

# RESEARCH INKlings

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## Regional tissue engineering and biomaterials debuts at Clemson; deadline for abstracts is Dec. 15

On Jan. 29 and 30, Clemson University will host the inaugural meeting for the Southeast Workshop on Tissue Engineering and Biomaterials, a newly organized event that will take place each year at a different university or research institute in the southeastern US. The mission of the workshop is to foster collaborative activities between southeastern universities involved in biomaterials research and tissue engineering. In addition to enhancing education and information exchange in the field, the workshop intends to provide a forum to showcase faculty and student research and establish liaison activities with local and international companies interested in biomaterials and tissue engineering. Baxter BioSurgery is a sponsor for the first Southeastern meeting.

The 2004 workshop will commence with keynote speaker, Dr. Ioannis Yannas, Professor of Mechanical Engineering at MIT, and member of the National Academy of Sciences and the Institute of Medicine. Dr. Yannas will discuss the genesis of tissue engineering and the contribution of biomaterials to this field. A poster session and reception will be held on the evening preceding the day-long workshop, open to all participants. The program will highlight the evolution of various forms of biomaterials in tissue engineering applications, exploring the use of natural and synthetic biomaterials in the context of tissue engineering. The second day of the workshop will consist of 20 minute podium presentations provided by senior faculty, junior faculty and students from the participating universities and companies.

The annual workshop will provide an opportunity to establish connections within universities as well as with other regional universities and companies. Each annual workshop will have a new host site, and follow a similar program format (poster, keynote, and podium sessions), coordinated by the host institution. To ensure continuity and assist the successive host institutions, the Georgia Tech/Emory Center for the Engineering of Living Tissues and the Department of Bioengineering at Clemson University will serve as co-anchor institutions.

The deadline for submission of abstracts for poster or podium presentations for the first workshop is 12/15/03. Registration fees, including the conference banquet, are \$45 for students and \$150 for all others. For more information on the January workshop at Clemson or information about serving as a host institution for a future workshop, please contact Dr. Ann Schmierer at <[ann.schmierer@ibb.gatech.edu](mailto:ann.schmierer@ibb.gatech.edu)>, (404)385-2259 or Dr. Karen Burg, <[kburg@clemson.edu](mailto:kburg@clemson.edu)>, (864)656-6462, or visit the workshop website at: <<http://www.ces.clemson.edu/bio>>. ▼

## NIAA revises policy for acceptance of K-series applications

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) advises applicants of changes in NIAAA policy regarding the acceptance of competing continuation (Type 2) applications for Career Development (K-series) awards. This policy change means that NIAAA will no longer accept competing continuation (Type 2) applications for the K05 Senior Scientist Award and the K07 Academic Career Award. On the other hand, NIAAA will accept competing continuation (Type 2) applications for one additional five-year period for the K02 Independent Scientist Award and the K24 Midcareer Investigator Award in Patient-Oriented Research. Other K-series Career Development awards supported by NIAAA (K01, K08, K18, K23, K25) remain non-renewable, as indicated in the respective program announcements. This change is effective for applications submitted for the March 1, 2004 receipt date. Use this link for more information: <<http://grants2.nih.gov/grants/guide/notice-files/NOT-AA-04-001.html>>.

Source: NIH Guide, NOT-AA-04-001, November 10, 2003 ▼

## New health information technology RFAs support improved patient safety and quality of care

The Agency for Healthcare Research and Quality (AHRQ) recently released three new Requests for Applications (RFAs) with funds set aside to support approximately 100 grants. The \$41 million grant program, "Transforming Healthcare Through Information Technology" (HIT), will be part of a \$50 million portfolio of grants, contracts, and other activities to demonstrate the role of health information technology to improve patient safety and the quality of care.

The HIT RFAs emphasize the importance of partnerships with rural communities and with small and rural hospitals. To read the AHRQ press release announcing the HIT program on Nov. 21, select <<http://www.ahrq.gov/news/press/pr2003/hitprojpr.htm>>. To obtain the full text of the RFAs, go to <<http://www.ahrq.gov/fund/grantix.htm>> and look for:

- RFA-HS-04-012 Demonstrating the Value of Health Information Technology
- RFA-HS-04-011 Transforming Healthcare Quality Through Information Technology (THQIT)—Implementation Grants
- RFA-HS-04-010 Transforming Healthcare Quality Through Information Technology (THQIT)—Planning Grants

Source: *AHRQ Electronic Newsletter, November 21, 2003, Issue #116*

## Pfizer Visiting Professorship proposals are due January 16; may be discontinued in future

Pfizer Inc. annually provides funds to encourage universities and research institutes in the US to host Visiting Professors who are leaders in their respective fields. The general purpose of the Visiting Professorships is to create opportunities to share cutting-edge clinical and basic research knowledge in a variety of settings. Pfizer currently offers Visiting Professorships in the following fields:

- Allergic Diseases and Asthma
- Cardiovascular Medicine
- Diabetes
- Family Medicine
- Infectious Diseases
- Pain Medicine
- Rheumatology
- Urology

Proposals for all the above opportunities are due on January 16. Instructions and form pages are available on Pfizer's "Physician Scientist" website at <[http://www.physicianscientist.com/visiting\\_professorships/index.asp](http://www.physicianscientist.com/visiting_professorships/index.asp)>

MUSC faculty and trainees have enjoyed the benefits of these programs a number of times in recent years. Most recently, Dr. Tom Keane and the Department of Urology hosted Dr. David A. Gillatt of the Bristol Urologic Institute, Southmead Hospital, UK as a 2003 Pfizer/American Urological Association Visiting Professor. In previous years MUSC has successfully garnered Pfizer Visiting Professorships in Allergic Diseases and Asthma, Cardiovascular Medicine, Infectious Diseases, and Rheumatology.

There is no limit to the number of times an institution may apply for a visiting professorship; however, an institution may not have back-to-back visitors in the same field in consecutive years and may submit only one proposal per field per year. An MUSC proposal for a Visiting Professor in Cardiovascular Medicine is already in process for this year. The other fields are wide open for consideration.

A regional Pfizer representative recently mentioned that the company is considering discontinuation of this program. For example, this year the Visiting Professorship in Pediatrics is no longer offered. Now is the time to consider taking advantage of this exceptional opportunity. To our knowledge, the Pfizer program is the only such program extant.

If you would like to consider an application to invite a distinguished visiting professor to give a talk and provide in depth consultation over a three-day period, please contact Peggy Schachte in the Office of Research Development at 792-0868, or <[schachtep@muscd.edu](mailto:schachtep@muscd.edu)>. We will be pleased to provide some successful examples and help you assemble the nomination packet. If you would like to communicate your support for continuing the overall program, please feel free to contact the Program Coordinator, Pfizer Visiting Professorship Program, 33 Main Street, Old Saybrook, CT 06475, 1-800-201-1214.

## NIH issues revised RFA designators for NIH Roadmap Initiatives

Under the leadership of director Elias Zerhouni, the National Institutes of Health has developed an overarching strategic "roadmap" for interdisciplinary biomedical research and is in the process of issuing a broad range of Requests for Applications (RFAs) to implement roadmap initiatives. In order to underscore the trans-NIH nature and increase the visibility of initiatives issued under the Director's Roadmap (see <<http://nihroadmap.nih.gov>>), the RFA number of the earliest announcements has been changed to incorporate the Roadmap designator (RM). All subsequent Requests for Applications (RFAs) issued under the NIH Roadmap will include the RM designator.

