the proposed national workgroup and related activities. Providing supplemental funding is both timely and an efficient mechanism for advancing newborn screening activities at the national level.

Ann M. Sheehy,

Principal Deputy Administrator.

[FR Doc. 2026–16396 Filed 8–11–26; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Solicitation of Nominations for Membership on the National Vaccine Advisory Committee

AGENCY: Office of the Assistant Secretary for Health, Office of Infectious Disease and HIV/AIDS Policy, Office of the Secretary, Department of Health and Human Services.

ACTION: Notice; solicitation of nominations for appointment to the National Vaccine Advisory Committee (NVAC).

SUMMARY: The Office of the Assistant Secretary for Health (OASH) is seeking nominations for membership on the National Vaccine Advisory Committee (referred to as NVAC and/or the Committee). The NVAC is a federal advisory committee within the U. S. Department of Health and Human Services (HHS). Management support for the activities of this Committee is the responsibility of the Office of the Assistant Secretary for Health (OASH). The qualified individuals will be nominated by the Assistant Secretary for Health (ASH) of the U.S. Department of Health and Human Services for appointment to the NVAC. The ASH serves as Director of the National Vaccine Program (NVP). Members of the Committee, including the Chair, are appointed by the ASH. Members are invited to serve for overlapping terms of up to four years. The NVAC was established to provide advice and make recommendations to the Director of the NVP on matters related to the Program's responsibilities. The functions of the Committee are solely advisory in nature. A copy of the NVAC charter that describes its structure and functions can be reviewed on the NVAC website at: *https://www.hhs.gov/vaccines/nvac/charter/index.html.*

DATES: Nominations for membership on the NVAC must be received no later than thirty days from publication. Packages received after this time will not be considered for the current membership cycle.

ADDRESSES: All nominations should be emailed in one email to *oidp@hhs.gov* with the subject line ''NVAC Application 2026.''

FOR FURTHER INFORMATION CONTACT: Acting Designated Federal Officer, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Health, Office of Infectious Disease and HIV/AIDS Policy, Hubert H. Humphrey Building, 200 Independence Avenue SW, Washington, DC 20201.

Email: oidp@hhs.gov.

SUPPLEMENTARY INFORMATION: Section 2105 of the Public Health Service (PHS) Act, as amended (42 U.S.C. 300aa–5) mandated that the Secretary of Health and Human Services (Secretary) establish a National Vaccine Program (NVP or Program) to achieve optimal prevention of human infectious diseases through immunization and to achieve optimal prevention against adverse reactions to vaccines. The Committee is governed by the provisions of the Federal Advisory Committee Act (5 U.S.C. Ch. 10). The functions of the Committee are solely advisory in nature. Membership will be balanced and includes a selection of public members who are engaged in gold standard science, vaccine safety or efficacy research, or who are physicians, scientists, members of parent organizations concerned with immunizations, representatives of state or local health agencies or public health organizations. The public members are classified as special government employees (SGEs). Committee members are appointed by the ASH. This announcement is to solicit nominations of qualified candidates to fill vacancies on the NVAC.

Nominations are being sought for individuals who have expertise and qualifications necessary to contribute to the accomplishments of NVAC's objectives. Federal employees will not be considered for membership. Nominees must be U.S. citizens, and cannot be full-time employees of the U.S. Government. Committee members are considered Special Government Employees (SGEs), requiring the filing of financial disclosure reports at the beginning and annually during their terms. Individuals who are selected for appointment will be required to provide detailed information regarding their financial interests. Note that the need for different expertise varies from year to year and a candidate who is not selected for an open position may be reconsidered for a subsequent open position.

How to submit nominations: The following information should be included in the package of materials submitted for each nominee: (1) A letter of nomination that clearly states the name and affiliation of the nominee, the basis for the nomination (*i.e.,* specific attributes that qualify the nominee for service in this capacity) from a person(s) not employed by the U.S. Department of Health and Human Services; and a statement that the nominee is willing to serve as a member of the committee; (2) a letter of interest or personal statement from the nominee stating how their expertise would inform the work of NVAC; (3) a current copy of the nominee's curriculum vitae (no longer than 5 pages); and (4) a short biographical sketch (no more than 200 words). All documentation must be received in a legible font, such as Times New Roman 12 point, for a nomination to be considered.

