AdvisoryCommittees/Calendar/default.htm. Scroll down to the appropriate advisory committee meeting link.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person on or before March 13, 2014. Oral presentations from the public will be scheduled between approximately 1 p.m. and 2 p.m. Those individuals interested in making formal oral presentations should notify the contact person and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation on or before March 5, 2014. Time allotted for each presentation may be limited. If the number of registrants requesting to speak is greater than can be reasonably accommodated during the scheduled open public hearing session, FDA may conduct a lottery to determine the speakers for the scheduled open public hearing session. The contact person will notify interested persons regarding their request to speak by March 6, 2014.

Persons attending FDA's advisory committee meetings are advised that the Agency is not responsible for providing access to electrical outlets.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact AnnMarie Williams at *Annmarie.Williams@fda.hhs.gov* or 301–796–5966 at least 7 days in advance of the meeting.

FDA is committed to the orderly conduct of its advisory committee meetings. Please visit our Web site at *http://www.fda.gov/AdvisoryCommittees/AboutAdvisoryCommittees/ucm111462.htm* for procedures on public conduct during advisory committee meetings.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: February 7, 2014.

Jill Hartzler Warner,

Acting Associate Commissioner for Special Medical Programs.

[FR Doc. 2014–03139 Filed 2–12–14; 8:45 am]

BILLING CODE 4160–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES (DHHS)

National Institutes of Health

Proposed Collection; Comment Request; NIH Neurobiobank Tissue Access Request

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 Mental Health (NIMH), 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.

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 proper 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 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.

To Submit Comments and for Further Information: To obtain a copy of the data collection plans and instruments, submit comments in writing, or request more information on the proposed project, contact: Keisha Shropshire, NIMH Project Clearance Liaison, Science Policy and Evaluation Branch, OSPPC, NIMH, NIH, Neuroscience Center, 6001 Executive Boulevard, MSC 9667, Rockville Pike, Bethesda, MD 20892, or call 301–443–4335 or Email your request, including your address to: *nimhprapubliccomments@mail.nih.gov.* Formal requests for additional plans and instruments must be requested in writing.

Comment Due Date: Comments received within 60 days of the date of this publication will receive fullest consideration.

Proposed Collection: National Institute of Health Neurobiobank Tissue Access Request–0925–New. National Institute of Mental Health (NIMH), National Institute of Health (NIH).

Need and Use of Information Collection: The NIH Neurobiobank Tissue Access Request form is necessary for ''Recipient'' Principal Investigators and their organization or corporations with approved assurance from the DHHS Office of Human Research Protections to access tissue or biospecimens from the National Neurobiobank for research purposes. The primary use of this information is to document, track, monitor, and evaluate the appropriate use of the Neurobiobank tissue and biospecimen resources, as well as to notify interested recipients of updates, corrections or other changes to the system.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 63.

ESTIMATES ANNUAL BURDEN HOURS

Form	Number of respondents	Frequency of response	Average time per response (in hours)	Annual hour burden
Neurobiobank Tissue Access Request	50	1	15/60	13
Pre-Mortem Consent and Medical History	50	1	1	50
Total				63

Dated: January 29, 2014.

Keisha Shropshire,

Project Clearance Officer, NIMH, NIH.

[FR Doc. 2014–03204 Filed 2–12–14; 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, 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. 209 and 37 CFR part 404 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.

FOR FURTHER INFORMATION CONTACT: 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.

Tumor Infiltrating Lymphocytes From Human Papillomavirus-Positive Tumors for the Treatment of Cancer

Description of Technology: Human papillomaviruses (HPV) cause anogenital and oropharyngeal cancers, and these malignancies express viral oncoproteins that can be recognized by T cells. When HPV-associated cancers spread they are incurable and difficult to palliate with existing treatments.