### **DEVELOPMENT OF HIGH RESOLUTION PROBES FOR CELLULAR IMAGING**

Old RFA Number: RFA-GM-03-013, New RFA Number: RFA-RM-04-001

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-001.html>>

### **METABOLOMICS TECHNOLOGY DEVELOPMENT**

Old RFA Number: RFA-DK-04-001, New RFA Number: RFA-RM-04-002

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-002.html>>

### **NATIONAL CENTERS FOR BIOMEDICAL COMPUTING**

Old RFA Number: RFA-RR-04-001, New RFA Number: RFA-RM-04-003

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-003.html>>

### **EXPLORATORY CENTERS (P20) FOR INTERDISCIPLINARY RESEARCH**

Old RFA Number: RFA-RR-04-002, New RFA Number: RFA-RM-04-004

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-004.html>>

### **NATIONAL TECHNOLOGY CENTERS FOR NETWORKS AND PATHWAYS**

Old RFA Number: RFA-RR-04-003, New RFA Number: RFA-RM-04-005

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-005.html>>

### **MULTIDISCIPLINARY CLINICAL RESEARCH CAREER DEVELOPMENT PROGRAMS**

Old RFA Number: RFA-HD-04-006, New RFA Number: RFA-RM-04-006

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-006.html>>

### **CURRICULUM DEVELOPMENT AWARD IN INTERDISCIPLINARY RESEARCH**

Old RFA Number: RFA-GM-04-003, New RFA Number: RFA-RM-04-007

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-007.html>>

### **SHORT PROGRAMS FOR INTERDISCIPLINARY RESEARCH TRAINING**

Old RFA Number: RFA-DK-04-003, New RFA Number: RFA-RM-04-008

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-008.html>>

### **CENTERS FOR INNOVATION IN MEMBRANE PROTEIN PRODUCTION**

Old RFA Number: RFA-GM-04-004, New RFA Number: RFA-RM-04-009

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-009.html>>

### **INTERDISCIPLINARY HEALTH RESEARCH TRAINING: BEHAVIOR, ENVIRONMENT AND BIOLOGY**

Old RFA Number: RFA-MH-04-007, New RFA Number: RFA-RM-04-010

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-010.html>>

### **DYNAMIC ASSESSMENT OF PATIENT-REPORTED CHRONIC DISEASE OUTCOMES**

Old RFA Number: RFA-AR-04-007, New RFA Number: RFA-RM-04-011

<<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-04-011.html>>

Source: NIH Guide, NOT-OD-04-008, November 21, 2003

## Is Electronic Research Administration here yet?

When the Financial Assistance Management Improvement Act of 1999 (PL106-107) was enacted, the goals were pure and lofty. They are to: (1) improve the effectiveness and performance of federal financial assistance programs; (2) simplify federal financial assistance application and reporting requirements; (3) improve delivery of services to the public; and (4) facilitate greater coordination among those responsible for delivering such services. The intent is to provide a single portal to the various federal agencies that provide financial assistance programs, and present a "common face" to the public seeking funds from these programs.

From the technology standpoint, the goals are entirely obtainable. The daunting reality is that the common face encompasses some 35 federal agencies, each with its own forms, application guidelines, business systems, and reporting requirements. The Office of Management and Budget (OMB) was given the responsibility of overseeing these systems and developing a method to get an application from the submitter to the intended agency. Just getting the agencies to agree on a common set of data elements took two years. During this period, each agency was busy developing its own system in order to be in compliance with federal directives. The leader in on-line application development was the National Science Foundation with its FastLane system. This application was developed with input from customers who would actually use the system, and has evolved into a robust application that is fairly easy to use and accommodates the business rules of the applying agencies (e.g., institutional approval and routing). Other agencies, such as the Dept. of Energy, the Office of Naval Research and the Dept. of Education, went public with their systems peremptorily and required users to get on board with little or no advance notice.

Throughout this effort, the Federal Demonstration Partnership (FDP) has been involved in developing data standards that will allow diverse systems to communicate. Although the deadline for implementation of PL106-107 when enacted in 1999 was initially 18 months, the initial web portal came on-line only this year. The Federal government's common face for those seeking financial assistance is the grants.gov web site <<http://www.grants.gov>>. From here, any interested party can look for funding opportunities, sign up for email notification of new opportunities, and download the required application forms for completion. Once registered, the authorized organizational representative may submit applications. A translator then takes the application and converts it to a format compatible with each agency's internal system. The use of this portal is optional—which is fortunate since it has a major drawback. The Pure Edge Viewer software required to view and complete the application forms is available only on Windows platform, eliminating a good portion of MUSC's users and much of the scientific community. Throughout this effort, the Federal Demonstration Partnership (FDP) has been involved in demanding that data standards be established and maintained regardless of the technology used. It is these standards that will allow diverse systems to communicate.

The grants.gov site also does not take into account any internal systems in use by the submitting entity. Those institutions with internal routing and approval systems may work independently with each agency to implement a direct transfer of information. The NIH Commons is one such system that is currently piloting a continuing grant application module. Modules currently active include financial status reporting, internet-assisted review, and electronic notification of grant awards. Principal investigators may also use the NIH Commons to review the status of their grant applications and summary critiques. Progress has been slow, but NIH is working closely with their customers to create a user-friendly system.

Access to these systems has been delegated to institutional representatives. If you need to set up an account with an agency or need help in creating and submitting applications, you may call Robbie Lee in the Office of Research and Sponsored Programs at 843-792-7198 or email to <[leer@musc.edu](mailto:leer@musc.edu)>.

Source: Robbie Lee, ORSP

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## Call for Abstracts: AcademyHealth Annual Research Meeting

AcademyHealth has issued a call for abstracts for its annual research meeting to be held June 6-8 in San Diego. With a due date of January 15, abstracts are invited for papers, posters, and panels. Select <<http://www.academyhealth.org/arm/abstracts/index.htm>> to access the AcademyHealth Web site where you can submit your abstract on-line and obtain more information about the meeting.

Source: AHRQ Electronic Newsletter, November 21, 2003, Issue #116

## Expanded NIH loan repayment program can be a boon for nonprofit researchers

In FY 2003 the National Institutes of Health (NIH) awarded 1,197 new two-year contracts to repay student loans for doctoral-level degree holders who have agreed to devote at least half of their time to research funded by a nonprofit institution or the government. The number of awardees is up 66% from 2002, with an average repayment of \$52,000 each. The FY 2003 awards in five categories amount to a commitment of \$63.3 million.

Nearly 500 individuals applied in FY 2002 and nearly 1,200 in FY 2003. The number of awards in FY 2003 increased to over 730. In FY 2002, two-thirds of awards went to applicants with MD or MD/PhD degrees. Also, a majority of awardees were research trainees, according to NIH. Loan repayment program (LRP) awards can repay up to \$35,000 annually of qualified educational loans, and covers all taxes related to the payments.

The five LRP categories are clinical research, where the number of awards nearly doubled to 732 from 393 in FY 2002; pediatric research, which had 298 FY 2003 awards compared to 168 in 2002; health disparities research, which rose marginally from 112 awards in FY 2002 to 121 in FY 2003; clinical research awards for individuals from disadvantaged backgrounds, which dropped from 41 in FY 2002 to 33 new awards this year; and contraception and infertility research, which jumped from nine awards in FY 2002 to 13 in FY 2003.

Applications are being accepted for the 2004 awards, with a December 31 deadline. Use this link to read more: <<http://www.lrp.nih.gov>>.

## Healthcare cost and utilization seminar will be webcast in January

You can register now for a 2-hour Web-assisted audio conference on the Healthcare Cost and Utilization Project (HCUP) on Wednesday, January 21, from 1:00 pm. to 3:00 p.m. EST. Presented by the Agency for Healthcare Research and Quality (AHRQ), the seminar, titled "Data and Tools to Support Health Services Research," is an introductory course to HCUP, a comprehensive set of all-payer inpatient and outpatient administrative, encounter-level data. Learn about its uses, how to obtain it, and how to benefit from the technical assistance offered through AHRQ. For complete information, go to <<http://www.academyhealth.org/cyberseminars/live>>.

Source: *AHRQ Electronic Newsletter, November 21, 2003, Issue #116*

## NIH changes policy concerning concurrent support from K awards and a research grants

The National Institutes of Health recently modified policy on mentored K Awards to allow award recipients to hold concurrent support from their career award and a competitive research grant in when serving in the capacity as a PI or subproject Director. Mentored career award recipients in the last two years of their support period will be permitted to reduce the level of effort required for the career award and replace that effort with an NIH research grant or subproject, provided they remain in a mentored situation. This policy will permit candidates who are ready to apply for and receive independent NIH research support to continue to benefit from the period of protected time offered by the career development award.

With this announcement, the NIH discontinues the practice of early termination of a career award when the recipient receives an NIH research grant or when the recipient is named as the director of a subproject on a multi-project NIH grant. Effective for competing research applications submitted for February 1, 2004 and beyond, mentored career award recipients, in the last two years of career award support, are encouraged to obtain funding from NIH either as Principal Investigator on a competing research grant award or cooperative agreement, or as project leader on a competing multi-project award. Requested budgets for a competing research grant or a subproject on a multi-project grant should include appropriate amounts for the salary and associated costs for the career recipient's effort. At the time the research grant is awarded, the effort required on the career award may be reduced to no less than 50 percent and replaced by effort from the research award so that the total level of research commitment remains at 75 percent or more for the duration of the mentored career award.

