Survey	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Child Welfare	93	1	93	4	372
Child Health	93	1	93	2.5	232
Child Mental Health	93	1	93	2.5	232
Medicaid	41	1	41	4	164
Total			320		1000

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Wendy A. Taylor, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: June 15, 1999.

Jane Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 99–15663 Filed 6–18–99; 8:45 am]

BILLING CODE 4160–15–U

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; Physician Survey on Genetic Testing

Summary: Under the provisions of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the National Cancer Institute (NCI), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the **Federal Register** on January 5, 1999, page 519–520 and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment.

Proposed Collection: Title: Physician Survey on Genetic Testing. Type of Information Request: New. Need and Use of Information Collection: The Physicians Survey on Genetic Testing will be used by the National Cancer Institute to establish baseline information on the prevalence of genetic testing for cancer susceptibility among primary care physicians in the United States. The survey will assess whether there are statistically significant differences in (1) self-reported knowledge, current use of, and future intentions to use genetic testing for cancer susceptibility, and (2) perceptions of barriers to testing, among primary care physicians by their type and location of practice, and recency of training. Primary care physicians (internists, pediatricians, family and general practitioners) will also be compared with specialty groups (gastroenterologists, surgeons, urologists and oncologists) with respect to their use, attitudes toward, and knowledge of, genetic testing for cancer susceptibility. A questionnaire will be administered by mail, telephone, facsimile and Internet, using a nationally representative sample of physicians. The study physicians will select their preferred response mode. Frequency of Response: One-time study. Affected Public: Medical Community. Type of Respondents: Primary care and speciality physicians with active licenses to practice medicine in the U.S. The annual reporting burden is as follows: Estimated Number of Respondents: 1,350; Estimated Number of Responses per Respondent: 1; Average Burden Hours per Response: .250 and Estimated Total Annual Burden Hours Requested; 338. The annualized cost to respondents is estimated at: $25,313. There are no Capital Costs, Operating Costs, and/or Maintenance Costs to report.

Request for Comments: Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate whether the proposed collection of information is necessary for the 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 on information technology.

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, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Louise Wideroff or Andrew Freedman, Epidemiologists, National Cancer Institute, EPN 313, Executive Boulevard MSC 7334, Bethesda, Maryland 20892–7344, Telephone (301) 435–6823 or (301) 435–6819, FAX (301) 435–3710, or E-mail your request, including your address to *wideroff@nih.gov* or Andrew__Freedman@nih.gov.

Comments 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.

Dated: June 11, 1999.

Reesa L. Nichols,

NCI Project Clearance Liaison.

[FR Doc. 99–15636 Filed 6–18–99; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute: Opportunity for a Cooperative Research and Development Agreement (CRADA) for the Research and Development of Software for Managing Distributed Knowledgebases Consisting of Large Numbers of Object of Diverse Categories Spanning Administrative, Scientific and Other Knowledge Domains

The National Cancer Institute (NCI) has extended the deadline for submission of written notices and proposals regarding the CRADA opportunity described in the **Federal Register** Notice number 74, volume 64, page 19183, dated April 19, 1999.

AGENCY: National Institutes of Health, PHS, DHHS.

ACTION: Notice of extension of announcement.

SUMMARY: The National Cancer Institute (NCI) seeks a Cooperative Research and Development Agreement (CRADA) with a software company with demonstrated excellence in the development and deployment of software applications for the enterprise and individuals. NCI has recently developed a powerful but user-friendly computer-based system which enables its users to create, use and share a knowledge base of information consisting of diverse objects related to each other by semantically meaningful links. This system, provisionally called ''KBTool'', can be considered a new class of software application since it is sufficiently different from existing applications. The system provides a knowledge base that is seamless, allowing individuals to store information on a virtually unlimited range of objects and concepts. In addition, dense and informative links between many types of concepts are constructed. The system is extensible so that it is suited for use in distributed systems in which information is shared between users and stored at different physical locations. Because of the power of the system and its relevance to many domains of knowledge and types of applications, the NCI is seeking a commercial partner for its continued development and deployment. The software was originally created to organize and link vast quantities of scientific data; however, NCI predicts that KBTool's functionality will be applicable to a wide variety of fields. The Collaborator must have a demonstrated record of success in privately producing and marketing information resources. Please refer to **Federal Register** notice number 74, volume 64, page 19183, dated April 19, 1999 for additional information about the KBTool technology and the corresponding CRADA opportunity.

