excipients, or in the preparation of veterinary medicinal products. The solvents are not completely removed by practical manufacturing techniques. The objective of this draft guidance is to recommend acceptable amounts for residual solvents in pharmaceuticals for the safety of the target animal as well as for the safety of residues in products derived from treated food-producing animals. The draft guidance recommends use of less toxic solvents and describes levels considered to be toxicologically acceptable for some residual solvents. This revision updates the listings and classification of solvents.

FDA has participated in efforts to enhance harmonization and is committed to seeking scientifically based harmonized technical procedures for pharmaceutical development. One of the goals of harmonization is to identify, and then reduce, differences in technical requirements for drug development among regulatory agencies in different countries.

FDA has actively participated in the International Conference on Harmonization of Technical Requirements for Approval of Pharmaceuticals for Human Use to develop harmonized technical requirements for the approval of human pharmaceutical and biological products among the European Union, Japan, and the United States. The VICH is a parallel initiative for veterinary medicinal products. The VICH is concerned with developing harmonized technical requirements for the approval of veterinary medicinal products in the European Union, Japan, and the United States, and includes input from both regulatory and industry representatives.

The VICH Steering Committee is composed of member representatives from the European Commission and European Medicines Agency; International Federation for Animal Health—Europe; FDA—Center for Veterinary Medicine and U.S. Department of Agriculture—Center for Veterinary Biologics; the U.S. Animal Health Institute; the Japanese Veterinary Products Association, and the Japanese Ministry of Agriculture, Forestry, and Fisheries.

There are eight observers to the VICH Steering Committee: One representative from government and one representative from industry of Australia, New Zealand, Canada, and South Africa. The World Organisation for Animal Health is an associate member of the VICH. The VICH Secretariat, which coordinates the preparation of documentation, is provided by the International Federation of Animal Health. This draft guidance is being issued consistent with FDA's good guidance practices regulation (21 CFR 10.115). The draft guidance, when finalized, will represent the current thinking of FDA on "Impurities: Residual Solvents in New Veterinary Medicinal Products, Active Substances and Excipients (Revision 2)." It does not establish any rights for any person and is not binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the applicable statutes and regulations.

# **II. Paperwork Reduction Act of 1995**

While this draft guidance contains no collection of information, it does refer to previously approved FDA collections of information. Therefore, clearance by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3521) is not required for this guidance. The previously approved collections of information are subject to review by OMB under the PRA. The collections of information in section 512(n)(1) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360b(n)(1)) have been approved under OMB control number 0910–0669; the collections of information in 21 CFR part 514 have been approved under OMB control number 0910-0032.

### **III. Electronic Access**

Persons with access to the internet may obtain an electronic version of the draft guidance at https://www.fda.gov/ animal-veterinary/guidance-regulations/ guidance-industry, https://www.fda.gov/ regulatory-information/search-fdaguidance-documents, or https:// www.regulations.gov.

Dated: July 12, 2022.

# Lauren K. Roth,

Associate Commissioner for Policy. [FR Doc. 2022–15244 Filed 7–15–22; 8:45 am] BILLING CODE 4164–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Food and Drug Administration

[Docket No. FDA-2022-N-1366]

# Data Standards; Requirement Begins for the Clinical Data Interchange Standards Consortium Versions 1.2 and 1.3 of the Analysis Data Model Implementation Guide

**AGENCY:** Food and Drug Administration, HHS.

ACTION: Notice.

**SUMMARY:** The Food and Drug Administration's (FDA or Agency) Center for Biologics Evaluation and Research (CBER) and Center for Drug Evaluation and Research (CDER) are announcing the date that support begins for versions 1.2 and 1.3 of the Clinical Data Interchange Standards Consortium (CDISC) Analysis Data Model Implementation Guide (ADaMIG) and the date that this version update is required in certain submissions. The Agency will update the FDA Data Standards Catalog (Catalog) to reflect these changes.

**DATES:** Support for versions 1.2 and 1.3 of the CDISC ADaMIG begins July 18, 2022. The requirement for electronic submissions to be submitted using versions 1.2 and 1.3 of the CDISC ADaMIG begins March 15, 2024, for new drug applications (NDAs), abbreviated new drug applications (ANDAs), certain biologics license applications (BLAs), and certain investigational new drug applications (INDs).

**ADDRESSES:** You may submit comments as follows.

## Electronic Submissions

Submit electronic comments in the following way:

• Federal eRulemaking Portal: https://www.regulations.gov. Follow the instructions for submitting comments. Comments submitted electronically, including attachments, to *https://* www.regulations.gov will be posted to the docket unchanged. Because your comment will be made public, you are solely responsible for ensuring that your comment does not include any confidential information that you or a third party may not wish to be posted, such as medical information, your or anyone else's Social Security number, or confidential business information, such as a manufacturing process. Please note that if you include your name, contact information, or other information that identifies you in the body of your comments, that information will be posted on *https://www.regulations.gov*.

