hospital perceptions about their working relationship.

The data collected will provide HRSA with a better understanding of the structural characteristics and practices of OPOs and hospitals associated with higher rates of referrals, consent, organ recovery, and organs transplanted. Results will inform future research, policy, and practice aimed at improving rates of organ donation as emphasized by U.S. Department of Health and Human Services Secretary Tommy G. Thompson's Gift of Life Initiative.

## Estimates of Annualized Hour Burden

Form name	Number of re- spondents	Responses per respond- ent	Hours per re- sponse	Total hour bur- den
Hospital Pre-Site Visit Telephone Survey Hospital On-Site Visit Interview Protocol OPO-Hospital Perception Survey	108 540 54	1 1 1	2 1 1	216 540 54
Total	702			810

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 11A–33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: August 23, 2002.

#### Jon L. Nelson,

Associate Administrator for Management and Program Support.

[FR Doc. 02–22079 Filed 8–28–02; 8:45 am] BILLING CODE 4165–15–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.

## Scytovirins and Related Conjugates, Antibodies, Compositions, Nucleic Acids, Vectors, Host Cells, Methods of Production and Methods of Using Scytovirin

Michael R. Boyd, Barry R. O'Keefe, and Tawnya C. McKee, Molecular Targets Drug Discovery Program (MTDDP, NCI-Frederick) and Heidi R. Bokesch (SAIC-Frederick); DHHS Reference No. E–017–02/0 filed May 16 2002.

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

This invention provides: (1) Isolated and purified antiviral peptides or antiviral proteins named Scytovirins isolated and purified from aqueous extracts derived from the cyanobacteria, Scytonema varium; (2) an antibody which binds an epitope of Scytovirin isolated and purified from Scytonema varium; (3) a purified nucleic acid molecule that comprises a sequence which encodes an amino acid sequence homologous to Scytovirin; (4) a vector comprising the isolated and purified nucleic acid molecule and a host cell or organism comprising the vector; (5) a conjugate comprising the peptide and an effector component; and (6) a method of inhibiting prophylactically and therapeutically a viral infection. Thus, this invention may represent potential new therapeutics for treatment of retroviral infections, including AIDS.

## Methods and Compositions for the Promotion of Hair Growth Utilizing Actin-Binding Peptides

- Deborah Philp, Ph.D., Michael Elkin, Ph.D., and Hynda K. Kleinman, Ph.D. (NIDCR); DHHS Reference No. E–053– 02/0 filed January 25, 2002.
- Licensing Contact: Jonathan Dixon; 301/ 496–7056 ext. 270; e-mail: dixonj@od.nih.gov.

Hair loss (alopecia) is a condition that afflicts millions of men and women. Countless therapies and concoctions have been devised to battle the effects of receding hairlines. None of these are universally effective, and many have met with, at best, dubious success.

The present invention provides the basis for the development of a safe and effective treatment for hair loss. It describes the novel use of naturally occurring, actin-binding, peptides to activate hair follicles. In animal studies, topical application of such peptides increased the number of active hair follicles at least two-fold. After application three times a week, new hair growth was observed as early as on day 7, and was retained with additional applications. This invention may lead to a treatment for a condition that affects a large percentage of the population.

# Stem Cells that Transform to Beating Cardiomyocytes

Neal D. Epstein (NHLBI); DHHS Reference No. E–329–01/0 filed October 22, 2001.

Licensing Contact: Fatima Sayyid; 301/ 496–7056 ext. 243; e-mail: sayyidf@od.nih.gov.

Many Americans die each year of congestive heart failure occurring from a variety of causes including cardiomyopathy, myocardial ischemia, congenital heart disease and valvular heart disease resulting in cardiac cell death and myocardial dysfunction. As cardiomyocytes are not replaced in adult myocardial tissue, physiologic demands on existing, healthy cardiomyocytes leads to their hypertrophy. Heart transplants have been the only recourse for patients in end-stage heart disease however this is complicated by lack of donors, tissue incompatibility and high cost.

An alternative approach to heart transplantation is to generate cardiomyocytes from stem cells *in vitro* that can be used in the treatment of cardiac diseases characterized by myocardial cell death or dysfunction.

This invention discloses a novel isolated population of stem cells, called

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spoc cells, that can be induced, either *in vivo* or *in vitro*, to differentiate into cardiomyocytes. Spoc cells may be differentiated and utilized for screening agents that affect cardiomyocytes and as therapeutic agents in the treatment of myocardial defects.

