

conclusion of the open meeting on May 4, 2023.

PLACE: 1050 First Street NE, Washington, DC and virtual. (This meeting will be a hybrid meeting.)

STATUS: This meeting will be closed to the public.

MATTERS TO BE CONSIDERED:

Compliance matters pursuant to 52 U.S.C. 30109.

Matters relating to internal personnel decisions, or internal rules and practices.

Investigatory records compiled for law enforcement purposes and production would disclose investigative techniques.

Information the premature disclosure of which would be likely to have a considerable adverse effect on the implementation of a proposed Commission action.

Matters concerning participation in civil actions or proceedings or arbitration.

CONTACT PERSON FOR MORE INFORMATION: Judith Ingram, Press Officer, Telephone: (202) 694-1220.

(Authority: Government in the Sunshine Act, 5 U.S.C. 552b.)

Vicktorja J. Allen,

Deputy Secretary of the Commission.

[FR Doc. 2023-09059 Filed 4-25-23; 4:15 pm]

BILLING CODE 6715-01-P

FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board's Freedom of Information Office at

<https://www.federalreserve.gov/foia/request.htm>. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)).

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E. Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington, DC 20551-0001, not later than May 30, 2023.

A. Federal Reserve Bank of Atlanta (Erien O. Terry, Assistant Vice President) 1000 Peachtree Street NE, Atlanta, Georgia 30309; Comments can also be sent electronically to Applications.comments@atl.frb.org:

1. *Smith & Hood Holding Company, L.L.C., Amite, Louisiana, and First Guaranty Bancshares, Inc., Hammond, Louisiana;* to acquire Lone Star Bank, Houston, Texas.

Board of Governors of the Federal Reserve System.

Michele Taylor Fennel,

Deputy Associate Secretary of the Board.

[FR Doc. 2023-08949 Filed 4-26-23; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-FY-2023; Docket No. CDC-2023-0032]

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 effort to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Airline and Vessel Traveler Information Collection. The information collected will be used to conduct contact tracing and public health follow-up on travelers who have been identified in a risk exposure zone on a conveyance where a traveler was

confirmed or suspected of traveling with infectious with a communicable disease of public health importance.

DATES: CDC must receive written comments on or before June 26, 2023.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2023-0032 by either of the following methods:

- *Federal eRulemaking Portal:* www.regulations.gov. Follow the instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to www.regulations.gov.

Please note: Submit all comments through the Federal eRulemaking portal (www.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 Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30329; Telephone: 404-639-7570; Email: 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 the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. 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;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information,

including the validity of the methodology and assumptions used;

3. Enhance the quality, utility, and clarity of the information to be collected;

4. 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 submissions of responses; and

5. Assess information collection costs.

Proposed Project

Airline and Vessel Traveler Information Collection (OMB Control No. 0920–1180, Exp. 6/30/2023)—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The rapid speed and tremendous volume of international travel, commerce, and human migration enable infectious disease threats to disperse worldwide in 24 hours—less time than the incubation period of most communicable diseases. These and other forces intrinsic to modern technology and ways of life favor the emergence of new communicable diseases and the reemergence or increased severity of known communicable diseases. Stopping a communicable disease outbreak—whether it is naturally occurring or intentionally caused—requires the use of the most rapid and effective public health tools available. Basic public health practices, such as collaborating with airlines in the identification and notification of potentially exposed travelers, are critical tools in the fight against the introduction, transmission, and spread of communicable disease in the United States. The collection of timely, accurate, and complete

conveyance and traveler information enables CDC to notify state and local health departments in order for them to make contact with individuals who may have been exposed to a communicable disease during travel, or due to an outbreak of disease in a geographic location and identify appropriate next steps.

Section 361 of the Public Health Service Act (42 U.S.C. 264) authorizes the Secretary of the Department of Health and Human Services (DHHS) to make and enforce regulations necessary to prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the United States, or from one State or possession into any other State or possession. Regulations that implement federal quarantine authority are currently promulgated in 42 CFR parts 70 and 71. Part 71 contains regulations to prevent the introduction, transmission, and spread of communicable diseases into the states and possessions of the United States.