Tumor infiltrating lymphocytes (TIL) have been used successfully to treat advanced stage malignant melanoma, however their use has been primarily limited to this disease. This technology describes a novel TIL therapy for treating HPV-associated cancers. The NIH inventors have found TIL can be grown from HPV positive tumors at grade and scale suitable for clinical use and that they can recognize the HPV oncoproteins that drive transformation and survival of cancer cells. The inventors have initiated a clinical trial for the treatment of advanced HPV positive cancers that are refractory to standard chemotherapy using HPV–TIL. Early results of the clinical trial suggest that HPV–TIL has activity in chemotherapy-refractory advanced disease for which no standard treatment options are available.

Potential Commercial Applications: HPV–TIL therapy is a novel treatment approach that may mediate long-lasting tumor regression from a single dose of cells.

Competitive Advantages: Early clinical results suggest that HPV–TIL has activity in chemotherapy-refractory advanced disease for which no standard treatment options are available.

Development Stage: In vitro data available (human)

Inventors: Christian Hinrichs and Steven A. Rosenberg (NCI)

Publications:

1. Piersma SJ, *et al.* Human papilloma virus specific T cells infiltrating cervical cancer and draining lymph nodes show remarkably frequent use of HLA–DQ and –DP as a restriction element. Int J Cancer 2008 Feb 1;122(3):486–94. [PMID 17955486]

2. de Vos van Steenwijk PJ, *et al.* An unexpectedly large polyclonal repertoire of HPV-specific T cells is poised for action in patients with cervical cancer. Cancer Res. 2010 Apr 1;70(7):2707–17. [PMID 20233872]

Intellectual Property: HHS Reference No. E–494–2013/0—US Provisional Application No. 61/846,161 filed 15 July 2013

Related Technology: HHS Reference No. E–495–2013/0—US Provisional Application No. 61/846,167 filed 15 July 2013

Licensing Contact: Whitney A. Hastings; 301–451–7337; *hastingw@mail.nih.gov*

Improved Culture Medium for Stem Cell Maintenance and Differentiation

Description of Technology: A novel low protein culture medium with defined chemical components that allows pluripotent stem cell maintenance and differentiation is disclosed. The present technology also provides for production of high quality cardiac cells from human embryonic and induced pluripotent stem cells in chemically defined medium conditions. Human pluripotent stem cells, including human embryonic stem cells and human induced pluripotent stem cells, can be propagated indefinitely while still retaining the capacity to differentiate into all somatic cell types, and are a potentially inexhaustible supply of human cells. The capacity to sustain survival at high density is critical for maintaining consistent stem cell cultures and avoiding the development of abnormal stem cells, and for proper stem cell differentiation. Also, it is essential to have high quality stem cells for all personalized cellular therapies. NIH investigators developed a low protein medium that supports the proliferation and differentiation of stem cells comprising one or more of a volume expander, a lipid mix and a growth factor modulator. Also, the investigators have used the new medium to produce high quality cardiac cells from human embryonic and induced pluripotent stem cells.

Potential Commercial Applications:

- Improved defined medium to grow, maintain and differentiate stem cells.
- This medium can be used to develop culture systems that could be used to generate specific cell types for potential clinical applications.

Competitive Advantages: This new medium could significantly improve progenitor cell derivation from embryonic stem cells and induced pluripotent stem cells and could have great usage in future translational applications.

Development Stage:

- Early-stage
- In vitro data available
- In vivo data available (animal)

Inventors: Guokai Chen and Yongshun Lin (NHLBI)

Intellectual Property: HHS Reference No. E–089–2013/0—US Provisional Application No. 61/879,840 filed 19 September 2013

Licensing Contact: Sury Vepa, Ph.D., J.D.; 301–435–5020; *vepas@mail.nih.gov*

Collaborative Research Opportunity: The National Heart, Lung, and Blood Institute is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate or commercialize Stem Cell Culture Medium. For collaboration opportunities, please contact Peg Koelble at *koelblep@nhlbi.nih.gov.*

Dated: February 10, 2014.

Richard U. Rodriguez,

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

[FR Doc. 2014–03083 Filed 2–12–14; 8:45 am]

BILLING CODE 4140–01–P