## NIH TECHNOLOGY TRANSFER COMMUNITY NEWSLETTER

## President Biden Announces NIH COVID-19 Licenses to Medicines Patent Pool

Steve Ferguson, OTT

Patents and biological materials for NIH COVID-19 technologies have been made available to the Medicines Patent Pool (MPP) through the World Health Organization's (WHO) COVID-19 Technology Access Pool (C-TAP). Inventors from the National Cancer Institute (NCI), the National Eye Institute (NEI), the National Institute of Allergy and Infectious Diseases (NIAID), the National Institute of Environmental Health Sciences (NIEHS), and the National Center for Advancing Translational Sciences (NCATS) developed the technologies which include the stabilized spike protein technology used in currently available COVID-19 vaccines, research tools for vaccine, drug, and



July 2022

President Biden



diagnostic development, as well

as early-stage vaccine candidates and diagnostics. The announcement of the licenses was made on May 12th by President Biden at the second Global COVID-19 Summit, cohosted by the United States, Belize, Germany, Indonesia and Senegal.

The MPP's purpose is to sublicense medicines and health technologies to increase access to and facilitate development of essential medicines for people living in low-and middle-income countries. NIH has been involved with MPP since its founding in 2010 when NIH contributed the first patent to MPP.

C-TAP's goal is to increase the global supply of vaccines, treatments, and diagnostics for COVID-19. The licensing of patents through C-TAP is handled by MPP.

NIH has agreed to license these technologies to the MPP to help low and middle income countries have access to lifesaving treatments, vaccines, and diagnostics. A full list of the available technologies can be seen <u>here</u>.





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## Book Review: Biotechnology Entrepreneurship: From Science to Solutions

Richelle Holnick, OTT

#### NCI's own Michael Salgaller wrote Biotechnology

*Entrepreneurship: From Science to Solutions* to fill a critical gap in the biotechnology industry. For all the resources on how to start companies and on how to manage established companies in other sectors, there is a dearth of material on unique and critical issues in starting biotechnology companies, as well as managing the transition from start-up to established company. It is to this gap that *Biotechnology Entrepreneurshi*p is directed. By combining the voices of a diverse set of industry insiders with extensive experience in biotechnology, *Biotechnology Entrepreneurship* prepares nascent founders, managers, investors, and other biotechnology company stakeholders to position themselves and their companies for commercial success.

#### BIOTECHNOLOGY ENTREPRENEURSHIP From Science to Solutions

Michael L. Salgaller, PhD



# An Interview with Dr. Phil Chen the 'Founding Father' of NIH Tech Transfer

Richelle Holnick, OTT

Upon the occasion of his 90th birthday, we sat down with the 'founding father' of NIH technology transfer – Dr. Phillip S. Chen, Jr. – to hear the true story of the origins of what has now become the world's largest (and most successful) biomedical T2 program. Dr. Chen had a long and accomplished career, spending over 40 years at the NIH. He has a laundry list of accomplishments, from 'inventing' the CRADA, to founding the NIH Office of Technology Transfer, and having one of the most highly cited scientific papers, to name only a few. Without further adieu, please read on for Dr. Chen's unfiltered thoughts on his career and technology transfer.



### What first attracted you to a career in scientific research?

*PC:* My father was a Chemistry teacher with a Ph.D. in Organic Chemistry, and I became interested in science at an early age. In college I majored in Physics, but took an equally large number of Chemistry courses. Seeking a doctorate was a logical next step when I graduated in 1950, and I applied to several graduate schools. After several offers from schools on the west coast and midwest, I learned of an opportunity at the University of Rochester to pursue a Ph.D. in Pharmacology at the Atomic Energy Project. This interested me since the research there related to the atomic energy effort, and I had been particularly attracted by a course in Modern Physics. Thus, my biomedical research career began at the University of Rochester, continued with a postdoctoral fellowship at the University of Copenhagen, and then at the National Heart Institute at NIH.

