

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### National Advisory Council on the National Health Service Corps; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), notice is hereby given of the following meeting:

*Name:* National Advisory Council on the National Health Service Corps.

*Dates and Times:* September 6, 2007, 2 p.m.–5 p.m.; September 7, 2007, 8:30 a.m.–5 p.m.; and September 8, 2007, 9 a.m.–5 p.m.

*Place:* Hilton Washington DC/Rockville Executive Meeting Center, 1750 Rockville Pike, Rockville, Maryland 20852.

*Status:* The meeting will be open to the public.

*Agenda:* The Council will be developing recommendations for the National Health Service Corps Program. Discussions will be focused on the impact of these recommendations on the program participants, communities served by these clinicians and in the administration of the program.

*For Further Information Contact:* Tira Patterson, Bureau of Clinician Recruitment and Service, Health Resources and Services Administration, Parklawn Building, Room 8A-55, 5600 Fishers Lane, Rockville, MD 20857; e-mail: [TPatterson@hrsa.gov](mailto:TPatterson@hrsa.gov); telephone: (301) 594-4140.

Dated: July 27, 2007.

**Alexandra Huttinger,**

*Acting Director, Division of Policy Review and Coordination.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Advisory Committee on Training in Primary Care Medicine and Dentistry; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), notice is hereby given of the following meeting:

*Name:* Advisory Committee on Training in Primary Care Medicine and Dentistry.

*Date and Time:* September 6, 2007, 8:30 a.m.—4:30 p.m. and September 7, 2007, 8 a.m.—2 p.m.

*Place:* Hilton Washington, DC/Rockville Executive Meeting Center, 1750 Rockville Pike, Rockville, Maryland 20852.

*Status:* The meeting will be open to the public.

*Purpose:* The Advisory Committee provides advice and recommendations on a broad range of issues dealing with programs and activities authorized under section 747 of the Public Health Service Act as amended by The Health Professions Education Partnership Act of 1998, Public Law 105-392. At this meeting the Advisory Committee will work on its seventh report on the topic of primary care providing a medical/dental home within the health care system. The report will be submitted to Congress and to the Secretary of the Department of Health and Human Services.

*Agenda:* The meeting on Thursday, September 6 will begin with opening comments from the Chair of the Advisory Committee and introductory remarks from senior management of the Health Resources and Services Administration. Several speakers will address the topic of patient-centered medical/dental home as a model for health care and training requirements for primary care practitioners. An opportunity will be provided for professional organizations to give comment on the topic. In both small groups and in the plenary session, the Advisory Committee will work on various parts of the report. An opportunity will be provided for public comment.

On Friday, September 7, the Advisory Committee will continue work on the seventh report in small groups and in the plenary session. The Advisory Committee will plan next steps in the report preparation process. An opportunity will be provided for public comment.

#### FOR FURTHER INFORMATION CONTACT:

Anyone interested in obtaining a roster of members or other relevant information should write or contact Jerilyn K. Glass, M.D., Ph.D., Division of Medicine and Dentistry, Bureau of Health Professions, Health Resources and Services Administration, Room 9A-27, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 443-6785. The Web address for information on the Advisory Committee is <http://bhpr.hrsa.gov/medicine-dentistry/actpcmd>.

Dated: July 26, 2007.

**Alexandra Huttinger,**

*Acting Director, Division of Policy Review and Coordination.*

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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, Public Health Service, 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. 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.

#### Development of Dengue Virus Type 3 Vaccine Candidates Containing Either 1) Nucleotide Deletions in the 3'-UTR of the Genome Consisting of More Than 30 Contiguous Nucleotides in One or Multiple Regions, or 2) a 3'-UTR Derived From DEN4 and Containing the A30 Nucleotide Deletion

**Description of Technology:** The disease burden associated with dengue virus infection has increased over the past several decades in the tropical and semi-tropical regions of the world, where over 2 billion people live at risk of dengue infection. Annually, there are an estimated fifty (50) to one hundred (100) million cases of dengue fever, making development of an effective vaccine a priority. In addition, there is a need for a "travelers vaccine" to protect those visiting dengue virus endemic areas, similar in scope to other currently available "travelers vaccines", such as hepatitis A vaccine.

The previously identified Δ30 attenuating mutation, created in each dengue virus serotype by the removal of 30 homologous nucleotides from the 3'-UTR, is capable of attenuating wild-type strains of dengue virus type 1 (DEN1), type 4 (DEN4) and to a limited extent type 2 (DEN2). These DEN1Δ30 and