A Cooperative Research and Development Agreement (CRADA) is the anticipated joint agreement to be entered into by the NCI pursuant to the Federal Technology Transfer Act of 1986 and Executive Order 12591 of April 10, 1987 as amended by the national Technology Transfer Advancement Act of 1995. The NCI is looking for a CRADA partner to collaborate in the development of the properties of the KBTool data management system. The expected duration of the CRADA would be from one(1) to five (5) years.

DATES: Interested parties should notify this office in writing of their interest in filing a formal proposal no later than July 21, 1999. They will then have an additional thirty (30) days to submit a formal proposal. CRADA proposals submitted thereafter may be considered if a suitable CRADA Collaborator has not been selected.

ADDRESSES: Inquiries and proposals regarding this opportunity should be addressed to Holly S. Symonds, Ph.D. (Tel. #301–496–0477, FAX # 301–402–2117), Technology Development and Commercialization Branch, National Cancer Institute, 6120 Executive Blvd., Suite 450, Rockville, MD 20852. Inquiries directed to obtaining patent license(s) needed for participation in the CRADA opportunity may be addressed to John Fahner-Vihtelic, Office of Technology Transfer, National Institutes of Health, 6011 Executive Blvd., Suite 325, Rockville, MD 20852, (Tel. 301–496–7735, ext. 270; FAX 301–402–0220).

Dated: June 13, 1999.

Kathleen Sybert,

Chief, Technology Development and Commercilization Branch, National Cancer Institute, National Institutes of Health.

[FR Doc. 99–15637 Filed 6–18–99; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Allergy and Infectious Diseases: Licensing Opportunity and/or Cooperative Research and Development Agreement (''CRADA'') Opportunity; Drug and Method for the Therapeutic Treatment of Respiratory Syncytial Virus and Parainfluenza Virus in Children

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

ACTION: Notice.

SUMMARY: The National Institute of Allergy and Infectious Diseases (NIAID) of the NIH is seeking Licensees and/or capability statements from parties to further develop, evaluate, and commercialize eosinophil-derived neutralizing agent (EDNA) for the treatment of infections in children and/or the elderly caused by Respiratory Syncytial Virus (RSV) and parainfluenza virus (PIV). RSV and PIV are medically the most important single-stranded RNA viruses; infections caused by these viruses hospitalize over 100,000 infants per year in the U.S.

The methods and compositions of this invention provide a means for prevention and treatment of infection by enveloped RNA viruses by eoxinophil derived neutralizing agent (EDNA), a ribonuclease. EDNA is a relatively soluble and thermostable protein, active at low concentrations, with no direct toxicity to bronchial epithelial cells, making it suitable for inhalation therapy. Parenteral administration is also contemplated by this invention.

EDNA, particularly recombinant EDNA, may be used as an agent for direct inhalation therapy in children with established RSV bronchiolitis (associated with the development of future respiratory disorders such as asthma), in children for which there is a high index of suspicion, and as prophylactic therapy in children with predisposing conditions such as prematurity, bronchiole pulmonary displasia, congential heart disease and immunodeficiency. Similar criteria may be applied to the susceptible elderly population.

Recombinant human EDNA has been produced in bacterial and baculovirus expression systems. Furthermore, in vitro experiments have shown it to have potent antiviral activity against RSV (Domachowske, JB et al., 1998, *J. Infect. Dis.* 177:1458–1464.) Initial studies in the Balb/C mouse model of RSV infection support its effectiveness against this virus. This project is a part of the study of ribonucleases and host defenses in the Laboratory of Host Defenses (LHD), Division of Intramural Research, NIAID.

The invention claimed in DHHS Reference No. E–161–97/1, ''Methods for Inactivating Enveloped RNA Virus Particles and Compositions for Use Therewith'' (HF Rosenberg, JB Domachowske), PCT/US98/13852 filed July 2, 1998, is available for exclusive or non-exclusive licensing in accordance with 35 U.S.C. 207 and 37 CFR part 404 and/or further development under one or more CRADAs in the clinically important applications described below in the Supplementary Information section.

ADDRESSES: Questions about licensing opportunities should be addressed to Peter Soukas, J.D., Technology Licensing Specialist, Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852–3804, Telephone: (301) 496–7056 ext. 268; Facsimile: (301) 402–0220; E-mail: ps193c@nih.gov. Information about Patent Applications and pertinent information not yet publicly described can be obtained under the terms of a