

**ACTION:** Availability of the Report on Carcinogens, Twelfth Edition (12th RoC).

**SUMMARY:** The Department of Health and Human Services released the 12th RoC to the public on June 10, 2011. The report is available on the RoC Web site at: <http://ntp.niehs.nih.gov/go/roc12> or in printed text or electronically from the Office of the RoC (see **ADDRESSES** below).

**DATES:** The 12th RoC will be available to the public on June 10, 2011.

**ADDRESSES:** Dr. Ruth Lunn, Director, Office of the RoC, NTP, NIEHS, P.O. Box 12233, MD K2-14, Research Triangle Park, NC 27709; *telephone:* (919) 316-4637; *FAX:* (919) 541-0144; *lunn@niehs.nih.gov*.

**FOR FURTHER INFORMATION CONTACT:** Questions or comments concerning the 12th RoC should be directed to Dr. Ruth Lunn (*telephone:* (919) 361-4637 or *lunn@niehs.nih.gov*).

**SUPPLEMENTARY INFORMATION:**

**Background Information on the RoC**

The RoC is a Congressionally mandated document that identifies and discusses agents, substances, mixtures, or exposure circumstances (collectively referred to as “substances”) that may pose a hazard to human health by virtue of their carcinogenicity. Substances are listed in the report as either *known* or *reasonably anticipated to be human carcinogens*. The listing of a substance in the RoC indicates a potential hazard, but does not establish the exposure conditions that would pose cancer risks to individuals in their daily lives. For each listed substance, the RoC provides information from cancer studies that support the listing as well as information about potential sources of exposure and current Federal regulations to limit exposures. Each edition of the RoC is cumulative, that is, it lists newly reviewed substances in addition to substances listed in the previous edition. Information about the RoC is available on the RoC Web site (<http://ntp.niehs.nih.gov/go/roc12>) or by contacting Dr. Lunn (see **ADDRESSES** above).

The NTP prepares the RoC on behalf of the Secretary of Health and Human Services. For the 12th RoC, the NTP followed an established, multi-step process with multiple opportunities for public input, and used established criteria to evaluate the scientific evidence on each candidate substance under review (<http://ntp.niehs.nih.gov/go/15208>).

**New Listings to the 12th RoC**

The 12th RoC contains 240 listings, some of which consist of a class of structurally related chemicals or agents. There are six new listings and two revised listings in this edition. The revised listings include (1) Formaldehyde, which was previously listed as *reasonably anticipated to be a human carcinogen* and is now listed as *known to be a human carcinogen*, and (2) certain glass wool fibers (inhalable). Glass wool (respirable) was first listed in the 7th RoC as *reasonably anticipated to be a human carcinogen*, but the scope of the listing changed and now certain glass wool fibers (inhalable) are listed as *reasonably anticipated to be human carcinogens*. The six new listings to the 12th RoC include one substance, aristolochic acids, listed as *known to be human carcinogens*, and five substances—captafol, cobalt-tungsten carbide: powders and hard metals, o-nitrotoluene, riddelliine, and styrene—listed as *reasonably anticipated to be a human carcinogen*.

Dated: June 14, 2011.

**Linda S. Birnbaum,**

*Director, National Institute of Environmental Health Sciences and National Toxicology Program.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[60Day-11-07BH]

**Proposed Data Collections Submitted for Public Comment and Recommendations**

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-5960 and send comments to Daniel Holcomb, CDC Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an e-mail to *omb@cdc.gov*.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have

practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

**Proposed Project**

Environmental Health Specialists Network (EHS-NET) Program Generic Package (no. 0920-0792; expiration date: 10/31/2011)—Revision—National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

The CDC is requesting OMB approval for three additional years to use this generic clearance for a research program focused on identifying the environmental causes of foodborne illness. This revision will provide OMB clearance for EHS-NET data collections conducted in 2011 through 2014 (a maximum of 3 annually). The program is revising the generic information collection request (ICR) in the following ways:

(1) We reduced the number of respondent groups from 3 to 1.

(2) We reduced the number of studies we expect to conduct on an annual basis, which reduces the estimated burden.

(3) We will use enhanced statistical methods in comparison to the previous ICR. Specifically, we plan to collect generalizable data.