This change in policy applies to the following mentored career award mechanisms: K01, K07 (developmental) K08, K22, K23, and K25, as well as the individuals mentored through institutional K12 awards. For more information, visit this link: <<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-04-007.html>>

Source: *NIH Guide, NOT-OD-04-007, November 14, 2003*

## R E S E A R C H

*Opportunities & Deadlines***Aging**

**Title:** Parkinson's Disease Data Organizing Center

**Agencies:** NIH/NINDS (National Institute of Neurological Disorders and Stroke), NIH/NIEHS (National Institute of Environmental Health Sciences)

**Solicitation Number:** RFA-NS-05-001

**CAFD:** 93.853, 93.113, 93.114, 93.115

**Letter of Intent Deadline:** December 22, 2003

**Application Deadline:** January 22, 2004

**Link:** <<http://grants1.nih.gov/grants/guide/rfa-files/RFA-NS-05-001.html>>

**Index Terms:** Aging, Biostatistics & Epidemiology, Neurosciences, Specific Diseases & Conditions

The National Institute of Neurological Disorders and Stroke (NINDS) and the National Institute of Environmental Health Services (NIEHS) invite cooperative agreement applications from qualified institutions for support of a Parkinson's Disease Data Organizing Center (PD-DOC), designed to serve as a shared research resource to facilitate research in Parkinson's disease (PD). This resource is intended to compile clinical data, as well as to provide virtual catalogues for both basic scientific and clinical research in PD. PD research would benefit from analysis of combined data collected systematically from existing PD Centers (Udall Centers, NIEHS centers, NIA Alzheimer's Disease Centers), and eventually from other sources where longitudinal data are collected. Such data on patients and unaffected, age-matched controls would support 1) clinical, molecular and pathological research on disease natural history, heterogeneity, diagnosis, and clinical-pathological correlations; and 2) epidemiological research related to the identification of risk factors, neuroprotective factors or biomarkers. As clinical components are built into the Morris K. Udall Parkinson's Disease Centers of Excellence and other PD Centers, the advance funding of this data coordination initiative will function to systematize data collection and analysis across centers. In addition, existing databases should be assessed as to their relevancy and incorporation into this national resource. Data from all PD center resources can thus be combined, coordinated, and made available to researchers from PD centers as well as the wider PD research community. ▼

**Title:** 2004 Merck/AFAR Research Scholarships in Geriatric Pharmacology For Medical and Pharmacy Students

**Agency:** American Federation For Aging Research

**Application Deadline:** January 22, 2004

**Link:** <<http://www.afar.org/grants.html>>

**Index Terms:** Aging, Training & Career Development, Pharmacological & Toxicological Sciences

The American Federation For Aging Research will award up to nine scholarships in 2004. Each award is \$4,000 and allows the recipient to undertake an eight- to twelve-week, full-time research project (anytime during 2004) on any subject in the field of geriatric pharmacology. The subject may be drawn from the basic, clinical, behavioral or health services sciences. The research project must be conducted under the supervision of a faculty mentor. It may be carried out in any setting (medical school, hospital, university, pharmaceutical company, nursing home, government, or non-government agency in the United States). There may also be an opportunity for participants to present a poster at the May 2005 annual meeting of the American Geriatrics Society. **CONTACT:** American Federation For Aging Research, Tel: 212-703-9977, Fax: 212-997-0330, Email: <[grants@AFAR.org](mailto:grants@AFAR.org)> ▼

**Title:** Proteomics In Aging And Age-Related Disorders

**Agency:** NIH/NIA (National Institute on Aging)

**Solicitation Number:** RFA-AG-04-006

**CAFD:** 93.866

**Letter of Intent Deadline:** January 23, 2004

**Application Deadline:** February 23, 2004

**Link:** <<http://grants1.nih.gov/grants/guide/rfa-files/RFA-AG-04-006.html>>

**Index Terms:** Aging, Proteomics

NIA is soliciting applications that use proteomic approaches to study age-related changes in protein structure and function. Proteomics research is expected to provide significant insights into the cellular and molecular mechanisms of aging and age-associated disease processes. This Request for Applications (RFA) encourages projects that advance research to identify and quantitative protein expression patterns, post-translational modification of proteins, and protein-protein interactions which may change in cells or tissues as a direct result of the aging process or age-related pathology. Research projects that take advantage of various animal models of aging and of age-related human disease, and that focus on cells or tissues of aging physiological systems, such as the cardiovascular, musculoskeletal, immune, endocrine and nervous systems, are encouraged. This RFA will use the R01 and R21 award mechanisms. The NIA intends to commit approximately \$1.5 million in FY 2004

to fund 5 to 7 new grants in response to this RFA. **CONTACT:** Bradley C. Wise, Fax: (301)496-1494, Email: <[wiseb@nia.nih.gov](mailto:wiseb@nia.nih.gov)>

**Title:** Acute Coronary Syndromes in Old Age  
**Agency:** NIH/NIA (National Institute on Aging)  
**Solicitation Number:** PAR-04-026  
**CAFD:** 93.866  
**Application Deadline:** <<http://grants.nih.gov/grants/dates.htm>>  
**Link:** <<http://grants.nih.gov/grants/guide/pa-files/PA-04-026.html>>  
**Index Terms:** Aging, Cardiovascular Sciences

The goal of this program is to foster biomedical research that will lead to a better understanding of the biology, pathophysiology, clinical presentation, and medical management of the acute coronary syndromes (ACS) in old age. This PA is intended to foster clinical research, including integrative biomedical research, some of which will incorporate the tools of molecular and cellular biology in the study of function and clinical outcome. A long-term goal is to provide the necessary framework for the development of effective prevention and/or new treatment strategies for ACS in old age.

## Alternative & Complimentary Medicine

**Title:** Centers of Excellence for Research on Complementary and Alternative Medicine (CERC)  
**Agency:** NIH/NCCAM (National Center for Complementary and Alternative Medicine)  
**Solicitation Number:** NOT-AT-04-002  
**Letter of Intent Deadline:** January 16, 2004, January 15, 2005  
**Application Deadline:** February 17, 2004, February 15, 2005  
**Link:** <<http://grants.nih.gov/grants/guide/notice-files/NOT-AT-04-002.html>>  
**Index Terms:** Alternative & Complementary Medicine, Health Promotion & Preventive Care, Interdisciplinary & Crosscutting Topics

This Notice is to clarify the requirements of PAS-03-038 <<http://grants.nih.gov/grants/guide/pa-files/PAS-03-038.html>> and remind applicants that preference may be given to applications proposing research on one of NCCAM's current research priority areas for Center grants, listed at <<http://www.nccam.nih.gov/research/priorities/index.htm>>. Applications substantially similar to those CERCs already funded may be given lower program priority. Future applications for Centers of Excellence for Research on Complementary and Alternative Medicine should be structured around a central scientific theme focusing on either (a) mechanisms of action of a specific group of CAM practices or CAM treatment approaches OR (b) mechanisms of action of several different CAM therapies used in treating a specific disease or class of diseases.

NCCAM will also consider applications for Centers organized around a specific research theme, such as the placebo effect; however, NCCAM does not encourage applications for Centers focused on a particular population group unless there is a strong scientific rationale for such a focus. Applicants are strongly encouraged to submit a Letter of Intent. **CONTACT:** Barbara Sorkin, PhD, E-mail: <[sorkinb@mail.nih.gov](mailto:sorkinb@mail.nih.gov)>

## Behavioral Science & Mental Health

**Title:** Pharmacogenomics of Mood and Anxiety Disorders  
**Agencies:** NIH/NIMH (National Institute of Mental Health), NIH/NIGMS (National Institute of General Medical Sciences)  
**Solicitation Number:** RFA-MH-04-001  
**Letter of Intent Deadline:** January 12, 2004  
**Application Deadline:** February 12, 2004  
**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-MH-04-001.html>>  
**Index Terms:** Behavioral Sciences & Mental Health, Pharmacological & Toxicological Sciences

This RFA solicits applications to perform high-quality research studies that correlate responses to drugs used to treat mood or anxiety disorders with genetic variation, and create a valuable knowledge base populated with reliable information that links drug response phenotypes to genotypes. Novel approaches, including the use of biomarkers and other phenotypes correlated with the clinical disorder as intermediate endpoints, are also encouraged. This RFA focuses on studies that examine genetic influences on inter-individual differences in response to therapeutic drugs used to treat mood or anxiety disorders. Data and biomaterials collected and produced in projects supported under this RFA will be included in the NIMH Human Genetics Initiative and distributed to the wider scientific community. The underlying theme of this RFA will be to search across the genome for pharmacogenetically important sequence variations by correlating genotype with treatment response. Such studies may help elucidate basic mechanisms of drug effects and adverse reactions, and may facilitate optimal selection of therapy in individual patients as well as mitigate serious adverse response or lack of response to therapy. This initiative aims to fund projects that target the whole genome to identify the genetic basis of therapeutic response to one of several compounds (e.g., anti-depressants, anti-psychotics (specifically used in the treatment of patients with a psychotic mood disorder), anti-manics and anxiolytics). This initiative will support research on patients with mood or anxiety disorders, and also will support studies of other patient groups where these compounds are used to treat co-morbid mood or anxiety disorders (e.g., anxiety disorder diagnosed in autistic or Fragile X patients). This RFA will use the R01 and the Collaborative R01 for Clinical and Services Studies of Mental Disorders and AIDS mechanisms. The participating ICs intend to commit \$3 million in FY 2004 to fund 3 to 5 new and/or competitive continuation grants in response to this RFA.

## Bioengineering

**Title:** Bioengineering Research Partnerships

**Agencies:** 16 participating Institutes and Centers (ICs) of the National Institutes of Health

**Solicitation Number:** PAR-04-023

**CAFD:** 93.286, 93.287, 93.394, 93.395, 93.396, 93.867, 93.172, 93.837, 93.838, 93.839, 93.866, 93.855, 93.856, 93.846, 93.864, 93.865, 93.929, 93.279, 93.173, 93.121, 93.113, 93.821, 93.859, 93.862, 93.853, and 93.879.