## Maxp1

Geoffrey J. Clark, Michelle Vos (NCI); DHHS Reference No. E–165–01/0 filed September 19, 2001.

Licensing Contact: Matthew Kiser; 301/ 496–7056 ext. 224; e-mail: kiserm@od.nih.gov.

The subject invention is directed to the cDNA sequence and the deduced amino acid sequence of the human Maxp1 gene. Maxp1 is frequently downregulated in primary human tumors. Accordingly, a vector comprising the cDNA sequence, a host cell comprising such a vector, a method of using the vector, such as one comprising a cDNA sequence in which the C-terminal Ras binding site has been mutated or deleted, or the polypeptide (or fragment thereof, such as one in which the Cterminal Ras binding site has been mutated or deleted) in the prophylactic and therapeutic treatment of cancer, a method of assaying small molecules for the ability to stimulate Maxp1 growth inhibitory function in cancer cells that remain positive for Maxp1 expression, and the assessment of the levels of Maxp1 mRNA or protein in the diagnosis, characterization and prognosis of cancer are additional, nonlimiting embodiments of the invention.

Further embodiments include: (a) Diagnosis and prediction of tumor characteristics, (b) gene therapy to restore Nore1/Maxp1 function in tumor cells which have lost protein expression, (c) the use of small molecules to simulate Nore1/Maxp1 growth inhibitory function in tumor cells which remain positive for Nore1/ Maxp1 expression, (d) the use of protein fragments/small molecules based on Nore1/Maxp1 structure to bind and inhibit the function of mutant Ras oncoproteins, and (e) a specific polyclonal antibody that works in westerns and in immunohistochemistry.

Dated: August 22, 2002.

#### Jack Spiegel,

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

[FR Doc. 02–22077 Filed 8–28–02; 8:45 am]

BILLING CODE 4140-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## National Institutes of Health

## National Cancer Institute; Cancellation of Meeting

Notice is hereby given of the cancellation of the National Cancer Institute Director's Consumer Liaison Group, September 5, 2002, 2 p.m. to September 5, 2002, 4 p.m., 6116 Executive Blvd, Rockville, MD, 20852 which was published in the **Federal Register** on August 16, 2002, 67FR535392.

The meeting is cancelled due to scheduling conflicts.

Dated: August 22, 2002.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy. [FR Doc. 02–22061 Filed 8–28–02; 8:45 am] BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### National Institutes of Health

#### National Cancer Institute; 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 552b(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 Cancer Institute Special Emphasis Panel, Spore in Lung Cancer.

*Date:* October 3–4, 2002.

*Time:* 8 a.m. to 6 p.m.

*Agenda:* To review and evaluate grant applications.

<sup>1</sup>*Place:* Washington Terrace Hotel, 1515 Rhode Island Avenue, NW., Washington, DC 20005.

*Contact Person:* Brian E. Wojcik, Ph.D., Scientific Review Administrator, Grants Review Branch, Division of Extramural Activities, National Cancer Institute, 6116 Executive Boulevard, Room 8019, Bethesda, MD 20892, 301/402–2785.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support, 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: August 22, 2002.

LaVerne Y. Stringfield, Director, Office of Federal Advisory Committee Policy. [FR Doc. 02–22064 Filed 8–28–02; 8:45 am] BILLING CODE 4140–01–M

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

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

## National Cancer Institute; 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 meeting of the President's Cancer Panel.

The meeting will be closed to the public in accordance with the provisions set forth in section 552b(c)(9)(B), Title 5 U.S.C., as amended because the premature disclosure of information and the discussions would likely to significantly frustrate implementation of recommendations.

*Name of Committee:* President's Cancer Panel.

Date: September 16, 2002.

*Closed:* 2 p.m. to 6 p.m.

Agenda: Meeting with Panel, two of which are new Members, to review the previous year's activities of the Panel and develop agendas for future meetings in 2003. These discussions will include confidential NCI operational information, i.e. budget formulations, personnel actions and contract issuances.

*Place:* National Institutes of Health, 31 Center Drive, Building 31, Room 31/11A10, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Maureen O. Wilson, Ph.D., Executive Secretary, National Cancer Institute, NIH, 31 Center Drive, Building 31, Room 3A18, Bethesda, MD 20892, (301) 496– 1148.

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

Information is also available on the Institute's/Center's home page: *deainfo.nci.nih.gov/advisory/pcp/pcp.htm*, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction;