54269

Committee (NVAC) will hold a meeting. The meeting is open to the public. **DATES:** The meeting will be held on October 22, 2007, from 9 a.m. to 5 p.m., and on October 23, 2007, from 9 a.m. to 1:30 p.m.

ADDRESSES: Department of Health and Human Services; Hubert H. Humphrey Building, Room 800; 200 Independence Avenue, SW., Washington, DC 20201.

FOR FURTHER INFORMATION. CONTACT: Ms. Emma English, Program Analyst, National Vaccine Program Office, Department of Health and Human Services, Room 443-H Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201; (202) 690-5566, nvpo@hhs.gov. SUPPLEMENTARY INFORMATION: Pursuant to section 2101 of the Public Service Act (42 U.S.C. section 300aa-1), the Secretary of Health and Human Services was mandated to establish the National Vaccine Program to achieve optimal prevention of human infectious diseases through immunization and to achieve optimal prevention against adverse reactions to vaccines. The National Vaccine Advisory Committee was established to provide advice and make recommendations to the Assistant Secretary for Health, as the Director of the National Vaccine Program, on matters related to the program's responsibilities.

Topics to be discussed at the meeting include adult and adolescent immunization, pandemic vaccine prioritization, vaccine financing, vaccine stockpiles, and other Departmental vaccine priorities. Subcommittee meetings will be held on the afternoon of October 22, 2007. A tentative agenda is currently available on the NVAC Web site: http:// www.hhs.gov/nvpo/nvac.

In anticipation of a discussion regarding the Committee's draft document "Mandates for Adolescent Immunizations," developed by the Adolescent Immunization Working Group, the Committee invites the public to submit written comments to the Executive Secretary, NVAC, through the contact person listed above. Written comment must be received by close of business on October 9, 2007. Additionally, members of the public will be given the opportunity to participate in the discussion on October 22, 2007. Public comment will be limited to five minutes per speaker. A copy of this draft document can be found at (http://www.hhs.gov/nvpo) or by contacting the contact person identified above.

Public attendance at the meeting is limited to space available. Individuals

must provide a photo ID for entry into the Humphrey Building. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the designated contact person. Members of the public will have the opportunity to provide comments at the meeting. Public comment will be limited to five minutes per speaker. Any members of the public who wish to have printed material distributed to NVAC members should submit materials to the Executive Secretary, NVAC, through the contact person listed above prior to close of business October 16, 2007. Preregistration is required for both public attendance and comment. Any individual who wishes to attend the meeting and/or participate in the public comment session should e-mail nvpo@hhs.gov or call 202-690-5566.

Dated: September 19, 2007.

Bruce Gellin,

Director, National Vaccine Program Office. [FR Doc. E7–18758 Filed 9–21–07; 8:45 am] BILLING CODE 4150–44–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Injury Prevention and Control Initial Review Group: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92– 463) of October 6, 1972, that the National Center for Injury Prevention and Control Initial Review Group, Centers for Disease Control and Prevention, Department of Health and Human Services, has been renewed for a 2-year period through August 20, 2009.

For information, contact Jane Suen, Ph.D., Executive Secretary, National Center for Injury Prevention and Control Initial Review Group, Centers for Disease Control and Prevention, Department of Health and Human Services, 4770 Buford Highway, Mailstop K02, Atlanta, Georgia 30341, telephone 770/488–4281 or fax 770/ 488–2489.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry. Dated: September 17, 2007. **Elaine L. Baker,** *Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.* [FR Doc. E7–18748 Filed 9–21–07; 8:45 am] **BILLING CODE 4163–18–P**

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Board on Radiation and Worker Health: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92– 463) of October 6, 1972, that the Advisory Board on Radiation and Worker Health, Centers for Disease Control and Prevention (CDC), Department of Health and Human Services, has been renewed for a 2-year period through August 3, 2009.

