NIH GUIDE for GRANTS and CONTRACTS

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Vol. 5, No. 19, November 15, 1976

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IN THIS ISSUE:

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HAVE YOU MOVED?

If your present address differs from that shown on the address label, please send your new address to: Room 2A14, 5333 Westbard Avenue, National Institutes of Health, Bethesda, Maryland 20014, and attach your address label to your letter. Prompt notice of your change of address will prevent your name being removed from our mailing list.

The GUIDE is published at irregular intervals to provide policy and administrative information to individuals and organizations who need to be kept informed of requirements and changes in grants and contracts activities administered by the National Institutes of Health.

Supplements, printed on yellow paper, are published by the respective awarding units concerning new projects, solicitations of sources, and requests for proposals.

RESEARCH FELLOWSHIPS TO SWEDEN AND SWITZERLAND

ANNOUNCEMENT

The Fogarty International Center, National Institutes of Health, has been asked to announce that the Swedish Medical Research Council and the Swiss National Science Foundation will each make available in 1977 three research fellowships to qualified biomedical scientists. These fellowships will provide postdoctoral training in basic or clinical areas of medical research.

To be eligible candidates must be citizens of the United States and have been engaged in independent responsible research in one of the health sciences for at least two of the past four years. They must present evidence of aptitude and promise in basic sciences or clinical research, with an active interest in pursuing a research career in a health science field. Applicants must also provide evidence of acceptance by a training institution and preceptor. It is the applicant's responsibility to arrange for his research training with the preceptor and to present in his application a complete and explicit plan for research training. Affiliation with the preceptor is documented in the Facilities and Commitment Statement which must accompany each application.

The Swiss fellowship may begin at any time between September 1977 and April 1978. The swedish fellowship must be started within 10 months of the date of its award and each date must be set by mutual agreement of the applicant and the institution.

The fellowships provide for reimbursement of the cost of round trip tourist air fare tickets for the Fellow and his family. Health insurance is provided during the term of the fellowship. Stipends for the Swedish Medical Research Council Fellowships range from $10,000 to $13,600 per year, depending upon the number of years of postdoctoral research experience at the time of award. The Swiss National Science Foundation stipends range from 22,800 Swiss francs (approximately $9,200) to 28,200 Swiss francs (approximately $11,400) depending upon the age and experience of the applicant at the time of award. In addition, the Swiss National Science Foundation Fellowships provide 3,600 Swiss francs (approximately $1,450) for the spouse, 1,200 Swiss francs (approximately $480) for each child and a cost of living adjustment.

Application materials may be obtained from Scholars and Fellowships Program Branch, Fogarty International Center, National Institutes of Health, Bethesda, Maryland 20014. The deadline for receipt by NIH of completed applications is January 1, 1977. Applications will be reviewed for appropriateness and scientific merit at the Fogarty International Center. They will be forwarded to Sweden or Switzerland, as appropriate, for final selection and award in late Spring or mid-Summer 1977.

All correspondence with the Fogarty International Center concerning these fellowships must be clearly marked as either "Swedish Medical Research Council Fellowship" or "Swiss National Science Foundation Fellowship."

SENIOR INTERNATIONAL FELLOWSHIPS — ANNOUNCEMENT

The Fogarty International Center, National Institutes of Health, announces Senior International Fellowships for outstanding faculty members of U.S. schools of medicine, osteopathy, dentistry, and public health at mid-career level for research and study in the health sciences at foreign host institutions. It is intended that these awards be career-enhancing and provide mutual benefit to both the U.S. and foreign institutions. Selection is on a competitive basis depending upon qualifications of the applicant, scientific merit of the proposed work, and benefit to be derived from the collaboration. Awards are made for periods of three to twelve months.

Applicants must be U.S. citizens or permanent residents, hold full-time appointment at a U.S. institution, and have at least five years' experience beyond the doctorate. Applications require nomination by the U.S. institution and invitation by a foreign institution. Transportation, allowance for the foreign institution, and a stipend of up to $18,000 are provided. Deadline for receipt of applications is December 1 and selections are announced in May.

For further information write to: Scholars and Fellowships Program Branch, Fogarty International Center, NIH, Bethesda, Maryland 20014.

