related to the priority area of Education and Community-Based Programs. Potential applicants may download a copy of *Healthy People 2020,* at *http://www.healthypeople.gov.*

Interested individuals are reminded that the list of eligible health and allied professions is effective for applicants for the 2012–2013 academic year. These priorities will remain in effect until superseded. Applicants who apply for health career categories not listed as priorities during the current scholarship cycle will not be considered for a scholarship award.

Dated: April 4, 2012.

Randy Grinnell,

Deputy Director, Indian Health Service.

[FR Doc. 2012–8517 Filed 4–9–12; 8:45 am]

BILLING CODE 4165–16–P

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.

Nonpathogenic Bacteria, Paenibacillus alvei, Useful as a Natural Biocontrol Agent for Elimination of Food-borne Pathogenic Bacteria

Description of Technology: This newly isolated non-pathogenic bacterial strain (TS–15) has shown the ability kill or inhibit a wide variety of harmful bacteria including many of the most common food-borne pathogens such as *Salmonella, Escherichia, Listeria, Shigella, Enterobacter* and *Staphylococcus.* The TS–15 strain may provide a natural low cost means to help protect the food supply. The strain may be used as a biocontrol agent in the form of a pesticide or pretreatment to soils in which fruits and vegetable are grown. Preventative use of the TS–15 strain in biocontrol measures may prevent many of the millions of illnesses in the U.S. that are caused by food-borne pathogens each year. Such prevention may also reduce the associated costs of treatment for such illnesses. Furthermore, isolation and development of the antibiotic compounds produced by the TS–15 strain may yield useful new compositions to help treat bacterial illness, including infections by some pathogens resistant to standard antibiotics.

Potential Commercial Applications

- Agriculture—pesticide.
- Medicine—antibiotic.

Competitive Advantages: Low cost natural means of prevention of many food-borne bacterial illnesses.

Development Stage: Early-stage.

Inventors: Eric Brown (FDA), Jie Zheng (FDA), and Alex Enurah.

Intellectual Property: HHS Reference No. E–042–2011/0—U.S. Provisional Application No. 61/488,271 filed 20 May 2011.

Licensing Contact: Tedd Fenn; 301–435–5031; Tedd.Fenn@nih.gov.

Collaborative Research Opportunity: The FDA Center for Food Safety and Applied Nutrition is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate or commercialize *Paenibacillus alvei* (TS–15). For collaboration opportunities, please contact Alice Welch at *alice.welch@fda.hhs.gov*.

Glass Capillary Arrays for Calibration, Validation, and Quality Assurance of Quantitative Measurements from Diffusion MRI Applications

Description of Technology: NIH scientists have developed a tool for calibration and quality assurance for diffusion MRI applications. These Glass Capillary Arrays (GCAs) allow reliable means for instrument calibration and data measurement validation of various MRI scanning parameters. A variety of GCA conformations is available, so they have broad utility in MRI applications ranging from material sciences to clinical and biological MRI.

Potential Commercial Applications

- Calibration, quality assurance, and quality control for diffusion MRI applications using physics and mathematics algorithms combined with known GCA properties.
- GCAs come in various diameters and thicknesses, so can be utilized in a wide range of sciences (material and biological).
- Provides known standards for adjustment of various parameters, including magnetic field gradient, magnetic field homogeneity, and radiofrequency pulse.

Competitive Advantages

- Allows sufficient quality assurance and instrument calibration not previously available for advanced diffusion MRI.
- GCAs are non-toxic and biologically and environmentally safe, so can be stored without special permits or requirements.

Development Stage: Prototype.

Inventors: Ferenc Horkey, et al. (NICHD).

Intellectual Property: HHS Reference No. E–202–2010/0—U.S. Provisional Application No. 61/536,032 filed 18 Sep 2011.

Licensing Contact: John Stansberry, Ph.D.; 301–435–5236; *stansbej@mail.nih.gov*.

Diffusion MRI of Beating Hearts and Other Moving Tissues in Live Patients

Description of Technology: Diffusion Tensor Imaging (DTI) is an improved form of Magnetic Resonance Imaging (MRI) that provides microscopic details about tissue structure based on water diffusion. DTI is commonly used to visualize the brain when examining patients with neurological disorders or strokes. Currently, DTI faces technical limitations preventing imaging of moving tissues, such as the beating heart, spinal cord, and base of the brain. The NIH inventors have established an improved method allowing application of DTI to moving tissues. Using DTI to examine patients' hearts will allow for better detection of location and severity of ischemia and for probing general muscle structure and integrity. This method can be applied to various diffusion models including Diffusion Weighted Imaging (DWI).

Potential Commercial Applications

- Heart disease diagnosis.
- Evaluating new drugs for effects on heart.
- Planning surgical procedures.
- Imaging spinal cord, base of brain, and periventricular zones.
- Enhanced imaging of other tissues.

Competitive Advantages

• Application of state-of-the-art DTI to a wider range of tissues.
• Works with multiple diffusion models including DWI.

Development Stage: Early-stage.

Inventor: Peter J. Basser (NICHD).

