

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Initial/Baseline Survey .....	800	1	.75	600
Follow-up Survey .....	640	1	.75	480

Estimated Total Annual Burden Hours: 1,080.

In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447. Attn: ACF Reports Clearance Officer. Email address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). All requests should be identified by the title of the information collection.

The Department specifically requests comments on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: May 29, 2007.

**Brendan C. Kelly,**

*Reports Clearance Officer.*

[FR Doc. 07-2724 Filed 6-1-07; 8:45 am]

BILLING CODE 4184-01-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, HHS.

**ACTION:** Notice.

**SUMMARY:** The inventions listed below are owned by an agency 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 companies and may also be available for licensing.

**ADDRESSES:** Licensing information and copies of the U.S. patent applications 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 applications.

**Human and Avian Influenza Whole Genome Phage Display Libraries**

*Description of Technology:* Available for use in developing research reagents, therapeutics or diagnostics are recombinant bacteriophage display libraries for identifying influenza viral gene products in preparation for pandemic threats the cross-reactivity and long-term protection of inter-pandemic influenza vaccines. Influenza vaccines predominantly include haemagglutinin (HA) and Neuraminidase (NA) antigens that characterize annual circulating influenza types A and type B. Analyses of the immune responses against new candidate vaccines is required in order to identify the best correlate of protection against seasonal human influenza strains and potential pandemic strains.

These "Whole Viral Genome Phage Display Libraries" express complete sets of protein fragments encoded by several Human and Avian Influenza strains including H1N1, H3N2, H5N1 and H7N9 and can be used for in depth analyses of plasma samples from: (a) Individuals exposed to human influenza; (b) individuals exposed to avian influenza; (c) individuals vaccinated with traditional influenza vaccines; (d) individuals vaccinated with new generation vaccines against human and bird influenza viruses.

*Applications:* Serological assays for surveillance of pandemic influenza outbreaks; Serological assays for distinguishing between exposure to human and bird influenza strains; Serological assays for diagnosing true infections in previously vaccinated individuals; Rapid analyses of immune sera from pre-clinical and clinical trials of novel influenza vaccines; Mapping of monoclonal and polyclonal antibodies against different influenza gene products; Identification of highly conserved "protective" epitopes for inclusion in future broadly-reactive influenza vaccines (against either inter-pandemic or pandemic influenza strains); Studies of viral protein-protein, viral RNA-protein and viral-host protein interactions (viral pathogenesis studies).

*Market:* Influenza diagnostics and vaccines.

*Development Status:* Materials available as research tools.

*Inventors:* Hana Golding, Ph.D. (FDA), Surender Khurana, Ph.D. (FDA).

*Patent Status:* HHS Reference No. E-031-2007/0—Research Tool.

*Licensing Status:* Available for licensing as a biological material.

*Scientific Contact:* Hana Golding, Ph.D.; FDA/CBER/OVRR/DVP/LR; 9000 Rockville Pike, Building 29B, Room 4N04, Bethesda, MD 20892; E-mail: [goldingh@cber.fda.gov](mailto:goldingh@cber.fda.gov); Phone: 301/827-0784.

*Licensing Contact:* Michael A. Shmilovich, Esq.; National Institutes of Health, Office of Technology Transfer; 6011 Executive Blvd., Suite 325, Rockville, MD 20852; E-mail: [shmilovm@mail.nih.gov](mailto:shmilovm@mail.nih.gov); Phone: 301/435-5019; Fax: 301/402-0220.

**Diagnostic and Therapeutic Use of Brother of the Regulator of Imprinted Sites (BORIS) Alternative Splice Forms**

*Description of Technology:* This technology identifies twenty five (25) new alternatively spliced transcripts of the BORIS gene. The transcripts lead to the expression of seventeen different protein isoforms with variable N- and C-termini encoded by BORIS gene locus. Differential expression levels of BORIS isoforms were observed in different cancers. While some BORIS alternative splice variants were expressed at different levels in all types of cancers,

other expressed forms are specific to particular cancer(s).

**Advantages and Applications:** Simple, rapid, RT-PCR based diagnostic test to detect BORIS isoforms in cancer patients; Profiling of BORIS splice variants can be useful as a diagnostic tool for the detection of cancers; BORIS can be a therapeutic target antigen for immunotherapeutic and/or siRNA based treatments for cancer; BORIS can be used in combination with other established immunogens for immunotherapeutic treatment of several cancers.

**Market:** Approximately 600,000 deaths from cancer related diseases are estimated in 2007. The technology, involving a differential expression of BORIS isoforms in cancer, can be useful for the diagnostics and treatment of several cancers having a potential market of more than 7 billion U.S. dollars.

