“unexposed” controls), and followed in either an Active Follow-up Cohort (N–27,000) or a Passive Follow-up Cohort (N–28,000). Exposures will be estimated using detailed job-exposure matrices developed from data from monitoring performed by different agencies and organizations during the crisis, information obtained by interview, and the available scientific literature. We will investigate acute health effects among all cohort members via self-report from the enrollment interview, and via clinical measures and biological samples from Active Follow-up Cohort members only. All cohort members will be followed for development of a range of health outcomes through record linkage (e.g., cancer, mortality) and possibly through linkage with routinely collected health surveillance data (collected by health departments and the CDC) or with electronic medical records. Recruitment of subjects should begin in late 2010, with telephone interviews and the baseline home visits conducted within 18 months.

### Activity (3-yrs)

<table>
<thead>
<tr>
<th>Activity (3-yrs)</th>
<th>Estimated number of respondents</th>
<th>Estimated responses per respondent</th>
<th>Burden hours per response</th>
<th>Total Burden hours per respondent</th>
<th>Estimated total burden hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ineligible respondents ...................................</td>
<td>25,000</td>
<td>1</td>
<td>0.25</td>
<td>0.25</td>
<td>6,250</td>
</tr>
<tr>
<td>Enrollment interview (All) ................................</td>
<td>55,000</td>
<td>1</td>
<td>0.50</td>
<td>0.50</td>
<td>27,500</td>
</tr>
<tr>
<td>Home Visit (Active) ......................................</td>
<td>27,000</td>
<td>1</td>
<td>2.75</td>
<td>2.75</td>
<td>74,250</td>
</tr>
<tr>
<td>Annual Contact Info Update (Passive) ...............</td>
<td>28,000</td>
<td>3</td>
<td>0.25</td>
<td>0.75</td>
<td>21,000</td>
</tr>
<tr>
<td>Annual Contact Info Update (Active) ...............</td>
<td>27,000</td>
<td>2</td>
<td>0.25</td>
<td>0.50</td>
<td>13,500</td>
</tr>
<tr>
<td>Biennial interview (Active) ............................</td>
<td>27,000</td>
<td>1</td>
<td>0.50</td>
<td>0.50</td>
<td>13,500</td>
</tr>
<tr>
<td>Passive Cohort Total responses &amp; hrs ................</td>
<td>27,000</td>
<td>4</td>
<td>1.25</td>
<td>1.25</td>
<td>13,500</td>
</tr>
<tr>
<td>Active Cohort Total responses &amp; hrs ..................</td>
<td>27,000</td>
<td>5</td>
<td>4.25</td>
<td>4.25</td>
<td>13,500</td>
</tr>
<tr>
<td>Total responses &amp; avg hrs per response .............</td>
<td>9</td>
<td>9</td>
<td>0.58</td>
<td>52,000</td>
<td>156,000</td>
</tr>
</tbody>
</table>

**Frequency of Response:** Participation will include one enrollment telephone interview (0.5 hr); collection of biological and environmental samples, basic clinical measurements, and GPS coordinates (2.75 hr) from the Active Follow-up Cohort only; annual contact information update (0.25; Active and Passive) or biennial follow-up telephone or Web interviews (0.5 hr; Active only) for 10 years or more. We also anticipate screening 25,000 ineligible respondents.

**Affected Public:** Individuals or households. **Type of Respondents:** Workers involved in Deepwater Horizon disaster clean-up, and similar individuals not involved in clean-up effort. The annual reporting burden is as follows; Estimated Number of Respondents: Active Follow-up Cohort (N–27,000) and Passive Follow-up Cohort (N–28,000).

**Estimated Number of Responses per Respondent:** See table.

**Average Burden Hours Per Response:** 0.58 hour; and Estimated Total Burden Hours Requested: 156,000 (over 3 years). The average annual burden hours requested is 52,000. The annualized cost to respondents is estimated at $11.60 (assuming $20 hourly wage × 0.58 hour). There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

**Request for Comments:** Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) 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) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the project or to obtain a copy of the data collection plans and instruments, contact: Dr. Dale P. Sandler, Chief, Epidemiology Branch, NIEHS, Rall Building A3–60, PO Box 12233, Research Triangle Park, NC 27709; non-toll-free number 919–541–4668 or e-mail sandler@niehs.nih.gov. Include your address.

**Comments Due Date:** Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.


W. Christopher Long.
NIEHS, Acting Associate Director for Management, National Institutes of Health.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

**Centers for Disease Control and Prevention**

Notice of Availability of Final Environmental Assessment (FINAL EA) and a Finding of No Significant Impact (FONSI) for Land Purchase, Access Road Construction and Access Tunnel Construction, NIOSH Lake Lynn Laboratory, Lake Lynn, PA

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

ACTION: Notice of Availability of Final Environmental Assessment (FINAL EA) and a Finding of No Significant Impact (FONSI) for Land Purchase, Access Road Construction and Access Tunnel Construction, NIOSH Lake Lynn Laboratory, Lake Lynn, PA.

SUMMARY: The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS) is issuing this notice to advise the public that the CDC has prepared, and signed on September 7, 2010, a Finding of No Significant Impact (FONSI) based on the Final Environmental Assessment (FINAL EA) for Land Purchase, Access Road Construction and Access Tunnel Construction, NIOSH Lake Lynn Laboratory, Lake Lynn, PA.
SUPPLEMENTARY INFORMATION: The Final EA evaluated the acquisition of approximately 507 acres of real estate containing the CDC/NIOSH’s Lake Lynn Experimental Mine located in Springhill Township, Pennsylvania. The EA also evaluated the construction for a new access road and new entry access mine tunnels servicing the Experimental Mine. The purpose and need of the proposed acquisition and construction improvements secures the currently leased Experimental Mine for the long-term continuation of mine health and safety research currently conducted at the site.

The Final EA has been prepared in accordance with the National Environmental Policy Act (NEPA) of 1969. Based on the results of the EA, CDC has issued a Finding of No Significant Impact (FONSI) indicating that the proposed action will not have a significant impact on the environment. Minimization and mitigating measures will include: compliance with applicable regulatory laws, procedures, and permits for stream crossings; conduct presence absence surveys for identified wildlife; implementation of avoidance plan for a previously recorded archaelogical site near area of proposed access road construction; and the application of best management practices (BMP) to minimize short term air quality and noise impact during roadway and access mine tunnel construction.


Tanja Popovic,
Deputy Associate Director for Science, Centers for Disease Control and Prevention.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health
National Institute of Mental Health; 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 materials, 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 of Neurological Disorders and Stroke Special Emphasis Panel; T32 Teleconference.

Date: October 25, 2010.

Time: 11 a.m. to 3 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Neuroscience Center, 6001 Executive Boulevard, Rockville, MD 20852 (Telephone Conference Call).

Contact Person: Phillip F. Wiethorn, Scientific Review Administrator, DHHS/NIH/NINDS/DER/SRB, Neuroscience Center, 6001 Executive Blvd., Room 3203, MSC 9529, Bethesda, MD 20892–9529, 301–496–5388, wiethorp@ninds.nih.gov.

(Catalogue of Federal Domestic Assistance Prog Nos. 93.853, Clinical Research Related to Neurological Disorders; 93.854, Biological Basis Research in the Neurosciences, National Institutes of Health, HHS)


Jennifer S. Spaeth,
Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2010–25297 Filed 10–6–10; 8:45 am]

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