

Leroy A. Richardson,
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 Office of Scientific Integrity, Office of the
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 Prevention.*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-15-15AHO; Docket No. CDC-2015-
 0031]

Proposed Data Collection Submitted for Public Comment and Recommendations

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), as part of
 its continuing efforts to reduce public
 burden and maximize the utility of
 government information, invites the
 general public and other Federal
 agencies to take this opportunity to
 comment on proposed and/or
 continuing information collections, as
 required by the Paperwork Reduction
 Act of 1995. This notice invites
 comment on a proposed information
 collection for a retrospective evaluation
 of the prevalence of acute flaccid
 myelitis with MRI grey matter findings
 among children aged ≤18 years.

DATES: Written comments must be
 received on or before July 13, 2015.

ADDRESSES: You may submit comments,
 identified by Docket No. CDC-2015-
 0031 by any of the following methods:

- *Federal eRulemaking Portal:*
Regulations.gov. Follow the instructions
 for submitting comments.

- *Mail:* Leroy A. Richardson,
 Information Collection Review Office,
 Centers for Disease Control and
 Prevention, 1600 Clifton Road NE., MS-
 D74, Atlanta, Georgia 30329.

Instructions: All submissions received
 must include the agency name and
 Docket Number. All relevant comments
 received will be posted without change
 to *Regulations.gov*, including any
 personal information provided. For
 access to the docket to read background
 documents or comments received, go to
Regulations.gov.

*Please note: All public comment should be
 submitted through the Federal eRulemaking
 portal (Regulations.gov) or by U.S. mail to the
 address listed above.*

FOR FURTHER INFORMATION CONTACT: To
 request more information on the
 proposed project or to obtain a copy of
 the information collection plan and
 instruments, contact the Information
 Collection Review Office, Centers for
 Disease Control and Prevention, 1600
 Clifton Road, NE., MS-D74, Atlanta,
 Georgia 30329; phone: 404-639-7570;
 Email: *omb@cdc.gov*.

SUPPLEMENTARY INFORMATION:

Under the Paperwork Reduction Act
 of 1995 (PRA) (44 U.S.C. 3501-3520),
 Federal agencies must obtain approval
 from the Office of Management and
 Budget (OMB) for each collection of
 information they conduct or sponsor. In
 addition, the PRA also requires Federal
 agencies to provide a 60-day notice in
 the **Federal Register** concerning each
 proposed collection of information,
 including each new proposed
 collection, each proposed extension of
 existing collection of information, and
 each reinstatement of previously
 approved information collection before
 submitting the collection to OMB for
 approval. To comply with this
 requirement, we are publishing this
 notice of a proposed data collection as
 described below.

Comments are invited on: (a) Whether
 the proposed collection of information
 is necessary for the proper performance
 of the functions of the agency, including
 whether the information shall have
 practical utility; (b) the accuracy of the
 agency's estimate of the burden of the
 proposed collection of information; (c)
 ways to enhance the quality, utility, and
 clarity of the information to be
 collected; (d) ways to minimize the
 burden of the collection of information
 on respondents, including through the
 use of automated collection techniques
 or other forms of information
 technology; and (e) estimates of capital
 or start-up costs and costs of operation,
 maintenance, and purchase of services
 to provide information. Burden means
 the total time, effort, or financial
 resources expended by persons to
 generate, maintain, retain, disclose or
 provide information to or for a Federal
 agency. This includes the time needed
 to review instructions; to develop,
 acquire, install and utilize technology
 and systems for the purpose of
 collecting, validating and verifying
 information, processing and
 maintaining information, and disclosing
 and providing information; to train
 personnel and to be able to respond to
 a collection of information, to search
 data sources, to complete and review
 the collection of information; and to
 transmit or otherwise disclose the
 information.

Proposed Project

Retrospective evaluation of the
 prevalence of acute flaccid myelitis with
 MRI grey matter findings among
 children aged ≤18 years—NEW—
 National Center for Immunization and
 Respiratory Diseases, Centers for
 Disease Control and Prevention (CDC).