**Letter of Intent Deadlines:** November 21, 2003; June 20, 2004; November 20, 2004; June 19, 2005; November 20, 2005; and June 22, 2006

**Application Deadlines:** January 21, 2004; August 20, 2004; January 20, 2005; August 19, 2005; January 20, 2006; and August 22, 2006

**Link:** <<http://grants.nih.gov/grants/guide/pa-files/PAR-04-023.html>>

**Index Terms:** Bioengineering, & Mental Health, Interdisciplinary & Crosscutting Topics

Participating Institutes and Centers (ICs) of NIH invite applications for R01 awards to support Bioengineering Research Partnerships (BRPs) for basic, applied, and translational multi-disciplinary research that addresses important biological or medical research problems. In the context of this program, a partnership is a multi-disciplinary research team that applies an integrative, systems approach to develop knowledge and/or methods to prevent, detect, diagnose, or treat disease or to understand health and behavior. The partnership must include appropriate bioengineering or allied quantitative sciences in combination with biomedical and/or clinical components. The Principal Investigator (PI) also serves as the project manager and must be capable of leading the proposed effort. A BRP may propose design-directed, developmental, discovery-driven, or hypothesis-driven research at universities, national laboratories, medical schools, large or small businesses, or other public and private entities or combinations of these entities. It is expected that a BRP will have a well-defined goal or deliverable that will be achieved based on objective milestones specified in the initial application. On October 11, 2001, the NIH issued a related program announcement (PA-02-011) for Bioengineering Research Grants (BRGs). <<http://grants.nih.gov/grants/guide/pa-files/PA-02-011.html>>. The BRGs differ from the BRPs in that the research will be performed in a single laboratory, by a single investigator, or by a small group of investigators. On January 16, 2003, the NIH issued another related program announcement (PA-03-058) for R21 Bioengineering Research Grants (EBRG) <<http://grants.nih.gov/grants/guide/pa-files/PA-03-058.html>>. The EBRGs differ from the BRPs in that (1) the research will be performed in a single laboratory, by a single investigator, or by a small group of investigators and (2) the projects are high-risk/high-payoff in nature (R21 mechanism) as compared to the R01-type grants supported by the BRP program. ▼

## Cancer

**Title:** Audrey Meyer Mars International Fellowships In Clinical Oncology

**Agency:** American Cancer Society

**Application Deadline:** January 15, 2004

**Link:** <[http://www.cancer.org/docroot/RES/RES\\_5\\_1.asp?sitearea=RES](http://www.cancer.org/docroot/RES/RES_5_1.asp?sitearea=RES)>

**Index Terms:** Cancer, Training & Career Development

The purpose of these fellowships is to provide advanced training in clinical oncology at participating cancer centers in the United States to qualified physicians and surgeons from other countries, particularly countries where advanced training is not readily available. Applications for training in basic cancer research will not be accepted for the award. Applicants should write directly to the institution(s) of their choice requesting: 1) the institution's form for the specific clinical training program desired, and 2) the form for the Audrey Meyer Mars International Fellowship in Clinical Oncology. The applicant should submit completed forms to the institution. **CONTACT:** Dr. Donella Wilson, Fax: 404-321-4669, Email:

<[grants@cancer.org](mailto:grants@cancer.org)> ▼

**Title:** Ovarian Cancer Research Program

**Agency:** Department of Defense, Department of the Army, US Army Medical Research and Materiel Command

**Solicitation Number:** W81XWH-FY04-OCRCP

**Application Deadline:** February 3, 2004

**Link:** <<http://cdmrp.army.mil/>>

**Index Terms:** Cancer, Women's Health

The FY04 Defense Appropriations Act provides \$10 million to the Department of Defense Ovarian Cancer Research Program (OCRCP) to support innovative research directed toward eliminating ovarian cancer. The US Army Medical Research and Materiel Command, through the Office of the Congressionally Directed Medical Research Programs (CDMRP), administers this program. The OCRCP is releasing Program Announcements for two different funding opportunities: Idea Development Awards and New Investigator Awards. Idea Awards are intended to support innovative approaches to ovarian cancer research. Proposals must address etiology/tumor biology, preclinical development of targeted therapeutics (excluding clinical trials), or molecular imaging/vital imaging of ovarian cancer. These awards will emphasize innovative ideas and technology. Preliminary data relevant to ovarian cancer and the proposed project are required. Independent investigators with all levels of experience are eligible to apply. Awards up to \$600,000 in direct costs over a 3-year period plus indirect costs as

appropriate are available. New Investigator Awards are intended to recognize and support the career transition and/or development of independent researchers in ovarian cancer research. Proposals must address etiology/tumor biology, preclinical development of targeted therapeutics (excluding clinical trials), or molecular imaging/vital imaging of ovarian cancer. Awards up to \$600,000 in direct costs over a 3-year period plus indirect costs as appropriate are available. Detailed descriptions of each of these funding mechanisms, evaluation criteria, and submission requirements can be found at the link above. **CONTACT:** CDMRP at 301-619-7079, Fax at 301-619-7792, or email <cdmrp.pa@det.amedd.army.mil>

## Cardiovascular Sciences

**Title:** Fellowships and Grants-in-Aid  
**Agency:** American Heart Association (Mid-Atlantic Affiliate)  
**Application Deadline:** January 16, 2004  
**Link:** <<http://www.americanheart.org/presenter.jhtml?identifier=3095>>  
**Index Terms:** Cardiovascular Sciences

The AHA announces its 2004 deadlines. Proposed research projects to be conducted in Maryland, North Carolina, South Carolina, Virginia and the Nation's Capitol are eligible for these programs: Predoctoral Fellowship; Postdoctoral Fellowship; Beginning Grant-in-Aid; and Grant-in-Aid. In addition to affiliate awards, the Fellow-to-Faculty Transition Award, supported in part by the Mid-Atlantic Affiliate, and the Scientist Development Grant are AHA awards available nationally. For more information, visit the link above.

## Child & Adolescent Health

**Title:** Establishing the Precursors of the Metabolic Syndrome in Children  
**Agencies:** NIH/NICHD (National Institute of Child Health and Human Development), NIH/NIDDK (National Institute of Diabetes and Digestive and Kidney Diseases)  
**Solicitation Number:** RFA-HD-03-033  
**CAFD:** 93.865; 93.847  
**Letter of Intent Deadline:** February 16, 2004  
**Application Deadline:** March 16, 2004  
**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-HD-03-033.html>>  
**Index Terms:** Biostatistics & Epidemiology, Child & Adolescent Health, Specific Conditions & Diseases


The goal of this initiative is to understand and identify the precursors of the metabolic syndrome in children and adolescents. The metabolic syndrome (also known as the dysmetabolic syndrome, syndrome X, or the insulin resistance syndrome) represents a clustering of metabolic disorders—central obesity, impaired fasting glucose, dyslipidemia

and hypertension—that in adults predicts the development of type 2 diabetes and/or coronary artery disease. Research is needed to determine whether the precursors of the metabolic syndrome are different in children than in adults and whether there are unique pathophysiological factors operating in the pediatric population. Elucidating the precursors of the metabolic syndrome in children and adolescents may lead to new therapies to prevent the development of the metabolic syndrome or to mitigate the consequences of the metabolic syndrome later in life. R01s and R21s will be accepted for this initiative with a goal to identify and understand the precursors of the metabolic syndrome in children and adolescents. Studies submitted in response to this RFA should focus on determining whether the precursors of the metabolic syndrome are different in children than in adults and whether there are unique pathophysiological factors operating in the pediatric population. Epidemiologic studies that involve the long-term follow-up of previously established and well-characterized cohorts are also of interest. Although descriptive epidemiology in the pediatric population is recognized as an important need, applications seeking to establish new cohorts will not be considered responsive to this RFA.

