ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Annual burden hours
ANA Project Outcome Assessment Survey	85	1	6	510

Comments: The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Authority: 42 U.S.C. 2992.

Mary C. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2024–25139 Filed 10–29–24; 8:45 am]

BILLING CODE 4184–34–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government Owned Inventions Available for Licensing/Collaboration: Using Artificial Intelligence To Diagnose Uveitis

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Eye Institute seeks (NEI), an institute of the National Institutes of Health (NIH), Department of Health and Human Services (HHS), is giving notice of the licensing and collaboration opportunity for the inventions listed below, which are owned by an agency of the U.S. Government and are available for licensing/collaboration in the U.S. to achieve expeditious commercialization of results of federally-funded research and development.

FOR FURTHER INFORMATION CONTACT: Inquiries related to this licensing/collaboration opportunity should be directed to: Hiba Alsaffar, Ph.D., Technology Transfer Manager, NCI, Technology Transfer Center, Email: *hiba.alsaffar@nih.gov* or Phone: 240–276–7489.

SUPPLEMENTARY INFORMATION: Uveitis is caused by inflammation in the eye that can cause pain and reduce vision. The rate of uveitis in the United States is 1 in every 200 people with eye-related irritation. Permanent symptoms such as vision loss can occur if untreated. Therefore, early detection is crucial. In certain uveitis cases, fluorescein angiography (FA) is essential for the diagnosis and management due to its ability to display retinal vascular leakage (RVL). Although proven to be critical in diagnosing and assessing severity, FA is invasive and side effects have been reported. Additionally, the procedure is time-consuming and imposes economic burdens to patients, physicians and payors. Scientists at the NEI have developed a deep learning tool to non-invasively detect RVL using ultrawide-field color fundus photos. This algorithm identifies fundus images with and without RVL with high accuracy (79%) and sensitivity (85%). Compared to the current gold standard of assessing RVL (clinician interpretation), this deep learning tool provides an improved method of detecting RVL for patients with uveitis.

This Notice is in accordance with 35 U.S.C. 209 and 37 CFR part 404.

NIH Reference Number: E–005–2023–0.

Potential Commercial Applications:

- Diagnostic tool to predict uveitis.
- Add-on to current color fundus imaging modalities.

Competitive Advantages:

- Greater accuracy and sensitivity versus current gold standard to assess RVL (clinician assessment).
- Deep learning tool to assess RVL.
- Deep learning to assess ultrawide-field color fundus images and assess RVL.

Publication: Young LH, et al. Automated Detection of Vascular Leakage in Fluorescein Angiography—A Proof of Concept. (PMID 35877095).

Patent Status: US Provisional Application 65/599,446 filed on November 15, 2023.

Development Stage: Prototype.

Therapeutic Area(s): Eye, Ear, Nose, Throat.

Dated: October 24, 2024.

Richard U. Rodriguez,

Associate Director, Technology Transfer Center, National Cancer Institute.

[FR Doc. 2024–25162 Filed 10–29–24; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

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

Pursuant to section 1009 of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Heart, Lung, and Blood Initial Review Group; NHLBI Institutional Training Mechanism Study Section.

Date: December 6, 2024.

Time: 10 a.m. to 6 p.m.

Agenda: To review and evaluate grant applications.

Address: National Institutes of Health, Rockledge I, 6705 Rockledge Drive, Bethesda, MD 20892.

Meeting Format: Virtual Meeting.

Contact Person: Michael P. Reilly, Ph.D., Scientific Review Officer, Office of Scientific Review/DERA, National Heart, Lung, and Blood Institute, National Institutes of Health, 6705 Rockledge Drive, Room 208–Z, Bethesda, MD 20892, 301–827–7975, email: *reillymp@nhlbi.nih.gov.*

(Catalogue of Federal Domestic Assistance Program Nos. 93.233, National Center for Sleep Disorders Research; 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; 93.839, Blood Diseases and Resources Research, National Institutes of Health, HHS)