"My understanding is that the NIH technology transfer program is the premier such program in the Federal Government. I am proud to have had something to do with its birthing and infancy." During my graduate years at Rochester, I was first author of a paper "Microdetermination of Phosphorus" published in Analytical Chemistry in 1956 that is one of the most highly cited scientific papers. At one time Science Citation Index listed it in the top 50.

### You worked at NIH for over 40 years; what kept you passionate for your work at the NIH? And how did you get interested in technology transfer?

**PC:** My career at the NIH was in two stages, and was exceptionally varied, which kept me challenged and made life interesting. The first stage was doing laboratory research as a USPHS commissioned officer in the Clinical Endocrinology Branch, National Heart Institute in 1956-1959.

The military draft stimulated me to seek a position where I could serve in a science capacity, and the NIH offered that attractive possibility. However, I returned to the University of Rochester in 1959 as an Assistant Professor of Radiation Biology and Biophysics and of Pharmacology to continue research with support from the Atomic Energy Commission. After a few years, I was attracted to apply to a new Grants Associate Training Program established by the NIH extramural program. My final lab research year was on sabbatical at the Institute for Biological Chemistry at the University of Copenhagen as a Fellow of the Guggenheim Foundation.

In 1967, I returned to the NIH as a Grants Associate. After the one year of intensive training in extramural-type endeavors, I began life in science administration, first in Program Planning and Evaluation (PPE) in the Office of the Director, and then as an Associate Director for PPE in the National Institute of General Medical Sciences.

My long-term relationship with the OD Office of Intramural Research began in 1974 when the then Director of NIGMS [National Institute of General Medical Sciences], Dr. Dewitt Stetten became Deputy Director for Science, and I was recruited as his principal assistant. Over the ensuing years, primarily as Associate Director for Intramural Affairs, I performed a wide variety of duties, including work on a new pay and personnel system, being liaison with the CIA, a focal point for acupuncture research, serving as Arctic research representative for the DHHS, acting as head of the Foreign Scientists Assistance Branch,

chairing the Positron Emission Tomography-Policy Advisory Committee, outside work and consulting, and innumerable other interesting assignments. By the time of retirement in 2006, I concluded that my job at the NIH was "to help people navigate the NIH".

Of particular interest to all, is my involvement in initiation of the Technology Transfer program at NIH. Owing to my position in the OIR/OD, I was early involved in activities of the DHHS Patent Branch, to which all intramural and extramural scientists had to report inventions. Decisions were made regarding patent searches, patenting and licensing by the National Technical Information



Happy 90th Birthday, Phil!

Service, and any royalties were collected by the U.S. Treasury.

Upon passage of the Federal Technology Transfer Act of 1986, it became my responsibility to implement this legislation at the NIH. The Department of Commerce convened committees to assist the various Government agencies each to develop their own programs. I served on such groups as the NIH representative.

Out of all of the products or projects that went to market from an NIH lab thanks to the technology transfer process, is there one that you are particularly proud of? **PC:** The NIH Technology Transfer Program has come a long way since I retired in early 2006. I do remember the AIDS test kit, and AZT. I believe some of the technology exemplified by presentations of a number of the annual Philip Chen lecturers can be commended.

### You were instrumental in establishing the NIH Office of Technology Transfer (OTT), can you talk a bit about what that was like?

**PC:** It was like starting up any new endeavor from scratch. Assembling a few helpers, asking for a budget and space, recruiting a startup crew. Then



**National Institutes of Health** Office of Intramural Research Office of Technology Transfer

seeking wider participation by a variety of existing NIH staff members to contribute. I was highly encouraged by all the cooperation I received.

Some of my previous activities contributed to developing the foundations for the NIH technology transfer effort, such as on:

- Outside work and consulting
- Material transfer agreements, and sharing of cell lines
- Conflict of Interest issues

A key document that guided early NIH technology transfer implementation was the "Policy Statement on Cooperative Research and Development Agreements and Intellectual Property Licensing". It expressed the NIH philosophy, defined our mission as basic research, and affirmed a commitment to technology transfer within a framework that promoted the free exchange of ideas and information.

