

| Respondents                    | Respondent description      | Number of respondents | Responses per respondent | Total responses | Hours per response | Total burden (hours) |
|--------------------------------|-----------------------------|-----------------------|--------------------------|-----------------|--------------------|----------------------|
| HIPDB Users Group Survey.      | Other HCEs (Reporting) .... | 57                    | 1                        | 57              | .25                | 14.25                |
|                                | Other HCEs (Querying) ..... | 976                   | 1                        | 976             | .25                | 244                  |
|                                | Licensing Boards .....      | 231                   | 1                        | 231             | .25                | 57.75                |
|                                | Government Hospitals .....  | 390                   | 1                        | 390             | .25                | 97.5                 |
|                                | MCOs .....                  | 580                   | 1                        | 580             | .25                | 145                  |
| NPDB Matched Response Survey.  | Other HCEs .....            | 260                   | 1                        | 260             | .25                | 65                   |
|                                | Licensing Boards .....      | 55                    | 3                        | 165             | .1                 | 16.5                 |
|                                | Hospitals .....             | 984                   | 3                        | 2952            | .1                 | 295.2                |
|                                | MCOs .....                  | 848                   | 3                        | 2544            | .1                 | 254.4                |
|                                | Other HCEs .....            | 904                   | 3                        | 2712            | .1                 | 271.2                |
| HIPDB Matched Response Survey. | Licensing Boards .....      | 43                    | 3                        | 129             | .1                 | 12.9                 |
|                                | Hospitals .....             | 202                   | 3                        | 606             | .1                 | 60.6                 |
|                                | MCOs .....                  | 432                   | 3                        | 1296            | .1                 | 129.6                |
|                                | Other HCEs .....            | 87                    | 3                        | 261             | .1                 | 26.1                 |
|                                | Licensing Boards .....      | 213                   | 1                        | 213             | .16                | 34.1                 |
| NPDB Non-User Survey ....      | MCOs .....                  | 341                   | 1                        | 341             | .16                | 54.6                 |
|                                | Other HCEs .....            | 881                   | 1                        | 881             | .16                | 141                  |
|                                | Licensing Boards .....      | 30                    | 1                        | 30              | .16                | 4.8                  |
| HIPDB Non-User Survey ...      | MCOs .....                  | 411                   | 1                        | 411             | .16                | 76.3                 |
|                                | Other HCEs .....            | 974                   | 1                        | 974             | .16                | 155.8                |
| Total .....                    | .....                       | 11,577                | .....                    | 18,687          | .....              | 2,826.1              |

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to the desk officer for HRSA, either by e-mail to [OIRA\\_submission@omb.eop.gov](mailto:OIRA_submission@omb.eop.gov) or by fax to 202-395-6974. Please direct all correspondence to the "attention of the desk officer for HRSA."

Dated: August 15, 2007.

**Alexandra Huttinger,**

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

[FR Doc. E7-16371 Filed 8-20-07; 8:45 am]

**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Council on Graduate Medical Education; Notice of Meeting

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

*Name:* Council on Graduate Medical Education (COGME).

*Dates and Times:* September 18, 2007, 8:30 a.m.–5:15 p.m.; and September 19, 2007, 8:30 a.m.–3:15 p.m.

*Place:* Crowne Plaza Silver Spring, 8777 Georgia Avenue, Silver Spring, Maryland 20910.

*Status:* The Meeting Will Be Open to the Public.

*Agenda:* On The Morning Of September 18, Following The Welcoming Remarks From The Cogme Chair, the Executive Secretary of COGME, and Health Resources and Services

Administration senior management, there will be presentations of comments and thoughts from selected Associations on COGME's two draft reports, *Enhancing GME Flexibility* and *New Paradigms for Physician Training for Improving Access to Healthcare*. Following Council discussions, at 1:30 p.m. there will be a breakout of Council members into the two draft writing groups for further report revisions. At 3:30 p.m., Barbara Chang, M.D. and Earl Reisdorff, M.D., the writing group chairs, will give their reports to the Council. There will be further discussion on writing group activities and reports. There will also be a discussion of further steps for producing reports.

On September 19, there will be a presentation on a George Washington University physician workforce planning initiative. There will be a panel presentation of activities of three advisory committees staffed within the Bureau of Health Professions; the Advisory Committee on Primary Care Medicine and Dentistry, the Advisory Committee on Interdisciplinary, Community Based Linkages, and the National Advisory Council on Nurse Education and Practice. Following will be an overview presentation on State Physician Workforce/ GME Planning. The Council will conclude with a discussion of new issues/ identification for future reports.

Agenda items are subject to change as priorities dictate.

*For Further Information Contact:* Jerald M. Katzoff, Executive Secretary, COGME, Division of Medicine and Dentistry, Bureau of Health Professions, Parklawn Building, Room 9A-21, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 443-6785.

Dated: August 15, 2007.

