and language specialists to carry out the study. The study will examine reproductive outcomes in pregnant women, follow and assess their children from birth to 1 year of age, and create a system to follow up the infants through childhood up to 6 years of age to evaluate the impact of uranium exposure on biological and psychosocial endpoints. Biological sample analysis, surveys, and developmental screenings will be performed during this research period for each participant.

In addition to investigating the role of uranium and other chemicals in the environment on birth outcomes and development, the prospective study may aid in understanding causes and prevention measures of chronic conditions. Several research studies have shown that exposure to chemicals in the environment during prenatal and postnatal periods can affect the development of adult chronic diseases. The study will also provide broad public health benefits for Navajo communities through outreach and education on environmental prenatal risks and early assessment. Referrals will also be provided for known developmental delays.

Participants will include Native American mothers from age 14 to 45 with verification of pregnancy who have lived in the study area for at least 5 years. Also, participants must consent to receive prenatal care and deliver at one of the healthcare facilities that are taking part in the study (Northern Navajo Medical Center, Chilene Comprehensive Health Care Facility, Gallup Indian Medical Center, Tuba City Regional Health-Care Corporation, or Tsehootsooi Medical Center). Fathers will be included in the study with consent regardless of age or residence. We estimate that 550 pregnant women and fathers per year must be enrolled in the study to obtain adequate statistical power. A 10% pregnancy loss will be assumed, which would result in 500 live births per year. Therefore, the total anticipated sample size is 1,500 mother-infant pairs over the three years of the study.

The survey instruments for pregnant mothers include the following: Enrollment Survey, Nutritional Assessment/Food Intake Questionnaire, Ages and Stages Questionnaire (ASQ–I), Mullen Stages of Early Development (MSEL), and Postpartum Surveys. An enrollment survey for fathers who agree to participate will also be administered. Community Health and Environmental Research Specialists (CHERS) will administer surveys using a CDC-approved electronic data entry system. Survey instruments were designed to collect demographic information, assess potential environmental health risks, and mother-child interactions. The survey instruments were developed based on previous surveys conducted by Dine’ Network for Environmental Health (DiNEH) Project, the National Children’s Study, and by other birth cohort studies that have been conducted among other indigenous populations. The final format of the survey instruments was modified based on review and input from the Navajo Nation community liaison group and associated Navajo staff to address issues such as cultural sensitivity, comprehension and language translation.

There is no cost to the respondents other than their time to participate in the study. The total estimated annual burden hours equals 3550.

<table>
<thead>
<tr>
<th>Type of respondent</th>
<th>Form name</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Average burden response (hours)</th>
<th>Total burden (hours)</th>
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<tbody>
<tr>
<td>Mother</td>
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<td>15/60</td>
<td>750</td>
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<td></td>
<td>Postpartum Survey (0 months)</td>
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<td>500</td>
<td>4</td>
<td>15/60</td>
<td>750</td>
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<tr>
<td>Father</td>
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<td>90/60</td>
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<tr>
<td>Total</td>
<td>Enrollment Survey</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Dated: November 16, 2011.

Daniel Holcomb,
Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. 2011-30103 Filed 11–21–11; 8:45 am]
BILLING CODE 4163–18–P

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.

ADDRESS: 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.

Medical Device for Intraocular Injection of Therapeutics and Fluid Sampling

Description of Technology: The National Institutes of Health seeks research collaboration and commercialization partners for a medical device for administering therapeutics into the eye to treat a variety of ocular diseases including diabetic retinopathy, retinal vein occlusion, and macular degeneration. The device is a dual function needle that can both inject and sample ocular fluid at the same injection site. The needle includes a hub portion in communication with a needle portion through a lumen that may be used as a conduit to inject a therapeutic into an injection site. A sample chamber, with an optional absorbent material, is
disposed in the lumen capable of absorbing intraocular fluid via a passive filling action into the sample chamber.

Potential Commercial Applications:
- Ocular therapeutics
- Macular degeneration
- Diabetic retinopathy
- Retinal vein occlusion

Competitive Advantages:
- Small sample volumes
- Disposable
- Personalized medicine

Development Stage:
- Prototype
- Early-stage

Inventors: Henry E. Wiley (NEI), Terrence M. Phillips (NIBIB), Fredrick L. Ferris (NEI), Heather Kalish (NIBIB).


Licensing Contact: Michael Shmilovich, Esq.; (301) 435–5019; mish@codon.nih.gov.

Collaborative Research Opportunity: The National Eye Institute is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate or commercialize intraocular therapeutic delivery. For collaboration opportunities, please contact Alan E. Hubbs, Ph.D. at (301) 594–4263 or hubbsa@mail.nih.gov.

Bacteria/Biofilm Resistant Implantable Medical Device

Description of Technology: Available for licensing and commercial development is a medical device resistant to a biological barrier such as a bacterial biofilm, fibrin sheath, and/or clot formation. An electric current is introduced through an electrically conductive surface of the device (e.g., a catheter) on which a biofilm, fibrin sheath, or clot may form to inhibit formation. The electrically conductive surface can extend along an entire length of the device (for example extending entirely from the proximal to distal end of a catheter), or a portion thereof such as at the tip.

Potential Commercial Applications:
- Biofilm resistant medical devices
- Antimicrobial methods
- Antimicrobial protection of implanted medical device
- Vascular access devices

Competitive Advantages: Non-degradable antimicrobial methods.

Development Stage:
- Prototype
- Early-stage

Inventors: Bradford Wood and Ziv Neuman (NIHCC).


Licensing Contact: Michael Shmilovich, Esq.; (301) 435–5019; mish@codon.nih.gov.

Dated: November 16, 2011.

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

[FR Doc. 2011–30109 Filed 11–21–11; 8:45 am]
BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Center for Scientific Review; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meetings.

The meetings 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: Center for Scientific Review Special Emphasis Panel, Psychomotor Behavior After Chemotherapy.

Date: November 30, 2011.

Time: 12:30 p.m. to 2 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892. (Telephone Conference Call).

Contact Person: Biao Tian, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 3089B, MSC 7848, Bethesda, MD 20892, (301) 402–4411, tianbi@csr.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.

Name of Committee: Center for Scientific Review Special Emphasis Panel, Review of HIV/AIDS Clinical Studies and Epidemiology Grant Applications.

Date: December 9, 2011.

Time: 12 p.m. to 3 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892. (Virtual Meeting).

Contact Person: Elena Smirnova, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5187, MSC 7840, Bethesda, MD 20892, (301) 435–1236, smirnova@csr.nih.gov.


Dated: November 15, 2011.

Jennifer S. Spaeth,
Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2011–30118 Filed 11–21–11; 8:45 am]