I also initiated several annual NIH/ADAMHA-Industry Collaboration Forums to publicize the new program to interested companies.

# CRADAs (Cooperative Research And Development Agreements) are now a standard part of technology transfer at NIH. What did it take to originally establish and set up this then new process?



**PC:** I believe this type agreement was implicit in the FTTA 1986 legislation. Various Government agencies each developed a format similar to the NIH CRADA. Some were called CRDAs. The legal staff of the OTT were highly instrumental in finalizing the CRADA as it became adopted at NIH.

The NIH CRADA was a standard agreement, where any proposed changes are included only in an appendix, which would also stipulate the resources to be applied and the scope

of work. This format facilitated the consideration of proposed CRADAs in that only the

### You also served as the first chair of the NIH Patent Policy Board, now the PHS Technology Transfer Policy Board (TTPB). How did this Board come about?

**PC:** At my recommendation, the NIH Patent Policy Board was established by the Director, NIH, Dr. James Wyngaarden on April 7, 1987 to make policy recommendations and oversee the organizational framework for FTTA 1986 implementation. (Subsequently, the Alcohol Drug Abuse and Mental Health Administration (ADAMHA) then a separate agency within DHHS joined as a full participant). The PPB met monthly. Several working subcommittees were also established: the CRADA Subcommittee, the Royalty Distribution Subcommittee, the Data Systems Subcommittee, the Training Subcommittee, and a Technology Development Coordinator Subcommittee (institute officials responsible for TT from each institute).

The NIH Patent Policy Board thus superseded the old (pre FTTA 1986) DHHS Patent Board, on which I had previously served as a member. That Board also included Office of Medical Applications of Research (OMAR) representation, and was staffed by DHHS OGC Patent Attorneys housed in the old Westwood Office Building.

## How would you describe the impact of technology transfer at NIH?

**PC:** Passage of the FTTA 1986 and subsequent establishment of the technology transfer program has revolutionized the culture of the NIH intramural research program. It has facilitated and stimulated the more effective practical application of research results into actual usage and accelerated the availability of products to patient care. And it has created a whole new career path at the NIH.



My understanding is that the NIH technology transfer program is the premier such program in the Federal Government. I am proud to have had something to do with its birthing and infancy.

# You retired in 2006 – besides returning every year for the lecture on innovation and technology transfer named in your honor, what have you been doing in retirement?

*PC:* Prior to my wife's passing in September 21, 2021, we would travel to visit family, friends, or on a tour. This took us around the U.S. (Maryland, Texas, Florida, California, and Washington) and Europe (especially Denmark and Norway). For some years, I have audited college courses at a nearby university here in Tennessee (automotive technology, entomology, music appreciation, history, etc.), most recently a course on the History of Modern China . Also, for a time, I volunteered to play my trombone monthly at a local Alzheimer's Facility (but then fell and broke several front teeth). I turn 90 on July 3, and still live in my own home.

## Renamed SIG: Patent Law, Industry & Technology Transfer Scientific Interest Group (PLITT)

Originally Published in the Catalyst

The Patent Law & Technology Transfer Scientific Interest Group (SIG) has been expanded and renamed to include the biotechnology industry. The goal of the PLITT SIG is to provide educational and networking opportunities for NIH scientists interested in patent law, industry, and technology transfer. The SIG will include members of the NIH Office of Technology Transfer, Technology Development Coordinators from the NIH institutes, bench scientists with interests in intellectual property and the biotechnology industry, as well as past fellows who have transitioned into applicable careers in local institutions or companies.

The SIG will hold seminars with invited representatives from the U.S. Patent and Trademark Office, law firms, and biotechnology and pharmaceutical companies; host mini symposia (at the annual NIH Research Festival) featuring former intramural investigators who have gone on to found or have successful careers in patent law, technology transfer, or in the biotechnical industry; host poster sessions on careers in technology transfer and business



development; and provide opportunities and support for trainees interested in industry through job fairs, networking events, technology demonstrations, and field trips to local companies and facilities. The SIG will also support the annual Philip S. Chen Lecture on Technology Transfer and Innovation. Meetings and activities will be coordinated with local chapters of the Technology Transfer Society, the Licensing Executives Society, as well as the Federal Laboratory Consortium for Technology Transfer.

