and in close proximity to that representation, any unexpected material connection between such endorser and any respondent, or other individual or entity affiliated with the product or service. Each order defines the terms ''clearly and conspicuously'' and ''unexpected material connection.''

Part III prohibits misrepresenting that paid commercial advertising is a statement or opinion from an independent or objective publisher or source.

Part IV requires the respondents, when they use endorsers to advertise or sell a product or service, to take certain steps to make sure the endorsements comply with Parts I and II of the orders. Such steps include clearly notifying endorsers of their representation and disclosure responsibilities, creating a monitoring system to review endorsements and disclosures, and terminating any endorser who fails to comply with Parts I and II. Part V requires the respondents to distribute the orders to certain persons and submit signed acknowledgments of order receipt.

Part VI requires the respondents to file compliance reports with the Commission, and to notify the Commission of bankruptcy filings or changes in corporate structure that might affect compliance obligations. Part VII contains recordkeeping requirements for personnel records, advertising and marketing materials, and all records necessary to demonstrate compliance with the orders. Part VIII contains other requirements related to the Commission's monitoring of the respondents' order compliance.

Part IX provides the effective dates of the orders, including that, with exceptions, the orders will terminate in 20 years.

The purpose of this analysis is to aid public comment on the proposed orders. It is not intended to constitute an official interpretation of the complaint or proposed orders, or to modify in any way the proposed orders' terms.

By direction of the Commission.

Donald S. Clark,

Secretary.

[FR Doc. 2018–25255 Filed 11–19–18; 8:45 am]

BILLING CODE 6750–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–19–18AG]

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 Assessment of the Cancer Survivorship Demonstration Project 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 November 13, 2017 to obtain comments from the public and affected agencies. CDC did not receive comments 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 or send an email to *omb@cdc.gov*. 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

Assessment of the Cancer Survivorship Demonstration Project—New—National Center for Chronic Disease Prevention and Health promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Under CDC's National Comprehensive Cancer Control Program (NCCCP) Request for Applications DP5–1501, the Division of Cancer Prevention and Control (DCPC) funded six grantees to implement evidence-based and promising strategies to increase knowledge of cancer survivor needs, increase survivor knowledge of treatment and follow-up care, and increase provider knowledge of guidelines pertaining to treatment of cancer. Specifically, this initiative employs strategies that relate to increasing surveillance and community-clinical linkages. Through this initiative DCPC intends to help address the public health needs of cancer survivors. To facilitate evidence-informed policy making and quality improvement of federal programs, a comprehensive assessment is needed to characterize survivorship interventions and document outcomes.

CDC is requesting a three year OMB approval to collect information needed for this assessment. The proposed information collection will focus on how each grantee has expanded their knowledge of cancer survivor needs, increased utilization of surveillance data to inform program planning by providers and coalition members, and enhanced partnerships to facilitate and broaden program reach. Data will also be collected on challenges encountered and addressed, factors that facilitated implementation, and lessons learned along the way. The information to be collected does not currently exist for organizations and entities working to improve cancer survivorship needs. The insights to be gained from this data collection will be critical to improving immediate efforts and achieving the goals of spreading and replicating strategies to improve the public health needs of cancer survivors.

CDC plans to collect information during two cycles of the program (09/2018 and 05/2020) using a web-based Grantee survey of NCCCP DP15–1501 grantee program directors and program managers, a web-based Partner Survey of grantees' self-identified key partners (*e.g.,* coalition members, providers, patient navigators), and semi-structured

telephone interviews with NCCCP DP15–1501 grantee program directors and program managers. The data from the survey and semi-structured interviews will provide additional insight into program efforts.

CDC is requesting OMB approval to conduct a web-based Grantee survey using Survey Gizmo to a purposive sample of one program director and one program manager in each of six grantees for a total of 12 respondents, and to conduct a web-based Partner Survey of 10 self-identified key partners in each of six grantees for a total of 60 respondents. The web-based surveys will be administered to the same respondents at two time points for a total estimated burden of eight hours for the web-based Grantee Survey and 40 hours for the web-based Partner Survey. Respondents will be asked to provide information regarding the type of respondent; their use of surveillance data to inform survivorship interventions; communication, education, and training activities to support the implementation of survivorship interventions; partnership engagement; challenges and facilitators regarding the implementation of evidence-based cancer survivorship strategies; reach of cancer survivorship interventions; and respondent background information.

CDC is also requesting OMB approval to conduct semi-structured interviews by telephone with a purposive sample of one program director and one program manager in each of six grantees for a total of 12 respondents. The semi-structured interviews will be conducted with the same respondents at two time points for a total estimated burden of 30 hours. Respondents will be asked to provide information regarding administration of the Behavioral Risk Factor Surveillance System Cancer Survivorship Module; communication, education, and training activities to support the implementation of cancer survivorship interventions; community-clinical linkage strategies to support cancer survivors, knowledge regarding best practices for survivorship care; partnership engagement; dissemination of evidence-based survivorship interventions; and recommendations for improving the implementation of evidence-based survivorship interventions.

Information collected will be analyzed and used in aggregate to inform future efforts to support cancer survivors and to initiate evidence-informed program decisions when rolling this initiative out to all NCCCP grantees. Without this data collection, CDC will not be able to provide tailored technical assistance to its grantees and communicate program efforts. The estimated annual burden hours requested are 28.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs)
NCCCP Grantee Program Director.	Web-based Grantee survey	8	1	20/60
	Semi-structured telephone interview	8	1	90/60
NCCCP Grantee Partner	Web-based Partner survey	40	1	20/60

Jeffrey M. Zirger,

Acting Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

[FR Doc. 2018–25275 Filed 11–19–18; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–19–18AFX]

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 Traumatic Brain Injury Disparities in Rural Areas (TBIDRA) 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 June 7, 2018 to obtain comments from the public and affected agencies. CDC received two comments 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 or send an email to *omb@cdc.gov*. 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

Traumatic Brain Injury Disparities in Rural Areas (TBIDRA)—New — National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Traumatic Brain Injury (TBI) is a significant public health concern in the United States. Research indicates that residents of rural areas have both higher