

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 being 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.

**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: Madeline La Porta, Associate Deputy Director, Cancer Information Service, OC, NCI, 6116 Executive Boulevard, MSC 8322, Room 3036A, Bethesda, MD 20892-8322, or call non-toll-free number (301) 594-8025 or e-mail your request, including your address to: [laportam@mail.nih.gov](mailto:laportam@mail.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: September 26, 2003.

**Reesa Nichols,**

*NCI Project Clearance Liaison.*

[FR Doc. 03-25067 Filed 10-2-03; 8:45 am]

BILLING CODE 4140-01-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Submission for OMB Review; Comment Request; Agricultural Health Study—A Prospective Cohort Study of Cancer and Other Diseases Among Men and Women in Agriculture

**SUMMARY:** Under the provisions of Section 3507(a)(1)(D) 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 for review and approval of the information collection

listed below. This proposed information collection was previously published in the **Federal Register** on August 1, 2003, pages 45257-8 and allowed 60 days for public comment. Comments were received from two individuals, both of whom are contractors interested in the potential for conducting portions of the proposed information collection activities. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

#### Proposed Collection

**Title:** Agricultural Health Study—A Prospective Cohort Study of Cancer and Other Diseases Among Men and Women in Agriculture. **Type of Information Collection Request:** Revision of a currently approved collection (0925-0406, expiration 11/31/03). **Need and Use of Information Collection:** The Agricultural Health Study is in its 5th year of follow-up data collection on a prospective cohort of 89,658 farms, their spouses, and commercial applicators of pesticides from Iowa and North Carolina. Follow-up is not yet complete for a segment of the cohort, commercial applicators ( $n = 4,916$ ). An extension until November 30, 2005 is requested to complete this data collection. **Frequency of Response:** Single time reporting. **Affected Public:** Individuals. **Type of Respondents:** Commercial pesticide applicators. The annual reporting burden is as follows: **Estimated Number of Respondents:** 2,548 **Estimated Number of Responses per Respondent:** 1.0; **Average Burden Hours Per Response:** 1.74; and **Estimated Total Annual Burden Hours Requested:** 3,707. The annualized cost to respondents is estimated at: \$59,312. 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) Evaluate 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) Evaluate 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) Enhance the quality, utility, and clarity of the information to be collected; and (4) 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.

#### 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: Michael C.R. Alavanja, Dr. P.H., Epidemiology and Biostatistics Program, Division of Cancer Etiology, National Cancer Institute, EPN 8000, 6120 Executive Boulevard, Rockville, MD 20852, or call (310) 435-4720, or E-mail your request, including your address to: [alavanjam@mail.nih.gov](mailto:alavanjam@mail.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: September 26, 2003.

**Reesa Nichols,**

*NCI Project Clearance Liaison.*

[FR Doc. 03-25068 Filed 10-2-03; 8:45 am]

BILLING CODE 4140-01-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### 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. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

**ADDRESSES:** Licensing information and copies of the U.S. patent application listed below may be obtained by writing to the indicated licensing contact 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 application.

#### **A New Target for Angiogenesis and Anti-angiogenesis Therapy**

Frank Cuttitta *et al.* (NCI).  
U.S. Provisional Application No. 60/425,018 filed 07 Nov 2002 (DHHS Reference No. E-294-2002/0-US-01).  
Licensing Contact: Catherine Joyce; 301/435-5031; [joycec@mail.nih.gov](mailto:joycec@mail.nih.gov).

Proadrenomedullin N-terminal 20 peptide (PAMP) is a 20 amino-acid molecule originating from the post-translational processing of pre-proadrenomedullin. PAMP has heretofore been known as a potent hypotensive and vasodilatory agent. PAMP and adrenomedullin (AM) are the two known bioactive products generated from cleavage of pre-proadrenomedullin. PAMP and AM are known to have vasodilatory and hypotensive activities. AM is also known to have angiogenic activity, whereas no such activity has previously been attributed to PAMP.

The inventors have discovered that, in addition to its hypotensive and vasodilatory effects, PAMP functions as a potent angiogenic factor. When compared to other well-known angiogenic factors such as vascular endothelial growth factor (VEGF) and basic fibroblast growth factor (bFGF), PAMP is roughly one million times more potent on a molar basis.

In one aspect, the invention relates to the use of PAMP inhibitors to inhibit angiogenesis *in vivo*. These methods would be useful, for example, in inhibiting the growth of tumors and in treating other diseases characterized by excessive angiogenesis including psoriasis, diabetic retinopathy, and chronic wounds. In a second aspect, the invention relates to the use of PAMP or PAMP derivatives to promote angiogenesis, for example, in subjects with coronary artery disease or cerebral ischemia.

Dated: September 27, 2003.

#### **Steven M. Ferguson,**

*Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.*

[FR Doc. 03-25072 Filed 10-2-03; 8:45 am]

**BILLING CODE 4140-01-P**

## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **National Institutes of Health**

#### **National Cancer Institute; Notice of Closed Meeting**

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 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 material, 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 Cancer Institute Special Emphasis Panel, Colon Cancer Screening in Primary Care Practice.

*Date:* October 23, 2003.

*Time:* 8 a.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Holiday Inn Select Bethesda, 8120 Wisconsin Ave, Bethesda, MD 20814.

*Contact Person:* C. Michael Kerwin, PhD, MPH, Scientific Review Administrator, Special Review and Logistics Branch, Division of Extramural Activities, National Cancer Institute, National Institutes Of Health, 6116 Executive Boulevard, Room 8057, MSC 8329, Bethesda, MD 20892-8329, 301-496-7421, [kerwinm@mail.nih.gov](mailto:kerwinm@mail.nih.gov).

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: September 29, 2003.

#### **LaVerne Y. Stringfield,**

*Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 03-25179 Filed 10-2-03; 8:45 am]

**BILLING CODE 4140-01-M**

## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **National Institutes of Health**

#### **National Cancer Institute; Notice of Closed Meeting**

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 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 material, 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 Cancer Institute Special Emphasis Panel, Community Clinical Oncology Program & Minority-Based Community Clinical Oncology Program.

*Date:* November 19, 2003.

*Time:* 8 a.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Executive Plaza North, 6130 Executive Blvd., Rockville, MD 20852.

*Contact Person:* Timothy C. Meeker, MD., Scientific Review Administrator, Special Referral and Resources Branch, Division of Extramural Activities, National Cancer Institute, 6116 Executive Boulevard, Room 8088, Rockville, MD 20852, 301/594-1279.

(Catalogue of Federal Domestic Assistance Program Nos. 93.292, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health HHS)

Dated: September 29, 2003.

#### **LaVerne Y. Stringfield,**

*Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 03-25180 Filed 10-2-03; 8:45 am]

**BILLING CODE 4140-01-M**

## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **National Institutes of Health**

#### **National Institute of Nursing Research; Notice of Closed Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as