be available at *http://ntp.niehs.nih.gov/go/ivive-wksp-2016.*

Meeting and Registration: This workshop is open to the public, free of charge, with attendance limited only by the space available. Registration is required to attend both the webinars and the workshop. Those persons attending the workshop should plan to participate in all four webinars. However, viewing the webinars does not require attendance at the workshop. Individuals who plan to attend the workshop must register at *http://ntp.niehs.nih.gov/go/ivive-wksp-2016* by February 5, 2016. Individuals who plan to participate in the webinars must register at *http://ntp.niehs.nih.gov/go/ivive-wksp-2016* two business days prior to the webinar date to ensure access. Please visit this Web page for the most current information about the webinars and workshop. For those who register, information about how to access the webinar will be emailed within two business days of each webinar.

Individuals with disabilities who need accommodation to participate in these events should contact Dr. Elizabeth Maull at phone: (919) 316–4668 or email: *maull@niehs.nih.gov.* TTY users should contact the Federal TTY Relay Service at (800) 877–8339. Requests should be made at least five business days in advance of the event. Visitor and security information for those attending the workshop can be found at *http://www2.epa.gov/aboutepa/about-epas-campus-research-triangle-park-rtp-north-carolina.*

Background Information on NICEATM: NICEATM conducts data analyses, workshops, independent validation studies, and other activities to assess new, revised, and alternative test methods and strategies. NICEATM also provides support for the Interagency Coordinating Committee on the Validation of Alternative Methods (ICCVAM). The ICCVAM Authorization Act of 2000 (42 U.S.C. 285*l*–3) provides authority for ICCVAM and NICEATM in the development of alternative test methods. Information about NICEATM and ICCVAM is found at *http://ntp.niehs.nih.gov/go/niceatm* and *http://ntp.niehs.nih.gov/go/iccvam,* respectively.

Dated: September 14, 2015.

John R. Bucher,

Associate Director, National Toxicology Program.

[FR Doc. 2015–23386 Filed 9–17–15; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Aging; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute on Aging Special Emphasis Panel; Aging of the Lung.

Date: October 20, 2015.

Time: 3:00 p.m. to 7:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institute on Aging, Gateway Building, 2C212, 7201 Wisconsin Avenue, Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Maurizio Grimaldi, MD, Ph.D., Scientific Review Officer, National Institute on Aging, National Institutes of Health, 7201 Wisconsin Avenue, Room 2c218, Bethesda, MD 20892, 301–496–9374, *grimaldim2@mail.nih.gov.*

(Catalogue of Federal Domestic Assistance Program Nos. 93.866, Aging Research, National Institutes of Health, HHS)

Dated: September 14, 2015.

Melanie J. Gray,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2015–23388 Filed 9–17–15; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; 30-Day Comment Request; United States and Global Human Influenza Surveillance in At-Risk Settings (NIAID)

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health, has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the **Federal Register** on April 9, 2015, page 19090 and allowed 60-days for public comment. One comment was received. However, it was not applicable to this data collection. The purpose of this notice is to allow an additional 30 days for public comment. The National Institute of Allergy and Infectious Diseases (NIAID), National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, *OIRA_submission@omb.eop.gov* or by fax to 202–395–6974, Attention: NIH Desk Officer.

Comment Due Date: Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

FOR FURTHER INFORMATION CONTACT: To obtain a copy of the data collection plans and instruments, or request more information on the proposed project, contact: Dr. Diane Post, Program Officer, Respiratory Diseases Branch, NIAID, NIH, 5601 Fishers Lane, Bethesda, MD or call non-toll-free number at 240–627–3348 or email your request, including your address to: *postd@niaid.nih.gov.* Formal requests for additional plans and instruments must be requested in writing.

Proposed Collection: United States and Global Human Influenza Surveillance in at-Risk Settings, 0925—NEW, National Institute of Allergies and Infectious Diseases (NIAID), National Institutes of Health (NIH).

Need and Use of Information Collection: These studies will identify individuals with or at risk for influenza through focused surveillance in at-risk settings within the United States and internationally, rapidly identify circulating influenza strains to identify those with pandemic potential and create an invaluable bank of human samples from influenza patients to allow the characterization of the determinants of influenza transmission to and among humans, the immune response to influenza, and the basis of severe disease—critical knowledge gaps impacting effectiveness of decision-making around patient care and

pandemic preparedness. These studies will provide insight into viral and host determinants that may be contributing to the transmission of influenza, immune response to influenza, and severity of influenza and associated morbidity and mortality.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours for the entire 3 year request are 17334.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Estimates of hour burden				
	Form name	Number of respondents	Frequency of response	Average time per response	Annual hour burden
Hospital/care setting patients	Informed Consent Form	1600	1	10/60	267
	Form 1a Screening and enrollment log (Attachment 3).		1	10/60	267
	Form 2a Eligibility Checklist (Attachment 4)		1	10/60	267
	Form 3a Subject Identification (Attachment 5).		1	10/60	267
	Form 4a Demographic and Exposure Information (Attachment 6).		1	10/60	267
	Form 5a Current Symptoms (Attachment 7)		1	10/60	267
	Form 6a Medical History (Attachment 8)		1	10/60	267
	Form 8a Follow Up Assessment (Attachment 10).		4	10/60	1,067
Human Animal-interface patients.	Informed Consent Form	900	1	10/60	150
	Form 1a Screening and enrollment log (Attachment 3).		1	10/60	150
	Form 2a Eligibility Checklist (Attachment 4)		1	10/60	150
	Form 3a Subject Identification (Attachment 5).		1	10/60	150
	Form 4a Demographic and Exposure Information (Attachment 6).		1	10/60	150
	Form 5a Current Symptoms (Attachment 7)		25	10/60	3,750
	Form 6a Medical History (Attachment 8)		1	10/60	150
	Form 8a Follow Up Assessment (Attachment 10).		25	10/60	3,750
Household Surveillance patients.	Informed Consent Form	500	1	10/60	83
	Form 1a Screening and enrollment log (Attachment 3).		1	10/60	83
	Form 2a Eligibility Checklist (Attachment 4)		1	10/60	83
	Form 3a Subject Identification (Attachment 5).		1	10/60	83
	Form 4a Demographic and Exposure Information (Attachment 6).		1	10/60	83
	Form 5a Current Symptoms (Attachment 7)		6	10/60	500
	Form 6a Medical History (Attachment 8)		1	10/60	83
	Form 8a Follow Up Assessment (Attachment 10).		6	10/60	500
Study Staff	Informed Consent Form	5	600	10/60	500
	Form 7a Enrollment Specimen Collection (Attachment 9).		600	10/60	500
	Form 9a ED Chart Review (Attachment 11)		600	10/60	500
	Form 10a Chart Review—Inpatient Hospitalization (Attachment 12).		600	10/60	500
	Form 11a Subject Withdrawal Form (Attachment 13).		600	10/60	500
	Form 12a Subject checklist (Attachment 14)		600	10/60	500
	Form 13A Enrollment Report (Attachment 15).		600	10/60	500
	Form 14A 10% Data accuracy report (Attachment 16).		600	10/60	500
	Form 15A—QC Checklist (Attachment 17)		600	10/60	500
Totals		3,005			17,334

Dated: September 10, 2015.

Dione Washington,

Project Clearance Liaison, NIAID, NIH.

[FR Doc. 2015–23479 Filed 9–17–15; 8:45 am]

BILLING CODE 4140–01–P