Background and Brief Description

Acute onset limb weakness,
 commonly referred to as acute flaccid
 paralysis (AFP), is a relatively
 uncommon syndrome among children.
 From August–October 2014, several
 clusters of AFP among children were
 reported from several states within the
 United States (U.S.) and an
 epidemiologic investigation was
 initiated to elucidate the possible causes
 of these cases.

CDC originally collected data under
 OMB Control Numbers 0920-1011 and
 0920-0009. Cases were characterized by
 distinctive abnormalities on spinal
 magnetic resonance imaging (MRI), in
 which pathologic changes were largely
 restricted to the central grey matter of
 the spinal cord. Due to these findings
 and to differentiate this illness from
 other forms of AFP, CDC used the term
 'acute flaccid myelitis' (AFM).

The main goal of this study is to
 obtain data in order to estimate the
 baseline rate of AFM that is
 accompanied by MRI changes confined
 to spinal grey matter among children
 ≤18 years of age that were seen at six
 pediatric medical centers in the United
 States. Data on spinal MRIs from years
 2005-2014 will be collected from six
 sentinel medical centers. Physicians at
 these medical centers will examine the
 MRI reports and extract data on specific
 variables using a database developed by
 CDC.

Data will then be sent to CDC, where
 2005-2013 data will be compared with
 2014 data in order to assess if 2014 rates
 of AFM were higher than in previous
 years. Furthermore, this evaluation will
 provide important information
 regarding characteristics of patients
 presenting with AFM and grey matter
 changes, assist in determining the
 potential for surveillance focusing on
 MRI findings because AFM is not
 routinely conducted in the United
 States and identify possible risk factors.

The data will be used to estimate a
 baseline for the rate of AFM that occurs
 in the United States each year. This
 information has not been previously
 collected, since the U.S. does not collect
 routine surveillance for AFM/AFP.

The participation of respondents is
 voluntary. There is no cost to the
 respondents other than their time. The

total estimated annual burden hours for the proposed project are 4,250 hours.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Avg. burden per response (in hrs.)	Total burden (in hrs.)
Physicians	Retrospective MRI Assessment for Acute Flaccid Myelitis: Patient Summary Form.	6	8,500	5/60	4,250
Total	4,250

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.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Disease Control and Prevention**

[60Day-15-0728; Docket No. CDC-2015-0033]

Proposed Data Collection Submitted for Public Comment and Recommendations

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), as part of its continuing efforts to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed revision of the *National Notifiable Diseases Surveillance System (NNDSS)* information collection. The NNDSS is the nation's public health surveillance system that monitors the occurrence and spread of diseases and conditions that are nationally notifiable or under national surveillance.

DATES: Written comments must be received on or before July 13, 2015.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2015-0033 by any of the following methods:

- Federal eRulemaking Portal: *Regulation.gov*. Follow the instructions for submitting comments.

- Mail: Leroy A. Richardson, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE., MS-D74, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. All relevant comments received will be posted without change to *Regulations.gov*, including any personal information provided. For access to the docket to read background documents or comments received, go to *Regulations.gov*.

Please note: All public comment should be submitted through the Federal eRulemaking portal (*Regulations.gov*) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact the Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE., MS-D74, Atlanta, Georgia 30329; phone: 404-639-7570; Email: omb@cdc.gov.

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the

agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information; and to transmit or otherwise disclose the information.

Proposed Project

National Notifiable Diseases Surveillance System (OMB Control No. 0920-0728, Expires 01/31/2017)—Revision—Center for Surveillance, Epidemiology and Laboratory Services (CSELS), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Public Health Services Act (42 U.S.C. 241) authorizes CDC to disseminate nationally notifiable condition information. The Nationally Notifiable Diseases Surveillance System (NNDSS) is based on data collected at the state, territorial and local levels as a result of legislation and regulations in those jurisdictions that require health care providers, medical laboratories, and other entities to submit health-related data on reportable conditions to public health departments. These