

**Request for Approval under the Generic Clearance for the “Conference, Meeting, Workshop, and Poster Session Registration Generic Clearance (OD)” (OMB#: 0925-0740, Expiration Date: 07/31/2022)**

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**TITLE OF INFORMATION COLLECTION:** 2021 Co-Clinical Imaging Research Resource Program (CIRP) Annual Virtual Meeting (NCI)

**PURPOSE:**

The Division of Cancer Treatment and Diagnosis (DCTD) of the National Cancer Institute (NCI) will host the 2021 *Co-clinical Imaging Research Resource Program (CIRP) Annual Virtual Meeting* on June 16-17. CIRP network was launched in 2018 as a trans-NCI initiative, joined by Cancer Imaging Program at Division of Cancer Treatment and Diagnosis, Division of Cancer Biology, and Division of Cancer Prevention. This annual virtual meeting is organized to enhance direct dialogues between NCI, the network investigators, the investigators from cancer biology community, cancer imaging community and clinicians, with focus on identifying major challenges and developing consensus on the strategies to overcome the challenges.

**DESCRIPTION OF RESPONDENTS:**

All CIRP teams members and associate members, NCI other extramural program staff, investigators from cancer or imaging communities who are interested in this program, other federal agencies and/or NIH other institutes extramural program staff. It is estimated ~ 160 total attendees, with ~ 20 FTEs.

**TYPE OF COLLECTION:** (Check all that apply)

Abstract  Application  
 Registration Form  Other: \_\_\_\_\_

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.

Name: Huiming Zhang, PhD

**To assist review, please provide answers to the following question:** If you are collecting name and email, then check yes for PII.

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected?  Yes  No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?  Yes  No

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?  Yes  No

Amount: \_\_\_\_\_

Explanation for incentive: (include number of visits, etc)

**ESTIMATED BURDEN HOURS and COSTS**

Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Individuals	140	1	5/60	12
<b>Totals</b>		<b>140</b>		<b>12</b>

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	12	\$46.95	\$563.40
<b>Total</b>			<b>\$563.40</b>

\*Source of the mean Hourly Wage Rate is provided by the Bureau of Labor Statistics, Occupation title “Medical Scientists” 19-1040, [https://www.bls.gov/oes/2019/May/oes\\_nat.htm#00-0000](https://www.bls.gov/oes/2019/May/oes_nat.htm#00-0000).

**FEDERAL COST:** The estimated annual cost to the Federal government is \$155.20.

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
Program Director	14/9	\$155,202	1%		\$155.20
<b>Contractor Cost</b>					\$0
Travel					\$0
Other Cost					\$0
<b>Total</b>					<b>\$155.20</b>

\*\*The salary in the table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/21Tables/html/DCB.aspx>

### **The selection of your targeted respondents**

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?  
 Yes  No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

The CIRP network teams and associate members are required to attend, and the meeting news will be posted on NCIP Hub, and NCI Event and some scientific meetings.

### **Administration of the Instrument**

How will you collect the information? (Check all that apply)

- Web-based or other forms of Social Media  
 Telephone  
 In-person  
 Mail  
 Survey Form  
 Chart Abstraction  
 Other, Explain

Will interviewers, facilitators, or research coordinators be used?  Yes  No

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**