## Health Information Technology & Telemedicine

**Title:** Demonstrating the Value of Health Information Technology  
**Agencies:** AHRQ (Agency for Healthcare Research and Quality), NIH/NLM (National Library of Medicine)  
**Solicitation Number:** RFA-HS-04-012  
**CAFD:** 93.226 (AHRQ) and 93.879 (NLM)  
**Letter of Intent Deadline:** February 6, 2004  
**Application Deadline:** April 22, 2004  
**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-HS-04-012.html>>  
**Index Terms:** Bioinformatics, Health Information Technology & Telemedicine, Patient Safety


The Agency for Healthcare Research and Quality and the National Library of Medicine announces the availability of research grants to assess the value derived from the adoption, diffusion, and utilization of health information technology (HIT) to improve patient safety and quality of care. AHRQ is seeking proposals that elucidate the value of HIT from a variety of perspectives, including patients, providers, purchasers, payers, policymakers, or other important stakeholders and decision makers. The main objective of this RFA is to support projects that will increase our knowledge and understanding of the value of HIT, which includes clinical, safety, quality, financial, organizational, effectiveness, efficiency, or other direct or indirect benefits that may be derived from the use of HIT in the delivery of health care. The findings from this initiative should provide these stakeholders with information needed to make better and more informed clinical, purchasing, and other important health

care decisions regarding the use of HIT in their environment. The other objective of this RFA is to support the development of models or other tools that can be used to help demonstrate the value of HIT or to advance the adoption of HIT. Specific aspects of value may include things such as: reduction in medical errors; improved use of effective and recommended interventions; decreased use of inappropriate or ineffective interventions; increased use of clinical guidelines and evidence-based clinical decisions; improvements in access to care and quality of care; improvements in provider productivity; more efficient use of personnel; reductions in costs (total costs or costs related to specific activities and functions); enhanced revenues; better coordination of care among providers; improved patient involvement and satisfaction; and greater transparency and accountability of provider operations. AHRQ is also specifically interested in applications that will examine the value of new and emerging HIT, as well as applications that explore the unique barriers faced by rural and small community providers in adopting HIT and opportunities for overcoming these barriers. NLM supports research in biomedical informatics, bioinformatics, computational biology and health information sciences in such areas as representation of medical knowledge in computers; organization and retrieval issues for image databases; enhancement of human intellectual capacities through virtual reality, dynamic modeling, artificial intelligence, and machine learning; medical decision-making; linguistic analyses of medical languages and nomenclatures; management of information in disasters; and approaches to linking genome and phenome data. In the area of clinical informatics, NLM is particularly interested in ways computers and networks bring value to the delivery of health care, the management of health information, and the support of informed decision-making by consumers, patients, health care providers, and health care administrators. 

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**Title:** Transforming Healthcare Quality Through Information Technology (THQIT) Planning Grants  
**Agencies:** AHRQ (Agency for Healthcare Research and Quality), NIH/NLM (National Library of Medicine)  
**Solicitation Number:** RFA-HS-04-010  
**CAFD:** 93.226, 93.879  
**Letter of Intent Deadline:** February 6, 2004  
**Application Deadline:** April 22, 2004  
**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-HS-04-010.html>>  
**Index Terms:** Bioinformatics, Health Information Technology & Telemedicine, Patient Safety

AHRQ announces the availability of planning grants to assist healthcare systems and their partners in planning for activities that will lead to successful implementation of health information technology (HIT) to promote and improve patient safety and the quality of healthcare. The objective of this Request for Applications (RFA) is to support community-wide planning processes across

multiple healthcare organizations within a local or regional area that will enable them to develop HIT infrastructure that provides for effective exchange of health information within the community. Successful planning efforts should also allow them to compete for future funding for implementation activities. Applicants may use these funds for planning development of important infrastructure components including, but not limited to, computer networks, hardware, software, personnel, project management, and quality improvement and research capacity. AHRQ is particularly interested in supporting community-wide collaborative partnerships that include acute care hospitals, clinics, health care providers, and other health delivery organization (e.g., public health) that will also help to provide effective HIT tools for immediate access to complete and timely health care information in diverse health care settings (e.g., ambulatory care, long-term care ≠ including home health) that involve all AHRQ identified priority populations. Through this initiative, AHRQ seeks to support collaborative planning processes that will result in standards-based data sharing across multiple care sites and lead to measurable and sustainable improvements in patient safety and quality of care. Projects presented for consideration under this RFA should comply with the Agency's policy regarding the inclusion of priority populations <<http://grants.nih.gov/grants/guide/notice-files/NOT-HS-03-010.html>>. See this link for information about implementation of these THQIT grants: <<http://grants.nih.gov/grants/guide/rfa-files/RFA-HS-04-011.html>>. 

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**Title:** Improved Strategies in Health Communication Research  
**Agency:** NIH/NIDCD (National Institute on Deafness and Other Communication Disorders)  
**Solicitation Number:** RFA-DC-03-001  
**Letter of Intent Deadline:** January 13, 2004  
**Application Deadline:** February 13, 2004  
**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-DC-03-001.html>>  
**Index Terms:** Health Information Technology & Telemedicine

The purpose of this RFA is to encourage the submission of research grant applications that investigate the creation, development, and evaluation of health information in one or more mission areas of the National Institute on Deafness and Other Communication Disorders (NIDCD): hearing, balance, smell, taste, voice, speech or language. Projects should be based on current health communication theory and directed to address issues in disease prevention and health promotion. The goal is improved public information, based upon scientific discovery. Applications should be from interdisciplinary teams that include both health communication experts and scientists knowledgeable about normal and disordered processes of human communication. Topic areas should be based on contemporary scientific knowledge and current research findings in any of the seven mission areas of the NIDCD. This RFA will use the NIH R25 award mechanism and just-in-time concepts. It also uses the modular as

well as the non-modular budgeting formats. It is anticipated that NIDCD will have approximately \$750,000 total costs available for this initiative in Fiscal Years 2004 and 2005 and that up to three (3) awards will be made for each of the two submission rounds.

31, 2004. **CONTACT:** Rick Phillips, Fax: (301) 480-3432, Email: <[phillipr@nhlbi.nih.gov](mailto:phillipr@nhlbi.nih.gov)>

## HIV/AIDS

**Title:** Clinical Trial, Topical Thalidomide for Aphthous Stomatitis in Patients with HIV/AIDS

**Agencies:** NIH/NIDCR (National Institute of Dental and Craniofacial Research), NIH/NHLBI (National Heart, Lung, and Blood Institute)

**Solicitation Number:** NIDCR-DR-04-15

**Letter of Intent Deadline:** December 30, 2003

**Application Deadline:** January 30, 2004

**Link:** <<http://www.nidr.nih.gov/funding/notices.asp>>

**Index Terms:** HIV/AIDS, Oral & Craniofacial Health

The National Heart, Lung, and Blood Institute (NHLBI) serves as a service center to the National Institute on Dental and Craniofacial Research (NIDCR) for research and development contracts. NIDCR has a requirement for a study to assess the efficacy and safety of a novel topical thalidomide formulation for healing of aphthous ulcers associated with HIV/AIDS in a Phase II/III clinical trial of 160 subjects. The proposed procurement is under a 100 percent small business set-aside, and the NAICS code is 541710. The successful offeror will operate as a Coordinating Center for this clinical trial. The Coordinating Center shall be capable of conducting all aspects of a multi-center clinical trial for the treatment of aphthous stomatitis in patients with HIV/AIDS using a topical formulation of thalidomide and will be responsible for performing the following tasks: 1) Identify up to 10 clinical sites capable of recruiting study subjects 18 years of age or older with HIV infection or AIDS who are experiencing painful oral lesions. Clinical sites identified must be capable of recruiting approximately 10–12 patients per year for up to two years, with each subject evaluated weekly and followed up to four weeks beyond study entry. 2) Issue RFPs for subcontracts with clinical sites by the end of the 3rd contract month and complete site selection by the end of 6th contract month. 3) Using the existing NIDCR protocol, which has been approved by the FDA, and in collaboration with the Government Project Officer, develop, disseminate and revise, as needed, Standard Operating Procedures. 4) Randomize patients and coordinate with the NIH pharmacy, drug dissemination to the clinical sites and maintain appropriate control records. Note: The government (NIH) holds the IND for the test article (drug) and will supply the drug for the study. 5) Assist clinical sites in obtaining and maintaining IRB approval, as well as track protocol violations. 6) Establish a data management plan and possess a computer data storage system that will receive, inventory, and store all information. 7) Perform data analyses of all study data. 8) Comply with DHHS Automated Information Systems Security Program (AISSP) Handbook. The government intends to negotiate one cost reimbursement type contract for a period of four years with an approximate award date of August

**Title:** HIV Vaccine Design And Development Teams

**Agency:** National Institute of Allergy and Infectious Diseases (NIAID)

**Solicitation Number:** RFP-NIH-NIAID-DAIDS-04-42

**Application Deadline:** February 19, 2004

**Link:** <<http://www.niaid.nih.gov/contract/rfps.htm>>

**Index Terms:** HIV/AIDS

The Division of Acquired Immune Deficiency Syndrome (DAIDS) of NIAID has a requirement for the development of efficacious preventative and therapeutic vaccines against HIV/AIDS for worldwide use in stemming the AIDS epidemic. To augment the vaccine product pipeline, we are seeking opportunities to advance vaccine concepts toward the product stage via a focused, development-based approach. Specifically, the long-range goal of this solicitation is the development of new safe, immunogenic vaccine candidates that merit further evaluation in larger human trials. The HIV Vaccine Design and Development Teams (HVDDT) solicitation seeks to fund consortia of scientists with development experience from industry and/or academia that have 1) identified a promising vaccine concept, and 2) devised a plan for its targeted development into a vaccine product. A vaccine product is defined here to be a material and its manner of administration that could reasonably provide protection against AIDS. Offerors are encouraged, but not required to conduct phase I/II trials in collaboration with NIAID/DAIDS-supported HIV/AIDS vaccine trials networks. Support for phase III studies will not be funded under this solicitation. It is anticipated that up to four (4) cost reimbursement, completion type contracts will be awarded for a period of five (5) years, beginning approximately September 30, 2004.

