

ESTIMATES OF ANNUALIZED BURDEN HOURS—Continued

Type of respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hours
Applicant Survey	240	1	20/60	80

Dated: July 2, 2014.
Lawrence A. Tabak,
Deputy Director, National Institutes of Health.
 [FR Doc. 2014-16072 Filed 7-8-14; 8:45 am]
BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of Start-Up Exclusive Evaluation Option License Agreement: AAV Mediated Aquaporin-1 Gene Transfer To Treat Sjögren’s Syndrome

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: This is notice, in accordance with 35 U.S.C. 209 and 37 CFR part 404, that the National Institutes of Health (NIH), Department of Health and Human Services (HHS), is contemplating the grant of a Start-Up Exclusive Evaluation Option License Agreement to Milo, LLC, a company having its headquarters in Cleveland, Ohio, to practice the inventions embodied in U.S. Provisional Patent Application No. 61/695,753, filed 20 April 2011 (HHS Ref. No. E-139-2011/1-US-01)), and PCT Patent Application No. PCT/US13/57632, filed 30 August 2013 (HHS Ref. No. E-139-2011/1-PCT-02), entitled “AAV Mediated Aquaporin-1 Gene Transfer to Treat Sjögren’s Syndrome.” The patent rights in these inventions have been assigned to or exclusively licensed to the Government of the United States of America. The territory of the prospective license may be worldwide and the field of use may be limited to: “the use of the Licensed Patent Rights, limited to AAV mediated aquaporin-1, for the treatment of Sjögren’s syndrome in humans.”

Upon the expiration or termination of the Start-Up Exclusive Evaluation Option License Agreement, Milo will have the exclusive right to execute a Start-up Exclusive Patent License Agreement which will supersede and replace the Start-up Exclusive Evaluation Option License Agreement, with no greater field of use and territory

than granted in the Start-Up Exclusive Evaluation Option License Agreement.

DATES: Only written comments and/or applications for a license which are received by the NIH Office of Technology Transfer on or before July 24, 2014 will be considered.

ADDRESSES: Requests for copies of the patent application, inquiries, comments and other materials relating to the contemplated Start-Up Exclusive Evaluation Option License Agreement should be directed to: Vince Contreras, Ph.D., Licensing and Patenting Manager, Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, MD 20852-3804; Telephone: (301) 435-4711; Facsimile: (301) 402-0220; Email: *vince.contreras@nih.gov*. A signed confidentiality nondisclosure agreement will be required to receive copies of any patent applications that have not been published or issued by the United States Patent and Trademark Office or the World Intellectual Property Organization.

SUPPLEMENTARY INFORMATION: The subject technology includes methods of treating Sjögren’s syndrome by using recombinant adeno associated virus (rAAV) serotypes as vectors to deliver a gene that expresses AQP1. Aquaporin-1 is a pore protein that selectively channels water molecules across the cell membrane. Using animal models that mimic the dry mouth symptoms (xerostomia) of Sjögren’s, it was discovered that there was restoration of fluid movement upon expression of AQP1. This potentially represents a long-term treatment for restoring exocrine gland function in Sjögren’s patients where salivary gland activity is significantly reduced.

The prospective Start-Up Exclusive Evaluation Option License Agreement will be royalty bearing and will comply with the terms and conditions of 35 U.S.C. 209 and 37 CFR part 404. The prospective Start-Up Exclusive Evaluation Option License Agreement and a subsequent Start-Up Exclusive Patent License Agreement may be granted unless the NIH receives, within fifteen (15) days from the date of this published notice, written evidence and argument that establishes that the grant

of the license would not be consistent with the requirements of 35 U.S.C. 209 and 37 CFR part 404.

Complete applications for a license in the prospective field of use that are filed in response to this Notice will be treated as objections to the grant of the contemplated Start-Up Exclusive Evaluation Option License Agreement. Comments and objections submitted in response to this Notice will not be made available for public inspection, and, to the extent permitted by law, will not be released under the Freedom of Information Act, 5 U.S.C. 552.

Dated: July 7, 2014.
Richard U. Rodriguez,
Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. 2014-16030 Filed 7-8-14; 8:45 am]

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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.

SUPPLEMENTARY INFORMATION:
Technology descriptions follow.

