

**National Notifiable Diseases Surveillance System (NNDSS)**

**OMB Control Number 0920-0728**

**Expiration Date: 01/31/2019**

**Program Contact**

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## **Circumstances of Change Request for OMB 0920-0728**

This is a nonmaterial/non-substantive change request for OMB No. 0920-0728, expiration date 01/31/2019, for the reporting of Nationally Notifiable Diseases. The National Notifiable Diseases Surveillance System (NNDSS) is the nation’s public health surveillance system that enables all levels of public health (local, state, territorial, federal and international) to monitor the occurrence and spread of the diseases and conditions that the Council of State and Territorial Epidemiologists (CSTE) has officially designated as either “nationally notifiable” or as under “national surveillance.”

The NNDSS facilitates the submission and aggregation of case notification data voluntarily submitted to CDC from 57 jurisdictions: health departments in every U.S. state, New York City, Washington DC, and 5 U.S. territories (American Samoa, the Commonwealth of Northern Mariana Islands, Guam, Puerto Rico, and the U.S. Virgin Islands). NNDSS also facilitates relevant data management, analysis, interpretation and dissemination of the information. The data are used to monitor health occurrence of notifiable conditions and to plan and conduct prevention and control programs at the state, territorial, local and national levels.

This request is for the addition of two disease-specific data elements for Hantavirus Pulmonary Syndrome (HPS). The data elements in this change request allow the program to specify the definitions for “Elevated Hematocrit” and “Elevated Creatinine” to increase the accuracy of the data collected.

The new data elements requiring the change request are in the following table:

### Hantavirus Pulmonary Syndrome Data Elements

Data Element Identifier	Data Element Name	Data Element Description
TBD	Elevated Hematocrit (>50)	Was Elevated Hematocrit >50?
TBD	Elevated Creatinine (>1.2 mg/dL)	Was Elevated Creatinine >1.2 mg/dL?

### Burden

The annualized burden hours and cost to reporting jurisdictions to submit these data to CDC does not change from the original estimates in the “Estimates of Annualized Burden Hours and Costs” section in

A.12 of OMB No. 0920-0728. The addition of two disease-specific data elements will not add any additional burden because States already collect this information. There will be no increase in burden for the reporting jurisdictions to send these data elements to CDC since most case notifications are submitted electronically from already existing databases.

A.12A. Estimates of Annualized Burden Hours

<b>Respondents</b>	<b>Number of Respondents</b>	<b>Number of Responses per Respondent</b>	<b>Average Burden Per Response (in hours)</b>	<b>Total Burden (in hours)</b>
<b>Weekly and Annual Submissions</b>				
States	50	52	10	26000
Territories	5	52	5	300
Cities	2	52	10	1040
<b>Total</b>				<b>28,340</b>

A.12B. Estimates of Annualized Cost Burden

<b>Type of Respondents</b>	<b>Form Name</b>	<b>Number of Respondents</b>	<b>Number of Responses per Respondent</b>	<b>Average Burden Per Response (in hours)</b>	<b>Total Burden Hours</b>	<b>Hourly Wage Rate</b>	<b>Respondent Cost</b>
States	Weekly and Annual	50	52	10	26,000	\$35.63	\$926,380
Territories	Weekly and Annual	5	52	5	1,300	\$35.63	\$46,319
Cities	Weekly and Annual	2	52	2	1,040	\$35.63	\$37,055
<b>Total</b>							<b>\$1,009,754</b>