

**Non-substantial Change Request to OMB Control # 0920-1011  
Emergency Epidemic Investigation Data Collections  
Year 1, Quarter 3 (Date Submitted: March 2, 2015)**

This is a non-substantive change request for the Emergency Epidemic Investigations (EEI) Generic ICR, (OMB Control No. 0920-1011, Expiration 3/31/17). This allows the Centers for Disease Control and Prevention (CDC) to continue to conduct EEIs in response to acute public health emergencies resulting from outbreaks or events with undetermined agents, undetermined sources, undetermined modes of transmission or undetermined risk factors. CDC frequently is called upon to conduct EEIs at the request of one or more external partners (e.g., local, state, tribal, military, port, other federal agency, or international health authorities or other partner organizations) seeking support to respond to urgent public health problems. In response to external partner requests, CDC readily provides necessary epidemiologic support to facilitate appropriate engagement in epidemiological investigations. Such investigations often are dependent on rapid and flexible data collection that evolves during the investigation period.

This non-substantive change request is submitted to comply with the stated procedures in the approved EEI Generic ICR package (as specified in point 5 under Special Circumstances Relating to the Guidelines of 5 CFR 1320.5), "CDC maintains a library of data collection instruments that includes all final data collection instruments conducted under this generic ICR. This library and the updated burden numbers based on data collected via the "Burden Memo" are submitted to OMB quarterly as a non-substantive change to the generic ICR." This non-substantive change request includes the following: Burden Memos (Appendix 1) and final data collection forms (Appendix 2) for the 12 investigations conducted under 0920-1011 for which data collection was completed during Y1Q3 (October 1, 2014 to December 31, 2014).

The actual burden for the 12 investigations completed during Y1Q3 was 14,866 respondents and 4,916 burden hours. This is greater than the 8,585 respondents and 1,972 burden hours that was projected in the GenIC requests for these investigations.

**Table 1. Burden in Y1Q3**

| Type of Respondents                           | Form Name  | No. of Respondents | Avg. Burden per Response (in hrs.) | Total Burden (in hrs.) |
|---|--|--------------------|------------------------------------|------------------------|
| Emergency Epidemic Investigation Participants | Emergency Epidemic Investigation Data Collection Instruments | 14,866             | 20/60                              | 4,916                  |
| Total   |  |                    |                                    | 4,916                  |

Table 2 below summarizes the data collection form name and projected and actual burden for each approved GenIC. A projected burden of 0 indicates the data collection form was developed in the field.

**Table 2. Y1Q3 Data Collection Forms and Projected and Actual Burden, By GenIC**

|                 |               |  | Projected Burden |       | Actual Burden   |       |
|-----------------|---------------|--|------------------|-------|-----------------|-------|
| GenIC No. (OMB) | Date Approved | Form Name  | No. Respondents  | Hours | No. Respondents | Hours |
| 2014009-XXX     | 7/7/2014      | Chikungunya_ Questionnaire                                 | 147              | 172   | 106             | 36    |
| 2014009-XXX     | 7/7/2014      | Chikungunya_ Consent-Parental Permission Form              | 147              | 13    | 102             | 9     |
| 2014011-XXX     | 7/8/2014      | Ebola_ Case Investigation Form                             | 600              | 250   | 4000            | 1667  |
| 2014011-XXX     | 7/8/2014      | Ebola_ Contract Tracing Form                               | 2000             | 100   | 1500            | 75    |
| 2014011-XXX     | 7/8/2014      | Ebola_ KAP_ HCW  | 0                | 0     | 40              | 20    |
| 2014011-XXX     | 7/8/2014      | Ebola_ KAP_ Public   | 0                | 0     | 360             | 60    |
| 2014011-XXX     | 7/8/2014      | Ebola_ KAP_ County Health Director                         | 0                | 0     | 6               | 6     |
| 2014013-XXX     | 7/16/2014     | Respiratory Illness_ Case Investigation Form               | 450              | 225   | 71              | 36    |
| 2014013-XXX     | 7/16/2014     | Respiratory Illness_ Hospitalized Case Investigation Form  | 100              | 50    | 5               | 3     |
| 2014013-XXX     | 7/16/2014     | Respiratory Illness_ Interview Assent Form                 | 0                | 0     | 8               | 2     |
| 2014013-XXX     | 7/16/2014     | Respiratory Illness_ Carriage Assent Form                  | 0                | 0     | 609             | 51    |
| 2014013-XXX     | 7/16/2014     | Respiratory Illness_ Infection Control Assessment          | 0                | 0     | 1               | 8     |
| 2014013-XXX     | 7/16/2014     | Respiratory Illness_ Rapid Environmental Health Assessment | 0                | 0     | 1               | 8     |
| 2014014-XXX     | 7/21/2014     | Ebola_ Case Investigation Form                             | 600              | 250   | 3600            | 1500  |
| 2014014-XXX     | 7/21/2014     | Ebola_ Contract Tracing Form                               | 2000             | 100   | 2000            | 100   |
| 2014015-XXX     | 8/13/2014     | Parechovirus_ Chart Abstraction Form                       | 1                | 13    | 4               | 17    |
| 2014015-XXX     | 8/13/2014     | Parechovirus_ Chart Abstraction Form                       | 0                | 0     | 2               | 14    |
| 2014015-XXX     | 8/13/2014     | Parechovirus_ Family Interview Questionnaire               | 20               | 5     | 26              | 13    |
| 2014015-XXX     | 8/13/2014     | Parechovirus_ Patient_ Sibling Diaper Collection           | 0                | 0     | 26              | 2     |
| 2014016-XXX     | 9/4/2014      | Ebola_ Case Investigation Form                             | 200              | 84    | 0               | 0     |
| 2014016-XXX     | 9/4/2014      | Ebola_ Contract Tracing Form                               | 1000             | 50    | 0               | 0     |
| 2014016-XXX     | 9/4/2014      | Ebola_ RECO Interview                                      | 0                | 0     | 18              | 3     |
| 2014016-XXX     | 9/4/2014      | Ebola_ Health Facility Assessment                          | 0                | 0     | 5               | 1     |
| 2014017-XXX     | 9/15/2014     | Chart Abstraction Form                                     | 4                | 40    | 3               | 72    |
| 2014017-XXX     | 9/15/2014     | Reuse and Reprocessing Checklist                           | 2                | 10    | 6               | 2     |
| 2014017-XXX     | 9/15/2014     | Outpatient Dialysis Center Practices Survey                | 20               | 35    | 0               | 0     |
| 2014018-XXX     | 9/22/2014     | Paralysis_ Medical Chart Abstraction Form                  | 1                | 9     | 1               | 6     |
| 2014018-XXX     | 9/22/2014     | Paralysis_ Questionnaire for Family                        | 0                | 0     | 0               | 0     |