Please note that nominees will not receive updates on the status of their nomination, and the nomination process can take many months. Information on nominees appointed to the committee will be posted to the NVAC website at *https://www.hhs.gov/vaccines/nvac/members/index.html.*

Individuals can nominate themselves for consideration of appointment to the committee. Incomplete nominations will not be processed. Federal employees should not be nominated for appointment to this committee.

Authority: Section 2105 of the Public Health Service (PHS) Act, as amended (42 U.S.C. 300aa–5). The NVAC is governed by the provisions of 5 U.S.C. Chapter 10, which sets forth standards for the formation and use of advisory committees.

Sarah McClelland,

Health advisor, Office of the Assistant Secretary for Health.

[FR Doc. 2026–16399 Filed 8–11–26; 8:45 am]

BILLING CODE 4150–44–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government Owned Invention Available for License: Human Antibodies Targeting Beneficial Viral Peptide in Liver Cancer

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Cancer Institute (NCI) seeks research co-development partners and/or licensees to develop a collection of anti-CE1 antibodies for liver cancer treatment.

FOR FURTHER INFORMATION CONTACT: Inquiries related to this license opportunity should be directed to: Michael Pollack, Ph.D., Unit Supervisor, NCI, Technology Transfer Center, Email: *PollackM@mail.nih.gov* or Phone: 240–276–5519.

SUPPLEMENTARY INFORMATION: Liver cancer is the sixth most common and the third leading cause of cancer death worldwide. The most common liver cancer in adults is hepatocellular carcinoma (HCC), an aggressive malignancy with an increasing global incidence and mortality rate. The current methods for early detection, surveillance, and treatment are suboptimal. This is due to complex etiologies, demonstrating a need for more effective treatments.

Previously, NIH investigators identified a novel viral peptide antigen known as CE1. CE1 belongs to the rhinovirus and enterovirus families (NIH Ref: E–023–2024) producing a dominant humoral response associated with reduced incidence and mortality of HCC. Through phage display from a human single-chain fragment variable (scFv) phage library, NCI inventors isolated two human antibodies (B9 and B10) against the viral peptide, CE1. Human anti-CE1 B9 and B10 antibodies were constructed. These antibodies showed specific binding to liver cancer cell lines and clinical tumor tissues. They inhibited HCC tumor growth via inducting NK cell-mediated antibody-dependent cellular cytotoxicity *in vitro* and *in vivo.* These anti-CE1 antibodies have the potential as liver cancer therapeutics, either on their own or as the targeting domain of an immunoconjugate.

''This Notice is in accordance with 37 CFR 404.4 Authority to grant licenses.''

NIH Reference Number: E–021–2025.

Related Technologies: E–023–2024.

Product Type: Therapeutic.

Therapeutic Area(s): Gastroenterology | Oncology.

Development Stage: Pre-clinical (*in vivo* validation).

Publications: None.

Patents: Provisional Patent filed on August 8, 2025.

Potential Commercial Applications:

- Development of cancer therapeutics overcoming of PD–1/PD–L1 checkpoint blockade resistance.
- Development of alternative or combination immunotherapies for checkpoint-refractory tumors.
- Preclinical screening of alternative or combination immunotherapies for checkpoint-refractory tumors.
- Evaluation of cancer therapeutic strategies for cancers with defective antigen processing/presentation or loss of MHC–I expression.
- Companion model for comparing checkpoint-resistant MC38 B2m KO tumors against checkpoint-responsive wild-type MC38 tumors.

Competitive Advantages:

- Uniquely models a clinically relevant checkpoint-resistance mechanism.
- Uses the MC38 colon cancer model, which is well-established and regulatorily de-risked.
- Unique model permitting the interrogation of abrogated response to anti-PD–1 and anti-PD–1 treatment.