Reducing foodborne illness first requires identification and understanding of the environmental factors that cause these illnesses. We need to know how and why food becomes contaminated with foodborne illness pathogens. This information can then be used to determine effective food safety prevention methods. Ultimately, these actions can lead to increased regulatory program effectiveness and decreased foodborne illness. The purpose of this food safety research program is to identify and understand environmental factors associated with foodborne illness and outbreaks. This program will continue to involve up to 3 data collections a year. This program is conducted by the Environmental Health Specialists Network (EHS-NET), a collaborative project of CDC, FDA, USDA, and six state/local sites (CA, NYC, NY, MN, RI, and TN).

Environmental factors associated with foodborne illness include both food safety practices (e.g., inadequate cleaning practices) and the factors in the environment associated with those practices (e.g., worker and retail food establishment characteristics). To understand these factors, we need to continue to collect data from those who prepare food (i.e., food workers) and on the environments in which the food is prepared (i.e., retail food establishment kitchens). Thus, data collection methods for this generic package include: (1) Worker interviews/surveys, and (2) observation of kitchen environments. Both methods allow data collection on food safety practices and environmental factors associated with those practices.

For each data collection, we will collect data in approximately 80 retail

food establishments per EHS-NET site. Thus, there will be approximately 480 establishments per data collection (6 sites\*80 establishments). For each data collection, we will collect interview/survey data from 1 to 3 workers per establishment. Each respondent will respond only once. Each worker interview/survey will take approximately 30 minutes. Thus, the maximum annual burden for the interview/surveys per data collection will be 720 hours (480 establishments\*3 workers\*30 minutes). As we plan to conduct up to 3 data collections annually, the maximum annual worker interview/survey burden will be 2,160 hours (720 hours\*3 data collections).

We expect a worker response rate of approximately 70 percent. Thus, for each data collection, we will need to

conduct a recruiting screener with approximately 2,057 worker respondents to obtain the needed number of respondents. Each respondent will respond only once. Each screener will take approximately 3 minutes. Thus, the maximum annual burden for the recruiting screeners per data collection will be 103 hours (2,057 workers\*3 minutes). As we plan to conduct up to 3 data collections annually, the maximum annual burden will be 309 hours (103 hours\*3 data collections). Thus, the maximum annual burden will be 2,469 hours (2,160 hours for worker interview/surveys + 309 hours for worker recruiting screener). There is no cost to the respondent 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)	Total burden (in hours)
Retail food workers .....	Interview/survey .....	4,320	1	30/60	2,160
Retail food workers .....	Recruiting screener .....	6,171	1	3/60	309
Total .....	.....	.....	.....	.....	2,469

**Daniel Holcomb,**

*Reports Clearance Officer, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Advisory Board on Radiation and Worker Health (ABRWH or Advisory Board), National Institute for Occupational Safety and Health (NIOSH)**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC), announces the following meeting of the aforementioned committee:

*Time and Date:* 11 a.m.–3 p.m., July 11, 2011.

*Place:* Audio Conference Call via FTS Conferencing. The USA toll-free, dial-in number is 1-866-659-0537 and the pass code is 9933701.

*Status:* Open to the public, but without a public comment period.

*Background:* The Advisory Board was established under the Energy Employees Occupational Illness Compensation

Program Act of 2000 to advise the President on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Advisory Board include providing advice on the development of probability of causation guidelines, which have been promulgated by the Department of Health and Human Services (HHS) as a final rule; advice on methods of dose reconstruction, which have also been promulgated by HHS as a final rule; advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed for purposes of the compensation program; and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC).

In December 2000, the President delegated responsibility for funding, staffing, and operating the Advisory Board to HHS, which subsequently delegated this authority to the CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, most recently, August 3, 2009, and will expire on August 3, 2011.

*Purpose:* This Advisory Board is charged with a) Providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; b) providing advice to the

Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this program; and c) upon request by the Secretary, HHS, advising the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class.

*Matters To Be Discussed:* The agenda for the conference call includes: HHS Notice of Proposed Rulemaking to Amending 42 CFR Part 81 (to add Chronic Lymphocytic Leukemia as a “radiogenic cancer” for the determination of probability of causation under Subpart B of EEOICPA); NIOSH SEC Petition Evaluation for Ames Laboratory (Ames, Iowa) and General Electric Company (Evendale, Ohio); NIOSH 10-mk Year Review of Its Division of Compensation Analysis and Support (DCAS) Program; Subcommittee and Work Group Updates; DCAS SEC Petition Evaluations Update for the August 2011 Advisory Board Meeting; and Board Correspondence.

The agenda is subject to change as priorities dictate.