Steven Ferguson (OD) and Ulisses Santamaria (NIAID) are co-chairs. For more information and instructions for joining the LISTSERV, go to <u>https://oir.nih.gov/sigs/patent-law-technology-transfer-interest-group</u>.



## New Campaign Creates Intramural Tech Transfer Awareness

Richelle Holnick, OTT

Your intramural NIH Technology Transfer Community Website has been through a lot of changes this past year! The revamped site now prominently features a search engine with enhanced capabilities to allow prospective licensees or collaborators to easily find technologies that meet their interests. It is also easier to navigate, allows users to create profiles and save technologies, and is all around more attractive. Plus, it has a new URL! Ott.nih.gov has been retired and replaced with techtransfer.nih.gov to more accurately reflect the true purpose of the website – a community site that provides access to various NIH tech transfer resources and allows interested parties to read news items, find technologies, and learn about partnering with the NIH.

To spread the news of our new and enhanced website and to increase awareness of intramural NIH as a technology transfer partner, OTT embarked on an Awareness Campaign this past winter. An email was designed and deployed to subscribers of BioPharma Dive and Fierce Biotech, both leading online newsletters in the biomedical field. The Awareness Campaign was quite the success. It attracted 372 new users to the website, with the Fierce Biotech campaign creating a 46.3% increase in sessions on the website post campaign, and the following BioPharma Dive campaign saw an additional 103.8% bump. From this we are able to surmise that new potential licensees or

collaborators are indeed interested in learning about intramural NIH programs as technology transfer partners.

Both emails were successful in exceeding partner benchmarks and reaching a highly engaged audience. By analyzing the behavior of users that came to the website from the campaign, we can clearly see an interest in searching for available technologies, especially therapeutics and technologies available for licensing. This campaign was successful in bringing awareness of the new NIH Technology Transfer website and its IC licensing and collaboration opportunities. Example of email content is pictured to the right.





Unlock possibilities with NIH Tech Transfer

technology

transfer

Discover our research and see where we

make a difference 🕨

View email in a brow

## National Academy of Inventors Fellow Applications Are Currently Open

Steven Ferguson, OTT

The National Academy of Inventors (NAI) selects a group of fellows each year from research universities, governmental and non-profit research institutes worldwide. The NAI is a member organization made up of over 4,000 Senior Members and Fellows spanning more than 250 institutes worldwide, including NIH. Its purpose is to encourage inventors with patents issued from the United States Patent and Trademark Office (USPTO), enhance the visibility of technology innovation, and help to translate the inventions of its members to the heavier.

its members to the benefit of society.

The NAI Fellows are extremely accomplished individuals who together hold more than 38,000 U.S. patents, have generated over 13,000 licensed technologies, and created over \$2.2 trillion in revenue based on their discoveries. Two NIH inventors became NAI Fellows this past year.



Bruce Tromberg, Ph.D, is the Director of the National Institute of Biomedical Imaging and Bioengineering (NIBIB). Dr. Tromberg leads the Rapid Acceleration of Diagnostics (RADx Tech) program, which is an initiative to increase SARS-COV-2 testing capacity and performance. Dr. Tromberg has co-authored over 450 publications and holds 24 patents. He specializes in development of optics and photonics technologies for biomedical imaging and therapy.

George Koob, Ph.D, is the Director of the National Institute on Alcohol Abuse and Alcoholism (NIAAA). NIAAA conducts alcohol research ranging from basic science to epidemiology, diagnostics, prevention, and treatment. Dr. Koob began his career researching the neurobiology of emotion before applying this basic research on emotions to alcohol and drug addition. He has authored more than 650 scientific papers and is a co-author of *The Neurobiology of Addiction*.

