definition of a hazardous drug and are classified by NTP as “known to be a human carcinogen,” or classified by IARC as “carcinogenic” or “probably carcinogenic.”

Table 2: Drugs that meet the NIOSH definition of a hazardous drug, but do not have MSHI and are not classified by NTP as “known to be a human carcinogen,” or classified by IARC as “carcinogenic” or “probably carcinogenic.”

Additional changes to the *List*, including those drugs proposed for removal from the *List*, are described in detail in the draft *NIOSH List of Hazardous Drugs in Healthcare Settings, 2020*, which is available for review in the docket for this activity.

#### IV. Risk Management for Hazardous Drugs in Healthcare Settings

In the 2016 *List*, Table 5 provided information on recommended exposure controls for hazardous drugs based on formulations. In order to clarify that the *List* is a hazard identification tool, NIOSH has removed this table from the document. In its place, NIOSH has developed a new, comprehensive document on risk management strategies entitled, *Managing Hazardous Drug Exposures: Information for Healthcare Settings*, which includes a revision of this table on control approaches to safe handling of hazardous drugs. The new risk management document is available for review in the docket for this activity.

NIOSH is seeking input from the public on the draft risk management strategies document and table to ensure that they contain accurate and helpful information. Independent peer reviewers are being consulted as well; their charge is available on the NIOSH

website<sup>9</sup> and includes the following questions. NIOSH encourages public comment on these questions.

1. Please provide feedback on the overall document:  
 a. What additional information would improve its usefulness and why?  
 b. What changes could be made to improve the utility of the information?  
 c. What information is redundant, incorrect, missing, or not needed? Please explain.

2. Please provide any additional studies or scientific information that evaluate or validate engineering, work practice or administrative controls to reduce exposures to hazardous drugs in healthcare settings.

3. Please provide any additional studies or scientific information that support or validate the use of the NIOSH recommended control strategies or alternative strategies to control exposures to hazardous drugs.

4. Please provide any additional studies or scientific information that support or validate evidence-based strategies or approaches for controlling exposures to hazardous drugs that are different from those that NIOSH has proposed.

5. NIOSH has provided its proposed recommendations and related information about controlling hazardous drugs in the Table of Control Approaches in Chapter 8.

a. What additional information would improve the usefulness of this table and why?

b. What structural or format changes could be made to improve the utility of this table?

c. What information is redundant, incorrect, missing, or not needed? Please explain.

6. What improvements could be made to this risk management information to make it more useful to employers and healthcare workers? Please provide specific examples.

7. Please provide information about your professional experience, if any, of implementing control strategies for exposures to hazardous drugs in healthcare or similar settings. Please describe what you found to be most or least effective and why. Include relevant publications if available.

8. Please provide any additional studies or scientific information related to the use of a medical surveillance program as an additional approach to protect workers in healthcare settings. Information of particular interest includes considerations for design and

implementation of a medical surveillance program, data analysis, and communication of results to participants.

**John J. Howard,**

*Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.*

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**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Mine Safety and Health Research Advisory Committee (MSHRAC)

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

**ACTION:** Notice of meeting.

**SUMMARY:** In accordance with the Federal Advisory Committee Act, the CDC announces the following meeting for the Mine Safety and Health Research Advisory Committee (MSHRAC). This is a virtual meeting. It is open to the public, limited only by web conference lines (500 web conference lines are available). If you wish to attend, please contact Marie Chovanec by email at [MChovanec@cdc.gov](mailto:MChovanec@cdc.gov) or by telephone at 412–386–5302 at least 5 business days in advance of the meeting. She will provide you the Zoom web conference access.

**DATES:** The meeting will be held on June 2, 2020, 10:00 a.m.–2:30 p.m., EDT.

**ADDRESSES:** The Zoom web conference access can be obtained via email at [MChovanec@cdc.gov](mailto:MChovanec@cdc.gov) or by telephone at 412–386–5302.

**FOR FURTHER INFORMATION CONTACT:** Jeffrey H. Welsh, Designated Federal Officer, MSHRAC, NIOSH, CDC, 626 Cochran Mill Road, Pittsburgh, PA 15236, telephone 412–386–4040; email [jwelsh@cdc.gov](mailto:jwelsh@cdc.gov).

#### SUPPLEMENTARY INFORMATION:

*Purpose:* This committee is charged with providing advice to the Secretary, Department of Health and Human Services; the Director, CDC; and the Director, NIOSH, on priorities in mine safety and health research, including grants and contracts for such research, 30 U.S.C. 812(b)(2), Section 102(b)(2).