**Title:** HIV/AIDS, Severe Mental Illness and Homelessness

**Agencies:** NIH/NIMH (National Institute of Mental Health), NIH/NIDA (National Institute on Drug Abuse), NIH/NIAAA (National Institute on Alcohol Abuse and Alcoholism)

**Solicitation Number:** PA-04-024


**CAFD:** 93.242, 93.279, 93.273

**Application Deadline:** Standard receipt dates of Feb. 1, June 1, and Oct. 1 for new proposals <<http://grants.nih.gov/grants/dates.htm>>

**Link:** <<http://grants.nih.gov/grants/guide/pa-files/PA-04-024.html>>

**Index Terms:** HIV/AIDS, Behavioral Sciences & Mental Health, Interdisciplinary & Crosscutting Topics

This PA replaces PA-98-080. The overall focus of this PA, sponsored by NIMH, NIAAA, and NIDA, is to refocus research on


persons with severe mental illness (SMI), either before or after HIV infection, and to expand HIV-related research to homeless persons. This PA solicits studies on the SMI population and/or homeless persons with special attention to the development, implementation, and evaluation of effective HIV-prevention interventions and their dissemination and translation to the community and public health service organizations. We also solicit studies on the SMI population and/or homeless persons that propose improved methodologies to study descriptive/analytic epidemiology of HIV infection and epidemiology of the behavior associated with risk and the spread of HIV infection. An important objective of this PA is to encourage integration both across and within the different research areas by establishing multidisciplinary research teams and collaborative alliances. 



### Interdisciplinary & Crosscutting

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**Title:** Exploratory Centers (P20) For Interdisciplinary Research  
**Agency:** National Institutes of Health (Roadmap Initiative)  
**Solicitation Number:** RFA-RM-04-004 (formerly RFA-RR-04-002)  
**CAFD:** 93.389  
**Letter of Intent Deadline:** January 30, 2004  
**Application Deadline:** February 24, 2004  
**Link:** <<http://grants1.nih.gov/grants/guide/rfa-files/RFA-RM-04-004.html>>  
**Index Terms:** Interdisciplinary & Crosscutting Topics

This RFA solicits applications for P20 planning grants that will support planning activities for groups of researchers to develop interdisciplinary research strategies to solve significant biomedical and/or behavioral research problems. Activities supported will include study design and, perhaps, pilot research to demonstrate the approach to be pursued. Whatever the approach, it must integrate aspects of multiple disciplines, which will be specified by the applicants. Planning activities are intended to lay the foundation and prepare investigators for submitting a subsequent application for more substantial support of longer duration through an Interdisciplinary Research Consortium. In recognition of the need to bring several disciplines together as equal partners, this RFA allows the research team to submit separate, but related applications that will be reviewed as a unit. This RFA will use the P20 award mechanism. The participating ICs intend to commit approximately \$9 million in FY 2004 to fund roughly fifteen new planning grants in response to this RFA. **CONTACT:** Greg Farber, PhD, Tel: (301) 435-0778, Fax: (301) 480-3659, Email: <[gf48a@nih.gov](mailto:gf48a@nih.gov)> 

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**Title:** NIAMS Clinical Trial Outcomes Instrument Development Grant Program  
**Agency:** National Institute of Arthritis and Musculoskeletal and

Skin Diseases (NIAMS)

**Solicitation Number:** RFA-AR-04-005


**CAFD:** 93.846

**Letter of Intent Deadline:** December 13, 2003

**Application Deadline:** January 13, 2004

**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-AR-04-005.html>>

**Index Terms:** Bioinformatics, Interdisciplinary & Cross-Cutting

This announcement solicits research applications to develop, apply and evaluate new clinical trial outcomes measures of safety, efficacy and effectiveness of therapies for diseases, illnesses and injuries of interest to the NIAMS. Clinical trials in rheumatic, skin, bone and muscle diseases are often hampered by the lack of validated outcome measures, or by outcome measures that are cumbersome, time-consuming and costly. Increasing availability of computer modeling and statistical approaches, along with better understanding of disease natural history, have yielded new concepts and new models that may be relevant to the development of new and refined outcomes for clinical trials in diseases, illnesses and injuries of interest to the NIAMS. The experimental design of a project may include, for example, consensus development approaches, meetings of experts, collection of data, beta testing of new instruments, mathematical and computer modeling, and validation studies. The proposal should include plans to disseminate information and have input from relevant scientific communities and professional organizations on the scientific merit and applicability of new and improved outcomes. Approaches that take advantage of bioinformatics to speed up data collection, analysis, dissemination and updates are encouraged. See link above for suggested topics for the R01s. NIAMS intends to commit approximately \$1.0 million in FY 2004 to fund four or five new grants in response to this RFA. 



### Miscellaneous

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**Title:** Research Grants

**Agency:** Herb Society of America

**Application Deadline:** January 31, 2004

**Link:** <[www.herbsociety.org](http://www.herbsociety.org)>

**Index Terms:** Interdisciplinary & Crosscutting Topics

To further the knowledge and use of herbs and contribute the results of the study and research to the records of horticulture, science, literature, history, art, and/or economics, the Herb Society of America is soliciting proposals from persons with a proposed program of scientific, academic, or artistic investigation of herbal plants. Research should involve plants using the horticultural rather than the botanical definition of herb. The grant is not given for financial aid to individuals, rather for specific research on herbal projects. Grants do not fund salaries, tuition or private garden development. Funds may not be used to fund a project in conjunction with other funding. The goal of this grant is not the dissemination of educational programs that have already been funded. Personal travel for the benefit of any

individual shall not be the focus of this grant. Practical considerations require that the grant projects shall be conducted in locations and formats that can be monitored by the Chairperson of the Grants Committee, consultants, or designees. The Society does not provide indirect expenses with the grant. Ownership of any non-expendable items of commercial value will be retained by HSA upon termination of the grant. **CONTACT:** Herb Society of America, Tel: (440) 256-0514, Fax: (440) 256-0541

of emergency medicine. As such, the applicants must provide evidence of a true collaborative effort between physician and nurse professionals and must delineate the relative roles of the participants in terms of protocol development, data collection, and manuscript preparation. **CONTACT:** Emergency Nurses Association, Tel: 847-460-4100 or 800-900-9659, Fax: 847-460-4001, Email: <enainfo@ena.org>

## Oral & Craniofacial Health

**Title:** Research Grant RFP (Hot Tub Grant RFP)

**Agency:** Foundation For Physical Therapy

**Application Deadline:** January 15, 2004

**Link:** <[www.apta.org/Foundation/applications\\_online/grants#](http://www.apta.org/Foundation/applications_online/grants#)>

**Index Terms:** Miscellaneous

The National Spa and Pool Institute's Hot Tub Council has generously provided the funds for a grant to be awarded in 2004 for a study that will evaluate the effectiveness of physical therapist interventions and the therapeutic effects of hot tub use on low back pain. The maximum grant amount is \$40,000 per year, and one grant will be awarded (salary, fringe benefits, and direct expenses only) No overhead is allowed for this grant. The following equipment and materials will also be provided as part of this grant: two or three hot tubs, hot tub covers, cover lifters, chemicals, supplies, expert repair and maintenance of the hot tubs. All hot tub equipment and supplies will remain with the grantee at the conclusion of the study. Support for purchase of major pieces of permanent equipment, other than hot tubs and hot tub equipment to be provided by the Hot Tub Council, is limited to 20% or less of the total award. See the link to view topics of interest. **CONTACT:** Foundation For Physical Therapy Tel: 703/684-2782, Fax: 703/684-7343, Email: <[foundation@apta.org](mailto:foundation@apta.org)>

## Nursing

**Title:** ENAF/EMF Team Research Grant

**Agencies:** Emergency Nurses Association (ENA), Emergency Medicine Foundation (EMF)

**Application Deadline:** January 16, 2004

**Link:** <[www.ena.org/foundation/grants/#](http://www.ena.org/foundation/grants/#)>

**Index Terms:** Emergency Medicine, Interdisciplinary & Cross-Cutting, Nursing

The ENA Foundation and the Emergency Medicine Foundation have combined resources to offer a \$20,000 research grant to address Emergency Department overcrowding. Proposals may focus on a number of related areas, including: definitions and outcome measures of ED overcrowding, causes and effects of ED overcrowding, and potential solutions to the problem of ED overcrowding. This grant is funded specifically to support work that arises from a true physician-nurse partnership in a clinical research area pertinent to the practice

**Title:** Mechanisms of Orofacial Pain: Anatomy, Genomics And Proteomics

**Agencies:** NIH/NIDCR (National Institute of Dental and Craniofacial Research), NIH/NINDS (National Institute of Neurological Disorders and Stroke)

**Solicitation Number:** RFA-DE-05-004

**CAFD:** 93.121 (NIDCR) 93.853 (NINDS)

**Letter of Intent Deadline:** April 19, 2004

**Application Deadline:** May 14, 2004

**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-DE-05-004.html>>

**Index Terms:** Interdisciplinary & Cross-Cutting, Oral & Craniofacial Health, Proteomics

NIDCR, along with NINDS, invites R01 applications to stimulate and support innovative, interdisciplinary research studies to elucidate the molecular mechanisms underlying orofacial pain, particularly the discovery of proteins and protein networks critical to processing nociceptive information. The purpose of this RFA is to encourage the use of genomic and proteomic approaches and imaging techniques to clarify the molecular events involved in: 1) acute orofacial pain, 2) the transition from unrelieved acute pain to chronic pain (i.e., neuroplasticity), 3) neuronal hyperexcitability as manifested by hyperalgesia and allodynia, and 4) chronic orofacial pain disorders of an inflammatory and neuropathic origin. This improved understanding could lead to new therapeutic interventions to effectively treat chronic pain conditions. Collaborative projects involving interdisciplinary teams of investigators are strongly encouraged. This Request for Applications contributes to the goals of the NIH Pain Consortium, which is co-chaired by NIDCR, NINDS, and National Institute of Nursing Research (NINR).