• If you want to submit a comment with confidential information that you do not wish to be made available to the public, submit the comment as a written/paper submission and in the manner detailed (see "Written/Paper Submissions" and "Instructions").

#### Written/Paper Submissions

Submit written/paper submissions as follows:

• Mail/Hand Delivery/Courier (for written/paper submissions): Dockets Management Staff (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. • For written/paper comments submitted to the Dockets Management Staff, FDA will post your comment, as well as any attachments, except for information submitted, marked and identified, as confidential, if submitted as detailed in "Instructions."

Instructions: All submissions received must include the Docket No. FDA– 2022–N–1366 for "Data Standards; Requirement Begins for the Clinical Data Interchange Standards Consortium Versions 1.2 and 1.3 of the Analysis Data Model Implementation Guide." Received comments will be placed in the docket and, except for those submitted as "Confidential Submissions," publicly viewable at *https://www.regulations.gov* or at the Dockets Management Staff between 9 a.m. and 4 p.m., Monday through Friday, 240–402–7500.

 Confidential Submissions—To submit a comment with confidential information that you do not wish to be made publicly available, submit your comments only as a written/paper submission. You should submit two copies total. One copy will include the information you claim to be confidential with a heading or cover note that states "THIS DOCUMENT CONTAINS CONFIDENTIAL INFORMATION." The Agency will review this copy, including the claimed confidential information, in its consideration of comments. The second copy, which will have the claimed confidential information redacted/blacked out, will be available for public viewing and posted on https://www.regulations.gov. Submit both copies to the Dockets Management Staff. If you do not wish your name and contact information to be made publicly available, you can provide this information on the cover sheet and not in the body of your comments and you must identify this information as "confidential." Any information marked as "confidential" will not be disclosed except in accordance with 21 CFR 10.20 and other applicable disclosure law. For more information about FDA's posting of comments to public dockets, see 80 FR 56469, September 18, 2015, or access the information at: https:// www.govinfo.gov/content/pkg/FR-2015-09-18/pdf/2015-23389.pdf.

*Docket:* 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.

## FOR FURTHER INFORMATION CONTACT:

*CDER:* Helena Sviglin, Center for Drug Evaluation and Research, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 51, Rm. 1117, Silver Spring, MD 20993–0002, 240– 402–6511, *cderdatastandards*@ *fda.hhs.gov.* 

*CBER:* Stephen Ripley, Center for Biologics Evaluation and Research, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 71, Rm. 7301, Silver Spring, MD 20993–0002, 240–402–7911.

SUPPLEMENTARY INFORMATION: FDA's CBER and CDER are issuing this Federal **Register** notice to announce the date that support begins for versions 1.2 and 1.3 of the CDISC ADaMIG and the date that this version update is required in certain submissions. The FDA guidance for industry "Providing Regulatory Submissions in Electronic Format-Standardized Study Data" (June 2021) (eStudy Data guidance), posted on FDA's Study Data Standards Resources web page at https://www.fda.gov/ forindustry/datastandards/studydata standards/default.htm, implements the electronic submission requirements of section 745A(a) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 379k-1(a)) for study data contained in NDAs, ANDAs, certain BLAs, and certain INDs submitted to CDER or CBER by specifying the format for electronic submissions. The eStudy Data guidance states that a Federal Register notice will specify any new standards and version updates to FDA-supported study data standards that will be added to the Catalog, when the support for such standards and version updates begins or ends, and when the requirement to use such standards and version updates in submissions begins or ends.

Support for versions 1.2 and 1.3 of the CDISC ADaMIG begins July 18, 2022. The transition date for this version update is March 15, 2023. The requirement for electronic submissions to be submitted using versions 1.2 and 1.3 of the CDISC ADaMIG is March 15, 2024, for NDAs, ANDAs, certain BLAs, and certain INDs.

Dated: July 11, 2022.

# Lauren K. Roth,

Associate Commissioner for Policy. [FR Doc. 2022–15248 Filed 7–15–22; 8:45 am] BILLING CODE 4164–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier OS-0990-0476]

## Agency Information Collection Request; 30-Day Public Comment Request

**AGENCY:** Office of the Secretary, HHS. **ACTION:** Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment. This Federal Register notice seeks public comment on the revision recently submitted to OMB for review and approval. These comments will be reviewed and taken into consideration if the Department intends to make any revisions to the information collection request approved under [0990-0476]. Interested persons are invited to submit comments regarding the aforementioned non-substantive changes or any other aspect of this collection of information, including: the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden. **DATES:** Comments on the ICR must be received on or before August 17, 2022. **ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice. To be assured consideration, comments and recommendations must be submitted 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.

### FOR FURTHER INFORMATION CONTACT:

Sherrette Funn, *Sherrette.Funn@hhs.gov* or (202) 264–0041. When submitting comments or requesting information, please include the document identifier 0990–0476–30D and project title for reference.

**SUPPLEMENTARY INFORMATION:** Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information