Dated: January 15, 1997.

William K. Hubbard,

Associate Commissioner for Policy Coordination.

[FR Doc. 97–1482 Filed 1–21–97; 8:45 am]

BILLING CODE 4160–01–F

National Institutes of Health

National Cancer Institute: Opportunity for a Cooperative Research and Development Agreement (CRADA) for Partnering, Informatics and Technology Development

AGENCY: National Cancer Institute, National Institutes of Health, PHS, DHHS.

ACTION: Notice.

SUMMARY: The Department of Health and Human Services (DHHS) seeks a company that can collaboratively pursue development of an expert, information based system of technology development and transfer. In particular, the Office of Technology Development (''OTD''), National Cancer Institute seeks to co-develop a system for modeling current OTD processes. The system will be tested using both the selected collaborator's processes and outcomes and real-time OTD experiences.

ADDRESSES: Questions about this opportunity may be addressed to William Cotreau, J.D., or Jeremy A. Cubert, M.S., J.D., Office of Technology Development, NCI, 6120 Executive Blvd., MSC 7182, Bethesda, MD 20892–7182, Phone: (301) 496–0477, Facsimile: (301) 402–2117. from whom further information may be obtained.

DATES: In view of the important priority of developing a technology informatics system, interested parties should notify this office in writing no later than March 10, 1997. Respondents will then be provided an additional 30 days for the filing of formal proposals.

SUPPLEMENTARY INFORMATION:

''Cooperative Research and Development Agreement'' or ''CRADA'' means the anticipated joint agreement to be entered into by NCI pursuant to the Federal Technology Transfer Act of 1986 and amendments (including 104 P.L. 133) and Executive Order 12591 of October 10, 1987 to collaborate on the specific research project described below.

The Office of Technology Development (OTD) serves as the Institute focal point for the implementation of the Federal Technology Transfer Act of 1986. The OTD provides advice, guidance and assistance to Institute staff on such things as: the development and management of intellectual property; registration and management of patents; terms and negotiation of licensing and research and development agreements; management and administration of royalties; transfer of research material; interpretation of laws, policies, rules and regulations especially related to the implementation of the Federal Technology Transfer Act; and other related matters.

The Government is seeking a partner with which, in accordance with the requirements of the regulations governing the transfer of technology in which the Government has taken an active role in developing (37 CFR 404.8), can co-develop a system for modeling technology development processes using information technologies. The National Cancer Institute will provide access to its knowledge and skill base, information regarding current processes and a test bed of technologies not subject to confidentiality obligations. The selected Collaborator will provide expertise in Technology Development, current processes and market awareness.

The expected duration of the CRADA will be two (2) to five (5) years.

The role of the National Cancer Institute, includes the following:

(1) demonstrate current technology development processes related to transactional research agreements.

(2) proof model/equations for logical structure.

(3) provide/input historical NCI–OTD data that are not subject to any confidentiality obligation(s) or where necessary ensure appropriate provisions of confidentiality are applied.

(4) input collaborator historical data.

(5) review model for logical structure.

(6) provide current examples that are not subject to confidentiality obligation(s) or where necessary ensure appropriate provisions of confidentiality are applied in order to further test model.

The role of the collaborator company, includes the following:

(1) program model of NCI current processes related to transactional research agreements.

(2) provide input and feedback regarding NCI processes related to transactional research agreements.

(3) amend model based on feedback from NCI and Collaborator.

(4) provide sufficient information about Collaborator technology development processes to elucidate and improve model.

(5) revise model as necessary.

(6) jointly test model using current NCI technology that is not subject to confidentiality obligation(s) as examples or where necessary ensure appropriate provisions of confidentiality are applied.

(7) develop commercial version of technology development information system.

(8) provide resources as necessary.

Dated: January 8, 1997.

Thomas D. Mays,

Director, Office of Technology Development, OIM, NCI.

[FR Doc. 97–1533 Filed 1–21–97; 8:45 am]

BILLING CODE 4140–10–M

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, Public Health Service, DHHS.

ACTION: Notice.

SUMMARY: The invention listed below is owned by an agency of the U.S. Government and is available for licensing in the U.S. in accordance with 35 U.S.C. 207 to achieve expeditious commercialization of results of federally funded research and development.

ADDRESSES: Licensing information and a copy of the U.S. patent application referenced below may be obtained by contacting George H. Keller, Ph.D., at the Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852–3804 (telephone 301/496–7735 ext. 246; fax 301/402–0220). A signed Confidential Disclosure Agreement will be required to receive a copy of the patent application.

Hepatitis A Virus Receptor and Methods of Use

G Kaplan, SM Feinstone (FDA)

Serial No. 08/287,001 filed 05 Aug 94

This invention describes the discovery and isolation of HAVcr–1, a simian cellular receptor for the hepatitis A virus (HAV). Cells nonpermissive to HAV infection transfected with HAVcr–1 cDNA, a novel cell surface mucin-like glycoprotein, gain susceptibility to HAV infection. The invention claims nucleic acids encoding cellular receptors to HAV which hybridize with HAVcr–1 probes. The invention also claims peptides encoded by the above-mentioned HAV receptor nucleic acid.

Potential areas of application include use of HAVcr–1 receptors for diagnostics; use of HAVcr–1 receptors for treatment of patients infected with HAV; development of compounds capable of interacting with HAVcr–1 receptors which could inhibit HAV

infection and be used to treat HAV infected patients; development of transgenic animals for HAV vaccine production and testing.

HAVcr–1 has recently been molecularly cloned and its cDNA is available for further development. A Notice of Allowance has recently been issued on this case by the U.S. Patent and Trademark Office; foreign rights are also available. This invention is available for licensing on an exclusive or nonexclusive basis.

