and/or go to the Dockets Management Staff, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852.

FOR FURTHER INFORMATION CONTACT: Kenneth Quinto, Office of the Commissioner, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 32, Rm. 5145, Silver Spring, MD 20993, 240–402–2221, *kenneth.quinto@fda.hhs.gov.*

SUPPLEMENTARY INFORMATION: FDA is responsible for protecting the public health by assuring the safety, efficacy, and security of human and veterinary drugs, biological products, medical devices, our Nation's food supply, cosmetics, and products that emit radiation.

FDA is establishing a public docket, Docket No. FDA–2017–N–7022, to receive input on post-marketing pediatric-focused safety reviews of products posted between October 23, 2017, and March 16, 2018, available on FDA's website at *https://www.fda.gov/AdvisoryCommittees/CommitteesMeetingMaterials/PediatricAdvisoryCommittee/ucm510701.htm* but not presented at the March 23, 2018, PAC meeting. FDA welcomes comments by members of the PAC, as mandated by the Best Pharmaceuticals for Children Act (Pub. L. 107–109) and the Pediatric Research Equity Act of 2003 (Pub. L. 108–155), interested parties (such as academic researchers, regulated industries, consortia, and patient groups), and the general public. The docket number is FDA–2017–N–7022. The docket will open on March 19, 2018, and remain open until March 30, 2018. The post-marketing pediatric-focused safety reviews are for the following products from the following centers at FDA:

Center for Biologics Evaluation and Research

1. EPICEL (cultured epidermal autographs) (humanitarian device exemption (HDE))
2. GARDASIL 9 (Human Papillomavirus 9-valent Vaccine, Recombinant)
3. TRUMENBA (Meningococcal Group B Vaccine)

Center for Drug Evaluation and Research

1. ATROPINE SULFATE OPHTHALMIC SOLUTION, USP 1%
2. DYMISTA (azelastine hydrochloride/fluticasone propionate)
3. EDURANT (rilpivirine); COMPLERA (emtricitabine, rilpivirine, tenofovir disoproxil fumarate); ODEFSEY (emtricitabine, rilpivirine, tenofovir alafenamide)
4. EMEND (aprepitant) capsule and oral suspension
5. EPIDUO FORTE (adapalene/benzoyl peroxide, 0.3%/2.5%) gel
6. GADAVIST (gadobutrol); EOVIST (Primovist; gadoxetate disodium)
7. GENVOYA (elvitegravir, cobicistat, emtricitabine, and tenofovir alafenamide) oral tablets
8. KAPVAY (clonidine extended-release) tablets
9. MERREM IV (meropenem for injection)
10. NAFTIN (naftifine hydrochloride)
11. NUCALA (mepolizumab)
12. OTIPRIO (6% ciprofloxacin otic suspension)
13. PAZEO (olopatadine hydrochloride ophthalmic solution) 0.7%
14. QNASL (beclomethasone dipropionate) nasal aerosol
15. SAPHRIS (asenapine)
16. TIVICAY (dolutegravir)
17. TREXIMET (naproxen sodium; sumatriptan succinate)
18. VALCYTE (valganciclovir)

Center for Devices and Radiological Health

1. FLOURISH PEDIATRIC ESOPHAGEAL ATRESIA DEVICE (HDE)

Dated: February 28, 2018.

Leslie Kux,

Associate Commissioner for Policy.

[FR Doc. 2018–04400 Filed 3–2–18; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier OS–0990–New]

Agency Information Collection Request; 60-Day Public Comment Request

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment.

DATES: Comments on the ICR must be received on or before May 4, 2018.

ADDRESSES: Submit your comments to *Sherrette.Funn@hhs.gov* or by calling 202–795–7714.

FOR FURTHER INFORMATION CONTACT: When submitting comments or requesting information, please include the document identifier 0990–New–60D and project title for reference to *Sherrette.funn@hhs.gov* or call the Reports Clearance Officer.

SUPPLEMENTARY INFORMATION: Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Title of the Collection: Trafficking Victim Assistance Program Social Network Analysis—Network Survey.

Type of Collection: New.

OMB No. 0990–NEW-Office of the Assistant Secretary for Planning and Evaluation–Administration for Children and Families' Trafficking Victim Assistance Program

Abstract

The Office of the Assistant Secretary for Planning and Evaluation (ASPE), in partnership with the Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS) is requesting Office of Management and Budget (OMB) approval for a new information collection request, ''Trafficking Victim Assistance Program (TVAP) Network Survey.'' ICF has been contracted to carry out this project under the guidance of ASPE and ACF.

