

Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Dr. John Gohagan, Chief, Early Detection Research Group, National Cancer Institute, NIH, EPN Building, Suite 3100, 6130 Executive Boulevard, MSC7346, Bethesda, MD 20892-7346-, or call non-toll-free number (301) 496-3982 or E-mail your request, including your address to: JG72P@NIH.GOV.

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

Dated: May 21, 2002.

**Reesa Nichols,**

*NCI Project Clearance Liaison.*

[FR Doc. 02-13276 Filed 5-24-02; 8:45 am]

**BILLING CODE 4140-01-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Submission for OMB Review; Comment Request; Health Information National Trends Survey (HINTS)

**SUMMARY:** Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Cancer Institute (NCI), 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. This proposed information collection was previously published in

the **Federal Register** on December 21, 2000, pages 80444-80445, 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 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.

#### Proposed Collection

**Title:** Health Information National Trends Survey (HINTS). **Type of Information Collection Request:** NEW. **Need and Use of Information Collection:** As a result of the ongoing changes in the communication environment, there is an unprecedented opportunity to communicate information about cancer and other health topics to the general public. Developing appropriate messages for the public about cancer prevention, detection, diagnosis, treatment, and survivorship requires an understanding of individuals' sources and access to cancer-related information, their knowledge about cancer and other health information, or the factors that enhance or may hinder access, use, or knowledge of health information.

The HINTS is a new telephone survey designed to provide nationally representative, population-based standardized data on health knowledge and health information for the United States. The survey will establish important baseline data about cancer communication practices, preferences

for information, and cancer knowledge across the country. This survey will provide data on the public's perceived needs for cancer information, sources and access to health information (e.g., health care providers, Internet, mass media), current knowledge and understanding about cancer prevention and detection, and the barriers to more effectively understanding and utilizing cancer-related information. The HINTS is intended to be conducted every 2 years, and data will be used to measure progress in improving cancer knowledge and communication among the general public. The survey will be administered to one sample adult in 8,000 households, and is intended to have an adequate sample size to produce stable estimates for racial and ethnic minority populations.

Data from this survey are essential for NCI to develop improved cancer-related messages and materials and to tailor these messages for different audiences, especially for cancer prevention and detection. Data will be used to help selecting the best means of communicating cancer-related messages to different audiences (communication channels) to reach the diverse audiences in the United States. Finally, information obtained in this survey data will be used to identify research gaps and to guide the direction and decisions about NCI's research efforts in health promotion and health communication.

**Frequency of response:** One-time.

**Affected public:** Individuals or households. **Type of Respondents:** U.S. adults. The annual reporting burden is as follows:

Type of respondent	Estimated number of respondents	Frequency of response	Average hours per response	Annual hour burden
Adult respondents to Dress Rehearsal Interview .....	150	1	.4509	68
Adult respondents to Main Study Household Screener .....	11,200	1	.0334	374
Adult respondents to Main Study Sample Person Interview .....	8,000	1	.4509	3607
<b>Total</b> .....	.....	.....	.....	<b>4049</b>

There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

#### Request for Comments

Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proposed performance of the functions of the agency, including whether the information shall have practical utility; (2) The accuracy of the

estimate of the burden of the proposed collection of information including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

#### Direct Comments to OMB

Written comments and/or suggestions regarding the item(s) contained in the notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact David E.

Nelson, M.D., M.P.H., Project Officer, National Cancer Institute, NIH, 6130 Executive Boulevard, EPN 4068, MSC 7365, Bethesda, Maryland 20852-7365, or call non-toll-free number (301) 594-9904, or FAX your request to (301) 480-2087, or E-mail your request, including your address, to [dn83r@nih.gov](mailto:dn83r@nih.gov).

**Comments Due Date:** Comments regarding this information collection are best assured of having their full effect if received within 30 days of this publication.

Dated: May 21, 2002.

**Reesa L. Nichols,**

*NCI Project Clearance Liaison.*

[FR Doc. 02-13277 Filed 5-24-02; 8:45 am]

**BILLING CODE 4140-01-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Opportunity for Cooperative Research and Development Agreement(s) (CRADAs) and/or License(s) for the Development and Commercialization of Nitric Oxide-Releasing Drugs and Biomaterials

**AGENCY:** National Institutes of Health, PHS, DHHS.

**ACTION:** Notice.

**SUMMARY:** The National Cancer Institute (NCI) seeks Licensee(s) and/or Cooperative Research and Development Agreement (CRADA) Collaborator(s) for the development and commercialization of Nitric Oxide (NO)-Releasing Drugs and Biomaterials as embodied in a variety of recent NCI publications, as well as, in the patents and patent applications listed below.

**DATES:** Confidential CRADA proposal summaries, preferably one page or less, and a signed Confidential Disclosure Agreement (CDA) (<http://ttb.nci.nih.gov/forms.html>) must be submitted to the NCI Technology Transfer Branch (TTB) on or before June 24, 2002, to take full advantage of this opportunity. CRADA proposal summaries submitted thereafter may be considered if a suitable CRADA Collaborator is not selected from among the timely responses. Guidelines for preparing a full CRADA proposal will be communicated shortly thereafter to all respondents with whom initial confidential discussions will have established sufficient mutual interest.

