

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

TITLE OF INFORMATION COLLECTION:

Technical Assistance Webinar—Developing Quantitative Imaging & Other Relevant Biomarkers of Myofascial Tissues for Clinical Pain Management

PURPOSE:

The National Institutes of Health (NIH) will sponsor an event on December 2, 2021 related to the Funding Opportunity Announcement (FOA) HEAL Initiative: Developing Quantitative Imaging and Other Relevant Biomarkers of Myofascial Tissues for Clinical Pain Management (R61/R33, Clinical Trial Required). The FOA is a partnership between the National Center for Complementary and Integrative Health (NCCIH), the National Institute of Biomedical Imaging and Bioengineering (NIBIB), and 9 other NIH Institutes and Centers.

Technical Assistance Webinar

December 2, 2021 from 3:00 – 4:00 p.m. ET

Informational Webinar for HEAL Initiative: Developing Quantitative Imaging and Other Relevant Biomarkers of Myofascial Tissues for Clinical Pain Management (R61/R33, Clinical Trial s Clinical Clinical Trial Required)

This technical assistance webinar is intended to provide an overview of the initiative, guidance on application preparation process, and address applicant questions. All webinar registrants will be prompted to indicate their areas of expertise, what additional areas of expertise they are looking for their teams, and whether they are willing to share their email addresses along with their areas of expertise with other webinar registrants. We are asking this information during the EventBrite registration to better facilitate potential team building interactions during a future researchers networking session.

DESCRIPTION OF RESPONDENTS:

Technologist or engineer, Pain expert, Interventionist/therapist, Clinical Trialist, Basic/mechanistic and clinical researchers, members of the public, advocates, policymakers, journalists, NIH Employees, members of academia, non-profits, and other interested parties.

TYPE OF COLLECTION: (Check one)

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:

Wen G. Chen, Ph.D., Branch Chief and Program Director, Basic and Mechanistic Research in Complementary and Integrative Health Branch

To assist review, please provide answers to the following question:

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 (Registration)	500	1	10/60	83
Totals		500		83

COST TO RESPONDENT

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	83	\$48.45	\$4,021.35
Total			\$4,021.35

*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/2020/may/oes_nat.htm

FEDERAL COST: The estimated annual cost to the Federal government is \$1,708

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Program Director	GS15-7	\$ 170,800	1%		\$1,708.00
Contractor Cost					
Travel					
Other Cost					
Total					\$1,708.00

**The salary in the table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/20Tables/html/DCB.aspx>

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

N/A

The selection of your targeted respondents

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?

We will promote the meeting through the NCCIH public website, NCCIH communication channels, other Institute, Center, and Offices communication channels, and third-party organizations such as professional associations and research societies. We will contact individual researchers interested in this topic as identified through NIH databases.

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.