We look forward to having future nominations for fellows from the NIH pool of talent. If you are interested in nominating someone, please contact your tech transfer office. More information on the NAI Fellow Program is available on their website. Submissions for this year's cohort of NAI fellows is currently open until the end of July. We hope to see the number of NAI Fellows representing the NIH grow!





### Now Showing at the Drive In: ETT Training Terry Goodell, OTT

Pull up in your Chevy and get yourself some snacks, there are many Enterprise Technology Transfer system (ETT) training videos that are ready to be watched!

These videos run from module highlight videos, which provide broad information about how the system works, to short 'ETT basics' videos, which teach you how to complete basic tasks, to longer 'ETT training' workflow videos, which provide a deep-dive on how to complete an entire workflow relevant to your work and/or your specific IC!

You can find all of these videos available on the <u>ETT video page</u> of SharePoint to watch at any time. Also, be on the lookout for bi-weekly emails from the ETT team letting you know what is 'playing' that week!

You can access ETT here. If you have any questions or access issues, please reach out to <u>ETT\_</u><u>support@nih.gov.</u>

### **BIO Jokes**

### What do you call this?

Head to page 13 for the answer!



NIH Technology Transfer Community Newsletter

### **Off Campus: NIA Gerontology Research Center** Richelle Holnick, OTT

While Bethesda may be the largest hub of NIH offices in Maryland, it is certainly not the only one! The National Institute on Aging (NIA) has had a Gerontology Branch in Baltimore since 1941! It was originally named the Unit on Aging and was located at the Baltimore City Hospital. In 1968, the construction of the Gerontology Research Center (GRC) in Baltimore was completed. This location eventually transferred from the City of Baltimore to Johns Hopkins. In 1974 the National



Dr. Nathan Shock

Institute on Aging was established and the GRC moves from NICHD to NIA the following year.

The GRC is located at the NIH Bayview Biomedical Research Center (pictured below). A new building was opened on June 2, 2008 and has 500,000+ square feet of space to accommodate approximately 1,000 scientists and staff. This location includes a state-of-the-art laboratory, vivarium, clinical, library, and office space. This location is actually leased from Johns Hopkins and is located within the campus of the Johns Hopkins Bayview Medical Center. Along with the NIA, National Human Genome Research Institute (NHGRI)

and the National Institute on Drug Abuse (NIDA) also have intramural laboratories located on this campus.

The GRC was started by Dr. Nathan Shock and originally staffed by just two employees. It now encompasses over 150 investigators and support staff that study medical issues that traditionally

affect older persons. The main focus of their research is understanding age-related changes in physiology from a translational perspective.

A successful product that came from NIA's gerontology intramural research is the TAXUS R Express 2 used to treat people suffering from coronary artery disease, which more commonly affects older persons. This technology is a drug-eluting stent designed to deliver a drug locally to reduce tissue ingrowth. The product itself is a small steel tube that has a drug/



Bayview Medical Center polymer coating. It is very flexible, which allows it to conform to the natural curves of the artery. NIA discovered that localized release of paclitaxel prevents artery narrowing from cell growth and collaborated with Angiotech Pharmaceuticals and Boston Scientific to bring this product to market. Taxus ® Express 2 was approved by the FDA in 2004 and at the time had the largest first year sales of any FDA approved product in U.S. history!

## The Path to ETT Going Live

Terry Goodell, Sapient

The Enterprise Technology Transfer system (ETT) support team is steadily progressing towards being ready to 'go live'. What does this mean exactly? ETT will become the main database for NIH's technology transfer activities and TechTracS (along with several other IC-operated legacy systems) will be going offline. To go live, the NIH Technology Transfer Community must first confirm that the system is entirely ready by completing five critical tasks:



ETT has been built and the first three items have been completed. The full list of known issues was evaluated by the ETT Support Team and prioritized based on criticality for system function, and then reviewed again by the Technology Transfer User Group (TTUG) to ensure that all issues that are related to essential business functions were prioritized as either Priority 1 (P1) or Priority 2 (P2). The amended issues list that was generated by the TTUG was then reviewed and approved by the ETT Governance Board to establish the final list of needed changes and fixes before going live.

