motor as rail continues to charge for Rail Security Service as an accessorial charge.

Response: The Rail Security Service (RSS), as a separate accessorial service for rail, was cancelled on July 1, 2000, combined with tank surveillance service and redesignated as rail inspection service. Rail Inspection Service is a physical inspection and/or surveillance requirement for rail shipments. Satellite monitoring is a technology that is integral to the vehicle. There is little comparison between a rail security inspector performing physical inspections of rail cars at every stop and satellite monitoring. These are distinctive and different types of services.

(6) *Industry Comment:* Future Defense Transportation Tracking System (DTTS) enhancement requirements will drive up costs to motor carriers that they will be unable to recoup.

Response: Carriers should consider all costs incurred in transportation and traffic management services when preparing rate and pricing submissions to MTMC. Costs associated with providing satellite monitoring service should be included with other costs such as fuel, insurance and labor. The DOD does not imply or intend that a carrier industry provide requested services without fair and equitable reimbursement. As such carriers are free to include costs associated with satellite monitoring in the rate structure.

(7) *Industry Comment:* MTMC intends to keep SNS as a separate accessorial service but not for AA&E.

Response: MTMC intends to retain a satellite monitoring service for non-AA&E shipments. The service will be used on a case-by-case basis where the shipper has determined in-transit tracking is necessary. However, MTMC does not intend to separately reimburse carriers for this service. Carriers will be permitted to voluntarily offer this service and shippers may use this as a factor, along with rates and similar service factors, when selecting a best value carrier. This change will be announced at a later date.

(8) *Industry Comment:* The GFM system is not capable of identifying carriers who can provide SNS, except by the publishing of the SNS accessorial code in the tenders, resulting in shippers requesting AA&E service from motor carriers not able to provide SNS service. Also, there is no information on how the change will be accomplished technically.

Response: MTMC intends to continue the practice of requiring the carrier to submit the SNS accessorial code within the protective service section of the carrier's applicable tender. However, the carrier will not be able to enter a specific rate for the accessorial service as any costs associated with SNS are to be incorporated into the carrier's linehaul transportation rate. The use of the SNS code will allow existing automated systems to identify carriers eligible to provide SNS from non-SNS eligible carriers. This practice is consistent with existing MTMC procedures in accordance with Item 701 (Security and Accessorial Services for Non Guaranteed Traffic) of the MSTIP 364–C and is a standard carrier practice for tenders with exclusive use rates.

(9) *Industry Comment:* MTMC incorrectly assumes that all AA&E transportation requires SNS service.

Response: MTMC is fully aware that small quantity shipments of low risk AA&E do not require SNS, but require constant surveillance service. This proposal will affect only those shipments that are satellite-monitored. The requirements for small shipments are articulated in the Defense Transportation Regulation Vol II and in the MTMC Military Freight Traffic Rules Publications 1B.

(10) *Industry Comment:* The proposal disadvantages small carriers, as SNS equipment is not readily available to them due to costs.

Response: The proposed change has no impact on small carrier's as they would be required to acquire the same technology regardless of how the carrier is reimbursed for SNS services. In addition, DOD shipments of AA&E require satellite tracking to ensure they move safely and securely from origin to destination.

(11) *Industry Comment:* SNS is different from other accessorial services (tarping, chains, and dual river) because satellite equipment is not readily interchangeable. It is an accessorial service that replaced two other accessorial services (armed guards and security escorts).

Response: MTMC understands that satellite-monitoring devices are not readily transferable from one conveyance (power unit) to another. However, since, the inception of SNS the carrier industry has had almost 10 years to equip conveyances with satellite tracking devices.

(12) *Industry Comment:* The change is viewed as being precedent for future changes.

Response: Technology and equipment improvements associated with the motor carrier industry are continually evolving. Accordingly, MTMC will periodically review and assess the program and rules which apply to the surface movement of AA&E shipments by motor and rail carriers and make program changes as warranted.

Luz D. Ortiz,

Army Federal Register Liaison Officer.

