

applicant's pediatric research accomplishments are acceptable and qualified pediatric research continues. Funding of contracts is contingent upon an appropriation and/or allocation of funds from the U.S. Congress and/or the NIH or ICs.

In return for the repayment of their educational loans, participants must agree to (1) engage in qualified pediatric research as an investigator on an NIH grant or as a recipient of an NIH award for a minimum period of 2 years; (2) make payments to lenders on their own behalf for periods of Leave Without Pay (LWOP); (3) pay monetary damages as required for breach of contract; and (4) satisfy other terms and conditions of the PR-LRP contract and application procedures. Applicants must submit a signed contract, prepared by the NIH, agreeing to engage in qualified pediatric research at the time they submit an application. Substantial monetary penalties will be imposed for breach of contract.

The NIH will repay lenders for the principal, interest, and related expenses (such as the required insurance premiums on the unpaid balances of some loans) of qualified Government (Federal, State, local) and commercial educational loans obtained by participants for the following:

- (1) Undergraduate, graduate, and health professional school tuition expenses;
- (2) Other reasonable educational expenses required by the school(s) attended, including fees, books, supplies, educational equipment and materials, and laboratory expenses; and
- (3) Reasonable living expenses, including the cost of room and board, transportation and commuting costs, and other living expenses as determined by the Secretary.

Repayments will be authorized for direct payment to lenders, following receipt of (1) the research supervisor's verification of completion of the prior period of research, and (2) lender verification of the crediting of prior loan repayments, including the resulting account balances and current account status. The NIH will repay loans in the following order, unless the Secretary determines that significant savings would result from a different order of priority:

- (1) Loans guaranteed by the U.S. Department of Health and Human Services:
  - Health Education Assistance Loan (HEAL);
  - Health Professions Student Loan (HPSL);
  - Loans for Disadvantaged Students (LDS);

- Primary Care Loan (PCL); and
- Nursing Student Loan Program (NSL);

- (2) Loans guaranteed by the U.S. Department of Education:

- Direct Subsidized Stafford Loan;
- Direct Unsubsidized Stafford Loan;
- Direct Consolidation Loan;
- Perkins Loan;
- FFEL Subsidized Stafford Loan;
- FFEL Unsubsidized Stafford Loan;

and

- FFEL Consolidation Loan;
- (3) Loans made or guaranteed by a State, the District of Columbia, the Commonwealth of Puerto Rico, or a territory or possession of the United States;

- (4) Loans made by Academic Institutions; and

- (5) Private ("Alternative")

Educational Loans:

- MEDLOANS; and
- Private (non-guaranteed)

Consolidation Loan.

Within each category, loans are repaid in order of interest rate (highest first).

The following loans are NOT repayable under the PR-LRP:

- (1) Loans not obtained from a government entity, academic institution, or a commercial or other chartered lending institution such as loans from friends, relatives, or other individuals;
- (2) Loans for which contemporaneous documentation is not available;
- (3) Loans that have been consolidated with loans of other individuals, such as a spouse.

- (4) Loans or portions of loans obtained for educational or living expenses which exceed a reasonable level, as determined by the standard school budget for the year in which the loan was made, and are not determined by the LRP to be reasonable based on additional contemporaneous documentation provided by the applicant;

- (5) Loans, financial debts, or service obligations incurred under the following programs, or other programs which incur a service obligation which converts to a loan on failure to satisfy the service obligation:

- Physicians Shortage Area Scholarship Program (Federal or State);
- National Research Service Award Program;
- Public Health and National Health Service Corps Scholarship Program;
- Armed Forces (Army, Navy, or Air Force) Health Professions Scholarship Program; and
- Indian Health Service Scholarship Program;

- (6) Delinquent loans, loans in default, loans not current in their payment schedule, loans already repaid or those

for which promissory notes have been signed after the program effective date are not eligible for repayment; and (7) PLUS Loans.

During lapses in loan repayments, due either to LRP administrative complications or a break in service, LRP participants are wholly responsible for making payments or other arrangements that maintain loans current, such that increases in either principal or interest do not occur. Penalties assessed participants as a result of LRP administrative complications to maintain a current payment status may be considered for reimbursement.

#### Additional Program Information

This program is not subject to the provisions of Executive Order 12372, Intergovernmental Review of Federal Programs.

This program is subject to OMB clearance under the requirements of the Paperwork Reduction Act of 1995. A Request for OMB Review and Approval of information collection associated with the program is being prepared by the NIH and will be sent to OMB for review and approval prior to implementation of the Pediatric Research LRP.

Dated: August 20, 2001.

*The Catalog of Federal Domestic Assistance* number for the Pediatric Research LRP is 93.285.

