

**Leroy A. Richardson,**  
Chief, Information Collection Review Office,  
Office of Scientific Integrity, Office of the  
Associate Director for Science, Office of the  
Director, Centers for Disease Control and  
Prevention.

[FR Doc. 2017-06867 Filed 4-5-17; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day-17-1146; Docket No. CDC-2017-  
0029]

#### 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 efforts to reduce public  
burden and maximize the utility of  
government information, invites the  
general public and other Federal  
agencies to take this opportunity to  
comment on proposed and/or  
continuing information collections, as  
required by the Paperwork Reduction  
Act of 1995. This notice invites  
comment on a revision to the  
information collection project approved  
under OMB Control number 0920-1146  
(expiration date 11/30/2019), Survey of  
Surveillance Records of *Aedes aegypti*  
and *Aedes albopictus* from 1960 to  
Present.

**DATES:** Written comments must be  
received on or before June 5, 2017.

**ADDRESSES:** You may submit comments,  
identified by Docket No. CDC-2017-  
0029 by any of the following methods:

- **Federal eRulemaking Portal:**  
*Regulations.gov*. Follow the instructions  
for submitting comments.

- **Mail:** Leroy A. Richardson,  
Information Collection Review Office,  
Centers for Disease Control and  
Prevention, 1600 Clifton Road NE., MS-  
D74, Atlanta, Georgia 30329.

**Instructions:** All submissions received  
must include the agency name and  
Docket Number. All relevant comments  
received will be posted without change  
to *Regulations.gov*, including any  
personal information provided. For  
access to the docket to read background  
documents or comments received, go to  
*Regulations.gov*.

**Please note:** All public comment  
should be submitted through the

Federal eRulemaking portal  
(*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 the Information  
Collection Review Office, Centers for  
Disease Control and Prevention, 1600  
Clifton Road NE., MS-D74, Atlanta,  
Georgia 30329; phone: 404-639-7570;  
Email: [omb@cdc.gov](mailto:omb@cdc.gov).

**SUPPLEMENTARY INFORMATION:** Under the  
Paperwork Reduction Act of 1995 (PRA)  
(44 U.S.C. 3501-3520), Federal agencies  
must obtain approval from the Office of  
Management and Budget (OMB) for each  
collection of information they conduct  
or sponsor. In addition, the PRA also  
requires Federal agencies to provide a  
60-day notice in the **Federal Register**  
concerning each proposed collection of  
information, including each new  
proposed collection, each proposed  
extension of existing collection of  
information, and each reinstatement of  
previously approved information  
collection before submitting the  
collection to OMB for approval. To  
comply with this requirement, we are  
publishing this notice of a proposed  
data collection as described below.

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; (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; and (e) estimates of capital  
or start-up costs and costs of operation,  
maintenance, and purchase of services  
to provide information.

Burden means the total time, effort, or  
financial resources expended by persons  
to generate, maintain, retain, disclose or  
provide information to or for a Federal  
agency. This includes the time needed  
to review instructions; to develop,  
acquire, install and utilize technology  
and systems for the purpose of  
collecting, validating and verifying  
information, processing and  
maintaining information, and disclosing  
and providing information; to train  
personnel and to be able to respond to  
a collection of information, to search  
data sources, to complete and review  
the collection of information; and to

transmit or otherwise disclose the  
information.

#### Proposed Project

Survey of Surveillance Records of  
*Aedes aegypti* and *Aedes albopictus*  
from 1960 to Present—Revision—(OMB  
Control number 0920-1146, expires 11/  
30/2019) National Center for Emerging  
and Zoonotic Infectious Diseases  
(NCEZID), Centers for Disease Control  
and Prevention (CDC).

#### Background and Brief Description

The Zika virus response necessitates  
the collection of county and sub-county  
level records for *Aedes aegypti* and *Ae.*  
*albopictus*, the vectors of Zika virus.  
This information will be used to update  
species distribution maps for the United  
States and to develop a model aimed at  
identifying where these vectors can  
survive and reproduce. CDC is seeking  
to revise the information collection  
approved under OMB Control number  
0920-1146 to collect information for  
three years.

In February 2016, OMB received  
emergency clearance for a county-level  
survey of vector surveillance records for  
a limited number of years (2006-2015)  
(OMB Control No. 0920-1101,  
expiration date 8/31/2016). OMB then  
issued clearance for a follow-up  
information collection that was very  
similar to the first (OMB Control No.  
0920-1146, expiration date 11/30/2019)  
but expanded the years that were  
evaluated. The information collection in  
this information collection request will  
be very similar of those surveys, but will  
collect these data monthly going  
forward.

