

retaining approximately 50% of the questionnaire content. In addition, HINTS II will experiment with alternative modes of data collection (i.e., the Internet). Data will be used (1) to understand individuals' sources of and access to cancer-related information; (2) to measure progress in improving cancer knowledge and communication to the general public; (3) to develop appropriate messages for the public

about cancer prevention, detection, diagnosis, treatment, and survivorship; and (4) to identify research gaps and guide decisions about NCI's research efforts in health promotion and health communication. *Frequency of response:* One-time. *Affected public:* Individuals. *Type of Respondents:* U.S. Adults, Pilot Survey, Screeners and Interview. The annual reporting burden is as follows: *Estimated Number of Respondents:*

10,389; *Estimated Number of Responses per Respondent:* 1; *Average Burden Hours per Response:* .37; and *Estimated Total Annual Burden Hours Requested:* 3,836. The annualized cost to respondents is estimated at \$38,360. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

| Type of respondent | Estimated number of respondents | Frequency of response | Average hours per response | Annual hour burden |
|---------------------------|---------------------------------|-----------------------|----------------------------|--------------------|
| Pilot Survey | 150 | 1 | .4167 | 63 |
| HINTS II Screener | 10,239 | 1 | .0833 | 854 |
| HINTS II Interview* | 7,004 | 1 | .4167 | 2,919 |
| Totals | | | | 3,836 |

*HINTS II interview respondents are a subset of the screener respondents (N = 10,389).

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) Whether the proposed collection of information is necessary for the proposed performance of the functions of the agency, including whether the information shall have practical utility; (2) The accuracy of the 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 of information technology.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Bradford W. Hesse, Ph.D., Project Officer, National Cancer Institute, NIH, EPN 4068, 6130 Executive Boulevard MSC 7365, Bethesda, Maryland 20892-7365, or call non-toll-free number (301) 594-9904, or FAX your request to (301) 480-2198, or E-mail your request, including your address, to heseb@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 this notice.

Dated: April 1, 2004.

Rachelle Ragland-Greene,

OMB Clearance Liaison, National Cancer Institute, National Institutes of Health.

[FR Doc. 04-8270 Filed 4-12-04; 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 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.

Query Tool for Accurate Protein Identification

Rodney L. Levine (NHLBI)

U.S. Patent Application No. 10/446,865 filed 29 May 2003 (DHHS Reference No. E-306-2002/0-US-01)

Licensing Contact: Michael Shmilovich; 301/435-5019; shmilovm@mail.nih.gov.

PHS seeks a commercial developer for the following software database query tool: A data-mining tool (software based query generator) that provides a script that identifies an isolated protein by using physical properties of the protein and submitting the query into a protein database (e.g., SWISS-PROT). The inventors identified that by combining an accurate determination of the ratio of at least one amino acid per molecule and at least one physical parameter of the protein; an accurate and unique match can be made by the query results. Parameters include the ratios of amino acids to others (e.g., C/F, W/C, C/Y etc.), the molecular weight, the ratio of positively to negatively charged moieties, and/or the isoelectric point.

Bromotyrosine-Derived Inhibitors of Mycothiol-S-Conjugate Amidase

Carole A. Bewley *et al.* (NIDDK)

U.S. Provisional Application No. 60/395,219 filed 10 Jul 2002 (DHHS Reference No. E-196-2002/0-US-01); PCT Application No. PCT/US03/21456 filed 09 Jul 2003, which published as WO 04/004659 on 15 Jan 2004 (DHHS Reference No. E-196-2002/0-PCT-02)

Licensing Contact: Michael Ambrose; 301/594-6565; ambrosem@mail.nih.gov.

Mycobacterium tuberculosis has reemerged as a leading cause of death by an infectious agent, especially among populations that are immunocompromised. With this increase in the rate of infection there has also been an increase in the number of drug resistant strains, making treatment of such infections more difficult. As such, the development of new antituberculars with novel modes

of action is paramount in the fight against such infections.

The current invention uses the finding of two mycothiol-related amidases that are unique to actinomycetes and thus share no homology to eukaryotic enzymes thus reducing potential side effects for new therapeutics. These amidases are novel targets for new therapeutics and classes of antimycobacterials. This invention describes a series of synthetic bromotyrosine-containing analogs that exhibit amidase inhibition and thus have potential for therapeutic development.