Responders interested in licensing the invention(s) should submit an

"Application for License to Public Health Service Inventions". The licensing application, model licenses

and other information on licensing NIH technologies can be found at <http://ott.od.nih.gov> under Intramural Licensing Program.

**ADDRESSES:** CRADA information may be obtained by contacting Dr. Charmaine Richman, Technology Transfer Specialist, Technology Transfer Branch, National Cancer Institute, 1003 West Seventh Street, Suite 500, Frederick, Maryland 21701; telephone: 301-846-5465; fax 301-846-6820; e-mail: [richmanc@mail.nih.gov](mailto:richmanc@mail.nih.gov).

Licensing information and copies of the issued U.S. patents referenced below may be obtained by contacting Dr. Norbert Pontzer, Technology Licensing Specialist, Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852-3804; telephone: 301-496-7057 ext. 284; fax 301-402-0220; e-mail:

[PontzerN@od.nih.gov](mailto:PontzerN@od.nih.gov). A signed Confidential Disclosure Agreement will be required to receive copies of patent applications that have not yet issued.

Scientific inquiries may be directed to Dr. Larry Keefer, National Cancer Institute/Center for Cancer Research (CCR) at Frederick, Building 538, Room 205F, Frederick, MD 21702-1201; telephone : 301-846-1467; e-mail: [keefe@ncifcrf.gov](mailto:keefe@ncifcrf.gov).

**SUPPLEMENTARY INFORMATION:** NIH scientists are developing a variety of novel techniques for delivering nitric oxide (NO) to specific organs and cell types for therapeutic benefit. Methods for targeting lung, liver, and other tissues have been introduced to the literature, as have NO-releasing proteins and insoluble polymers. The compounds and drug delivery strategies developed thus far have shown promising activities that have been demonstrated in relevant experimental animal models. These include inhibition of thrombosis, treatment of vasospasm, relief of respiratory distress, protection against toxic liver injury, radiosensitization of hypoxic tumors, correction of genitourinary tract dysfunction, antimicrobial effects, protection against ischemia-reperfusion injury and whole-body radiation, and preservation of organ transplants. Inventions described in the patents are available for either exclusive or non-exclusive licensing in accordance with 35 U.S.C. 207 and 37 CFR 404.

A Cooperative Research and Development Agreement (CRADA) is the anticipated joint agreement to be entered into with NCI pursuant to the Federal Technology Transfer Act of 1986 and Executive Order 12591 of April 10, 1987, as amended. A CRADA

is an agreement designed to enable certain collaborations between Government laboratories and non-Government laboratories. It is not a grant, and it is not a contract for procurement of goods/services. The NCI is prohibited from transferring funds to a CRADA collaborator. Under a CRADA, NCI can contribute facilities, staff, materials, and expertise. The CRADA Collaborator will have an option to negotiate the terms of an exclusive or nonexclusive commercialization license to subject inventions arising under the CRADA. CRADA applicants should be aware that a license to the above-mentioned patent rights may be necessary in order to commercialize products arising from a CRADA. The expected duration of the CRADA(s) would be for up to five (5) years. The goals of CRADAs include rapid publication of research results and timely commercialization of products, diagnostics, and treatments that result from the research.

#### Nitric Oxide Patents

**Patent Status:** Compositions and uses covered in:

1. Keefer, L.K., Wink, D.A., Dunams, T.M., and Hrabie, J.A.: Stabilized nitric oxide-primary amine complexes useful as cardiovascular agents. U.S. Patent 4,954,526, September 4, 1990.

2. Keefer, L.K., Wink, D.A., Dunams, T.M., and Hrabie, J.A.: Anti-hypertensive compositions of secondary amine-nitric oxide adducts and use thereof. U.S. Patent 5,039,705, August 13, 1991.

3. Keefer, L.K., and Hrabie, J.A.: Complexes of nitric oxides with polyamines. U.S. Patent 5,155,137, October 13, 1992.

4. Diodati, J.G., and Keefer, L.K.: Therapeutic inhibition of platelet aggregation by nucleophile-nitric oxide complexes and derivatives thereof. U.S. Patent 5,185,376, February 9, 1993.

5. Keefer, L.K., Wink, D.A., Dunams, T.M., and Hrabie, J.A.: Anti-hypertensive compositions of secondary amine-nitric oxide adducts and use thereof. U.S. Patent 5,208,233, May 4, 1993 (continuation in part of U.S. Patent 5,039,705).

6. Keefer, L.K., Wink, D.A., Dunams, T.M., and Hrabie, J.A.: Anti-hypertensive compositions and use thereof. U.S. Patent 5,212,204, May 18, 1993.

7. Keefer, L.K., and Hrabie, J.A.: Complexes of nitric oxide with polyamines. U.S. Patent 5,250,550, October 5, 1993 (continuation in part of U.S. Patent 5,155,137).

8. Keefer, L. K., Dunams, T.M., and Saavedra, J.E.: Oxygen-substituted