**Yvonne T. Maddox,**

*Acting Deputy Director, National Institutes of Health.*

[FR Doc. 01-22354 Filed 9-5-01; 8:45 am]

**BILLING CODE 4140-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Government-Owned Inventions; Availability for Licensing

**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.

#### **Methods and Structures for Microengineering Neocartilage Scaffolds**

Erik Petersen and Richard Spencer (NIA),  
DHHS Reference No. E-175-01/0 filed 27 Apr 2001,

*Licensing Contact:* Marlene Shinn; 301-496-7056 ext. 285; e-mail: shinnm@od.nih.gov.

Therapy for joint damage due to trauma, congenital abnormality, or osteoarthritis has in the past only been limited to the replacement of the joint with a prosthesis. Recently, autologous transplantation of chondrocytes has begun to be performed, however, there are several hurdles that have needed to be overcome, including problems with cell loss and heterogeneous development of tissue density.

The NIH announces a new method of growing chondrocytes on a two-dimensional surface patterned biocompatible scaffold. These scaffolds consist of creating uniform contoured surfaces using photolithographic methods and then covering the surface with a polysaccharide gel. The gel is then allowed to cure and then is removed from the template. Chondrocytes that have been isolated from explants are then applied to the surface and attach to the gel. Once attached, the cells create an extracellular matrix within the gel and layers of neocartilage are created within the square depressions. Functional tissue is thereby produced which can be used as grafts and/or implants in humans.

#### **Agents Useful for Reducing Amyloid Precursor Protein and Treating Dementia and Methods of Use Thereof**

Nigel H. Greig et al. (NIA),  
Serial No. 60/245,329 filed 02 Nov 2000,

*Licensing Contact:* Norbert Pontzer; 301/496-7736 ext. 284; e-mail: pontzern@od.nih.gov.

Alzheimer's disease (AD) is a progressive neurodegenerative condition leading to loss of memory and other cognitive functions. Alzheimer's disease is characterized pathologically by the appearance of senile plaques, primarily composed of amyloid  $\beta$

protein ( $A\beta$ ), and neurofibrillary tangles in the CNS. Treatments reducing potentially toxic  $A\beta$  may thus prevent the occurrence and progression of Alzheimer's disease. As  $A\beta$  is derived from the larger  $\beta$  amyloid precursor protein ( $\beta$ APP), reducing the production of  $\beta$ APP should provide a therapy for the treatment of Alzheimer's disease.

The production of  $\beta$ APP is regulated by cytokines, muscarinic receptors, and some cholinesterase inhibitors. The latter also have some utility in treating the symptoms of Alzheimer's disease. The agents and methods disclosed and claimed in this patent application reduce the production of  $\beta$ APP and  $A\beta$  in vivo and in vitro without cholinergic side effects or other toxicity. The agents are structurally related to a known anticholinesterase agent in current clinical assessment, but are devoid of anticholinesterase activity and associated side effects. They likely act on a recently described translational regulatory element on  $\beta$ APP mRNA. Further information as to how these agents effect  $\beta$ APP processing can be found in the Proceedings of the National Academy of Sciences, Volume 98(13), Pages 7605-7610, June 19, 2001.

Dated: August 29, 2001.

#### **Jack Spiegel,**

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

[FR Doc. 01-22355 Filed 9-5-01; 8:45 am]

**BILLING CODE 4140-01-P**

### **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

#### **National Institutes of Health**

#### **National Institute on Alcohol Abuse and Alcoholism; Notice of Closed Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Institute on Alcohol Abuse and Alcoholism Special Emphasis Panel.

*Date:* September 5, 2001.

*Time:* 1 p.m. to 2 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Willco Building, Suite 409, 6000 Executive Boulevard, Rockville, MD 20892, (Telephone Conference Call).

*Contact Person:* Eugene G. Hayunga, Ph.D., Chief Scientific Review Branch, OSA, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Willco Building, Suite 409, 6000 Executive Boulevard, MSC 7003, Bethesda, MD 20892-7003, 301-443-2860, ehayunga@mail.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.271, Alcohol Research Career Development Awards for Scientists and Clinicians; 93.272, Alcohol National Research Service Awards for Research Training; 93.273, Alcohol Research Programs; 93.891, Alcohol Research Center Grants, National Institutes of Health, HHS)

Dated: August 28, 2001.

#### **Anna Snouffer,**

*Deputy Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 01-22350 Filed 9-5-01; 8:45 am]

**BILLING CODE 4140-01-M**

### **DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT**

**[Docket No. FR-4651-N-04]**

#### **Submission for Emergency OMB Review: Public Comments on Fair Housing Act (FHA) Training and Technical Guidance**

**AGENCY:** Office of Fair Housing and Equal Opportunity, HUD.

**ACTION:** Notice of proposed information collection requirement.

**SUMMARY:** The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for emergency review and approval, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal. The Department of Housing and Urban Development (HUD) will be offering Training and Technical Guidance on the Fair Housing Act. Under the Fair Housing Act, it is unlawful to design and construct certain attached single-family and multifamily (buildings having four or more units) dwellings built for first occupancy after March 13, 1991, in a manner that makes them inaccessible to persons with disabilities.