**Title:** Phase III Clinical Trials in Oral Infectious Diseases

**Agency:** NIH/NIDCR (National Institute of Dental and Craniofacial Research)


**Solicitation Number:** PAR-04-025

**CAFD:** 93.121

**Application Deadline:** Standard receipt dates of Feb. 1, June 1, and Oct. 1 for new proposals <<http://grants.nih.gov/grants/dates.htm>>


**Link:** <<http://grants.nih.gov/grants/guide/pa-files/PAR-04-025.html>>

**Index Terms:** Infectious Diseases, Oral & Craniofacial Research


The National Institute of Dental and Craniofacial Research (NIDCR) encourages submission of investigator-initiated grant applications for Phase III clinical trials to assess the efficacy and safety of preventive or therapeutic interventions for oral infectious diseases. Such interventions should have high potential for translation into clinical practice and for improving the oral health status of all Americans. NIDCR's prior support for basic and clinical research has shown that dental caries, periodontal diseases, and many other oral diseases involve infectious processes that result from the interplay of infectious agents, environmental influences (e.g., diet), genetic factors, and host response. This initiative seeks to accelerate the translation of such findings into well-documented, cost-effective interventions of proven efficacy for preventing and treating oral infectious diseases. Clinical trials focusing on the periodontal diseases and dental caries are particularly encouraged given the uniquely prominent role that these disorders have in the delivery and cost of oral health care, as well as their widespread prevalence in the population. However, clinical trials involving other oral conditions with an infectious cause—bacterial, viral, or fungal—will also be considered responsive to this PA. Applications that address novel interventions, higher risk population groups with oral health care disparities, research gaps, and common pathologic mechanisms are particularly encouraged. 

**Title:** Regenerative Dental Medicine**Agency:** NIH/NIDCR (National Institute of Dental and Craniofacial Research)**Solicitation Number:** RFA-DE-05-005**CAFD:** 93.121**Letter of Intent Deadline:** March 23, 2004**Application Deadline:** April 23, 2004**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-DE-05-005.html>>**Index Terms:** Oral & Craniofacial Health, Regenerative Medicine

Stem cells from a number of orofacial structures recently have been identified and the ability to use human embryonic stem cells is now scientifically possible. NIDCR invites R01s to promote research on the use of stem cells derived from human embryos and adults. The source of human embryonic stem cells will be limited to federally approved stem cell lines listed on the NIH Human Embryonic Stem Cell Registry. Information on the lines and how to contact providers can be found on the NIH stem cell registry site <<http://stemcells.nih.gov/registry/index.asp>>. In particular, this RFA encourages studies on: 1) the understanding of the unique properties of embryonic and postnatal stem cells in orofacial tissues; 2) the development of methods to induce appropriate stem cell expansion, differentiation and in vitro assembly of a functional tissue prototype unit and 3) the design and development for new bio-inspired materials

for cell transplantation. (Note: FDA regulations and requirements may restrict the selection of cells eligible for transplantation). Collaborative projects involving interdisciplinary teams of investigators are strongly encouraged. 

**Title:** General Dental Practice-Based Research Network**Agency:** NIH/NIDCR (National Institute of Dental and Craniofacial Research)**Solicitation Number:** RFA-DE-05-006**CAFD:** 93.121**Letter of Intent Deadline:** June 18, 2004**Application Deadline:** July 16, 2004**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-DE-05-006.html>>**Index Terms:** Oral & Craniofacial Health

NIDCR invites cooperative agreement applications to establish and support a dental Practice-Based Research Network (PBRN). For each PBRN supported under this RFA, the NIDCR will support one Network Chair and one Coordinating Center to plan, implement and maintain a general dental PBRN. The primary purpose of grants funded under this RFA is to provide an infrastructure to conduct multiple clinical trials and prospective observational studies that will answer questions facing general dental practitioners in the routine care of their patients. The PBRN infrastructure must provide a flexible and adaptable electronic communications network/platform that will provide a common means for connectivity, data sharing, and communication within the PBRN and with other medical and dental PBRNs currently in existence or that may be created in the future. At least 100 dental practices will be recruited to participate in the network during the first year of operation. Applicants for the Network Chair and Coordinating Center must prepare separate applications for peer review and must submit them jointly as a package. Peer review of the paired applications will primarily focus on the capability and capacity of the Network Chair and Coordinating Center to conduct the required activities. Substantial involvement between the funded investigators and NIDCR staff is anticipated in the selection of hypotheses, trial and protocol design, monitoring of progress, and analysis and publication of data. 


**Patient Safety**
**Title:** Incidence of Needlestick and Sharps Injuries and Medical Safety Device Availability/Use among Non-Hospital Health Care Workers**Agencies:** CDC (Centers for Disease Control and Prevention), NIH/NIOSH (National Institute for Occupational Safety and Health)**Solicitation Number:** RFA-OH-04-003**CAFD:** 93.262**Letter of Intent Deadline:** December 17, 2003**Application Deadline:** January 23, 2004

**Link:** <<http://grants.nih.gov/grants/guide/rfa-files/RFA-OH-04-003.html>>

**Index Terms:** Patient Safety

NIOSH and the CDC invite grant applications for studies that will contribute to the understanding of the risks of exposure to blood among health care workers employed in home health care settings. Such information will contribute significantly to an understanding of the risk for such exposures, as well as development of effective intervention strategies. Because little is known about the incidence of blood exposures in home health care workers, this RFA has an emphasis on research that examines the incidence of exposures to blood, risk factors associated with such exposures, and the availability and use of medical safety devices. A special feature of this RFA is encouraging applications from researchers and from membership organizations comprised of health care workers, such as unions and professional organizations, and collaboration among these groups.

## Training & Career Development

**Title:** Various

**Agency:** American Academy of Otolaryngology-Head and Neck Surgery Foundation, Inc.

**Letter of Intent Deadline:** December 15, 2003

**Application Deadline:** January 15, 2004

**Link:** <<http://www.entlink.net/research/grant/Grant-Guidelines.cfm#>>

**Index Terms:** Oral & Craniofacial Health, Specific Conditions & Diseases, Training & Career Development

**AAOA Research Grants.** The purpose of this award is to support a collaborative AAOA research project by fostering basic or clinical research related to otolaryngic allergy, rhinology, or immunology by otolaryngologist-head and neck surgeons. Applicants must have demonstrated potential for excellence in research and teaching and serious commitment to an academic research career in otolaryngology. There are no restrictions on career stage, education, or country of residence. AAOA members are preferred but not required. Former recipients of an Academy Resident Grant, or Academy Research Training Award are eligible to compete for an AAOA grant. Other individuals who have already competed successfully for independent research grant support from a private or Federal funding agency are ineligible for this Academy award program. Earleen Elkins Research Training Award. The purpose of this award is to foster the acquisition of contemporary basic or clinical research skills among new full-time academic otolaryngologist-head and neck surgeons. The award is intended as a preliminary step in clinical investigator career development and is expected to facilitate the recipient's preparation of a more comprehensive individualized research training plan suitable for submission to one of the National Institutes of Health Clinical Investigator Career Development Award (CIA) programs (K series).


**GlaxoSmithKline Clinical Research Fellowship.** This award is intended to foster the development of a new generation of clinical researchers in otolaryngology-head and neck surgery. The program encourages physicians completing their clinical training to turn their intellectual energy toward acquiring patient-oriented clinical research skills that will enable them to address research questions related to improving the diagnosis, treatment, and prevention of diseases of ears, nose, throat, and related structures of the head and neck. The winners of this award will be designated GlaxoSmithKline Research Scholars. All applicants must hold the MD degree and be AAO-HNS members in good standing. Applicants must have demonstrated potential for excellence in research and a serious commitment to an academic research career in otolaryngology—head and neck surgery. Prior to the start of the Clinical Research Fellowship year, the candidate must have completed an accredited residency training program in otolaryngology—head and neck surgery. Appointment of fellows is contingent on satisfactory completion of the clinical and/or research activities in which they are engaged prior to the fellowship year.