**Development Status:** The technology is currently in the pre-clinical stage of development.

**Inventors:** Victor V. Lobanenkov et al. (NIAID).

**Patent Status:** U.S. Provisional Application No. 60/841,342 filed 31 Aug 2006 (HHS Reference No. E-117-2006/0-US-01).

**Licensing Status:** Available for exclusive and non-exclusive licensing.

**Licensing Contact:** Mojdeh Bahar, J.D.; 301/435-2950; baharm@mail.nih.gov.

**Collaborative Research Opportunity:** The NIAID Laboratory of Immunopathology is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate, or commercialize methods of cancer diagnostics and treatment based on detection of *BORIS* isoforms. Please contact Cecilia Pazman at pazmance@niaid.nih.gov or (301) 451-3526 for more information.

Dated: May 23, 2007.

**Steven M. Ferguson,**

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

[FR Doc. E7-10711 Filed 6-1-07; 8:45 am]

BILLING CODE 4140-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

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#### A MicroRNA Profile for Androgen Responsive Prostate Cancer

**Description of Technology:** This invention describes a microRNA gene expression profile in prostate cancers that correlates with androgen responsiveness. Most prostate cancers are androgen sensitive and can be treated with anti-androgen therapies. Tumors non-responsive to anti-androgen therapy are more aggressive and needs alternative therapeutic interventions. Additionally, the microRNAs discovered can also be potential targets for developing new prostate cancer drugs.

**Applications:** MicroRNA expression profile can help physicians take informed treatment action on an individual basis.

**Advantages:** *In vitro* proof-of-concept data available.

**Inventors:** Dr. Chang Hee Kim et al. (NCI).

**Related Publications:** A manuscript directly related to this technology will be available as soon as it is accepted for publication.

**Patent Status:** U.S. Provisional Application No. 60/906,742 filed 12 Mar 2007 (HHS Reference No. E-142-2007/0-US-01).

**Licensing Status:** Available for exclusive and non-exclusive licensing.

**Licensing Contact:** Thomas P. Clouse, J.D.; 301/435-4076; clousetp@mail.nih.gov.

**Collaborative Research Opportunity:** The NCI/SAIC-Frederick, Advanced Technology Program, Laboratory for Molecular Technology, is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate, or

commercialize microRNA diagnostic markers in cancer. Please contact John D. Hewes, Ph.D. at 301-435-3121 or hewesj@mail.nih.gov for more information.

#### A Gene Expression Signature Identifying Pro-Angiogenic Genes in Ovarian Tumor Endothelial Cell Isolates

**Description of Technology:** Cancer is a heterogeneous disease that requires multimodality therapy. Most of the therapeutic approaches for ovarian cancer have focused on chemotherapy, which primarily targets proliferating tumor cells. Women with ovarian cancer are typically asymptomatic and they are often diagnosed at an advanced stage and have poor survival. Despite an 80% positive patient response rate to surgery and chemotherapy, most patients will experience tumor recurrence within two years. A majority of women who die of ovarian cancer will have ovarian epithelial carcinomas.

The inventors have discovered a unique proangiogenic biomarkers isolated from ovarian endothelial cells. By targeting tumor angiogenesis by inhibiting endothelial cells that support tumor growth, this technology provides methods to diagnose an ovarian cancer in its early stages.

**Applications:** Method to diagnose and treat ovarian cancer in its early stage; Novel early stage ovarian cancer biomarkers; Therapeutic targets and compositions that inhibit ovarian tumors such as siRNA.

**Market:** Ovarian cancer is the seventh most common cancer and the fifth leading cause of cancer death in the U.S.; An estimated 15,310 deaths in the U.S. in 2006.

**Development Status:** The technology is currently in the pre-clinical stage of development.

**Inventors:** Michael J. Birrer (NCI) et al.

**Publication:** C Lu et al. Gene alterations identified by expression profiling in tumor-associated endothelial cells from invasive ovarian carcinoma. Cancer Res. 2007 Feb 15;67(4):1757-1768.

**Patent Status:** U.S. Provisional Application No. 60/901,455 filed 14 Feb 2007 (HHS Reference No. E-095-2007/0-US-01).

**Licensing Status:** Available for exclusive or non-exclusive licensing.

**Licensing Contact:** Jennifer Wong; 301/435-4633; wongje@mail.nih.gov.

**Collaborative Research Opportunity:** The National Cancer Institute, Cell and Cancer Biology Branch, Molecular Mechanisms Section, is seeking statements of capability or interest from parties interested in collaborative