

Control No. 9000–0010, Progress Payments, SF 1443.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–24–1385]

Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled “Characteristics of Cases of Priority Fungal Diseases” to the Office of Management and Budget (OMB) for review and approval. CDC previously published a “Proposed Data Collection Submitted for Public Comment and Recommendations” notice on December 11, 2023 to obtain comments from the public and affected agencies. CDC received one comment related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570. Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW, Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

Proposed Project

Characteristics of Cases of Priority Fungal Diseases (OMB Control No. 0920–1385, Exp. 3/31/2026)—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Fungal diseases cause substantial illness, ranging from mild infection to severe or life-threatening invasive disease. They also constitute a considerable financial burden on patients and healthcare systems. Awareness of fungal diseases is low, and data collection has historically been limited in size, scope, and coordination, which has hindered our understanding of these diseases. Detailed epidemiologic and clinical data are

critical to inform appropriate public health responses. We plan to enhance surveillance of high priority fungal diseases across the United States to better characterize factors such as disease burden, geographic scope, patient risk factors, health disparities, healthcare utilization, outcomes, and emerging trends. This project will serve as a Revision of the information collections project: Triazole-resistant *Aspergillus fumigatus* Case Report Form (CRF). The Revision will expand the number of fungal diseases for which data may be collected.

CDC requests to change the name of this information collection project from Triazole-resistant *Aspergillus fumigatus* Case Report Form to Characteristics of Cases of Priority Fungal Diseases. In addition to triazole-resistant *A. fumigatus* infections, CRFs have also been developed for coccidioidomycosis, histoplasmosis, blastomycosis, *C. auris*, and antifungal-resistant dermatophytosis. We plan to use standardized CRFs to collect public health surveillance data for cases of these diseases regarding demographics (*e.g.*, age, sex, race/ethnicity, location of residence), underlying medical conditions, diagnosis (*e.g.*, clinical presentation, laboratory testing), treatments, and outcomes (*e.g.*, hospitalization, vital status). The corresponding CRF would be filled out voluntarily by State and local health departments and contains a section for medical chart review and an optional supplemental interview (including data on potential occupational or environmental exposures) of the patient or their representative. Findings can help identify populations at higher risk of these diseases, detect emerging epidemiologic trends, and guide prevention and response efforts. They can also help better focus public and healthcare provider outreach, inform efforts to contain or mitigate spread, and influence health policy and research on prevention and treatment.

CDC requests OMB approval for an estimated 1,138 annual burden hours. There is no cost to respondents other than their time to participate.

Estimated Annualized Burden Hours

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State and Local Health Departments	Triazole-resistant <i>Aspergillus fumigatus</i> Case Report Form.	15	15	0.5
State and Local Health Departments	Coccidioidomycosis Case Report Form	10	25	1.0
State and Local Health Departments	Histoplasmosis Case Report Form	10	25	1.0
State and Local Health Departments	Blastomycosis Case Report Form	10	25	1.0
State and Local Health Departments	<i>Candida auris</i> Case Report Form	15	20	45/60

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State and Local Health Departments	Antifungal-resistant dermatophytosis case report form.	10	10	0.5

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Office of Public Health Ethics and
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC-2024-0019, NIOSH-352]

National Institute for Occupational Safety and Health; Outdoor Workers Exposed to Wildland Fire Smoke; Request for Information

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

ACTION: Request for information.

SUMMARY: The Centers for Disease Control and Prevention's (CDC) National Institute for Occupational Safety and Health (NIOSH), in the Department of Health and Human Services, announces an opportunity for the public to provide information about approaches to assess and control the hazards of wildland fire smoke to outdoor workers. Wildland fire smoke is a complex mixture of potentially toxic gases and particles that can vary depending on factors in the wildland or wildland urban interface environment, such as weather, fire behavior, and the type of materials or vegetation burning. Because of this, outdoor workers may be exposed to varying types and amounts of compounds in wildland fire smoke throughout their work shift or during different fire events and job tasks. NIOSH is seeking information to develop a hazard review document that summarizes the scientific literature about the health effects from exposures to wildland fire smoke and provides recommendations to protect outdoor workers.

DATES: Comments must be received by May 13, 2024.

ADDRESSES: Comments may be submitted through either of the following two methods:

• *Federal eRulemaking Portal:* <http://www.regulations.gov> (follow the instructions for submitting comments), or

• *By Mail:* NIOSH Docket Office, Robert A. Taft Laboratories, MS C-34, 1090 Tusculum Avenue, Cincinnati, Ohio 45226-1998.

Instructions: All written submissions received in response to this notice must include the agency name (Centers for Disease Control and Prevention, HHS) and docket number (CDC-2024-0019, NIOSH-352) for this action. All relevant comments, including any personal information provided, will be posted without change to <http://www.regulations.gov>.

FOR FURTHER INFORMATION CONTACT: R. Todd Niemeier, 1090 Tusculum Ave., MS C-15, Cincinnati, OH 45226; Telephone (513) 533-8166 (this is not a toll-free number); Email NIOSHregs@cdc.gov.

SUPPLEMENTARY INFORMATION: The hazard review development process will involve review and assessment of the scientific literature about exposures to wildland fire smoke, potential health effects, outdoor worker populations at risk, and development or updating of recommendations to protect outdoor workers. The purpose of the hazard review document is to provide an overview of the relevant health effects literature and develop evidence-based recommendations to protect outdoor workers, including farm workers, construction workers, oil and gas workers, park rangers, emergency responders, and others, from the adverse health effects of occupational exposure to wildland fire smoke. Scientific information related to wildland fire smoke is requested on the following topics:

- Properties and characteristics of wildland fire smoke mixtures
- Potential for occupational exposures to outdoor workers
- Health effects of exposures
- Outdoor worker populations at risk
- Exposure monitoring
- Risk management and control
- Research needs

Wildland fire smoke is a complex mixture of gases and particles from burning vegetation and other materials. In some cases, this can include wildland

urban interface environments, which are areas or zones where structures and other human development meet or intermingle with undeveloped wildland or vegetative fuels. Wildland fires can include wildfires and prescribed or controlled burns. As a wildland fire burns, different compounds are released in the smoke, such as particulate matter, carbon monoxide, benzene, formaldehyde, acrolein, polycyclic aromatic hydrocarbons, and other compounds. While exposure to wildland fire smoke has been of interest to researchers and public health professionals for decades, the hazards from wildland fire smoke are not fully understood. This is primarily due to the complexity of wildland fire smoke, as the smoke is made up of many different types and amounts of potentially toxic compounds and can change very quickly depending on factors in the environment, such as weather, fire behavior, and the type of vegetation burning. Because of this, workers may be exposed to varying types and amounts of compounds in wildland fire smoke, even in areas where smoke has migrated, throughout their work shift or during different fire events. Exposure also varies by the type of job task being performed.

There is very limited published information about how exposure to wildland fire smoke impacts outdoor workers. However, taken together with research studies examining exposure to smoke from wildland fires among the public, along with assessments of the health effects of exposures to specific components of wildland fire smoke, there is clear potential for such exposures to result in adverse health outcomes. The risk of experiencing symptoms and adverse health effects due to smoke exposure varies from person to person. The variability of health effects and symptoms can also be impacted by variability in exposure based on distance from the fire, wind speed and direction, and local environmental factors. Workers can have different individual risk factors such as age and health conditions (e.g., pre-existing heart or lung disease) that make them more likely to be affected by wildland fire smoke. Some health effects known or suspected to be caused