**Health Services Research Small Project Grant.** This award will foster research that will improve the effectiveness and appropriateness of medical practice. Projects supported under this program will develop and disseminate scientific information on the effects of otolaryngology services and procedures on patients' survival, health status, functional capacity, and quality of life. The award is intended to promote increased participation by otolaryngologists in the rapidly expanding area of health services research.

**Percy Memorial Research Award.** This is an annual grant-in-aid of a worthy research project proposed in any area within the scope of otolaryngology-head and neck surgery. The award was established in memory of A. Edward Percy, Jr., MD and his parents. All applicants must be members in good standing of AAO-HNSF. Applicants should be experienced independent otolaryngologist investigators affiliated with academic or similar institutions eligible to apply for and administer Federal research awards. Fellows with substantial research experience are eligible to apply, as are individuals who have already competed successfully for independent research grant support from a private or federal funding agency.

**Resident Research Grant.** Any resident of an accredited otolaryngology-head and neck surgery training program in the US or Canada is eligible to apply for the Foundation's Resident Research Grant(s). All applicants must be members in good standing of AAO-HNS. Proposed projects may be related to any area of otolaryngology-head and neck surgery. The results of the supported investigation must be presented at the closest AAO-HNS Foundation Annual Meeting immediately following the award. The recipient(s) shall be free to publish the results afterwards, but the Foundation shall have the right of first refusal for publication in its journal, Otolaryngology-Head and Neck Surgery. Any presentation or publication of results

supported by this award shall acknowledge the contribution of the Foundation's Resident Research Grant.

**AHNS/AAO-HNSF Young Investigator.** The purpose of this award is to support a collaborative AHNS/AAO-HNSF research project by fostering the development of contemporary basic or clinical research skills focused on neoplastic disease of the head and neck among new full-time academic surgeons. The award is intended as a preliminary step in clinical investigator career development and is expected to facilitate the recipient's preparation of a more comprehensive individualized research plan suitable for submission to the National Institutes of Health or comparable funding agency. **CONTACT:** Research Resource Coordinator, American Academy of Otolaryngology-Head and Neck Surgery Foundation, Inc., One Prince Street Alexandria, VA 22314-3357, Tel: (703) 836-4444, Fax: (703) 683-5100. 

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**Title:** FY 2004 ONR Young Investigator Program


**Agency:** Office of Naval Research

**Solicitation Number:** BAA04-002

**Application Deadline:** January 8, 2004

**Link:** <<http://www.onr.navy.mil/02/baa>>

**Index Terms:** Training & Career Development

ONR's Young Investigator Program seeks to identify and support academic scientists and engineers who have received PhD or equivalent degrees within the last five years and who show exceptional promise for doing creative research. The objectives of this program are to attract outstanding faculty members of Institutions of Higher Education/Universities to the Department of the Navy's research program, to support their research, and to encourage their teaching and research careers. **-CONTACT:** Donald Polk, Email: <[polkd@onr.navy.mil](mailto:polkd@onr.navy.mil)>. 

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**Title:** Fellowship Award

**Agency:** Sass Foundation for Medical Research

**Letter of Intent Deadline:** January 6, 2004

**Application Deadline:** March 1, 2004

**Link:** <<http://www.sassfoundation.org/information.html>>

**Index Terms:** Cancer, Training & Career Development , Specific Conditions & Diseases

The Sass Foundation for Medical Research, a nonprofit organization, is committed to education, research, and education in various hematological and malignant diseases. As a part of research commitment, the Foundation offers two research grants annually to bright young postdoctoral fellows to pursue innovative ideas. Candidates must have the potential to develop into independent investigators with sustained extramural NIH type funding. The

amount of funding is \$40,000 for one year, which can be competitively renewed for a second year. The goal of fellowship award is provide stipend for novel research projects in cancer to be conducted by postdoctoral fellows under the guidance of an able mentor. The Foundation is especially interested in hypothesis driven novel research that is not an extension of the mentor's research. The intent is to help the postdoctoral fellows to obtain data and to submit proposals to NIH and other extramural funding agencies in order to become independent investigators. The fellowship is open to any postdoctoral fellow with MD, PhD or both degrees, who is associated with an academic non-profit institution and has not completed more than 2 years of postdoctoral training at the time of the award (Fellows entering their 3rd year fellowship at the time of award are eligible). The mentor should have an established record as an independent investigator. Applications will be entertained in the area of cancer biology. Preference will be given for translational research. See link for more information. **CONTACT:** Sass Foundation for Medical Research, Fax: 516-869-9730, Email: <[sassfoundation@aol.com](mailto:sassfoundation@aol.com)>



### Have you visited the Research Bulletin Board?

The Research Web Site hosts a new bulletin board for the MUSC research community. To visit the bulletin board from the MUSC Main Page, simply click on "Research" on the left side of your screen, then click on "bulletin board" in the top right sector. Feel free to post questions, job openings, inquiries about technologies or expertise. The intent is to provide a site where members of the MUSC research community at all stages of training and in any area of interest can develop a spontaneous forum to exchange information, swap resources or advertise a need or interest.

### Research Swap Shop

Do you have an instrument or tool with a reasonable remaining useful life that you no longer really need in your research? Do you have a need for a research-related item that you know could be just as good used as new and much more economical, if only you could find a reliable source? Would you jump at the chance to cash in an under utilized item, or trade for something you could use more? Are you looking for ways to stretch your resources? Tell us! (All items offered "as is" and all relevant disclaimers apply!)

To list an item, call Trisha Addison at 792-5828 or email to [addison@muscd.edu](mailto:addison@muscd.edu). To pursue an item, please use the contact information in the ad

<b>Institutional Support for Research through the URC (University Research Committee)</b>				
<i>The University provides support to strengthen the research capabilities of the faculty and to provide research training for residents interested in pursuing an academic career. Additional information and questions may be directed to the Office of Research and Sponsored Programs at 792-3838.</i>				
<b>Deadline, Review and Funding Dates</b>				
Institutional Application	Deadline Resident Application	Interim Funding Request	Review Decision by	Funding Dates
April 1	April 15	May 1	June 15	July 1
August 1	August 15	September 1	October 15	December 15
December 1	December 15	January 2	February 15	April 1

## NIH STANDARD RECEIPT DATES AND REVIEW AND AWARD CYCLES

### TYPES OF APPLICATIONS

Institutional National Research Service Awards\*\*  
 All Academic Research Enhancement Awards, except those involving AIDS-related research  
 New Research Grants, Conferences, and Research Career Awards.  
 All Program Project and Center Grants (New & Revised)  
 Interactive Research Project Grants  
 Competing Continuation, Supplemental, and Revised Grants  
 Individual National Research Service Awards (Standard)\*\*\*  
 All AIDS-Related Grants

### CYCLE I

January 10  
 January 25  
 February 1  
 February 1  
 February 15  
 March 1  
 April 5  
 May 1

### CYCLE II

May 10  
 May 25  
 June 1  
 June 1  
 June 15  
 July 1  
 August 5  
 September 1

### CYCLE III

September 10  
 September 25  
 October 1  
 October 1  
 October 15  
 November 1  
 December 5  
 January 2

Scientific Merit Review	June-July	Oct-Nov.	February-March
Advisory Council Review	Sept-Oct	Jan-Feb	May-June
Earliest Project Start Date	December	April	July

**Please NOTE:** Effective with the January 1, 2002 receipt dates, applicants must seek agreement to accept assignment from Institute/Center staff at least 6 weeks prior to the anticipated submission of any application requesting \$500,000 or more in direct costs for any year. See 10/16/2001 NIH Guide Notice.

\*\* Several NIH Institutes and Centers use only one or two of the receipt dates for Institutional NRSA awards. Please check the program announcement for "Institutional Research Training Grants (T32)" at <<http://grants.nih.gov/training/nrsa.htm>>

\*\*\* The National Research Service Award Individual Predoctoral Fellowships for Minority Students and Students with Disabilities have special receipt dates.

### Receipt Date Policy

- \* An unsolicited, investigator-initiated application is considered on time if it is either (1) received by or (2) mailed on or before the published receipt date and a proof of mailing is provided. Proof of timely mailing consists of a legibly dated U.S. Postal Service postmark or a dated receipt from a commercial carrier or the U.S. Postal Service. Private metered postmarks are not acceptable. This policy also applies to unsolicited AIDS-related applications and to AREA applications.
- \* Solicited applications and proposals must be received by the specified date. However, an application received after the deadline may be acceptable if it carries a legible proof-of-mailing date assigned by the carrier and the proof-of-mailing is not later than one week prior to the deadline date. Solicited applications include those in response to Requests for Applications (RFAs); Program Announcements (PAs) with specified receipt dates (dates other than the standard ones specified in the chart below), such as Small Business Innovation Research (SBIR), and Small Business Technology Transfer (STTR); and Requests for Proposals (RFPs).
- \* Starting Nov. 13, 2001, NIH will no longer accept hand-delivered applications to the Center for Scientific Review. All applications and other deliveries to the Center for Scientific Review must either come via courier delivery or the USPS.
- \* When a receipt date falls on a weekend or holiday, the receipt date will be the following business day.

### EDITORIAL STAFF

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