Interactive Clinical Protocol Services Software

Description of Technology: The invention pertains to a C/C++ and C sharp application toolkit named (Interactive Protocol Services) iPS that loads into the Allscripts HealthCare System as a Dynamic Link Library (DLL). The application provides users with a GUI that opens into a window of one of the SCM's tabs. The toolkit could be rendered compatible with any off-the-shelf healthcare system that allows loading library files. The toolkit provides healthcare professionals with a custom structure language to be used in designing customized layouts and accessing data sources within the patient care. This custom structure language is provided to iPS during the COTS (e.g., SCM) application startup process or during an interface communication transaction. Usually, the custom structured language or design layout is stored in the COTS application database system and is retrieved during the startup process of iPS. The custom structure language instructs iPS in how to build and manipulate defined User Control Widgets through properties. These defined User Control Widgets are created in object pairs. These object pairs can be accessible through the iPS application/DLL. iPS also contains a nested list of layout controls that place the User Control Widgets at certain coordinates on the display screen. Each User Control Widget contains code events that allow it to respond to user-defined events, actions, web commands and SQL procedure calls.

Potential Commercial Applications:

- COTS healthcare system.
- Medical/hospital information systems.

Competitive Advantages:

- Customized views.
- Integrates into existing management tool libraries.

Development Stage:

- Early-stage.
- Prototype.

Inventor: Steven D. Moore (NIH-CC).

Intellectual Property: HHS Reference No. E-172-2014/0—Software. Patent protection is not being pursued for this technology.

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

Collaborative Research Opportunity: The NIH Clinical Center is seeking statements of capability or interest from

parties interested in collaborative research to further develop, evaluate or commercialize Interactive Clinical Protocol Services Software. For collaboration opportunities, please contact Eric Cole at colee@cc.nih.gov or 301-451-4430.

Non-Contact Total Emission Detection Methods for Multiphoton Microscopy: Improved Image Fidelity and Biological Sample Analysis

Description of Technology: The technology offered for licensing and for further development is in the field of multiphoton microscopy (MPM). More specifically, the invention pertains to optical designs that can enhance and extend the capabilities of MPM in spectral imaging of biological samples. The unique design of the light collection and the detection optics maximizes the collection of emitted light, thus increasing the signal and hence the signal-to-noise ratio (SNR). Improvement in image fidelity will result in improved analysis of biological samples and thus will favorably impact medical research and possibly clinical diagnosis. The present technology is a further improvement on the TED (Total Emission Detection) technology, first disclosed by Dr. Robert Balaban et al. at the NIH in 2006 and claimed in US Patent 7,667,210 (issued February 23, 2010). The earlier NIH TED technology proposed an optical design based on enveloping the entirety of a small sample in a parabolic mirror/condenser combination so light emanated by a sample in all directions is redirected to the detector. The present technology further expands the capabilities of TED as its unique design employing parabolic, toric and conic mirrors ensures maximum light collection from large samples in cases where there is only access to one side of the tissues (e.g., in vivo or ex vivo). This is accomplished by the redirection of all attainable light (i.e., light escaping the tissue or a whole animal in the epi and sideway directions) to the detector.

Potential Commercial Applications:

- Tissue and cell analysis in biomedical research.
- Potential applications in clinical diagnostics.

Competitive Advantages:

- Increased signal-to-noise ratio.
- Enhanced image resolution due to SNR.
- Improved analytical capabilities.
- Non-contact.
- May readily be adaptable to commercial microscopes.

Development Stage:

- In vitro data available.
- Prototype.

Inventors: Jay R. Knutson, Christian A. Combs, Robert S. Balaban (all of NHLBI).

Publications:

1. Combs CA, et al. Optimization of multiphoton excitation microscopy by total emission detection using a parabolic light reflector. *J Microsc.* 2007 Dec;228(Pt3):330-7. [PMID 18045327]
2. Combs CA, et al. Compact non-contact total emission detection for in vivo multiphoton excitation microscopy. *J Microsc.* 2014 Feb;253(2):83-92. [PMID 24251437]
3. Combs CA, et al. Optimizing multiphoton fluorescence microscopy light collection from living tissue by noncontact total emission detection (epiTED). *J Microsc.* 2011 Feb;241(2):153-61. [PMID 21118209]

Intellectual Property: HHS Reference No. E-236-2009/0—

- US Provisional Patent Application 61/224,772 filed July 10, 2009.
- US Patent 8,759,792 issued June 24, 2014.
- European Patent Application 10797972.6 filed July 12, 2010.

Related Technology: HHS Reference No. E-257-2005/0—US Patent 7,667,210 issued February 23, 2010.

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

Collaborative Research Opportunity: The NHLBI Laboratory of Molecular Biophysics is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate, or commercialize an enhanced method of multiphoton microscopy that is suitable for the spectral imaging of biological samples. Please contact Brian W. Bailey, Ph.D. at bbailey@mail.nih.gov for more information.

Dated: July 7, 2014.

Richard U. Rodriguez,

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

[FR Doc. 2014-16029 Filed 7-8-14; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Center for Scientific Review; Notice of Closed Meetings

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