Publication: Rohde G, et al. Comprehensive approach for correction of motion and distortion in diffusion-weighted MRI. Magn Reson Med. 2004 Jan;51(1):103–114. [PMID 14705050]

Intellectual Property: HHS Reference No. E–168–2009/0—U.S. Provisional Application No. 61/523,108 filed 12 Aug 2011.

Related Technologies

• HHS Reference No. E–203–1993/0—U.S. Patent No. 5,539,310 issued 23 Jul 1996; PCT Application No. PCT/US94/08842 filed 05 Aug 1994.
• HHS Reference No. E–079–2003/1—U.S. Application No. 12/114,713 filed 02 May 2008.
• HHS Reference No. E–079–2003/0—U.S. Patent No. 7,643,863 issued 05 Jan 2010; PCT Application No. PCT/US2004/22027 filed 08 Jul 2004.

Licensing Contact: John Stansberry, Ph.D.; 301–435–5236; *stansbej@mail.nih.gov*.

Dated: April 4, 2012.

Richard U. Rodriguez,

Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. 2012–8577 Filed 4–9–12; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of Exclusive License: Method for Segmenting Medical Images and Detecting Surface Anomalies in Anatomical Structures

AGENCY: National Institutes of Health, Public Health Service, HHS.

ACTION: Notice.

SUMMARY: This is notice, in accordance with 35 U.S.C. 209(c)(1) and 37 CFR 404.7(a)(1)(i), that the National Institutes of Health (NIH), Department of Health and Human Services, is contemplating the grant of an exclusive license to practice the inventions embodied in U.S. Patents: 6,246,784 filed August 18, 1998 and issued June 12, 2001; 6,345,112 filed January 19, 2001 and issued February 5, 2002; and 6,556,696 filed February 5, 2002 and issued April 29, 2003; each entitled ''Method for segmenting medical images and detecting surface anomalies in anatomical structures,'' by Ronald M. Summers *et al.,* to iCAD, Inc. having a place of business in 98 Spit Brook Road, Suite 100, Nashua, NH 03062 USA. The patent rights in this invention have been assigned to the United States of America.

DATES: Only written comments and/or application for a license that are received by the NIH Office of Technology Transfer on or before May 10, 2012 will be considered.

ADDRESSES: Requests for a copy of the patent application, inquiries, comments and other materials relating to the contemplated license should be directed to: Tedd Fenn, Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, MD 20852–3804; Email: *Tedd.Fenn@mail.nih.gov;* Telephone: 301–435–5031; Facsimile: 301–402–0220.

SUPPLEMENTARY INFORMATION: The invention relates to methods of processing medical image data to extract information about organ structure and reconstruct the anatomical image in a virtual 3D model to detect anomalies. The methods help solve imaging problems such as image ''leakage,'' which causes distortion, overloads datasets and slows the 3D modeling display. Once the image is assembled, additional processing methods can detect surface anomalies by comparing the curvature characteristics of anatomy to curvature characteristics anomalies. The anomalies in the image can be colorized or otherwise identified in the image to enhance detection. This is helpful to identify harmful features such as precancerous polyps or other anomalies.

The field of use may be limited to ''computer aided detection in colonography.''

The prospective worldwide exclusive license will be royalty bearing and will comply with the terms and conditions of 35 U.S.C. 209 and 37 CFR 404.7. The prospective exclusive license may be granted unless, within thirty (30) days from the date of this published Notice, NIH receives written evidence and argument that establishes that the grant of the license would not be consistent with the requirements of 35 U.S.C. 209 and 37 CFR 404.7.

Properly filed competing applications for a license filed in response to this notice will be treated as objections to the contemplated license. Comments and objections submitted in response to this notice will not be made available for public inspection, and, to the extent permitted by law, will not be released under the Freedom of Information Act, 5 U.S.C. 552.

Dated: April 4, 2012.

Richard U. Rodriguez,

Director, Division of Technology Development & Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. 2012–8578 Filed 4–9–12; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[Docket ID FEMA–2011–0039; OMB No. 1660–0124]

Agency Information Collection Activities: Submission for OMB Review; Comment Request, FEMA Preparedness Grants: Emergency Operations Center (EOC) Grant Program

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Notice.

SUMMARY: The Federal Emergency Management Agency (FEMA) will submit the information collection abstracted below to the Office of Management and Budget for review and clearance in accordance with the requirements of the Paperwork Reduction Act of 1995. The submission will describe the nature of the information collection, the categories of respondents, the estimated burden (i.e., the time, effort and resources used by respondents to respond) and cost, and the actual data collection instruments FEMA will use.

DATES: Comments must be submitted on or before May 10, 2012.

ADDRESSES: Submit written comments on the proposed information collection to the Office of Information and Regulatory Affairs, Office of Management and Budget. Comments should be addressed to the Desk Officer for the Department of Homeland Security, Federal Emergency Management Agency, and sent via electronic mail to *oira.submission@omb.eop.gov* or faxed to (202) 395–5806.

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the information collection should be made to Director, Records Management Division, 1800 South Bell Street, Arlington, VA 20598–3005, facsimile number (202) 646–3347, or email address *FEMA–Information-Collections-Management@dhs.gov.*