ESTIMATED ANNUALIZED BURDEN HOURS—Continued

	Type of respondent	Number of respondents	Number of responses per respondent	Average time per response (in hours)	Total annual burden hour
Total	150	150		450	

Dated: May 11, 2021.

Cesar E. Perez-Gonzalez,

Training Director, National Eye Institute, National Institutes of Health.

[FR Doc. 2021–10820 Filed 5–21–21; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Heart, Lung, and Blood Institute; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the National Heart, Lung, and Blood Advisory Council, June 08, 2021, 10:00 a.m. to June 08, 2021, 05:00 p.m., NIH, Rockledge 1, 6705 Rockledge Dr, Bethesda, MD 20892 which was published n the **Federal Register** on May 05, 2021, 294922.

The notice is amended to change the time of the meeting's public portion to 12:00 p.m. through 5:00 p.m. The meeting is partially closed to the public.

Dated: May 19, 2021.

David W. Freeman,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2021–10894 Filed 5–21–21; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; 30 Day Comment Request; The Impact of Clinical Research Training and Medical Education at the Clinical Center on Physician Careers in Academia and Clinical Research (Clinical Center)

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the Clinical Center, 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.

DATES: Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to *www.reginfo.gov/public/do/PRAMain.* Find this particular information collection by selecting ''Currently under 30-day Review—Open for Public Comments'' or by using the search function.

FOR FURTHER INFORMATION CONTACT: To obtain a copy of the data collection plans and instruments, contact: Robert M. Lembo, MD, Office of Clinical Research Training and Medical Education, NIH Clinical Center, National Institutes of Health, 10 Center Drive, Room 1N252C, Bethesda, MD 20892–1158, or call non-toll-free number (301) 496–2636, or Email your request, including your address to: *robert.lembo@nih.gov.* Formal requests for additional plans and instruments must be requested in writing.

SUPPLEMENTARY INFORMATION: This proposed information collection was previously published in the **Federal Register** February 25, 2021 on pages 11550–11551 (86 FR 11550) and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The Clinical Center, National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

In compliance with Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below.

Proposed Collection: The Impact of Clinical Research Training and Medical Education at the Clinical Center on Physician Careers in Academia and Clinical Research, 0925–0602.

Expiration Date: 11/30/2022, REVISION, Clinical Center (CC), National Institutes of Health (NIH).

Need and Use of Information Collection: The information collected will allow continued assessment of the value of the training provided by the Office of Clinical Research Training and Medical Education (OCRTME) at the NIH Clinical Center and the extent to which this training promotes (a) patient safety; (b) research productivity and independence; and (c) future career development within clinical, translational, and academic research settings. The information received from respondents is presented to, evaluated by, and incorporated into the ongoing operational improvement efforts of the Director of the Office of Clinical Research Training and Education, and the Chief Executive Officer of the NIH Clinical Center. This information will enable the ongoing operational improvement efforts of the OCRTME and its commitment to providing clinical research training and medical education of the highest quality to each trainee.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours 478.

ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Type of respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hours requested
CRTP/MRSP Alumni Survey	Post Doctoral Students	704	1	20/60	235

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Form name	Type of respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hours requested
Summer Internship Program Alumni Survey	Pre Doctoral Students	280	1	20/60	93
Graduate Medical Education Graduate Survey	Physicians	350	1	20/60	117
Clinical Electives Program 1 Year Alumni Surveys.	Physicians	100	1	20/60	33
Total			1,434		478

Dated: May 11, 2021.

Frederick D. Vorck, Jr.,

Project Clearance Liaison, NIH Clinical Center, National Institutes of Health.

[FR Doc. 2021–10815 Filed 5–21–21; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of an Exclusive Patent License: P2Y14 Receptor Antagonists To Treat Kidney and Lung Inflammation

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: National Institute of Diabetes and Digestive and Kidney Diseases, an institute of the National Institutes of Health, Department of Health and Human Services, is contemplating the grant of an Exclusive Patent License to practice the inventions embodied in the Patents and Patent Applications listed in the **SUPPLEMENTARY INFORMATION** section of this notice to Kantum Pharma Inc. (Kantum), located in Boston, Massachussets.

