In addition, CMS has physical safeguards in place to reduce the exposure of computer equipment and thus achieve an optimum level of protection and security for the IRIS. For computerized records, safeguards have been established in accordance with the Department of Health and Human Services (HHS) standards and National Institute of Standards and Technology guidelines, e.g., security codes will be used, limiting access to authorized personnel. Systems securities are established in accordance with the Department of Health and Human Services (HHS), Information Resource Management Circular #10, Automated Information Systems Security Program; CMS Automated Information Systems Guide, Systems Securities Policies, and OMB Circular No. A-130 (revised), Appendix III.

#### RETENTION AND DISPOSAL:

Records are maintained in a secure storage area with identifiers. Disposal occurs three years from the last action on the hospital's cost report, and should be coordinated with disposal of the reports.

#### SYSTEM MANAGER AND ADDRESS:

Director, Division of Financial Integrity, Office of Financial Management, CMS, 7500 Security Boulevard, C3–14–00, Baltimore, Maryland 21244–1850.

### NOTIFICATION PROCEDURE:

For purpose of access, the subject individual should write to the systems manager who will require the system name, SSN, address, date of birth, sex, and for verification purposes, the subject individual's name (woman's maiden name, if applicable). Furnishing the SSN is voluntary, but it may make searching for a record easier and prevent delay.

#### RECORD ACCESS PROCEDURE:

For purpose of access, use the same procedures outlined in Notification Procedures above. Requestors should also reasonably specify the record contents being sought. (These procedures are in accordance with Department regulation 45 CFR 5b.5(a)(2).)

### CONTESTING RECORD PROCEDURES:

The subject individual should contact the system manager named above, and reasonably identify the record and specify the information to be contested. State the corrective action sought and the reasons for the correction with supporting justification. (These procedures are in accordance with Department regulation 45 CFR 5b.7.)

#### **RECORD SOURCE CATEGORIES:**

Data for this system is collected from IRIS diskettes as transmitted by the hospitals.

### SYSTEMS EXEMPTED FROM CERTAIN PROVISIONS OF THE ACT:

None

[FR Doc. 02–18169 Filed 7–22–02; 8:45 am] BILLING CODE 4120–03–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. 02N-0055]

Agency Information Collection Activities; Announcement of OMB Approval; Infant Formula Recall Regulations

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing that a collection of information entitled "Infant Formula Recall Regulations" has been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995.

### FOR FURTHER INFORMATION CONTACT:

Peggy Schlosburg, Office of Information Resources Management (HFA–250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–1223.

**SUPPLEMENTARY INFORMATION:** In the Federal Register of June 6, 2002 (67 FR 39011), the agency announced that the proposed information collection had been submitted to OMB for review and clearance under 44 U.S.C. 3507. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. OMB has now approved the information collection and has assigned OMB control number 0910-0188. The approval expires on July 31, 2005. A copy of the supporting statement for this information collection is available on the Internet at http://www.fda.gov/ ohrms/dockets.

Dated: July 17, 2002.

#### Margaret M. Dotzel,

Associate Commissioner for Policy. [FR Doc. 02–18557 Filed 7–22–02; 8:45 am] BILLING CODE 4160–01–S

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### **National Institutes of Health**

# Government-Owned Inventions; Availability for Licensing

**AGENCY:** National Institutes of Health, Public Health Service, DHHS.

**ACTION:** Notice.

summary: The inventions listed below are owned by agencies 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.

# Methods for Treating Cancer in Humans Using IL-21

Patrick Hwu, M.D. and Gang Wang, Ph.D. (NCI)

U.S. Patent Application No. 60/368,438 filed on March 27, 2002

Licensing Contact: Jonathan Dixon; 301/ 496–7056 ext. 270; e-mail: dixonj@od.nih.gov

The present invention discloses the use of IL–21 for cancer therapy and/or cancer prevention. When compared to similar cytokines, IL–21 has shown substantial anticancer activity and reduced toxicity in murine models.

IL—21 belongs to the class I family of cytokines and is closely related to IL—2 and IL—15. Some cancer patients have shown significant response to administration of IL—2. However, IL—2 has also been associated with severe toxicity leading to a variety of undesirable side effects. This invention attempts to resolve the toxicity concerns and presents a new therapy for cancer prevention and treatment.

# Amine Modified Random Primers for Microarray Detection

Charles Xiang and Michael J. Brownstein (NIMH) DHHS Reference No. E–098–01/1 filed 11 Apr 2002