TVAP, as authorized by the Trafficking Victims Protection Act of 2000, provides comprehensive case management services to foreign-born victims of human trafficking residing in the United States. Since its inception, TVAP funding and infrastructure have remained relatively unchanged: Services are paid on a per capita basis, and funds are managed through three primary grantees that enter into cooperative agreements with service providers (subrecipients). Given the changing landscape and the greater understanding of the nature and extent of trafficking, HHS is undertaking a program assessment to understand whether any efficiencies can be gained in the program administration and structure. Building on an earlier fiscal year 2018 assessment to solicit qualitative feedback from a range of program stakeholders, the information collected for this program survey aims to help HHS determine if efficiencies can be

gained through improved coordination among TVAP grantees, TVAP subrecipients, and other service providers.

The data collected and analyzed under this submission will help HHS better understand the type and extent of the relationships between the TVAP grantees, TVAP subrecipients, and other service providers operating in TVAP subrecipient areas. This information will enable HHS to understand the structure of the grantee/subrecipient network and inform recommendations for more efficient network management and distribution of support.

Data will be collected through an electronic survey of fiscal year 2016 TVAP grantees and subrecipients. Key staff at grantee sites and subrecipient organizations will complete a self-administered online survey that will include questions for each respondent about services for which referrals are made, estimated costs of services, service coordination between grantees or subrecipients, and type and strength of relationships between grantees and subrecipients. With this data, ICFwill build a social/organizational network for HHS to depict how grantee and subrecipient organizations collaborate with one another through TVAP to better understand the existing network and identify potential opportunities for improving the efficiency of the network. ASPE anticipates completion of all data collection activities by October 2018.

ANNUALIZED BURDEN HOUR TABLE

Forms	Respondents	Number of respondents	Number of responses per respondents	Average burden per response	Total burden hours
TVAP Network Survey	TVAP grantees	3	1	45/60	2.25
TVAP Network Survey	TVAP subrecipients	253	1	45/60	189.75
Total		256			192

Terry S. Clark,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.

[FR Doc. 2018–04386 Filed 3–2–18; 8:45 am]

BILLING CODE 4150–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Library of Medicine; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, 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 Library of Medicine Special Emphasis Panel; COI/Career Award.

Date: March 23, 2018.

Time: 12:00 p.m. to 5:30 p.m.

Agenda: To review and evaluate grant applications.

Place: National Library of Medicine/Center for Scientific Review, 6701 Rockledge Drive, Room 2141, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Zoe E. Huang, MD, Scientific Review Officer, Extramural Programs, National Library of Medicine, NIH, 6705 Rockledge Drive, Suite 301, Bethesda, MD 20892–7968, 301–594–4937, *huangz@mail.nih.gov.*

(Catalogue of Federal Domestic Assistance Program No. 93.879, Medical Library Assistance, National Institutes of Health, HHS)

Dated: February 27, 2018.

Michelle Trout,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2018–04346 Filed 3–2–18; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office Of The Director, National Institutes Of Health; Notice of Meeting

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended, notice is hereby given of a meeting of the Office of AIDS Research Advisory Council.

The meeting will be open to the public, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

Name of Committee: Office of AIDS Research Advisory Council.

Date: March 27, 2018.

Time: 8:30 a.m. to 4:30 p.m.

Agenda: OAR Director's Report; Review of the DHHS HIV/AIDS Treatment and Prevention Guidelines; and, updates on the NIH AIDS Study Sections, the OAR Task Force on Cost-Sharing, the FY2020 Trans-NIH Plan for HIV-Related Research, and on HIV/AIDS research activities from NIH Institutes.

Place: National Institutes of Health, 5601 Fishers Lane, Rockville, MD 20892.

Contact Person: Elizabeth S Church, Ph.D., Executive Secretary, Office of AIDS Research, DPCPSI, Office of the Director, 5601 Fishers Lane, Room 2E–60, Rockville, MD, 20852–9830, 240–627–3201, *elizabeth.church@nih.gov.*

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person. Information is also available on the Institute's/Center's home page: *www.oar.nih.gov,* where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.14, Intramural Research Training Award; 93.22, Clinical Research Loan Repayment Program for Individuals from Disadvantaged Backgrounds; 93.232, Loan Repayment Program for Research Generally; 93.39, Academic Research Enhancement Award; 93.936, NIH Acquired Immunodeficiency Syndrome Research Loan Repayment Program; 93.187, Undergraduate Scholarship Program for Individuals from Disadvantaged Backgrounds, National Institutes of Health, HHS)

Dated: February 27, 2018.

Natasha Copeland,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2018–04348 Filed 3–2–18; 8:45 am]

BILLING CODE 4140–01–P