PRAMain. Find this particular information collection by selecting ''Currently under Review—Open for Public Comments'' or by using the search function.

FOR FURTHER INFORMATION CONTACT: To request a copy of the clearance requests submitted to OMB for review, email Samantha Miller, the HRSA Information Collection Clearance Officer, at *paperwork@hrsa.gov* or call (301) 443–3983.

SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Delta States Rural Development Network Grant Program, OMB No.0915–0386—Revision.

Abstract: The Delta States Rural Development Network Grant (Delta) Program is authorized by the Public Health Service Act, Section 330A(f) (42 U.S.C. 254c(f)). The Delta Program supports projects that demonstrate evidence-based and/or promising approaches around cardiovascular disease, diabetes, acute ischemic stroke, or obesity to improve health status in rural communities throughout the Delta Region. Key features of Delta Program-supported projects are collaboration, adoption of an evidence-based approach, demonstration of health outcomes, program replicability, and sustainability. HRSA collects information from Delta Program award recipients using an OMB-approved set of performance measures and wants to revise that information collection.

A 60-day notice published in the **Federal Register** on March 18, 2026, vol. 91, No. 52; pp. 13041–13042. There were no public comments.

Need and Proposed Use of the Information: The purpose of the data collection is for HRSA to assess Delta Program awardees' progress in meeting the program goals, and how well each awardee meets their community needs. Additionally, HRSA will be able to monitor and assess the impact of the Delta Program and ensure funds are effectively used to provide services that meet the target population's needs.

HRSA seeks to revise the approved information collection, which Delta Program awardees will submit to HRSA on an annual basis. The proposed revisions include modifying how HRSA displays race and ethnicity measures in the data collection platform by making it display as two separate questions for current Delta Program recipients. As the Delta Program recipients are currently in an active project period, this proposed revision would minimize any disruptions to their existing data collection processes and help maintain consistent data reporting to HRSA.

Additionally, the estimated total burden hours have increased to reflect the time required for current Delta Program awardees to complete data collection-related training for their internal staff as well as staff within their network partnerships. There are several additional contributing factors to the increase in estimated total burden. These grantee organizations vary in data collection and reporting capacity as well as vary in the number of network organizations they must coordinate with to report this data to HRSA. Furthermore, the grantee organization and its network organizations may not share the same data collection systems/platforms. As a result, this increase in total burden accounts for the time that Delta Program awardees will need to compile and review data quality from its network organizations prior to submitting the data to HRSA.

Likely Respondents: Respondents will be the Delta Program award recipients.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. 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. The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Delta States Rural Development Network Program Performance Measures	12	1	12	72.75	873
Total	12	1	12	72.75	873

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2026–11828 Filed 6–11–26; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Biomedical Imaging and Bioengineering; Notice of Meeting

Pursuant to section 1009 of the Federal Advisory Committee Act, as amended, notice is hereby given of a meeting of the National Advisory Council for Biomedical Imaging and Bioengineering.

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

The meeting will be videocast and can be accessed from the NIH Videocast website at the following links: *https://videocast.nih.gov/* or *https://www.nibib.nih.gov/about-nibib/advisory-council.*

Name of Committee: National Advisory Council for Biomedical Imaging and Bioengineering.

Date: September 16, 2026.
Open: 9:00 a.m. to 12:25 p.m.
Agenda: Call to order; Director's report; ORA Director's Updates; Speaker; Adjournment.
Address: National Institutes of Health, Rockledge II, Conference Room 260 C/D/E/F, 6701 Rockledge Drive, Bethesda, MD 20892.
Meeting Format: In Person.
Closed: 1:25 p.m. to 3:15 p.m.
Agenda: Conflict of Interest; Review of Applications, Adjournment.
Address: National Institutes of Health, Rockledge II, Conference Room 260 C/D/E/F, 6701 Rockledge Drive, Bethesda, MD 20892.
Meeting Format: In Person.
Contact Person: Thomas Cheever, Ph.D., Acting Associate Director for Research Administration, Office of Research Administration, National Institute of Biomedical Imaging, And Bioengineering, 6707 Democracy Boulevard, Bethesda, MD 20892, *thomas.cheever@nih.gov.*

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person. Information is also available on the Institute's/Center's home page: *http://www.nibib1.nih.gov/about/NACBIB/NACBIB.htm,* where an agenda and any additional information for the meeting will be posted when available.

Dated: June 8, 2026.

Margaret N. Vardanian,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2026–11890 Filed 6–11–26; 8:45 am]

BILLING CODE 4167–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; 60-Day Comment Request; Specimen Resource Locator (National Cancer Institute)

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995 to provide an opportunity for public comments on proposed data collection projects, the National Cancer Institute (NCI) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

DATES: Comments regarding this information collection are best assured of having their full effect if received by August 11, 2026.

FOR FURTHER INFORMATION CONTACT: To obtain a copy of the data collection plans and instruments, submit comments in writing, or request more information on the proposed project, contact Melissa Park, PRA Liaison, Office of Management Policy and Compliance, National Cancer Institute, 9609 Medical Center Drive, Room 2E196, Bethesda, MD 20892 or call non-toll-free number (240) 276–5717 or email your request, including your address to: *melissa.park@nih.gov.* Formal requests for additional plans and instruments must be requested in writing.

SUPPLEMENTARY INFORMATION: Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 requires: written comments and/or suggestions from the public and affected agencies are invited to address one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Proposed Collection Title: Specimen Resource Locator (NCI), 0925–0703: Expiration Date 08/31/2026, EXTENSION, National Cancer Institute (NCI), National Institutes of Health (NIH).

Need and Use of Information Collection: The availability of specimens and associated data is critical to increase our knowledge of cancer biology and to translate important research discoveries into clinical applications. The development of molecular technologies in cancer patients with defined molecular abnormalities advances the identification and development of clinically useful biomarkers and diagnostic assays that guide treatment.

The discovery and validation of cancer prevention markers require researchers' access to quality clinical biospecimens. In response to this need, NCI's Cancer Diagnosis Program developed, and is expanding, a searchable database: Specimen Resource Locator (SRL) *https://specimens.cancer.gov/tissue/default.htm.* The SRL allows scientists in the research community and the NCI to locate specimens needed for their research. The SRL lists all NCI-supported and non-NCI-supported biospecimens repositories and their links. It is not NCI's intent to collect the biospecimens; instead, the collections are descriptions of the available data that can act as a resource and be shared with interested researchers and scientists. This submission does not involve any analysis.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 105.

ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Type of respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hours
Initial Request	Private Sector	70	1	30/60	35
	State Government	70	1	30/60	35
	Federal Government	60	1	30/60	30
Annual Update	Private Sector	20	1	5/60	2
	State Government	20	1	5/60	2
	Federal Government	10	1	5/60	1
Total			250		105