Forms are available in the application kit and at the following Internet address: www.cdc.gov/od/pgo/forminfo.htm

On or before August 15, 2001, in both electronic (Microsoft Word and Excel format) and hard copy, submit the application to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement.

G. Evaluation Criteria

Your application will be evaluated against the following criteria by an independent review group appointed by CDC.

1. Understanding of the Problem (10 Points)

Extent to which the applicant demonstrates a clear and concise understanding of the nature of the problem described in the Purpose section of this announcement. This specifically includes description of the public health importance of the planned activities to be undertaken and realistic presentation of proposed objectives and projects.

2. Technical Approach (30 Points)

The extent to which the applicant's proposal includes an overall design strategy, including measurable time lines, the extent to which the proposal addresses regular monitoring and evaluation, and the potential effectiveness of the proposed activities in meeting objectives.

3. Ability to Carry Out the Project (25 Points)

The extent to which the applicant documents demonstrated capability to achieve the purpose of the project.

4. Personnel (20 Points)

The extent to which professional personnel involved in this project are qualified, including evidence of experience in working with HIV/AIDS, opportunistic infections, and HIV/STD surveillance.

5. Plans for Administration and Management of Projects (15 Points)

Adequacy of plans for administering the projects.

6. Budget (Not Scored)

The extent to which itemized budget for conducting the project, along with justification, is reasonable and consistent with stated objectives and planned program activities.

7. Protection of Human Subjects (Not Scored)

The extent to which the application adequately addresses the requirements

of 45 CFR 46 for the protection of human subjects.

H. Other Requirements

Technical Reporting Requirements

Provide CDC with original plus two copies of:

- 1. Written quarterly progress reports;
- 2. Financial status report, no more than 45 days after the end of the budget period; and
- 3. Final financial and performance reports, no more than 90 days after the end of the project period.
- 4. Annual audit of these CDC funds (program-specific audit) by a U.S.-based audit firm with international branches and current licensure/authority incountry, and in accordance with International Accounting Standards or equivalent standard(s) approved in writing by CDC.

Send all reports to the program contact and the Grants Management Specialist, both identified in the "Where to Obtain Additional Information" section of this announcement.

The following additional requirements are applicable to this program. For a complete description of each, see Attachment I of the announcement. Some of the more complex requirements have some additional information provided below. AR-1—Human Subjects Requirements AR-6—Patient Care AR-14—Accounting System

Requirements AR–22—Research Integrity

I. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under section 307 of the Public Health Service Act, [42 U.S.C. section 242I], as amended. The Catalog of Federal Domestic Assistance number is 93.941.

J. Where To Obtain Additional Information

This and other CDC announcements can be found on the CDC home page Internet address—http://www.cdc.gov. Click on "Funding" then "Grants and Cooperative Agreements."

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from: Dorimar Rosado, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, MS–15, Atlanta, GA 30341–4146, Telephone: (770) 488–2782, Fax: (770) 488–2847, e-mail: dpr7@cdc.gov.

For program technical assistance, contact: Jordan W. Tappero, MD, MPH,

Director, Thailand-CDC Collaboration, Director, The HIV/AIDS Program, DMS 6 Building, Ministry of Public Health, Tivanon Road, Nonthaburi 11000, THAILAND, Tel: (66 2) 591 8358, Fax: (66 2) 591 5443, Mobile: (66 1) 755 9011, e-mail: jwt0@cdc.gov.

Dated: July 10, 2001.

John L. Williams,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention. [FR Doc. 01–17658 Filed 7–13–01; 8:45 am]

BILLING CODE 4163-18-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, DHHS.

ACTION: Notice.

summary: The inventions listed below are owned by agencies 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.

BRB Array Tools

Richard Simon (NCI)
DHHS Reference No. E-154-01/0
Licensing Contact: Dale Berkley; 301/
496-7735 ext. 223; e-mail:
berkleyd@od.nih.gov.

The invention is a desktop software package that integrates into Microsoft Excel as an add-in for the analysis of DNA microarray data. The software incorporates numerous statistical analysis methods tailored to the analysis of DNA microarray data, providing a robust visualization capability for translating the data into biological knowledge that is lacking in currently available packages. The software is

oriented for use by biologists, but was developed by professional statisticians for this application. The invention is expected to find a wide range of applications throughout the biomedical sciences.

Real Time Interactive Volumetric Magnetic Resonance Imaging

Michael Guttman and Elliott McVeigh (NHLBI)

DHHS Reference No. E-082-01/0 filed Feb 16, 2001.

Licensing Contact: Dale Berkley; 301/496–7735 ext. 223; e-mail: berkleyd@od.nih.gov.

