of Health (NIH) of the Public Health Service (PHS) of the Department of Health and Human Services (DHHS) seeks a Cooperative Research and Development Agreement (CRADA) with a pharmaceutical or biotechnology company for collaborative creation, research and development of poly[ethylene glycol] (PEG) conjugates of the antiviral protein, cyanovirin-N (CV-N) and antiviral homologs thereof. More specifically, a commercial partner is sought for collaborative R&D of PEG– CV-N conjugates for non-retroviral fields of use. Examples of nonretroviruses of interest include influenza viruses A&B, measles virus, human herpesvirus 6 (HHV-6) and related viruses. Any CRADA for the biomedical use of this technology will be considered. The CRADA would have an expected duration of one (1) to five (5) years. The goals of the CRADA include the rapid publication of research results and timely commercialization of products, diagnostics and treatments that result from the research. The CRADA Collaborator will have an option to elect a non-exclusive or exclusive commercialization license to subject inventions arising under the CRADA and which are subject of the CRADA Research Plan.

DATES: Inquiries regarding CRADA proposals and scientific matters may be forwarded at any time. Confidential CRADA proposals, preferably two pages or less, must be submitted to the NCI within 30 days from date of this publication. Guidelines for preparing full CRADA proposals will be communicated shortly thereafter to all respondents with whom initial confidential discussions will have established sufficient mutual interest.

ADDRESSES: Proposals and questions about this CRADA opportunity may be addressed to Dr. Bjarne Gabrielsen, Technology Transfer Branch, National Cancer Institute-Frederick, Fairview Center, Room 502, Frederick, MD 21701 (phone: 301–846–5465, fax: 301–846–6820).

Scientific inquiries should be directed to: Michael Boyd, M.D./ Ph.D., Chief, Molecular Targets Drug Discovery Program, Bldg 1052, National Cancer Institute, Frederick, MD 21702 (phone 301–846–5391; FAX 301–846–6919; e-mail: boyd@dtpax2.ncifcrf.gov).

### SUPPLEMENTARY INFORMATION:

### Technology Available

DHHS scientists within the MTDDP have extensive experience with the chemistry and biology of CV–N and related antiviral proteins. More

specifically, MTDDP has expertise and technology for protein chemistry, protein mutagenesis and bioengineering and antiviral evaluations pertinent to this proposed collaboration. Whereas MTDDP is currently engaged in a CRADA collaboration on HIV fields of use of PEG—CV—N's, the new collaboration proposed herein will focus on non-retroviruses, including but not limited to influenza viruses types A&B, measles virus, human herpesvirus 6 (HHV—6), and related viruses.

### **Technology Sought**

Accordingly, DHHS now seeks collaborative arrangements for the construction and antiviral research and development of PEG-CV-N conjugates against non-retroviruses. The successful Collaborator should possess experience in the following areas at a minimum: pegvlation (PEG) chemistry, biology and pharmacology of PEG-protein conjugates, preclinical and clinical development expertise for pegylated proteins as therapeutic and/or preventative agents, preferably against viral diseases. For collaborations with the commercial sector, a Cooperative Research and Development Agreement (CRADA) will be established to provide equitable distribution of intellectual property rights developed under the CRADA. CRADA aims will include rapid publication of research results as well as development of the technology toward commercialization. The role of the National Cancer Institute-Molecular Targets Drug Discovery Program (MTDDB) in this CRADA will include, but not be limited to:

- 1. Providing intellectual, scientific, and technical expertise and experience to the research project.
- to the research project.
  2. Providing the Collaborator with pertinent available reagents for investigation/evaluation.
- 3. Planning research studies and interpreting research results.
- 4. Publishing research results. The role of the CRADA Collaborator may include, but not be limited to:
- 1. Providing significant intellectual, scientific, and technical expertise or experience to the research project.
- 2. Planning research studies and interpreting research results.
- 3. Providing technical expertise and/ or financial support (e.g. facilities, personnel and expertise) for CRADArelated research as outlined in the CRADA Research Plan.
- 4. Accomplishing objectives according to an appropriate timetable to be outlined in the CRADA Collaborator's proposal.
- 5. The willingness to commit best effort and demonstrated resources to the

research, development and commercialization of this technology.

- 6. The demonstration of expertise in the commercial development, production, marketing and sales of products related to this area of technology.
- 7. The willingness to cooperate with the National Cancer Institute in the timely publication of research results.
- 8. The agreement to be bound by the appropriate DHHS regulations relating to human subjects, and all PHS policies relating to the use and care of laboratory animals.
- 9. The willingness to accept the legal provisions and language of the CRADA with only minor modifications, if any. These provisions govern patent rights to CRADA inventions.

Dated: November 7, 2001.

#### Kathleen Sybert,

Chief, Technology Transfer Branch, National Cancer Institute, National Institutes of Health. [FR Doc. 01–29545 Filed 11–27–01; 8:45 am] BILLING CODE 4140–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

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

# Office of the Director; Notice of Meeting

Pursuant to Public Law 92–463, notice is hereby given of a meeting of the Advisory Committee to the Director, NIH

The entire meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should inform the Contact Person listed below in advance of the meeting. In the interest of security, NIH has instituted stringent procedures for entrance into the building by non-government employees. Persons without a government I.D. will need to show a photo I.D. upon entering the building.