Passenger and crewmember manifests are used to collect travelers information from airlines and vessels after travel has been completed and when a disease is confirmed or there is a suspected exposure. Manifests include locating and contact information, as well as information concerning where passengers sat while aboard an airline or their location (e.g. cabin numbers) and activities aboard a vessel. Manifests collect the following data elements:

- Full name (last, first, and, if available, middle or others);
- Date of birth;
- Sex;
- Country of residence;
- If a passport is required; passport number, passport country of issuance, and passport expiration date;
- If a travel document, other than a passport is required, travel document type, travel document number, travel document country of issuance and travel document expiration date;

- Address while in the United States (number and street, city, state, and zip code), except that U.S. citizens and lawful permanent residents will provide address of permanent residence in the U.S. (number and street, city, state, and zip code; as applicable);

- Primary contact phone number to include country code;
- Secondary contact phone number to include country code;
- Email address;
- Airline name;
- Flight number;
- City of departure;
- Departure date and time;
- City of arrival;
- Arrival date and time; and
- Seat number for all passengers

CDC also requests seat configuration for the requested contact area (example: AB/aisle/CDE/aisle/FG, bulkhead in front of row 9), identification on the manifest of the crew and what zone crew were assigned to, the identification of any babes-in-arms, and finally CDC requests the total number of passengers on board if measles is the cause of the investigation, due to the highly infectious nature of the disease. CDC then uses this passenger and crew manifest information to coordinate with state and local health departments or International Health Regulation (IHR) National Focal Points (NFPs) so they can follow-up with residents who live or are currently located in their jurisdiction. In most cases, the manifests are issued for air travel and state and local health departments or IHR NFPs are responsible for the contact investigations; airlines and vessels may take responsibility for follow-up of crew members. In rare cases, CDC may use the manifest data to perform the contact investigation directly.

CDC requests OMB approval for an estimated 875 annual burden hours. There are no costs to respondents other than their time to participate.

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) |
|---|---|-----------------------|------------------------------------|--|-------------------------|
| Airline Medical Officer or Equivalent/Analysist/Travel Specialist/Manager Equivalent. | International Manifest Template/Informal Manifest Request Template. | 350 | 1 | 150/60 | 875 |
| Total | | | | | 875 |

Jeffrey M. Zirger,

Lead, Information Collection Review Office,
Office of Public Health Ethics and
Regulations, Office of Science, Centers for
Disease Control and Prevention.

[FR Doc. 2023-08909 Filed 4-26-23; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC-2020-0046; NIOSH-233-
C]

Hazardous Drugs: Procedures for Developing the NIOSH List of Hazardous Drugs in Healthcare Settings and Managing Hazardous Drug Exposures: Information for Healthcare Settings

AGENCY: Centers for Disease Control and
Prevention (CDC), Department of Health
and Human Services (HHS).

ACTION: General notice.

SUMMARY: The National Institute for
Occupational Safety and Health
(NIOSH) of the Centers for Disease
Control and Prevention (CDC), in the
Department of Health and Human
Services (HHS), announces the
following final documents are available
in the docket and on the NIOSH
website: *Procedures for Developing the
NIOSH List of Hazardous Drugs in
Healthcare Settings and Managing
Hazardous Drug Exposures: Information
for Healthcare Settings.*

DATES: The documents announced in
this notice are available on April 27,
2023.

ADDRESSES: The documents announced
in this notice are available in the docket
at www.regulations.gov and through the
NIOSH Hazardous Drug Exposures in
Healthcare website at [https://
www.cdc.gov/niosh/topics/hazdrug/
default.html](https://www.cdc.gov/niosh/topics/hazdrug/default.html).

FOR FURTHER INFORMATION CONTACT:
Jerald Ovesen, NIOSH, Robert A. Taft
Laboratories, 1090 Tusculum Avenue,
MS-C15, Cincinnati, OH 45226;
Telephone: (513) 533-8472 (not a toll-
free number); Email: jovesen@cdc.gov.

SUPPLEMENTARY INFORMATION: This
notice is organized as follows:

I. Public Participation

II. Background

III. Procedures for Developing the NIOSH List of Hazardous Drugs in Healthcare Settings

A. Section II. Purposes

1. Application to Occupational Settings
2. Coordination With U.S. Pharmacopeia
(USP)

B. Section III. Background

1. Exposure to Drugs in Healthcare Settings

C. Section IV. NIOSH Definition of a Hazardous Drug

1. Investigational Drugs
2. Over-the-Counter Drugs
3. Veterinary Drugs

D. Section V. Identifying, Screening, Evaluating, and Reviewing a Drug for Placement on the List

1. Section V.A. Step 1: Identifying
Potentially Hazardous Drugs
2. Section V.B. Step 2: Screening
Potentially Hazardous Drugs
3. Section V.C. Step 3: Evaluating
Potentially Hazardous Drugs
 - a. Toxicity Criteria
 - b. Developmental and Reproductive
Toxicity
 - c. Organ Toxicity at Low Dose
 - d. Tabular Arrangement of Hazardous
Drugs on the List
4. Section V.D. Step 4: Peer Review of
Potentially Hazardous Drugs and Section
V.E. Step 5: Public Review of Potentially
Hazardous Drugs