Collaboration Opportunity: Licensing.

Dated: August 7, 2026.

Richard U. Rodriguez,

Associate Director, Technology Transfer Center, National Cancer Institute.

[FR Doc. 2026–16442 Filed 8–11–26; 8:45 am]

BILLING CODE 4167–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of an Exclusive Patent License: Development and Commercialization of BL–760 Dye for Intraoperative Fluorescence Imaging

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Cancer Institute, an institute of the National Institutes of Health, Department of Health and Human Services, is contemplating the grant of an Exclusive Patent License to practice the inventions embodied in the patents and patent applications listed in the Supplementary Information section of this notice to OptoSurgical LLC (''OptoSurgical''), a company located in Columbia, Maryland, the United States of America.

DATES: Only written comments and/or applications for a license which are received by the National Cancer Institute's Technology Transfer Center on or before August 27, 2026 will be considered.

ADDRESSES: Requests for copies of the patent applications, inquiries, and comments relating to the contemplated Exclusive Patent License should be directed to: Lauren Nguyen-Antczak, Ph.D., J.D., Senior Technology Transfer Manager, NCI Technology Transfer Center, Telephone: (301)–624–8752; Email: *lauren.nguyen-antczak@nih.gov.*

SUPPLEMENTARY INFORMATION:

Intellectual Property

1. PCT Application No. PCT/US2014/064136 filed November 5, 2014, entitled ''A New Class of Stable Heptamethine Cyanine Fluorophores And Biomedical Applications Thereof'' [HHS Reference No. E–271–2014–0–PCT–01].
2. United States Patent No. 10,280,307 (Application No. 15/524,567) filed May 4, 2017, entitled ''A New Class of Stable Heptamethine Cyanine Fluorophores And Biomedical Applications Thereof'' [HHS Reference No. E–271–2014–0–US–02].
3. United States Patent No. 10,876,003 (Application No. 16/374,642) filed April 3, 2019, entitled ''A New Class of Stable Heptamethine Cyanine Fluorophores And Biomedical Applications Thereof'' [HHS Reference No. E–271–2014–0–US–03].
4. PCT Application No. PCT/US2019/018153 filed February 15, 2019, entitled ''A New Class of Stable Heptamethine Cyanine Fluorophores And Biomedical Applications Thereof'' [HHS Reference No. E–046–2019–0–PCT–01].
5. United States Patent No. 10,961,193 (Application No. 16/969,902) filed August 13, 2020, entitled ''A New Class of Stable Heptamethine Cyanine Fluorophores And Biomedical Applications Thereof'' [HHS Reference No. E–046–2019–0–US–06].
6. United States Patent No. 11,746,086 (Application No. 17/179,217) filed February 18, 2021, entitled ''A New Class of Stable Heptamethine Cyanine Fluorophores And Biomedical Applications Thereof'' [HHS Reference No. E–046–2019–0–US–07].
7. United States Patent Application No. 18/520,027 filed November 27, 2023, entitled ''A New Class of Stable Heptamethine Cyanine Fluorophores And Biomedical Applications Thereof'' [HHS Reference No. E–046–2019–1–US–01].
8. PCT Application No. PCT/US2019/018057 filed February 14, 2019, entitled ''Heptamethine Cyanines For Use As Fluorescent Markers Of The Biliary And Renal Systems'' [HHS Reference No. E–036–2018–0–PCT–01].
9. United States Patent Application No. 18/358,068 filed July 25, 2023, entitled ''Heptamethine Cyanines For Use As Fluorescent Markers Of The Biliary And Renal Systems'' [HHS Reference No. E–036–2018–0–US–03].

The patent rights in these inventions have been assigned to the Government of the United States of America.

The prospective exclusive license territory may be the ''United States,'' and the field of use may be limited to the following:

''Development, manufacture and commercialization of BL–760 dye as