The previous two surveys aimed to  
describe the reported distribution of the  
Zika virus vectors *Aedes aegypti* and  
*Ae. albopictus* from 1960 until late 2016  
at county and sub-county spatial scales.  
The 56-year data review was necessary  
because many recent records for these  
species of mosquitos were lacking,  
likely because from 2004-2015 most  
vector surveillance focused on vectors  
of West Nile virus (*Culex* spp.) rather  
than Zika vectors. The surveys yielded  
important data allowing CDC, states,  
and partners to understand the spread of  
these mosquitos in the U.S as well as  
the environmental conditions necessary  
for them to survive. The surveys  
reviewed data records from 1960-2016  
and resulted in a complete assessment  
of historical records of mosquito  
surveillance but were not designed to  
collect these types of data routinely over  
time.

In this revision, CDC will also seek  
information on locations of the  
mosquito traps at sub-county spatial

scales through an online data portal called MosquitoNET (<https://wwwn.cdc.gov/Arbonet/MosquitoNET>) and will be expanded to include insecticide susceptibility and resistance data on local populations of mosquitos. Data will be collected monthly through the expiration date of this OMB approval.

Such information will aid in (1) targeting vector control efforts to prevent mosquito-borne Zika virus transmission in the continental U.S. and (2) targeting future vector surveillance efforts. The resulting maps and models will inform the public and policy makers of the known distribution of these vectors, identify gaps in vector

surveillance, and target allocation of surveillance and prevention resources. As part of the Zika response, efforts to identify *Ae. aegypti* and *Ae. albopictus* in the continental U.S. were substantially enhanced during 2016 and funding will be provided to states to continue to enhance surveillance for these vectors through the longstanding Epidemiology and Laboratory Capacity Program that was expanded to now include mosquito surveillance.

Respondents will include vector control professionals, entomologists, and public health professionals who are recipients of ELC funding or their designated points of contact. The respondents will be contacted via ELC

primary recipients and instructed to set up accounts on the MosquitoNET Web site via a simple process. Data collection from ELC recipients will then begin. In order to limit the burden of data entry on respondents who may be entering information for their state, they will have the option of submitting the data via email to CDC using an excel survey.

This information collection request is authorized by Section 301 of the Public Health Service Act (42 U.S.C. 241). The total estimated annualized burden time is 192 hours. There will be no anticipated costs to respondents other than time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)	Total burden (in hrs.)
Vector control professionals, entomologists, and Public health professionals.	MosquitoNET entry of monthly surveillance records of <i>Aedes aegypti</i> and <i>Aedes albopictus</i> .	64	12	15/60	192
Total .....	.....	.....	.....	.....	192

**Leroy A. Richardson,**  
*Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.*

[FR Doc. 2017-06865 Filed 4-5-17; 8:45 am]

BILLING CODE 4163-18-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30 Day-17-17IM]

**Agency Forms Undergoing Paperwork Reduction Act Review**

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (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 or send an email to [omb@cdc.gov](mailto:omb@cdc.gov). Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

**Proposed Project**

Use of the Cyclosporiasis National Hypothesis Generating Questionnaire

(CNHGG) during Investigations of Foodborne Disease Clusters and Outbreaks—New—Center for Global Health (CGH), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

An estimated 1 in six Americans per year become ill with a foodborne disease. Foodborne outbreaks of cyclosporiasis—caused by the parasite *Cyclospora cayetanensis*—have been reported in the United States since the mid-1990s and have been linked to various types of fresh produce. During the 15-year period of 2000–2014, 31 U.S. foodborne outbreaks of cyclosporiasis were reported; the total case count was 1,562. It is likely that more cases (and outbreaks) occurred than were reported; in addition, because of insufficient data, many of the reported cases could not be directly linked to an outbreak or to a particular food vehicle.

Collecting the requisite data for the initial hypothesis-generating phase of investigations of multistate foodborne disease outbreaks is associated with multiple challenges, including the need to have high-quality hypothesis-generating questionnaire(s) that can be used effectively in multijurisdictional investigations. Such a questionnaire was developed in the past for use in the context of foodborne outbreaks caused by bacterial pathogens; that