IV. Managing Hazardous Drug Exposures: Information for Healthcare Settings

A. Peer Review

1. Charge 1.a. What additional information
would improve [the document's]
usefulness and why?
2. Charge 1.b. What changes could be made
to improve the utility of the information?
3. Charge 1.c. What information is
redundant, incorrect, missing, or not
needed? Please Explain
4. Charge 2. Please Provide any Additional
Studies or Scientific Information That
Evaluate or Validate Engineering, Work
Practice, or Administrative Controls To
Reduce Exposures to Hazardous Drugs in
Healthcare Settings
5. Charge 3. Please Provide any Additional
Studies or Scientific Information That
Support or Validate the Use of the
NIOSH Recommended Control Strategies
or Alternative Strategies To Control
Exposures to Hazardous Drugs
6. Charge 4. Please Provide any Additional
Studies or Scientific Information That
Support or Validate Evidence-Based
Strategies or Approaches for Controlling
Exposures to Hazardous Drugs That Are
Different From Those That NIOSH Has
Proposed
7. Charge 5.a. What additional information
would improve the usefulness of [the
Table of Control approaches in chapter
8] and why?
8. Charge 5.b. What structural or format
changes could be made to improve the
utility of [the Table of Control
approaches]?
9. Charge 5.c. What information is
redundant, incorrect, missing, or not
needed [in the Table of Control
approaches]? Please Explain
10. Charge 6. What improvements could be
made to this risk management
information to make it more useful to
employers and healthcare workers?
Please Provide Specific Examples
11. Charge 7. Please Provide Information
About Your Professional Experience, if
any, of Implementing Control Strategies

for Exposures to Hazardous Drugs in
Healthcare or Similar Settings. Please
Describe What You Found to be Most or
Least Effective and Why. Include
Relevant Publications if Available

12. Charge 8. Please Provide any Additional Comments or Suggestions Either as a List Below or Using Track Changes in the Attached Draft Document

B. Public Comments

1. Glossary
 2. Chapter 1.0 Purpose and Scope
 3. Chapter 6.0 Risk Management Plan
 - a. Section 6.2 Engineering Controls
—Closed System Transfer Devices
 - b. Section 6.3 Administrative Controls
—Alternative Duty
—Cleaning
—Counting Tablets
 - c. Section 6.4 Personal Protective
Equipment
—Use of Gloves
—Use of Gowns, Sleeve Covers, and Head
Covers
—Use of Respirators
 - d. Section 6.5 Surface Contamination
 - e. Section 6.6 Medical Surveillance
 4. Chapter 7.0 Waste and Spill Control
 - a. Section 7.1 Hazardous Drug Waste and
Section 7.2 Spill Control
—Waste Designation and Handling
 5. Chapter 8.0 Control Approaches for
Safe Handling of Hazardous Drugs by
Activity and Formulations
 - a. Section 8.1 Introduction to Table of
Control Approaches
 - b. Section 8.2 Control Approaches by
Activity and Formulation
—Receiving and Packaging
—Transportation
—Compounding of Drugs
—Administration
 6. USP <800>
 7. Other Topics
- V. Summary of Changes to Documents
- A. Procedures for Developing the NIOSH
List of Hazardous Drugs in Healthcare
Settings
 - B. Managing Hazardous Drug Exposures:
Information for Healthcare Settings

I. Public Participation

In a **Federal Register** notice published
on May 1, 2020 (85 FR 25439), NIOSH
invited the public to participate in the
development of a suite of tools designed
to assist with the identification of
hazardous drugs and appropriate
handling practices: (1) *Procedures for
Developing the NIOSH List of
Hazardous Drugs in Healthcare Settings*;
(2) *NIOSH List of Hazardous Drugs in
Healthcare Settings*, and (3) *Managing
Hazardous Drug Exposures: Information
for Healthcare Settings*.

The *Procedures for Developing the
NIOSH List of Hazardous Drugs in
Healthcare Settings (Procedures)*
establish the NIOSH definition of a
hazardous drug and a methodology for
evaluating chemical properties, pre-
clinical information, and available
clinical information about each drug.
The *Procedures* also clarify how