*Matters to be Considered:* The agenda will include discussions on mining safety and health research projects and outcomes, including updates from one MSHRAC Workgroup, the Health Advisory in the Mining Program

<sup>9</sup> NIOSH Peer Review Agenda, <https://www.cdc.gov/niosh/review/peer/isi/healthsafetyrisks.html>.

(HAMP) Workgroup, NIOSH Miner Health Program strategic plan, NIOSH Mining respirable crystalline silica research, Understanding elongate mineral particle exposure in mining, Research roadmap for haul truck health and safety issues, and Future of the coal industry presentation. The meeting will also include an update from the NIOSH Associate Director for Mining. Agenda items are subject to change as priorities dictate.

The Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, 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.

**Kalwant Smagh,**

*Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Advisory Committee on Breast Cancer in Young Women (ACBCYW); Cancellation of Meeting**

Notice is hereby given of a change in the meeting of the Advisory Committee on Breast Cancer in Young Women (ACBCYW); May 13, 2020, 8:00 a.m. to 1:00 p.m., EDT.

The teleconference and web conference, which was published in the **Federal Register** on March 16, 2020, Volume 85, Number 51, page 14945, is being canceled in its entirety.

**FOR FURTHER INFORMATION CONTACT:**

Jeremy McCallister, Designated Federal Officer, National Center for Chronic Disease Prevention and Health Promotion, CDC, 4770 Buford Hwy. NE, Mailstop S107-4, Atlanta, Georgia 30341, Telephone (404) 639-7989, Fax (770) 488-4760; Email: [acbcyw@cdc.gov](mailto:acbcyw@cdc.gov).

The Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, 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.

**Kalwant Smagh,**

*Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[Docket No. CDC-2019-0069]

**Proposed Update of the CDC's 2006 Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings; Re-opening of the Comment Period**

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

**ACTION:** Notice.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC) in the Department of Health and Human Services (HHS) announces the re-opening of this docket to obtain additional public comment on the proposed update of the 2006 Revised Recommendations for HIV Testing. CDC is re-opening this docket at the request of the public.

**DATES:** Electronic or written comments must be received by June 30, 2020.

**ADDRESSES:** You may submit comments, identified by Docket No. CDC-2019-0069, by any of the following methods below. CDC does not accept public comment by email.

- *Federal eRulemaking Portal:* <http://www.regulations.gov>. Follow the instructions for submitting comments.

- *Mail:* DHAP Guideline Team, Centers for Disease Control and Prevention, 1600 Clifton Road, NE, MS US8-4, Atlanta, Georgia 30329.

**FOR FURTHER INFORMATION CONTACT:**

Priya Jakhmola, Health Scientist, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS US8-4, Atlanta, Georgia 30329. Telephone: 404-639-2495, Email: [dhapguideline@cdc.gov](mailto:dhapguideline@cdc.gov).

**SUPPLEMENTARY INFORMATION:**

**Public Participation**

Interested persons or organizations are invited to participate by submitting written views, recommendations, and data related to HIV screening approaches. In addition, CDC invites

comments specifically on opt-out routine HIV testing, including, but not limited to:

- Suggestions for revisions, edits, and new additions
- Contemporary issues and new evidence
- Implementation barriers, challenges, and lessons learned
- Examples of innovative models, partnerships, and collaborations

Please note that comments received, including attachments and other supporting materials, are part of the public record and are subject to public disclosure. Comments will be posted on <https://www.regulations.gov>. Therefore, do not include any information in your comments or supporting materials that you consider confidential or inappropriate for public disclosure. If you include your name, contact information, or other information that identifies you in the body of your comments, that information will be on public display. CDC will review all submissions and may choose to redact, or withhold, submissions containing private or proprietary information, inappropriate language, or examples of a mass-mail campaign. CDC will carefully consider all comments submitted in preparation of the final document and may revise the final document as appropriate.

**Background**

On August 30, 2019, CDC published a notice (84 FR 45495) announcing the availability of a Proposed Update of the CDC's 2006 Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings. The comment period ended October 28, 2019. CDC received a request from the public to re-open the comment period.

The CDC guideline "Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings" was published on September 22, 2006 in CDC's *Morbidity and Mortality Weekly Report* (MMWR). Since then, there have been changes in evidence related to HIV testing technologies and interventions, disease epidemiology, outcomes, implementation resources, and related guidelines. This evidence will be identified, assessed, and analyzed to inform the update of the guideline.

CDC will update the 2006 guideline based on input from subject matter experts, public health agencies, the public, and other stakeholders. The guideline development process will draw on up-to-date nationally and internationally accepted guideline