

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](http://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**

CDC’s Milestone Tracker App User Surveys (OMB Control No. 0920–1397, Exp. 5/31/2026)—Revision—National Center for Birth Defects and Developmental Disabilities (NCBDDD), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

The Centers for Disease Control and Prevention (CDC) seeks a three-year Revision of a currently approved

information collection to evaluate the Milestone Tracker mobile application. The Milestone Tracker app, developed under CDC’s Learn the Signs. Act Early. program, supports family-engaged developmental monitoring and promotes early identification of developmental delays and disabilities. The purpose of this data collection is to assess user satisfaction, usage patterns, and actions taken after a missed developmental milestone or developmental concern is identified within the app. The information collected will help CDC understand how users engage with the app, whether follow-up actions are taken after concerns are identified, and how the app functions as a tool to support developmental monitoring. Findings will inform future improvements and ongoing program evaluation. Without this Revision, CDC would lose access to ongoing data necessary to monitor user experience, assess follow-up actions after identification of developmental concerns, and support continuous program improvement.

This request includes one minor, non-substantive clarification to Parent Survey 2. A brief explanatory note was

added to Question 1 to clarify why the question is being asked, after some respondents indicated confusion during prior data collection. The question wording and response options remain unchanged. This clarification does not affect the methodology, data collected, or the estimated time per response, which remains five (5) minutes. This Revision also reflects an adjustment to previously approved burden estimates. The original 2023 burden projections were developed without historical response data and were based on anticipated participation levels derived from total app downloads. Actual data collected from 2023–2026 indicate substantially lower response levels. Accordingly, the number of respondents and total annual burden hours have been revised to align with observed participation trends.

CDC requests OMB approval for a revised annual burden estimate of 2,401 hours, a reduction of 39,266 hours from the previously approved 41,667 hours. There are no changes to the instruments, methodology, frequency of collection, or time per response. 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)
Parents using the <i>Milestone Tracker</i> app who complete 65% or more of a checklist using the app.	Parent Survey 1 .....	23,000	1	5/60
Parents using the <i>Milestone Tracker</i> App who complete 65% or more of a checklist using the app AND indicate a missed milestone or identify a developmental concern.	Parent Survey 2 .....	5,000	1	5/60
Early childhood providers/professionals who use the <i>Milestone Tracker</i> app at least 3 times.	Provider .....	800	1	5/60

**Jeffrey M. Zirger,**

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

[FR Doc. 2026–10510 Filed 5–26–26; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day–26–1348]

**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 “The National Firefighter Registry for Cancer” 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 February 14, 2026, to obtain comments from the public and affected agencies. CDC received no 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, email [NFRRegistry@cdc.gov](mailto:NFRRegistry@cdc.gov). 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](http://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**

National Firefighter Registry for Cancer (OMB Control No. 0920-1348)—Reinstatement—National Institute for Occupational Safety and Health

(NIOSH), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

In order to accurately monitor trends in cancer incidence and evaluate control measures among the U.S. fire service, Congress passed the Firefighter Cancer Registry Act of 2018. Under this legislation, CDC/NIOSH was directed to create a registry of U.S. firefighters for the purpose of monitoring cancer incidence and risk factors among the current U.S. fire service. Funding for the project was authorized through this legislation for five years as of fiscal year 2019 and has been reauthorized through 2028.

According to the Firefighter Cancer Registry Act of 2018, The main goal of the National Firefighter Registry for Cancer (NFR) is, “to develop and maintain . . . a voluntary registry of firefighters to collect relevant health and occupational information of such firefighters for purposes of determining cancer incidence.” Results from the NFR will provide information for decision makers within the fire service

and medical or public health community to devise and implement policies and procedures to lessen cancer risk and/or improve early detection of cancer among firefighters. NIOSH seeks a three-year renewal to enroll at least 33,333 firefighters annually. The overall enrollment goal of the NFR remains 200,000. Prior annual enrollment data has led to a more accurate annual burden estimation than prior approvals.

There are three corresponding documents to be completed as part of the enrollment process: Informed Consent, User Profile, and Enrollment Questionnaire. Select fire departments may have an additional Records Request. The estimated time burden for the Informed Consent and User Profile are five minutes each, an estimated 20-minute burden for the NFR Enrollment Questionnaire, and 16 hours for the Records Request (applicable to an estimated 30 firefighters). CDC requests OMB approval for an estimated 17,157 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)
U.S. Firefighters	Informed Consent	33,333	1	5/60
U.S. Firefighters	NFR User Profile (web-portal registration)	33,333	1	5/60
U.S. Firefighters	NFR Enrollment Questionnaire	33,333	1	20/60
U.S. Firefighters	Records request	30	1	16

**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**

**Food and Drug Administration**

[Docket No. FDA-1998-P-0083 (formerly 76N-0377); DESI 7661]

**Drugs for Human Use; Drug Efficacy Study Implementation: Estrogen-Androgen Fixed-Combination Drug Products; Syntest D.S. and Syntest H.S. Tablets; Withdrawal of Hearing Requests; Final Resolution of Drug Efficacy Study Implementation 7661**

**AGENCY:** Food and Drug Administration, Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA or Agency) is announcing that all outstanding hearing requests for estrogen-androgen fixed-combination drug products under Docket FDA-1998-P-0083 (formerly 76N-0377) (DESI 7661) have been withdrawn. Therefore, as proposed in the April 14, 2003, notice of opportunity for hearing (NOOH), FDA finds that the products subject to this proceeding have not been shown to be effective for use under the conditions of use prescribed, recommended, or suggested in the labeling. Shipment in interstate commerce of any product identified in this docket (DESI 7661), or any identical, related, or similar (IRS) product, that is not the subject of an approved new drug application (NDA) or abbreviated new drug application (ANDA) is unlawful as of the date of this notice.

**DATES:** This notice is effective June 26, 2026.

**ADDRESSES:** For access to the docket to read background documents or the electronic and written/paper comments received, go to <https://www.regulations.gov> and insert the docket number, found in brackets in the heading of this document, into the “Search” box and follow the prompts and/or go to the Dockets Management Staff, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852, 240-402-7500 between 9 a.m. and 4 p.m., Monday through Friday. Publicly available submissions may be seen in the docket.

The most relevant background documents regarding this matter are available in the docket. However, additional background documents are available upon request (see **FOR FURTHER INFORMATION CONTACT**).

**FOR FURTHER INFORMATION CONTACT:** Amber McKinley, Center for Drug Evaluation and Research, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 51, Rm. 5172, Silver Spring, MD 20993-0002, 301-