That brings us to our current state. When all P1 issues – as well as all P2 issues that must be completed prior to rollout – have been resolved, the ETT Support Team will report "ready to go live." Once these issues have been resolved and the Governance Board is informed, they will then determine how much more time is needed for the community to be ready to transition to the new system and will set a 'go live' date based on that information.

This is where you come in! The ETT team wants to make sure that the community feels comfortable in the system and ready to transition. It is a good idea for you to log into ETT and start practicing how to use the system. You are highly encouraged to watch the training videos available on SharePoint to become familiar with how to perform the tasks associated with your job. If you have any questions or concerns, please reach out to the ETT team at ETT\_support@nih.gov.

## NIH Librarian's T2 Tip of the Month – ScienceDirect

Josh Duberman, NIH Library

The NIH Library provides access to <u>ScienceDirect</u>, a searchable full text database of books, chapters, and journal articles from Elsevier covering science, social sciences, technology and medicine.



Full text searching can be the best way to search for often hard-tofind information including experimental conditions, specific cell lines, lab equipment, brand names, and even captions of tables or graphs. Elsevier is one of the world's largest scientific publishers, and ScienceDirect's unique fulltext content can be valuable for technology transfer and competitive intelligence research.

ScienceDirect has a menu-based search interface, available via the NIH network/VPN. From the <u>NIH Library web page</u> click the

**'Databases'** tab at the lower left, search for **'ScienceDirect'**, and then click on the green **'Available Online'** logo. Additional features are available with a free Elsevier user account, also used for Embase and Scopus.

A ScienceDirect User Quick Start Guide is available.

Additional training and support information is available.

Contact Josh Duberman <u>jduberman@nih.gov</u> for answers to any questions or training on ScienceDirect and other information resources. You may also click <u>here</u> for the NIH Library class

schedule, or <u>sign up</u> for the NIH Library email news.



### **BIO Jokes Answer:**

### A gazebo-controlled double-wined study!

## **Historically Notable Patents**

Barry Buchbinder, NIAID

<u>Vote here</u> on your favorite historically notable patent! Results to be announced in the Q4 newsletter!



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Patent Number: 1X Title: Improvement in the Making of Pot Ash and Pearl Ash by a New Apparatus and Process Issued: July 31, 1790 Inventor: Samuel Hopkins

Patent Number: 72XTitle: Cotton GinIssued: March 14, 1794Inventor: Eli Whitney

A. S. BELL. CELESTAPET. Teticied March 7, 1876.





51.174.445-



Patent Number:200,521Title:Phonograph or Speaking MachineIssued:February 19, 1878Inventor:Thomas Alva Edison



Patent Number: 223,898 Title: Electric-Lamp Issued: January 27,1880 Inventor: Thomas Alva Edison



Patent Number: 821,393 Title: Flying Machine Issued: May 22, 1906 Inventors: Orville & Wilbur Wright



Patent Number: 621,195. Title: Navigable Balloon Issued: March 14, 1899 Inventor: Ferdinand Graf Zeppelin





I'M GLAD YOU ASKED. IF YOU OPEN THE EMAIL ATTACHMENT, YOU'LL FIND A LINK TO A SHAREPOINT DOCUMENT. IF YOU CLICK THE LINK IN THERE, YOU'LL GET A REFERENCE TO A HIDDEN TECHTRACS FIELD. ONCE YOU DECODE THE SECRET MESSAGE, YOU'LL BE LED TO A ONEDRIVE FILE.

AND THAT'S WHERE IT GETS INTERESTING ...



SOMETIMES I LIKE TRYING TO SEE HOW MANY PLATFORMS I CAN COMBINE TO SEND SIMPLE MESSAGES.

