

**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. 2016-13847 Filed 6-10-16; 8:45 am]

BILLING CODE 4163-18-P

---

**DEPARTMENT OF HEALTH AND  
HUMAN SERVICES**
**Centers for Disease Control and  
Prevention (CDC)**
**Requirements and Registration for  
Healthcare Associated Venous  
Thromboembolism Prevention  
Challenge; Amendment of Notice**

Authority: 15 U.S.C. 3719.

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

**AWARD APPROVING OFFICIAL:** Thomas R.  
Frieden, MD, MPH, Director, Centers for  
Disease Control and Prevention, and  
Administrator, Agency for Toxic  
Substances and Disease Registry.

**ACTION:** Notice.

**SUMMARY:** The Centers for Disease  
Control and Prevention (CDC) located  
within the Department of Health and  
Human Services (HHS) announces an  
amendment to its notice entitled,  
Announcement of Requirements and  
Registration for Healthcare Associated  
Venous Thromboembolism Prevention  
Challenge. This amendment is being  
made to reflect an increase in the  
number of Champions and change the  
maximum total prize disbursement.  
There are no other changes to the  
September 22, 2015 notice.

**FOR FURTHER INFORMATION CONTACT:**  
Michele Beckman, Division of Blood  
Disorders, National Center on Birth  
Defects and Developmental Disabilities,  
Centers for Disease Control and  
Prevention, 1600 Clifton Road NE.,  
Mailstop E-64, Atlanta, GA 30329,  
Telephone: 404-498-6474, Fax: 404-  
498-6799, Attention: HA-VTE  
Prevention Challenge, Email:  
[havtechallenge@cdc.gov](mailto:havtechallenge@cdc.gov).

**SUPPLEMENTARY INFORMATION:**

*Subject of Challenge Competition:* On  
September 22, 2015 CDC announced the  
Requirements and Registration for  
Healthcare Associated Venous  
Thromboembolism Prevention  
Challenge (80 FR 57187). This notice  
announces an increase in the number of  
Champions, from 7 to 8. The Champions  
were selected from the highest scoring  
U.S. hospitals, multi-hospital systems,  
hospital networks, and managed care

organizations. Champions were  
recognized as HA-VTE Prevention  
Champions and will receive a cash  
award of \$10,000. A maximum of  
\$80,000 will now be awarded in this  
challenge, an increase of \$10,000.  
Additional honorable mention awards  
were also made to deserving entries.  
Federal and international winners  
received non-monetary recognition but  
no prize.

Authority: 15 U.S.C. 3719.

Dated: June 7, 2016.

**Sandra Cashman,**

Executive Secretary, Centers for Disease  
Control and Prevention.

[FR Doc. 2016-13850 Filed 6-10-16; 8:45 am]

BILLING CODE 4163-18-P

---

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

[30-Day-16-16CA]

**Agency Forms Undergoing Paperwork  
Reduction Act Review**

The Centers for Disease Control and  
Prevention (CDC) has submitted the  
following information collection request  
to the Office of Management and Budget  
(OMB) for review and approval in  
accordance with the Paperwork  
Reduction Act of 1995. The notice for  
the proposed information collection is  
published to obtain comments from the  
public and affected agencies.

Written comments and suggestions  
from the public and affected agencies  
concerning the proposed collection of  
information are encouraged. Your  
comments should address any of the  
following: (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 or  
send an email to [omb@cdc.gov](mailto:omb@cdc.gov). Written  
comments and/or suggestions regarding  
the items contained in this notice  
should be directed to the Attention:  
CDC Desk Officer, Office of Management  
and Budget, Washington, DC 20503 or  
by fax to (202) 395-5806. Written  
comments should be received within 30  
days of this notice.

**Proposed Project**

Update seat belt fit recommendation  
for children—New—National Center for  
Injury Prevention and Control (NCIPC),  
Centers for Disease Control and  
Prevention (CDC).

**Background and Brief Description**

The Centers for Disease Control and  
Prevention (CDC) is seeking OMB  
approval to conduct a new information  
collection for a study entitled, "Update  
Seat Belt Fit Recommendation for  
Children," over a period of three years.

CDC seeks to measure how seat belts  
fit children in vehicles with and  
without booster seats. The scientific  
basis for the current height  
recommendation for when children can  
transition from using a booster seat to  
just a seat belt is from a 1993 study that  
is outdated (Durbin *et al.*, 2011; Reed *et  
al.*, 2013). The goal of the new collection  
is to use the latest technology among the  
largest sample of children to date to  
help inform when children can safely  
transition from using a booster seat with  
a seat belt to using only a seat belt.

Findings from this data collection will  
inform CDC's child passenger safety  
recommendation regarding when  
children can safely transition from using  
a booster seat with the seat belt to using  
only the seat belt. This study will also  
provide information on ways to further  
reduce motor vehicle-related injuries  
and deaths among children.

Prospective study participants will be  
children aged 6-12 years old in the  
greater District of Columbia (DC) area.  
Parents of prospective study  
participants will answer a series of  
screening questions to determine  
eligibility. Children who meet the  
screening criteria and are willing to  
participate will complete an in-person  
measurement session. Data will be  
analyzed using descriptive statistics,  
mean, standard deviation, and logistic  
regression. Selected findings will  
eventually be published in a peer-  
reviewed journal.

The estimated annual burden hours  
are 466. There are no costs to  
respondents other than their time.