 $\it Name\ of\ Committee:\ Advisory\ Committee$  to the Director, NIH.

Date: December 6, 2001. Time: 9:00 a.m.-4:00 p.m.

Agenda: The topics proposed for discussion include but are not limited to: (1) Implementation of the Policy for Use of Human Embryonic Pluripotent Stem Cells; (2) NIH Response to Exceptional Situations; (3) Further Discussion and Decision on Extramural Construction Report; and (4) Presentation on the President's Information Technology Advisory Council (PITAC).

Place: National Institutes of Health, 31 Center Drive, Building 31, Conference Room 10, Bethesda, Maryland 20892. Contact: Ms. Janice C. Ramsden, Special Assistant to the Acting Director, NIH, National Institutes of Health, Building 1, Room 333, Bethesda, Maryland 20892, jr52h@nih.gov, Telephone: (301) 496–0959.

Dated: November 15, 2001.

#### LaVerne Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 01–29531 Filed 11–27–01; 8:45 am]

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **National Institutes of Health**

# State-of-the-Science Conference on Management of Clinically Inapparent Adrenal Mass (Incidentaloma)

Notice is hereby given of the National Institutes of Health (NIH) State-of-the-Science Conference on "Management of the Clinically Inapparent Adrenal Mass (Incidentaloma)" to be held February 4 to 6, 2002, in the NIH Natcher Conference Center, 45 Center Drive, Bethesda, Maryland 20892. The conference will begin at 8:30 a.m. on February 4 and 5 and at 9:00 a.m. on February 6 and will be open to the public.

Adrenal gland masses occur in at least 3 percent of persons over age 50. Although most cause no symptoms or health problems, a small proportion can lead to serious diseases, and approximately one out of every 4,000 adrenal masses is cancerous. Physicians discover many adrenal masses inadvertently, while testing or treating patients for other conditions. These clinically inapparent masses are commonly known as incidentalomas.

Incidentalomas raise challenging questions for physicians and their patients, including what, if any, surgical or nonsurgical treatment is the best approach. The appropriate management of incidentalomas promises to be an increasingly common challenge for our aging society.

Over the past several years, new information about the epidemiology, biology, screening, treatment, and follow-up of adrenal tumors has become available. This conference will explore and assess the current scientific knowledge regarding adrenal incidentalomas so that health care providers and the general public can make informed decisions about this important public health issue.

During the first day and a half of the conference, experts will present the latest research findings on clinically inapparent adrenal masses to an independent non-Federal panel. After

weighing all of the scientific evidence, the panel will draft a statement that will address the following key questions:

- What are the causes, prevalence, and natural history of clinically inapparent adrenal masses?
- Based on available scientific evidence, what is the appropriate evaluation of a clinically inapparent adrenal mass?
- What criteria should guide the decision on surgical versus nonsurgical management of these masses?
- If surgery is indicated, what is the appropriate procedure?
- What is the appropriate follow-up for patients for each management approach?
- What additional research is needed to guide practice?

On the final day of the conference, the panel chair will read the panel's draft statement in public, at which time members of the public are invited to offer comments on the draft.

The National Institute of Child Health and Human Development and the NIH Office of Medical Applications of Research (OMAR) are the primary sponsors of this meeting. The National Cancer Institute will cosponsor the meeting.

Advance information about the conference and conference registration materials may be obtained from Prospect Associates of Silver Spring, Maryland, by calling 301–592–3320 or by sending e-mail to adrenalmass@prospectassoc.com. Prospect Associates' address is 10720 Columbia Pike, Suite 500, Silver Spring, Maryland 20901–4437. A conference agenda and registration information are also available on the NIH Consensus Program Web site at http://consensus.nih.gov.

Please Note: Organizations that wish to make 5-minute presentations on the conference topic should contact Elsa Bray of NIH/OMAR by telephone (301-496–4999) or e-mail (elsabray@nih.gov) no later than January 14, 2002. The NIH has recently instituted new security measures to ensure the safety of NIH employees and property. All visitors must be prepared to show a photo ID upon request. Visitors may be required to pass through a metal detector and have bags, backpacks, or purses inspected or x-rayed as they enter NIH buildings. Conference attendees may want to leave extra bags or personal materials at their hotel to minimize the time needed for inspection. For more information about the new security measures at NIH, please visit the Web site at http://www.nih.gov/about/ visitorssecurity.htm.

Dated: November 19, 2001.

#### Ruth L. Kirschstein,

Acting Director, National Institutes of Health. [FR Doc. 01–29542 Filed 11–27–01; 8:45 am]

# 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, Letter RFA CA 02–502.

Date: December 12, 2001.

Time: 12 p.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

Place: Executive Plaza North, Room 4013, 6130 Executive Boulevard, Rockville, MD 20852 (Telephone Conference Call).

Contact Person: Sherwood Githens, Ph.D, Scientific Review Administrator, National Institutes of Health, National Cancer Institute, Special Review, Referral and Resources Branch, 6116 Executive Boulevard, Room 8068, Bethesda, MD 20892, (301) 435–

(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: November 19, 2001.

### LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 01–29518 Filed 11–27–01; 8:45 am]

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