## **Comings & Goings**



**David Bradley**, Ph.D., transferred to a policy analyst position at NIDCR and is helping to design and implement translation education and training efforts, identify trends in research that will impact dentistry, and assisting with NIDCR's EDI initiatives.



**Sabarni Chatterjee**, Ph.D., M.B.A., joins NIAID TTIPO from NCI's Technology Transfer Center where he served as a Unit Supervisor responsible for technology transfer operations for NCI and NIH client institutes. Sabarni was at the forefront of TTC's innovative ideas that support its invention management efforts and relationship with the NCI scientific community. In addition, Sabarni conceived and developed TTC's successful Transition to Industry Fellowship (T2I). Prior to joining the NCI, he was a Senior Licensing and Patenting Manager at the NIH Office of Technology Transfer, where he evaluated, marketed, licensed and managed a wide range of NIH and FDA inventions and other intellectual property and held several positions in the private sector including in an intellectual property law firm and a start-up company.



**Diptadip Dattaroy** has left NCI where he worked a technology transfer manager to join the George Washington University Technology Commercialization Office as a life sciences licensing manager. He will be working with researchers to identify their valuable early-stage technologies, develop IP protection, and license the results to companies. Previously, Diptadip worked as a life sciences business strategist at BioHealth Innovation. Diptadip received his PhD in Environmental Health Sciences from the University of South Carolina, Columbia, and pursued a postdoctoral fellowship at the National Institute of Diabetes and Digestive and Kidney Diseases.



**Steven M. Ferguson** from the Office of Technology Transfer has been selected by the Licensing Executives Society (LES) to serve as a volunteer on its Management Council as Senior Vice President – Federal Laboratories. In this role Steve will help to coordinate LES activities with the Federal Laboratory Consortium (FLC) and other federal laboratory organizations and support increased federal laboratory participation in existing LES programs. He will also be seeking better awareness & participation by general LES membership in federal lab tech transfer programs as well as helping publicize licensing career public service opportunities with federal laboratories to LES members.



**Cosimo Fuda**, Ph.D., J.D., is the new Branch A Chief at NIAID. He served most recently as Director of the Office of Partnerships and Business Development at the Naval Medical Research Center (NMRC), where he managed a team responsible for negotiating over 250 partnership agreements a year that bring in over \$75 M in funding to the Naval Medical Research Enterprise, which includes nine Naval Commands globally. Prior to NMRC, he was a Patent and Licensing Consultant at the U.S. Food and Drug Administration Technology Transfer (FDATT) Program responsible for the program marketing activity, and structuring partnership agreements including CRADAs. He also assisting in patent drafting and managing the prosecution of the FDATT patent portfolio.



**Jonathan Motley** has joined NIAID's Technology Transfer and Intellectual Property Office as a Technology Transfer Patent Specialist. Prior to joining, Jonathan worked as a Technology Transfer Fellow in NCI's Technology Transfer Center. As a fellow, Jonathan supported NCI labs with their agreement, patenting, and licensing needs. Prior to working at NCI, Jonathan earned his Ph.D. in Genetics and Genomics from Duke University, and a B.S. in Cell Biology and Genetics from the University of Maryland.



**L**isa Spatalo has started at NIAID TTIPO as a Paralegal. Lisa attended film school and received a BFA degree from NYU. Her first job was in the litigation field, and she has remained in legal support positions ever since. Throughout her paralegal career she has concentrated on the intellectual property field in both the litigation and patent prosecution areas. She has managed large document coding projects and has been a case manager on large court cases. She has most recently supported attorneys in prosecuting mechanical, software and biochem patent applications in the US, PCT and foreign jurisdictions.



**B**enfeard Williams has moved to the National Institute on Aging as a Health Specialist in the Clinical Interventions and Diagnostics Branch in the Division of Neuroscience. He started at the NIH as a Technology Transfer Fellow at NCI TTC and eventually became a Technology Transfer Manager at the NHLBI OTTAD. He is a registered patent agent and has negotiated transactional research and licensing agreements for intramural labs and service center clients.