advisory committee information line to learn about possible modifications before coming to the meeting.

SUPPLEMENTARY INFORMATION:

Agenda: The meeting presentations will be heard, viewed, captioned, and recorded through an online teleconferencing platform. On October 6, 2022, the committee will meet in open session to discuss the Strain Selection for the Influenza Virus Vaccines for the 2023 Southern Hemisphere Influenza Season.

FDA intends to make background material available to the public no later than 2 business days before the meeting. If FDA is unable to post the background material on its website prior to the meeting, the background material will be made publicly available at the time of the advisory committee meeting, and the background material will be posted on FDA's website after the meeting. Background material is available at *https://www.fda.gov/AdvisoryCommittees/Calendar/default.htm*. Scroll down to the appropriate advisory committee meeting link. The meeting will include slide presentations with audio components to allow the presentation of materials in a manner that most closely resembles an in-person advisory committee meeting.

Procedure: On October 6, 2022, from 8:30 a.m. to 12:40 p.m. EasternTime, the meeting is open to the public. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. All electronic and written submissions submitted to the Docket (see **ADDRESSES**) on or before September 28, 2022, will be provided to the committee. Comments received after September 28, 2022, and by October 5, 2022, will be taken into consideration by FDA. Oral presentations from the public will be scheduled between approximately 10:40 a.m. and 11:40 a.m. EasternTime. Those individuals interested in making formal oral presentations should notify the contact person and submit a brief statement of the general nature of the evidence or arguments they wish to present, along with their names, email addresses, and direct contact phone numbers of proposed participants, on or before 12 p.m. Eastern Time on September 21, 2022. Time allotted for each presentation may be limited. If the number of registrants requesting to speak is greater than can be reasonably accommodated during the scheduled open public hearing session, FDA may conduct a lottery to determine the speakers for the scheduled open public hearing session. The contact person will notify interested persons regarding their request to speak by 6 p.m. September 22, 2022.

For press inquiries, please contact the Office of Media Affairs at *fdaoma@fda.hhs.gov* or 301–796–4540.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with disabilities. If you require accommodations due to a disability, please contact Sussan Paydar or Prabhakara Atreya (see **FOR FURTHER INFORMATION CONTACT**) at least 7 days in advance of the meeting.

FDA is committed to the orderly conduct of its advisory committee meetings. Please visit our website at *https://www.fda.gov/AdvisoryCommittees/AboutAdvisoryCommittees/ucm111462.htm* for procedures on public conduct during advisory committee meetings.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: August 15, 2022.

Lauren K. Roth,

Associate Commissioner for Policy.

[FR Doc. 2022–17784 Filed 8–17–22; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director, National Institutes of Health; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the Council of Councils, September 8, 2022, 10:30 a.m. to September 9, 2022, 03:00 p.m., virtual meeting which was published in the **Federal Register** on, August 8, 2022, FR Doc 2022–16892, 87 FR 48189.

The notice is being amended to change the start and end times of the open portion of the meeting on September 8, 2022 from 10:30 a.m. to 10:15 a.m. and end time 3:00 p.m. to 3:30 p.m. and change the end time of the open portion of the meeting on September 9, 2022 from 3:10 p.m. to 3:15 p.m.

Dated: August 12, 2022.

David W Freeman,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2022–17726 Filed 8–17–22; 8:45 am]

BILLING CODE 4140–01–P

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 invention listed below is owned by an agency of the U.S. Government and is available for licensing 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: Dawn Taylor-Mulneix at 301–767–5189, or *dawn.taylor-mulneix@nih.gov.* Licensing information may be obtained by communicating with the Technology Transfer and Intellectual Property Office, National Institute of Allergy and Infectious Diseases, 5601 Fishers Lane, Rockville, MD 20852; tel. 301–496–2644. A signed Confidential Disclosure Agreement will be required to receive copies of unpublished information related to the invention.

SUPPLEMENTARY INFORMATION:

SARS–CoV–2 Infection of Human Lung Epithelial Cells Triggers a Cell-Mediated Acute Fibrin Fibrosis

Description of Technology

Scientists at National Institute of Allergy and Infectious Diseases (NIAID) have developed a method of treatment for virus-induced lung fibrosis using nebulized thrombin inhibitors. Since March 2020, the World Health Organization (WHO) estimates that 564 million people have been infected with SARS–CoV–2 world-wide. Lung fibrosis is a major factor associated with SARS–CoV–2 infections and can contribute to mortality. Additionally, severe SARS–CoV–2 cases can result in long-term pulmonary disease due to lung fibrosis. At present, attempts to treat lung fibrosis developed during a SARS–CoV–2 infection using intravenous heparin have been unsuccessful.

NIAID scientists have discovered a previously unknown acute fibrosis mechanism mediated by SARS–CoV–2 infected primary lung epithelium, and have developed an innovative method of treating lung fibrosis using nebulized thrombin inhibitors.

This technology is available for licensing for commercial development