Dated: January 9, 1997.

Barbara M. McGarey,

Deputy Director, Office of Technology Transfer.

[FR Doc. 97–1532 Filed 1–21–97; 8:45 am]

BILLING CODE 4140–01–M

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

The inventions listed below are owned by agencies of the U.S. Government and are available for licensing in the U.S. in accordance with 35 U.S.C. 207 to achieve expeditious commercialization of results of federally funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for U.S. companies and may also be available for licensing.

ADDRESS: Licensing information and copies of the U.S. patent applications listed below may be obtained by contacting the indicated licensing specialist at the Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852–3804; telephone: 301/496–7057; fax: 301/402–0220. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications.

2,2′-Bipyridyl, a Ferrous Chelator, Prevents Vasospasm in a Primate Model of Subarachnoid Hemorrhage

LL Horky (NINDS)

Serial No. 08/672,060 filed 26 Jun 96

Licensing Contact: Stephen Finley, Ph.D., 301/496–7735 ext 215

Subarachnoid hemorrhage (SAH) occurs in 28,000 people per year in North America. Symptomatic vasospasm occurs in the majority of individuals suffering SAH and is the most common cause of morbidity and mortality in patients reaching neurological care. Specifically, vasospasm causes cerebral ischemia or stroke, and the prevention of vasospasm could prevent stroke and death as well as allow physicians more freedom in scheduling surgery when the operative risks are lower.

Intravenous administration of 2,2′-bipyridyl successfully prevented vasospasm in a reliable primate model of subarachnoid hemorrhage. Bipyridyl may provide a safe, cost-effective and reliable therapy for vasospasm in the clinical setting. Additional ferrous chelates, which may also prove effective, are also embodied in the invention. (portfolio: Central Nervous System—Therapeutics, neurological, stroke)

Interleukin-4 Stimulated T-Lymphocyte Cell Death for the Treatment of Autoimmune Diseases, Allergic Disorders and Graft Rejection

MJ Lenardo, SA Boehme, J Critchfield (NIAID)

Serial No. 08/348,286 filed 30 Nov 94

Licensing Contact: Jaconda Wagner, J.D., 301/496–7735 ext 284

The discovery that interleukin-4 (IL–4) predisposes T lymphocytes to programmed cell death (apoptosis) allows for a novel method of therapeutic intervention in diseases caused by the action of IL–4-responsive T cells. Specifically, the therapy induces the death of a subpopulation of T lymphocytes that are capable of causing disease. Current therapies may cause general death or suppression of immune responses involving T-cells, severely comprising a patient's immune system. This treatment affects only the subset of T cells that react with a specified antigen, thereby leaving a patients immune system uncompromised. This invention is useful in treating allergies and HIV complications. Both fields are available for licensing (portfolio: Internal Medicine—Therapeutics, anti-inflammatory)

Interleukin-2 Stimulated T-Lymphocyte Cell Death for the Treatment of Autoimmune Diseases, Allergic Disorders and Graft Rejection

MJ Lenardo (NIAID)

Serial No. 08/482,724 filed 07 Jun 95

Licensing Contact: Jaconda Wagner, J.D., 301/496–7735 ext 284

T-Cell apoptosis induced by administration of IL–2 and antigen offers an important new treatment for allergic disorders, which are due to the effects of antigen-activated T-cells. Antigen-activated T-cells cause the release of harmful lymphokines and the production of immunoglobulin E by B cells. Presently available methods for treating allergies have limitations because they are nonspecific in their action and have side effects and limited efficacy. IL–2 and antigen stimulates the programmed death of only antigen-specific T-cells while leaving the rest of the patient's T-cells and other immune cells intact. This invention is also useful in treating HIV. Both fields of use, allergies and HIV, are available for licensing. (portfolio: Internal Medicine—Therapeutics, anti-inflammatory)

Dated: January 13, 1997.

Barbara M. McGarey,

Deputy Director, Office of Technology Transfer.

[FR Doc. 97–1534 Filed 1–21–97; 8:45 am]

BILLING CODE 4140–01–M

Division of Research Grants; Notice of Closed Meetings

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following Division of Research Grants Special Emphasis Panel (SEP) meetings:

Purpose/Agenda: To review individual grant applications.

Name of SEP: Behavioral and Neurosciences.

Date: January 20, 1997.

Time: 3:30 p.m.

Place: NIH, Rockledge 2, Room 5168 Telephone Conference.

Contact Person: Dr. Jane Hu, Scientific Review Administrator, 6701 Rockledge Drive, Room 5168, Bethesda, Maryland 20892, (301) 435–1245.

This notice is being published less than 15 days prior to the above meetings due to the urgent need to meet timing limitations imposed by the grant review and funding cycle.

Name of SEP: Biological and Physiological Sciences.

Date: February 4, 1997.

Time: 2:00 p.m.

Place: NIH, Rockledge 2, Room 6170 Telephone Conference.

Contact Person: Dr. Dennis Leszczyski, Scientific Review Administrator, 6701 Rockledge Drive, Room 6170, Bethesda, Maryland 20892, (301) 435–1044.

Name of SEP: Multidisciplinary Sciences.

Date: February 24–26, 1997.

Time: 8:00 a.m.

Place: Doubletree Hotel, Rockville, Maryland.

Contact Person: Dr. Dharam Dhindsa, Scientific Review Administrator, 6701 Rockledge Drive, Room 5206, Bethesda, Maryland 20892, (301) 435–1174.

Name of SEP: Clinical Sciences.

Date: February 24–26, 1997.

Time: 8:30 a.m.

Place: Hyatt Regency, Bethesda, Maryland.