HMTS include intercept interviews, telephone interviews, focus groups, online surveys, and cognitive interviews. In almost all instances, data will be collected by outside organizations under contract with CDC.

For many years, CDC programs have used HMTS to test and refine message concepts and test draft materials for clarity, salience, appeal, and persuasiveness to target audiences. Having this Generic Clearance available has enabled them to test their information and get critical health information out to the public quickly. Over the last three years, more than 27 messages have been tested using this OMB Clearance package.

CDC's Division of Tuberculosis Elimination was approved to conduct program evaluation for their Latent Tuberculosis Infection (LTBI) Awareness Campaign within target audiences—non-US-born Vietnamese and Filipino persons and the healthcare professionals (primary care physicians, nurse practitioners, and physician assistants) that serve them. Assessing the immediate effects of campaign materials provides helpful insights that can be used to inform adjustments of campaign materials for intended audiences.

CDC's Division of Nutrition, Physical Activity, and Obesity (DNPAO) is tasked with leading our nation's efforts to prevent chronic diseases by promoting good nutrition, regular physical activity, and a healthy weight. One of the key ways DNPAO does this is by providing state and community partners with practical tools to promote healthy lifestyles such as the SCHMC communication resources. It is imperative that this ad testing be conducted so that CDC/DNPAO can best support grantees and local partners by providing timely information about how specific ads resonate with key audiences. The insights gained from the ad testing also provided DNPAO with timely information to inform development of additional ads and communication materials that they will resonate with audiences and lead to intended actions/behavior changes related to increasing physical activity, reducing sugary drink consumption, and improving infant and toddler nutrition.

The National Center for Injury Prevention and Control (NCIPC) collected data to assess older adults' perceptions of products developed as part of the expansion phase of CDC's Still Going Strong Campaign. Digital products were developed as part of this effort to expand the campaign to address social connectedness and isolation. The messages conveyed the importance of social connectedness to health to maintaining a high quality of life as we age. Participants learned about how social connectedness as well as physical and mental health are interconnected and critical to the well-being of older adults.

Over 5,400 burden hours were used during the previous approval period. Because the availability of this ICR has been so critical to programs in disseminating their materials and information to the public in a timely manner, the Office of Communications is requesting approval for an estimated 2,470 annual burden hours for this three-year Extension of the information collection. There is no cost to the 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)
Public Health Professionals, Health Care Providers, State and Local Public Health Officials, Emergency Responders, General Public.	Moderator's Guides, Eligibility Screeners, Interview Guides, Opinion Surveys, Consent Forms.	18,525	1	8/60

Jeffrey M. Zirger,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-25–24GU]

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 ''Assessing Adoption and Implementation of the National Institute of Occupational Safety and Health's (NIOSH) Outputs'' 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 June 28, 2024, to obtain comments from the public and affected agencies. CDC received two non-substantive 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, 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

Assessing Adoption and Implementation of the National Institute of Occupational Safety and Health's (NIOSH) Outputs—New—National Institute of Occupational Safety and Health's (NIOSH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC), National Institute for Occupational Safety and Health (NIOSH), is requesting approval of a new Generic information collection for a period of three years under the project titled, ''Assessing Adoption and Implementation of the National Institute of Occupational Safety and Health's (NIOSH) Outputs.''

With the continuation of the Government Performance and Results Act and the more recent passage of the Foundations of Evidence-Based Policy Making Act, there is an increased need for federal agencies to measure and demonstrate their impact. However, measuring impact is challenging, especially for organizations that have a science-driven mission because of the time it takes to move from basic to applied research. Demonstrating attribution (cause and effect relationships) is particularly challenging for research organizations.

NIOSH research is often designed to collect implementation and adoption data through document reviews of NIOSH records, including grantee final reports, and through interviews with NIOSH researchers (federal employees). While commonly recognized metrics, these data sources are not comprehensive, representative, or informative of the adoption and implementation of NIOSH products and efforts. Further, the design and execution of research projects has hindered research and program leaders prioritizing information collections to understand and assess the adoption and implementation of research efforts and products.

The proposed generic information collection package would allow researchers to expeditiously pursue efforts to provide NIOSH with critical information to inform mission-driven needs. Additionally, the proposed efforts go beyond simply measuring customer satisfaction and rather seek to advance NIOSH's burden, need, and impact framework for future research while also endeavoring to execute the Office of Management and Budget's (OMB) guidance regarding the Foundations of Evidence-Based Policymaking Act.

Respondents are expected to consist of users and potential users of NIOSH products including subject matter expects, former NIOSH funding recipients, and intermediary and end users. CDC requests OMB approval for an estimated 17,150 total burden hours with an estimated annual burden of 6,069 hours. There is no cost to respondents other than their time to participate.

Estimated Annualized Burden Hours

Type of respondent	Type of data collection instrument	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Subject matter experts	Survey instrument (single, pre and post, or poll) including demographics.	5,000	1	20/60
	Informed consent form	250	1	5/60
	Interview or focus group guide	250	1	1
Former NIOSH funding recipients	Survey instrument (single, pre and post, or poll) including demographics.	200	1	20/60
	Informed consent form	25	1	5/60
	Interview or focus group guide	25	1	1
Intermediary or end users (e.g., employers, workers, manufactures, labor/professional associations, policymakers).	Survey instrument (single, pre and post, or poll) including demographics.	10,000	1	20/60
	Informed consent form	650	1	5/60
	Interview or focus group guide	650	1	1

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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–2024–P–4163]

Determination That NOXAFIL (Posaconazole) Delayed-Release Tablets, 100 Grams Was Not Withdrawn From Sale for Reasons of Safety or Effectiveness

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA, Agency, or we) has determined that NOXAFIL (posaconazole) delayed-release tablets, 100 grams (g), was not withdrawn from sale for reasons of safety or effectiveness. This determination means that FDA will not begin procedures to withdraw approval of abbreviated new drug applications (ANDAs) that refer to this drug product, and it will allow FDA to continue to approve ANDAs that refer to the product as long as they meet relevant legal and regulatory requirements.

FOR FURTHER INFORMATION CONTACT: Awo Archampong-Gray, Center for Drug Evaluation and Research, Food and Drug Administration, 10903 New