The invention makes possible "live" volume renderings from a Magnetic Resonance Imaging (MRI) scanner. Previously, volume renderings from MRI data could only be generated offline, some time after the image data was collected. In one embodiment of the invention, the time between data collection and volume rendering update (the latency) is approximately one third of a second at a frame rate of approximately 10 updates per second. User interaction with the rendering, such as rotation and cut planes, are allowed during imaging. This gives a caregiver real-time three-dimensional feedback while manipulating devices within a patient's body. The invention may be of benefit to several types of image-guided interventional procedures, including cardiac catheterization, tumor removal, ablation or biopsies.

STATLAB—A Matlab® Toolbox for Advanced Statistical Modeling and Data Analysis

Philip S. Rosenberg (NCI) DHHS Reference No. E–217–00/0 filed Apr 05, 2001

Licensing Contact: Dale Berkley; 301/496–7735 ext. 223; e-mail: berkleyd@od.nih.gov.

The invention relates to a set of programs (a toolbox) to enhance Matlab's ® statistical capabilities by utilizing an object-oriented design that helps statistical scientists more rapidly design, build and debug sophisticated statistical applications entirely in the Matlab® environment. This saves researchers from the time and effort required to code algorithms in low-level languages such as Fortran or C. Matlab® is the commercially available premiere technical computing environment that is widely used by scientists and engineers to solve mathematical problems arising in diverse scientific and engineering disciplines. STATLAB is the name given by the inventor to the set of programs that make up the invention, a toolbox for advanced

statistical modeling and data analysis. This toolbox offers advanced error checking, report generation and data management capabilities not found together in any other package.

Engineered Human Topoisomerase I

Gary S. Laco (NCI), Michael A. Eissenstat, and Tatiana Guerassina (NCI)

DHHS Reference No. E-052-01/0

Licensing Contact: Sally Hu; 301/496–7056 ext. 265; e-mail: hus@od.nih.gov.

This invention describes a recombinant form of human topoisomerase (top68c) that encodes human topiosomerase (top 1) minus its localization signals. This invention provides an expression and purification strategy that allows wild type and mutant forms of top68c to be overexpressed and easily purified in vitro. The expressed top68c is pure (>99%) and retains full activity with a high yield. This invention has overcome the problems of the existing production of human topiosomerase 1 in insect cells such as low yields of difficult to purify protein. Therefore, this invention makes more research opportunities possible, such as screening for inhibitors, and providing sufficient quantities of the protein to do X-ray crystallography studies of top68c complexed with substrates and inhibitors. Such research is very important for determining the mechanism of top 1 activity and for finding future therapeutics related to top1. Finally, inhibiting this enzyme has possible anti-cancer and anti-HIV usage. This invention is available for licensing through a Biological Materials License because no patent applications exist.

Glycosylation-resistant Cyanovirins and Related Conjugates, Compositions, Nucleic Acids, Vectors, Host Cells, Methods of Production and Methods of Using Nonglycosylated Cyanovirins

Michael R. Boyd (NCI) DHHS Reference No. E-074-99/7 filed Mar 22, 2001

Licensing Contact: Sally Hu; 301/496–7056 ext. 265; e-mail: hus@od.nih.gov.

This invention has two major aspects. The first is that cyanovirin-N (CV-N) and homologous proteins and peptides potently inhibit diverse laboratory and clinical isolates of influenza viruses A and B. Since influenza A and B are the two major types of influenza virus that infect humans, an agent that has anti-influenza virus activity against both influenza A and B, like CV-N, would be particularly useful in prevention or treatment of influenza virus infection. The second aspect provides CV-N mutants called glycosylation-resistant mutants. These mutants code sequences

to enable ultra large-scale recombinant production of functional cyanovirins in non-bacterial (yeast or insect) host cells or in transgenic animals or plants. Therefore, these glycosylation-resistant mutants may allow industry to produce CV-Ns on a large scale and make CV-Ns cheap enough for developing countries to benefit from this invention.

Dated: July 6, 2001.

Jack Spiegel,

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

[FR Doc. 01–17750 Filed 7–13–01; 8:45 am] **BILLING CODE 4140–01–P**

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

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ADDRESSES: Licensing information and copies of the U.S. patent applications listed below may be obtained by contacting Susan S. Rucker, J.D., at the Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852–3804; telephone: 301/496–7056 ext. 245; fax: 301/402–0220; e-mail: ruckers@od.nih.gov. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications.

Interaction of AAV4 With Sialic Acid

JA Chiorini (NIDCR)

Serial No. E-131-01/0 filed Mar 28, 2001.

This patent application describes the ability of AAV4 (adeno-associated virus, serotype 4) to interact with particular alpha 2,3-linked sialic acid residues on susceptible cells. The 2,3-linked sialic acid residues constitute part of the cell surface receptor(s) for AAV4. The identification of these residues provides