

GA 30341–3717. Attn: Docket No. ATSDR–2026–0034.

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

FOR FURTHER INFORMATION CONTACT:

Farhana Rahman, Agency for Toxic Substances and Disease Registry, Office of Innovation and Analytics, 4770 Buford Highway, Mail Stop S106–5, Atlanta, GA 30341–3717; Email: ATSDRToxProfileFRNs@cdc.gov; Phone: 1–800–232–4636.

SUPPLEMENTARY INFORMATION: ATSDR has prepared a draft of the updated Toxicological Profile for Xylene based on current understanding of the health effects and availability of new studies and other information since its initial release. All toxicological profiles issued as “Drafts for Public Comment” represent the result of ATSDR’s evidence-based evaluations of the available literature to provide important toxicological information on priority hazardous substances to the public and health professionals. ATSDR considers key studies for these substances during the profile development process, using a systematic review approach. To that end, ATSDR is seeking public comments and additional information or reports on studies about the health effects of these substances for review and potential inclusion in the profile. ATSDR will evaluate the quality and relevance of such data or studies for possible inclusion in the profile.

Legislative Background

The Superfund Amendments and Reauthorization Act of 1986 (SARA) (42 U.S.C. 9601 *et seq.*) amended the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA or Superfund) (42 U.S.C. 9601 *et seq.*) by establishing certain requirements for ATSDR and the U.S. Environmental Protection Agency (EPA) regarding the hazardous substances most commonly found at facilities on the CERCLA National Priorities List. Among these statutory requirements is a mandate for the Administrator of ATSDR to prepare toxicological profiles for each substance included on the priority list of hazardous substances (also called the Substance Priority List (SPL)). This list identifies 275 hazardous substances that ATSDR has determined pose the most significant potential threat to human

health. The SPL is available online at <https://www.atsdr.cdc.gov/programs/substance-priority-list.html>. ATSDR is also mandated to revise and publish updated toxicological profiles, as necessary, to reflect updated health effects and other information.

In addition, CERCLA provides ATSDR with the authority to prepare toxicological profiles for substances not found on the SPL. CERCLA authorizes ATSDR to establish and maintain an inventory of literature, research, and studies on the health effects of toxic substances (CERCLA section 104(i)(1)(B); 42 U.S.C. 9604(i)(1)(B)); to respond to requests for health consultations (CERCLA section 104(i)(4); 42 U.S.C. 9604(i)(4)); and to support the site-specific response actions conducted by the agency (CERCLA section 104(i)(6); 42 U.S.C. 9604(i)(6)).

Availability

The draft toxicological profile is available online at <http://www.regulations.gov>, Docket No. ATSDR–2026–0034 and at <https://www.atsdr.cdc.gov/toxicological-profiles/about/index.html>.

Public Participation

Interested people or organizations are invited to participate by submitting written views, recommendations, and data. 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 comment 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. ATSDR will review all submissions and may choose to redact, or withhold, submissions containing private or proprietary information such as Social Security numbers, medical information, inappropriate language, or duplicate/near duplicate examples of a mass-mail campaign. If you submit comments with reference to studies that are not publicly available such as unpublished research, those studies must be attached with your comment for review. Otherwise ATSDR may be unable to respond to portions of your comment referring to any material that is not publicly available. Do not submit comments by

email. ATSDR does not accept comments by email.

Donata Green,

Associate Director, Office of Policy, Planning and Partnerships, Agency for Toxic Substances and Disease Registry.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–26–1215]

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 “Awardee Lead Profile Assessment (ALPA)” 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 January 13, 2026 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. 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

Awardee Lead Profile Assessment (ALPA) (OMB Control No. 0920-1215, Exp. 5/31/2026)—Revision—National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) is requesting Paperwork Reduction Act (PRA) Clearance for a three-year Revision of an information collection request (ICR)

titled Awardee Lead Profile Assessment (ALPA) (OMB Control No. 0920-1215; Exp. 5/31/2026). The goal of this ICR is to build on CDC’s existing childhood lead poisoning prevention program. CDC requires that CDC-funded Childhood Lead Poisoning Prevention Programs (CLPPPs), including those funded under the current Notice of Funding Opportunity Childhood Lead Poisoning Prevention and Surveillance of Blood Lead Levels in Children (CDC-RFA-EH21-2102), complete the ALPA annually.

CDC can use this information to inform guidance, resource development, and technical assistance to support eliminating lead exposure in children. Data will be aggregated by jurisdiction, shared with CDC-funded CLPPPs, and used in response to inquiries by the public, press, and Congress. The dissemination of results will support the ability for both funded and non-funded jurisdictions to: (1) identify policies and strategies that support or hinder childhood lead poisoning prevention efforts; and (2) develop and implement similar interventions to improve childhood lead poisoning prevention.

This program management information collection has been revised in several ways, including the addition of new response options and questions as well as simpler language and structure.

- The electronic data collection tool was updated from Epi Info to the REDCap platform to improve functionality and streamline data management.
- The section on local laws was removed to focus solely on programs receiving surveillance funding, ensuring greater relevance and consistency.
- Questions were revised to clarify those that were unclear or difficult to interpret.
- Redundant or overlapping questions and response choices were combined where appropriate for clarity and to reduce respondent burden.
- The previous alphanumeric question labels were replaced with a fully numeric system, creating a cleaner and more organized survey format.

The revisions on the survey will slightly affect the total time burden requested as the time to take the survey has increased from 47 minutes per response in 2021 to 53 minutes per response in 2025. This estimate is based on pilot tests of the revised survey among five respondents and includes the time needed to review the ALPA Training Manual. CDC requests OMB approval for an estimated 66 annual burden hours. There is no cost to respondents other than their time to participate.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State, Tribal, Local, and Territorial Governments	ALPA Web Survey	75	1	53/60

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-26-0210]

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 “List of Ingredients Added to Tobacco in the Manufacture of Cigarette Products” 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 September 9, 2025 to obtain comments from the public and affected entities. CDC received no public comments related to the previous notice. This notice serves to allow an additional 30 days for public and affected entities’ 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