health interventions will help state and local health departments determine the appropriate level of follow up needed based on the traveler's level of risk and rapidly identify any travelers with symptoms that may need to be prioritized for more targeted public health measures, such as quarantine, due to a higher risk of exposure to Ebola. State and local health departments will utilize the contact information provided by CDC to prioritize and identify the level of follow up needed based on the level of risk of exposure to Ebola and determine if additional targeted public health measures are necessary. The purpose of this evaluation will be to gather feedback from state and local health departments regarding traveler monitoring activities and determine the usability of contact information and public health risk assessment information shared by CDC.

CDC anticipates certain time and cost burdens to respondents and record keepers due to the requirements and requests OMB approval for an estimated 4,550 annual burden hours. There are no costs to respondents other than their time to participate.

ESTIMATED ANNUALIZED BURDEN HOURS

| Respondent | Information collection tool | Number of respondents | Number of responses per respondent | Average burden per response (in minutes) | Total burden hours |
|---|---|---|---|---|---|
| Traveler ..... | Risk Assessment and Post-Arrival Monitoring Outcome REDCap Reporting. | 350 | 52 | 15/60 | 4,550 |

**Jeffrey M. Zirger,**

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

[FR Doc. 2022–24047 Filed 11–3–22; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

### Delegation of Authority Under Section 564A(e) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360bbb–3a(e))

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** CDC has redelegated the authority under the Federal Food, Drug, and Cosmetic (FD&C) Act to create and issue amended emergency use instructions (EUI) to inform healthcare providers or individuals to whom an eligible product, as defined under the FD&C Act, is to be administered, concerning the product's approved, licensed, or cleared conditions of use that deviate from approved labeling, standard clinical practice, and/or standard medical modality (*e.g.,* individual prescription within the patient-clinician relationship). This notice announces the redelegation of the above-mentioned authority, without the authority to redelegate, from the Director, CDC, to the Director, National Center for Immunizations and Respiratory Diseases (NCIRD).

**DATES:** This delegation was approved by the Director, CDC, and is effective October 28, 2022.

**SUPPLEMENTARY INFORMATION:** Only the Director, CDC, can issue original EUIs. The Director, NCIRD, may only issue amendments that are substantially within the scope of the original EUI and only for countermeasures within the scope of the NCIRD Director's official responsibilities. This authority shall be exercised under section 564A(e) of the FD&C Act (21 U.S.C. 360bbb–3a(e)), and any related HHS policies. This delegation became effective on October 28, 2022. The Director, CDC, affirms and ratifies any actions taken that involve the exercise of the authority delegated herein prior to the effective date of this delegation.

**Sherri A. Berger,**

*Chief of Staff, Centers for Disease Control and Prevention.*

[FR Doc. 2022–24044 Filed 11–3–22; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

**[60Day–23–1301; Docket No. CDC–2022–0126]**

### Proposed Data Collection Submitted for Public Comment and Recommendations

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

**ACTION:** Notice with comment period.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies the opportunity to comment on a continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Templates for Extramural Data Management Plans. The aim of this collection is to provide contract and cooperative agreement applicants and awardees with templates for the creation of data management plans (DMPs).

**DATES:** CDC must receive written comments on or before January 3, 2023.

**ADDRESSES:** You may submit comments, identified by Docket No. CDC–2022–0126 by either of the following methods:

- *Federal eRulemaking Portal: www.regulations.gov.* Follow the instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329.

*Instructions:* All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to *www.regulations.gov. Please note: Submit all comments through the Federal eRulemaking portal (www.regulations.gov) or by U.S. mail to the address listed above.*

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329; Telephone: 404–639–7570; Email: *omb@cdc.gov.*