This research has been described, in part, in: GM Nicholas et al., Bioorg. Med. Chem. Lett. (2002) 12:2487-2490; B Fetterolf and CA Bewley, Bioorg. Med. Chem. Lett. (Submitted, March 26, 2004).

Radio Frequency Cauterization Biopsy

Bradford J. Wood and Christan Pavlovich (CC)

U.S. Patent Application No. 10/274,074 filed 17 Oct 2002 (DHHS Reference No. E-207-2001/1-US-02)

Licensing Contact: Michael Shmilovich; 301/435-5019; shmilovm@mail.nih.gov.

The invention is a method and apparatus for using radio frequency (RF) energy to cauterize the needle track after percutaneous image-guided needle biopsy. The invention is designed to limit the risks of bleeding and needle track seeding that are inherent risks of any needle biopsy. The device uses a coaxial biopsy arrangement with the outer needle coated with a non-conducting polymer that insulates the needle shaft and the tissue immediately in contact with the shaft. As the needle is pulled back from the organ or tumor target, RF energy is applied to an exposed end portion of the probe, causing cauterization and coagulation of the tissue immediately adjacent to the needle track. Modular insertions could plug the needle into any cauterization or radiofrequency generator. A variation on the device could be used to limit bleeding after catheter placement into organs, such as for nephrostomy, biliary drainage, or transhepatic islet cell transplantation.

Endoluminal Radiofrequency Cauterization System

Bradford J. Wood (CC)

U.S. Patent 6,676,657 issued 13 Jan 2004 (DHHS Reference No.E-244-2000/1-US-01)

Licensing Contact: Michael Shmilovich; 301/435-5019; shmilovm@mail.nih.gov.

The invention is a device for occluding the lumen of a hollow organ, vessel or aneurysm by delivering radio frequency energy to its inner wall. The apparatus uses specialized electrodes that contact the walls of the organ to substantially conform to the inner surface. RF energy is then applied to the electrode at any of a broad range of desired frequencies for selected times at power levels of from 20 to 200 watts. Delivery of RF energy may be regulated by monitoring temperature, tissue impedance or other parameters at or near the site of the electrode. A temperature sensor located near the electrode allows microprocessor-based control of the power delivered to the electrode site as a function of tissue temperature. The device has applications in therapeutic thrombosis of an aneurysm, stopping blood flow to a tumor or bleeding vessel, or reducing stricture or stenosis in, for example, a bronchus, esophagus, intestine segment or a blood vessel. The invention also may be useful in reducing stenosis in a coronary artery or to reduce a restenotic lesion from intimal hyperplasia that may occur after angioplasty.

Dated: April 4, 2004.

Steven M. Ferguson,

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

[FR Doc. 04-8268 Filed 4-12-04; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director, National Institutes of Health; Notice of Meeting

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of a meeting of the Advisory Committee to the Director, NIH.

The meeting will be open to the public, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

Name of Committee: Advisory Committee to the Director, NIH.

Date: May 6, 2004.

Time: 8:30 a.m. to 5 p.m.

Agenda: Topics proposed for discussion include Office of the Director updates, Institute and Center Director presentations, and an Advisory Committee to the Director

(ACD) working group report from the Blue Ribbon Panel on Conflict of Interest.

Place: National Institutes of Health, Building 31, Conference Room 6, 9000 Rockville Pike, Bethesda, MD 20892.

Contact Person: Shelly Pollard, ACD Coordinator, National Institutes of Health, 9000 Rockville Pike, Building, 2 Room BE15, Bethesda, MD 20892, (301) 496-0959.

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed in this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

In the interest of security, NIH has instituted stringent procedures for entrance into the building by non-government employees. Persons without a government I.D. will need to show a photo I.D. and sign-in at the security desk upon entering the building.

Information is also available on the Institute's/Center's home page: <http://www.nih.gov/about/director/acd.htm>, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.14, Intramural Research Training Award; 93.22, Clinical Research Loan Repayment Program for Individuals from Disadvantaged Backgrounds; 93.232, Loan Repayment Program for Research Generally; 93.39, Academic Research Enhancement Award; 93.936, NIH Acquired Immunodeficiency Syndrome Research Loan Repayment Program; 93.187, Undergraduate Scholarship Program for Individuals from Disadvantaged Backgrounds, National Institutes of Health, HHS.)

Dated: April 6, 2004.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 04-8276 Filed 4-12-04; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director, National Institutes of Health; Notice of Meeting

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of a meeting of the Director's Council of Public Representatives.

The meeting will be open to the public, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.