

massively paralleled multiplexed screening method using next generation sequencing (NGS). This method uses sample-specific barcoded indexes that detect both SARS-CoV-2 virus and the host's transcriptional response to infection simultaneously. By matching existing laboratory protocols for PCR-based sample processing, this assay is easily incorporated into existing CLIA-certified facilities. This testing approach provides the capability for testing tens of thousands of patient samples in a large bolus, allowing accurate and fast-turnaround SARS-CoV-2 testing capacity at population scale, and permits massive scale monitoring of at-risk individuals with minimal processing delay.

Potential Commercial Applications: Diagnostic test for detecting infectious organisms, including SARS-CoV-2.

Competitive Advantages

- Reduction in reagents needed to perform a test, reducing test cost and bottleneck of critical reagents used during nucleic acid amplification.
- Simultaneously detect the pathogen and a host's transcriptional response to infection by the pathogen.
- Gene expression information from the donor can be used to predict disease severity.

Development Stage:

- Early stage.
- Data from tests of human samples available.

Inventors: Oswaldo Alonso Lozoya (NIEHS), and Brian Papas (NIEHS).

Intellectual Property: HHS Reference No. E-241-2020-0; U.S. Provisional Patent Application 63/116,031 filed November 19, 2020.

Licensing Contact: Vidita Choudhry, Ph.D.; 301-594-4095; vidita.choudhry@nih.gov. This notice is made in accordance with 35 U.S.C. 209 and 37 CFR part 404.

Dated: January 8, 2021.

Bruce D. Goldstein,

Director, National Heart, Lung, and Blood Institute, Office of Technology Transfer and Development.

[FR Doc. 2021-00825 Filed 1-14-21; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Eunice Kennedy Shriver National Institute of Child Health & Human Development; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as

amended, notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and/or contract proposals 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 of Child Health and Human Development Special Emphasis Panel; Maternal and Pediatric HIV/AIDS Research.

Date: March 12, 2021.

Time: 10:00 a.m. to 6:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institute of Child Health and Human Development, 6710B Rockledge Drive, Bethesda, MD 20817 (Video-Assisted Meeting).

Contact Person: Luis E. Dettin, Ph.D., M.S., M.A., Scientific Review Officer, Scientific Review Branch, Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, 6710B Rockledge Drive, Rm. 2131B, Bethesda, MD 20892, (301) 827-8231, luis_dettin@nih.gov.

Name of Committee: National Institute of Child Health and Human Development Special Emphasis Panel; Centers to Advance Research in Endometriosis (CARE) (P01 Clinical Trial Not Allowed).

Date: March 16-17, 2021.

Time: 9:00 a.m. to 6:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6710B Rockledge Drive, Rockledge Drive, Bethesda, MD 20817 (Video-Assisted Meeting).

Contact Person: Derek J. McLean, Ph.D., Scientific Review Officer, Scientific Review Branch, Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, 6710B Rockledge Drive, Rm. 2125B, Bethesda, MD 20892-7002, Derek.McLean@nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.865, Research for Mothers and Children, National Institutes of Health, HHS)

Dated: January 12, 2021.

Ronald J. Livingston, Jr.,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2021-00918 Filed 1-14-21; 8:45 am]

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DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[Docket ID FEMA-2020-0016]

Meeting To Implement Pandemic Response Voluntary Agreement Under the Defense Production Act

AGENCY: Federal Emergency Management Agency, Department of Homeland Security.

ACTION: Announcement of meetings.

SUMMARY: The Federal Emergency Management Agency (FEMA) held a series of meetings to implement the Voluntary Agreement for the Manufacture and Distribution of Critical Healthcare Resources Necessary to Respond to a Pandemic.

DATES: The first meeting took place on Wednesday, January 6, 2021, from 2 to 4 p.m. Eastern Time (ET). The second meeting took place on Thursday, January 7, 2021, from 2 to 4 p.m. ET. The third meeting took place on Friday, January 8, 2021, from 2 to 3:30 p.m. ET.

FOR FURTHER INFORMATION CONTACT:

Robert Glenn, Office of Business, Industry, Infrastructure Integration, via email at OB3I@fema.dhs.gov or via phone at (202) 212-1666.

SUPPLEMENTARY INFORMATION: Notice of these meetings is provided as required by section 708(h)(8) of the Defense Production Act (DPA), 50 U.S.C. 4558(h)(8), and consistent with 44 CFR part 332.

The DPA authorizes the making of "voluntary agreements and plans of action" with, among others, representatives of industry and business to help provide for the national defense.¹ The President's authority to facilitate voluntary agreements was delegated to the Secretary of Homeland Security with respect to responding to the spread of COVID-19 within the United States in Executive Order 13911.² The Secretary of Homeland Security has further delegated this authority to the FEMA Administrator.³

On August 17, 2020, after the appropriate consultations with the Attorney General and the Chairman of the Federal Trade Commission, FEMA completed and published in the **Federal Register** a "Voluntary Agreement for the Manufacture and Distribution of Critical Healthcare Resources Necessary to

¹ 50 U.S.C. 4558(c)(1).

² 85 FR 18403 (Apr. 1, 2020).

³ DHS Delegation 09052, Rev. 00.1 (Apr. 1, 2020); DHS Delegation Number 09052 Rev. 00 (Jan. 3, 2017).