For information, contact Lewis Wade, Ph.D., Executive Secretary, National Institute for Occupational Safety and Health, CDC, 4976 Columbia Parkway, Cincinnati, Ohio 45226, Telephone (513) 533–6825, Fax (513) 533–6826.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: September 17, 2007.

Elaine L. Baker,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E7–18749 Filed 9–21–07; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; Quality of Life Outcomes in Neurological Disorders

SUMMARY: In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Institute of Neurological Disorders and Stroke (NINDS), the National Institutes of Health (NIH) will publish periodic summaries of proposed

projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Proposed Collection: Title: Quality of Life Outcomes in Neurological Disorders; Type of Information Collection Request: New; Form Number: NA; Need and Use of Information Collection: In order to improve outcome measurement in clinical trials of neurological conditions, NINDS is developing a health-related quality of life (HRQL) measurement system for major neurological diseases that affect the United States population. This measurement system must be consistent enough across the selected conditions to allow for cross-disease comparison, and yet flexible enough to capture condition-specific HRQL issues. The primary end users of this measurement system will be clinical trialists and other clinical neurology researchers; however the measurement system will also be appropriate for clinical practice. The proposed information collection will support psychometric testing of HRQL item banks and testing of Spanish translation of the final questionnaires. *Frequency of Response:* Once; *Affected Public:* Individuals; *Type of Respondent:* Adults and children. The annual reporting burden is shown in the following table. There are no Capital Costs, Operating Costs or Maintenance Costs to report.

Type of respondents	Number of respondents	Frequency of response	Average time per response	Annual hour burden
Adults Children	6000 3000	1	0.5 0.5	3,000 1,500
Totals	9000			4,500

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 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 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.

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: Dr. Claudia Moy, Program Director, Clinical Trials Group, NINDS, NIH, Neuroscience Center, 6001 Executive Boulevard, Room 2214, Bethesda, MD 20892, or call non-tollfree number 301–496–2789 or e-mail your request, including your address to: moyc@ninds.nih.gov.

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

Dated: September 6, 2007.

Joellen Harper Austin,

Executive Officer, NINDS, National Institutes of Health.

[FR Doc. E7–18772 Filed 9–21–07; 8:45 am] BILLING CODE 4140–01–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.

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.

Method for Predicting and Detecting Tumor Metastasis

Description of Technology: Detecting cancer prior to metastasis greatly increases the efficacy of treatment and the chances of patient survival. Although numerous biomarkers have been reported to identify aggressive tumor types and predict prognosis, each biomarker is specific for a particular type of cancer, and no universal marker that can predict metastasis in a number of cancers have been identified. In addition, due to a lack of reliability, several markers are typically required to determine the prognosis and course of therapy.

Available for licensing are carboxypeptidase E (CPE) inhibitor compositions and methods to prognose and treat cancer as well as methods to determine the stage of cancer. The inventors discovered that CPE expression levels increase according to the presence of cancer and metastasis wherein CPE is upregulated in tumors and CPE levels are further increased in metastatic cancer. This data has been demonstrated both in vitro and in vivo experiments and in liver, breast, prostate, colon, and head and neck cancers. Metastatic liver cells treated with CPE siRNA reversed the cells from being metastatic and arrested cells from further metastasis. Thus, CPE as a biomarker for predicting metastasis and its inhibitors have an enormous potential to increase patient survival.

Applications: Method to prognose multiple types of cancer and determine likelihood of metastasis; Compositions that inhibit CPE such as siRNA; Method to prevent and treat cancer with CPE inhibitors.

Market: 600,000 cancer related deaths in 2006; Global cancer market is worth more than eight percent of total global pharmaceutical sales; Cancer industry is predicted to expand to \$85.3 billion by 2010.

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

Inventors: Y. Peng Loh (NICHD) *et al. Publication:* Manuscript in preparation.

Patent Status: U.S. Provisional Application No. 60/885,809 filed 19 Jan