[FR Doc. 02–8680 Filed 4–9–02; 8:45 am]

BILLING CODE 3710–08–M

DEPARTMENT OF DEFENSE

Department of the Army

Availability for Non-Exclusive, Exclusive, or Partially Exclusive Licensing of U.S. Patent Application Concerning Angiogenesis Inhibitors Specific for Methionine Aminopeptidase 2 as Antiparasitic Drugs

AGENCY: Department of the Army, DoD.

ACTION: Notice.

SUMMARY: In accordance with 37 CFR 404.6, announcement is made of the availability for licensing of U.S. Patent Application Serial No. 60/354,280 entitled ''Angiogenesis Inhibitors Specific for Methionine Aminopeptidase 2 as Antiparasitic Drugs'' and, filed January 29, 2002. The United States Government as represented by the Secretary of the Army has rights in this invention.

ADDRESSES: Commander, U.S. Army Medical Research and Material Command, ATTN: Command Judge Advocate, MCMR–JA, 504 Scott Street, Fort Detrick, Frederick, Maryland 21702–5012.

FOR FURTHER INFORMATION CONTACT: For patent issues, Ms. Elizabeth Arwine, Patent Attorney, (301) 619–7808. For licensing issues, Dr. Paul Mele, Office of Research & Technology Assessment, (301) 619–6664, both at telefax (301) 619–5034.

SUPPLEMENTARY INFORMATION: Methionine aminopeptidase 2 (MetAP2) is responsible for hydrolysis of the initiator, methionine residues from the majority of newly synthesized proteins. A malaril MetAP2 gene has been cloned from *Plasmodium falciparum* (GenBank accession number AF34820). The cloned *P. falciparum* MetAP2 (PfMetAP2) has a length of 1544 bp and encoded a protein of 354 amino acid residues. A multiple sequence alignment shows that the *P. falciparum* MetAP2 has 40% homology with human MetAP2 and 45% homology with yeast MetAP2. The gene of *P. falciparum* MetAP2 locates in chromosome 14. The 3D structure of *P. falciparum* MetAP2 has been modeled based on human MetAP2 crystal structure. The specific MetAP2 inhibitors, fumagillin and

TNP–440 have been found to potently block the in vitro growth of *P. falciparum* and to a lesser degree against that of *Leishmania donavani.*

Luz D. Ortiz,

Army Federal Resister Liaison Officer.

[FR Doc. 02–8678 Filed 4–9–02; 8:45 am]

BILLING CODE 3710–08–M

DEPARTMENT OF DEFENSE

Department of the Army

Availability for Non-Exclusive, Exclusive, or Partially Exclusive Licensing of U.S. Patent Application Concerning Method of Diagnosing Stage or Aggressive of Breast and Prostate Cancer Based on Levels of Fatty Acids Binding Proteins

AGENCY: Department of the Army, DoD.

ACTION: Notice.

SUMMARY: In accordance with 37 CFR 404.6, announcement is made of the availability for licensing of U.S. Patent Application No. 09/451,513 entitled ''Method of Diagnosing Stage or Aggressiveness of Breast and Prostate Cancer Based on Levels of Fatty Acids Binding Proteins'' filed Nov. 30, 1999. Foreign rights are also available (PCT/US99/28314), filed Nov. 30, 1999. The United States Government as represented by the Secretary of the Army has rights in this invention.

ADDRESSES: Commander, U.S. Army Medical Research and Materiel Command, ATTN: Command Judge Advocate, MCMR–JA, 504 Scott Street, Fort Detrick, Frederick, Maryland 21702–5012.

FOR FURTHER INFORMATION CONTACT: For patent issues, Ms. Elizabeth Arwine, Patent Attorney, (301) 619–7808. For licensing issues, Dr. Paul Mele, Office of Research & Technology Assessment, (301) 619–6664, both at telefax (301) 619–5034.

SUPPLEMENTARY INFORMATION: A method of diagnosing the stage or aggressiveness of cancer and particularly breast and prostate cancer by measuring the deviation of levels of fatty acid binding proteins in mammalian tissue or body fluids from normal levels of fatty acid binding proteins. The invention relates to a family of key proteins levels of fatty acid binding proteins. The invention relates to a family of key proteins called fatty acid binding proteins, which are involved in metabolism of AA and other lipids and how they affect the proliferation of cancer cells.