**Alexandra Huttinger,**

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

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**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Proposed Collection; Comment Request; Multi-Ethnic Study of Atherosclerosis (Mesa) Event Surveillance

**SUMMARY:** In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Heart, Lung, and Blood Institute (NHLBI), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

*Proposed Collection: Title:* Multi-Ethnic Study of Atherosclerosis (MESA) Event Surveillance. *Type of Information Request:* Renewal (OMB No. 0925-0493). *Need and Use of Information Collection:* The study, MESA, is identifying and quantifying factors associated with the presence and progression of subclinical cardiovascular disease (CVD)—that is, atherosclerosis and other forms of CVD that have not produced signs and symptoms. The findings provide important information on subclinical CVD in individuals of different ethnic backgrounds and provide information for studies on new interventions to prevent CVD. The aspects of the study that concern direct participant evaluation received a clinical exemption from OMB clearance (CE-99-11-08) in

April 2000. OMB clearance is being sought for the contact of physicians and participant proxies to obtain information about clinical CVD events that participants experience during the follow-up period. *Frequency of*

*Response:* Once per CVD event. *Affected Public:* Individuals. *Types of Respondents:* Physicians and selected proxies of individuals recruited for MESA. The annual reporting burden is as follows: *Estimated Number of*

*Respondents:* 550; *Estimated Number of Responses per Respondent:* 1.0; and *Estimated Total Annual Burden Hours Requested:* 36.7.

There are no capital, operating, or maintenance costs to report.

| Type of respondents       | Estimated number of respondents | Estimated number of responses per respondent | Average burden hours per response | Estimated total annual burden hours requested |
|---------------------------|---------------------------------|----------------------------------------------|-----------------------------------|-----------------------------------------------|
| Physicians .....          | 250                             | 1.0                                          | 0.20                              | 16.7                                          |
| Participant proxies ..... | 300                             | 1.0                                          | 0.20                              | 20                                            |
| Total .....               | 550                             | 1.0                                          | 0.20                              | 36.7                                          |

*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 will have practical utility; (2) The accuracy of the agency's estimate of 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 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.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of data collection plans and instruments, contact Dr. Jean Olson, Division of Prevention and Population Sciences, NHLBI, NIH, II Rockledge Centre, 6701 Rockledge Drive, Suite 10018, MSC # 7936, Bethesda, MD 20892-7936, or call non-toll-free number 301-435-0397, or e-mail your request, including your address to: [olsonj@nhlbi.nih.gov](mailto:olsonj@nhlbi.nih.gov).

*Comments Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

Dated: August 9, 2007.

**Michael Lauer,**

Chief, Division of Prevention and Population Sciences, NHLBI, National Institutes of Health.

Approved: August 9, 2007.

**Suzanne Freeman,**

NHLBI Project Clearance Officer, National Institutes of Health.

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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.

#### Prophylactic Vaccines and Therapeutic Monoclonal Antibodies Against Influenza

*Description of Technology:* This technology describes development of H5N1 influenza vaccine candidates in which mutations have been introduced to increase affinity of the hemagglutinin (HA) for the sialic acid receptor found in humans, which have a different sialic acid linkage than the corresponding avian receptor. These mutations could therefore result in a higher immune response in vaccines, producing a more robust response than other H5N1 vaccine candidates that retain their

avian receptor preferences. These mutations also changed antibody-sensitivity of the vaccine candidates. The H5 modifications can be expressed from DNA or adenoviral vectors, or the proteins themselves can be administered. Additionally, these mutated HAs can be used to develop therapeutic monoclonal antibodies. The technology describes three (3) unique monoclonal antibodies that react with wild-type H5, wild-type H5 and mutant HA equivalently, and the mutant HA, respectively.

*Applications:* Prophylactic influenza vaccine; Therapeutic antibodies.

*Inventors:* Gary J. Nabel *et al.* (VRC/NIAID).

*Patent Status:* U.S. Patent Application No. 60/850,761 filed 10 Oct 2006 (HHS Reference No. E-306-2006/0-US-01).

U.S. Patent Application No. 60/860,301 filed 20 Nov 2006 (HHS Reference No. E-306-2006/1-US-01).

U.S. Patent Application No. 60/920,874 filed 30 Mar 2007 (HHS Reference No. E-306-2006/2-US-01).

U.S. Patent Application No. 60/921,669 filed 02 Apr 2007 (HHS Reference No. E-306-2006/3-US-01).

*Development Status:* Animal (mouse) data available.

*Licensing Status:* Available for licensing.

*Licensing Contact:* Susan Ano, Ph.D.; 301/435-5515; [anos@mail.nih.gov](mailto:anos@mail.nih.gov).

#### Antiviral Compounds With Broad Neutralization Capabilities

*Description of Technology:* The NIH is pleased to announce as available for licensing a technology that provides for novel antiviral compounds effective against a broad spectrum of viruses. The compounds utilize soluble phospholipases, exemplified by PLA<sub>2</sub>-X and others, either alone or as a fusion protein with a viral binding polypeptide. These compositions are able to inactivate viruses through enzymatic degradation of the viral membrane without affecting target cells