

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–24–1316]

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 “Aerosols from cyanobacterial blooms: Exposures and Health Effects in a Highly Exposed Population” 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 October 16, 2023 to obtain comments from the public and affected agencies. CDC received one comment related to this 30-day notice.

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

Aerosols from Cyanobacterial Blooms: Exposures and Health Effects in a Highly Exposed Population (OMB Control No. 0920–1316, Exp. 1/31/2024)—Extension—National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC), requests a three-year Paperwork Reduction Act (PRA) clearance for a renewal of the information collection

request titled Aerosols from Cyanobacterial Blooms: Exposures and Health Effects in a Highly Exposed Population. NCEH is authorized to conduct research under the Public Health Service Act, Section 301, “Research and investigation,” (42 U.S.C. 241).

Toxins produced by blooms of algae, cyanobacteria, and seaweed (herein called harmful algal blooms or HABs) are among the most potent natural chemicals. Exposure to these toxins can induce a wide variety of reported and documented effects in people and animals. Published studies demonstrate that people and animals are at risk for health effects from exposure to HABs, whether through eating contaminated food, drinking contaminated water, or inhaling contaminated aerosols. Although there is substantial published work describing the public health impacts from these blooms, unanswered questions remain, including quantitative assessments of exposure and characterization of the clinical presentations of illnesses associated with HAB exposures.

HAB events and associated environmental impacts (e.g., geographic and temporal extent, composition, toxin production) are difficult, if not impossible to predict and track. Specifically, for the previously approved project, we were not able to align the physical occurrence of a specific type of a HAB of significant magnitude with government approvals and resource commitments. Therefore, we request a three-year Extension of the original Information Collection Request (ICR).

CDC requests OMB approval for an estimated 1,273 annual burden hours. There is no cost to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Interested community members	Screening/baseline Survey	84	1	15/60
Eligible study respondents	Symptom Survey	67	10	15/60
Eligible study respondents	Record of Time Spent Outdoors	67	5	10/60
Eligible study respondents	Provide blood specimen	67	3	15/60
Eligible study respondents	Provide specimens (urine, nasal swabs, lung function test).	67	10	1
Eligible study respondents	Be outfitted with personal air sampler	67	5	45/60
Eligible study respondents	Provide fish (if respondent went fishing and caught fish).	67	5	10/60

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. 2024-00716 Filed 1-16-24; 8:45 am]
BILLING CODE 4163-18-P

**DEPARTMENT OF HEALTH AND
 HUMAN SERVICES**

**Centers for Disease Control and
 Prevention**

[30Day-24-1319]

**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 "National Surveillance of Community Water Systems and Corresponding Populations with the Recommended Fluoridation Level" 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 August 21, 2023 to obtain comments from the public and affected agencies. CDC received three comments related to the previous notice. All comments were determined to be outside the scope of this project. 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

National Surveillance of Community Water Systems and Corresponding Populations with the Recommended Fluoridation Level (OMB Control No. 0920-1319, Exp. 2/29/2024)—Extension—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Community water fluoridation is the process of adjusting the fluoride concentration of a community water system (CWS) to the level beneficial for prevention of dental caries as recommended by the US Public Health Service (PHS). CWS fluoridation is a major factor contributing to the large decline in caries in the U.S. in the past 75 years and is recognized as one of 10 great public health achievements of the twentieth century. Community water fluoridation reduces dental caries by 25% and is a safe and the most cost-effective way to deliver fluoride to people of all ages, regardless of education and income level. It is especially important for populations with limited access to preventive dental measures.

CDC is authorized to collect the information under the Public Health Service Act. This data collection aligns with CDC's strategy to use public health surveillance to inform programs and policies to improve the oral health of the nation by reducing disparities and expanding access to effective prevention programs. CDC uses the Water Fluoridation Reporting System (WFRS) to collect water fluoridation coverage and quality throughout the US. Respondents to the information collection are state fluoridation managers or other state government officials designated by the state dental director or drinking water administrator. State participation in the data collection is voluntary. This data allows CDC and states to monitor the performance and efficiency of their water fluoridation programs, which will improve and extend program delivery.

CDC requests OMB approval for an estimated 2,783 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 Official	Fluoridation status and population	50	1	37.5
State Official	Fluoride testing data	33	1	27.5

Jeffrey M. Zirger,
*Lead, Information Collection Review Office,
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 Disease Control and Prevention.*