Luz D. Ortiz,

Army Federal Register Liaison Officer.

[FR Doc. 02–8677 Filed 4–9–02; 8:45 am]

BILLING CODE 3710–08–M

DEPARTMENT OF DEFENSE

Department of the Army

Availability for Non-Exclusive, Exclusive, or Partially Exclusive Licensing of U.S. Patent Application Concerning Chimeric Filovirus Glycoprotein

AGENCY: Department of the Army, DoD.

ACTION: Notice.

SUMMARY: In accordance with 37 CFR 404.6, announcement is made of the availability for licensing of U.S. Patent Application No. 10/066,506 entitled ''Chimeric Filovirus Glycoprotein'' filed January 31, 2002. The United States Government as represented by the Secretary of the Army has rights in this invention.

ADDRESSES: Commander, U.S. Army Medical Research and Materiel Command, ATTN: Command Judge Advocate, MCMR–JA, 504 Scott Street, Fort Detrick, Frederick, Maryland 21702–5012.

FOR FURTHER INFORMATION CONTACT: For patent issues, Ms. Elizabeth Arwine, Patent Attorney, (301) 619–7808. For licensing issues, Dr. Paul Mele, Office of Research & Technology Assessment, (301) 619–6664, both at telefax (301) 619–5034.

SUPPLEMENTARY INFORMATION: Chimeric GP molecules were constructed which contain portions of both the EBOV and MBGV GP proteins by swapping the subunits between EBOV and MBGV. The chimeric molecules were cloned into an alphavirus replicon, which offers the advantage of high protein expression levels in mammalian cells and is a proven vaccine vector. These chimeric molecules fully protected guinea pigs from MBGV challenge, and conversely protected the animals from EBOV challenge. These results indicate that a protective epitope resides within the GP2 subunit of the MBGV GP protein and at least partially within the GP2 subunit of the EBOV GP protein. Additionally these results show that a construction of a single-component bivalent vaccine protective in guinea pigs is achievable.

Luz D. Ortiz,

Army Federal Register Liaison Officer.

[FR Doc. 02–8675 Filed 4–9–02; 8:45 am]

BILLING CODE 3710–08–M

DEPARTMENT OF DEFENSE

Department of the Army

Availability for Non-Exclusive, Exclusive, or Partially Exclusive Licensing of U.S. Patent Application Concerning Securing Device for an Endotracheal Tube

AGENCY: Department of the Army, DOD.

ACTION: Notice.

SUMMARY: In accordance with 37 CFR 404.6, announcement is made of the availability for licensing of U.S. Patent Application No. 09/789,708 entitled ''Securing Device for an Endotracheal Tube'' filed February 22, 2001. Foreign rights are also available (PTC/US01/05558). The United States Government as represented by the Secretary of the Army has rights in this invention.

ADDRESSES: Commander, U.S. Army Medical Research and Materiel Command, ATTN: Command Judge Advocate, MCMR–JA, 504 Scott Street, Fort Detrick, Frederick, Maryland 21702–5012.

FOR FURTHER INFORMATION CONTACT: For patent issues, Ms. Elizabeth Arwine, Patent Attorney, (301) 619–7808. For licensing issues, Dr. Paul Mele, Office of Research & Technology Assessment, (301) 619–6664, both at telefax (301) 619–5034.

SUPPLEMENTARY INFORMATION: A securing device for an endotracheal tube includes a shield having an opening through which the endotracheal tube can pass and a clamp mounted on the shield for holding the endotracheal tube. A bite block for preventing occlusion of the endotracheal tube by a patient's teeth may be mounted on an opposite surface of the shield from the clamp.

Luz D. Ortiz,

Army Federal Register Liaison Officer.

[FR Doc. 02–8676 Filed 4–9–02; 8:45 am]

BILLING CODE 3710–08–M