DATES: Only written comments and/or applications for a license which are received by the National Institute of Diabetes and Digestive and Kidney Diseases' Technology Advancement Office on or before June 8, 2021 will be considered.

ADDRESSES: Requests for copies of the patent application, inquiries, and comments relating to the contemplated Exclusive Patent License should be directed to: Betty B. Tong, Ph.D., Senior Licensing and Patenting Manager, NIDDK Technology Advancement Office, Telephone: 301–451–7836; Email: *tongb@mail.nih.gov.*

SUPPLEMENTARY INFORMATION:

Intellectual Property

1. HHS Ref. No.: E–213–2015–0; Entitled: Triazole Derivatives as P2Y14 Receptor Antagonists; Inventors: Kenneth Jacobson, Ph.D. *et al*
   (i) U.S. Patent No. 10,683,277; HHS Ref. No.: E–213–2015–0–US–05; Issue *Date:* June 16, 2020
   (ii) EP Patent Application 16774825.0; HHS Ref. No.: E–213–2015–0–EP–04; Filing *Date:* April 19, 2018
   (iii) Chinese Patent No. ZL 201680064441.5; HHS Ref. No.: E–213–2015–0–CN–03; Issue *Date:* March 19, 2021
2. HHS Reference No. E–028–2018–1; Entitled: P2Y14 Receptor Antagonists Containing a Biaryl Core; Inventors: Kenneth Jacobson, Ph.D. *et al*
   (i) Australian Patent Application 2019218256; HHS Ref. No.: E–028–2018–1–AU–02; Filing *Date:* July 28, 2020
   (ii) Canadian Patent Application 3,090,788; HHS Ref. No.: E–028–2018–1–CA–03; Filing *Date:* August 7, 2020
   (iii) Chinese Patent Application 201980012696.0; HHS Ref. No.: E–028–2018–1–CN–04; Filing *Date:* August 10, 2020
   (iv) EP Patent Application 19707559.1; HHS Ref. No.: E–028–2018–1–EP–05; Filing *Date:* July 20, 2020
   (v) Japanese Patent Application 2020–542580; HHS Ref. No.: E–028–2018–1–JP–06; Filing *Date:* August 6, 2020
   (vi) U.S. Patent Application 16/967,177; HHS Ref. No.: E–028–2018–1–US–07; Filing *Date:* August 4, 2020
3. HHS Reference No. E–051–2021–0; Entitled: Heterocyclic P2Y14 Receptor Antagonists; Inventors: Kenneth Jacobson, Ph.D. *et al*
   (i) U.S. Provisional Patent Application No.: 62/643,015; HHS Ref. No.: E–051–2021–0–US–01; Filing *Date:* January 18, 2021

The patent rights in these inventions have been assigned to the government of the United States of America.

The prospective exclusive license' territory may be worldwide and the field of use may be limited to ''Commercial development of P2Y14 receptor antagonists for the prevention and treatment of conditions or diseases associated with inflammation in the kidney and lung in humans, as claimed in the Licensed Patent Rights''.

The inventions pertain to the composition and use of selective antagonists for the P2Y14 receptor, a purinergic G protein-coupled receptor that is activated by extracellular UDP-glucose and related nucleotides. These P2Y14R antagonists can be developed as potential drug for the treatment of inflammation and other disorders associated with P2Y14R regulated functions.

This notice is made in accordance with 35 U.S.C. 209 and 37 CFR part 404. The prospective exclusive license will be royalty bearing, and the prospective exclusive license may be granted unless within fifteen (15) days from the date of this published notice, the National Institute of Diabetes and Digestive and Kidney Diseases receives 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.

In response to this Notice, the public may file comments or objections. Comments and objections, other than those in the form of a license application, will not be treated confidentially, and may be made publicly available. License applications submitted in response to this Notice will be presumed to contain business confidential information and any release of information in these license applications will be made only as required and upon a request under the *Freedom of Information Act,* 5 U.S.C. 552.