NOTICE OF AVAILABILITY OF INTERFERON

In order to foster increased research on interferon in relation to cancer, the National Cancer Institute, NIH, is in the process of obtaining a supply of human leucocyte, human fibroblast (diploid) cell, and human lymphoblastoid cell interferons. This material will be made available to qualified scientists who have obtained support for their research, but are in need of interferon. The human leucocyte and fibroblast interferons are being prepared in a manner which will make them usable for clinical studies.

Scientists interested in obtaining some of this material should submit their request to the Interferon Working Group, NIH, which will be responsible for the distribution of this material. The request should specify the type and amount of interferon requested. It should include a complete description of the study for which the interferon is needed and the source of support. If it is to be used in a clinical study, the clinical protocol should also be included.

It should be stressed that limited amounts are available and only the most scientifically deserving proposals will be considered. Therefore, it is to the applicant's advantage to be complete.

Requests should be addressed to Chairman, Interferon Working Group, National Cancer Institute, National Institutes of Health, Room 3A03, Building 31, Bethesda, Maryland 20014.

NOTICE

NONHUMAN PRIMATES AVAILABLE

The Animal Resources Branch, Division of Research Resources, has a cooperative cost-sharing contract with Charles River Breeding Laboratories, Inc., to develop domestic production of rhesus monkeys (Macaca mulatta). The following animals will be available from this source:

Number	Age	Weight	Sex	Price	Last Date for Guaranteed NIH-ADAMHA Priority
24	12-15 months	1.0-1.5 Kg	Male	$490	December 1
24	15-18 months	1.6-1.9 Kg	Male	$490	December 1
3	18-24 months	2.0-2.5 Kg	Male	$560	December 1
30	12-24 months	1.0-2.0 Kg	Male	$490	January 1

These animals are produced from an isolated free ranging island colony. They, and the colony from which they come, have been uniformly negative to tests for herpesvirus simiae (B virus) antibody, tuberculin hypersensitivity, and Salmonella and Shigella organisms (testing details are available on request from Charles River Breeding Laboratories, Inc.). The animals have been cage accommodated for four to six weeks and unless specifically requested otherwise, will be vaccinated against measles. The price is F.O.B., Key West, Florida.

The animals are to be distributed through regular commercial sale, but Charles River Breeding Laboratories is to give priority to purchase of animals for use on National Institutes of Health (NIH) and Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) supported projects. Therefore, investigators desiring animals from this source for use on an NIH or ADAMHA supported grant or contract should include the title and identifying number of the grant or contract with their purchase request. Purchase orders should be sent directly to Charles River Breeding Laboratories, Inc., Wilmington, Massachusetts 01887. Animals will be held for priority purchase until the indicated dates.

Please note that these animals are from a different source, and a different distribution mechanism is to be used from those whose availability was announced in Vol. 5, No. 14, August 13, 1976, of the *NIH Guide for Grants and Contracts*.

NIH's POLICY AND PROCEDURES ON SUBMISSION

AND ACCEPTANCE OF

REVISED REPORTS OF EXPENDITURES

POLICY

A. *PURPOSE* This issuance states the policy and describes the procedures which will be used by NIH in handling revised reports of expenditures submitted by grantee institutions.

B. *APPLICABILITY* This policy covers all NIH grant awards for which the submission of a report of expenditures is required.

C. *BACKGROUND* Current Public Health Service policy requires that annual or final reports of expenditures be submitted to NIH within 90 days from the end of the pertinent budget period or project period. However, there has never been any uniformly stated NIH guidelines or policy on the acceptance of revised annual or final reports. Grantee institutions from time to time submit revised reports months and sometimes even years after the initial annual or final reports of expenditures have been submitted to and processed by NIH. Often the report will relate to a grant which has been closed and the financial records purged from the DHEW Federal Assistance Financing System and the NIH Central Accounting System. In other cases the revised report may pertain to an early budget period in a still currently active grant where the previously reported actual balance has been used to partially fund a succeeding budget period within the project period. Under such circumstances, if a revised report claiming additional expenditures in the earlier budget period is processed, it results in an underfunding of the grant for the succeeding budget period. Through the collaborative review efforts of the NIH awarding units and the Division of Financial Management, NIH, many of the proposed revisions have been determined to be unreasonable and, accordingly, acceptance of the report has been denied. However, responding to the multiple requests from the grantee institutions - with great time variances involved - has been difficult and obviously has not been handled in any uniform fashion.

D. *POLICY*

1. Annual or final reports of expenditures shall be submitted to NIH within 90 days from the end of the pertinent budget period.

2. The NIH expects the grantee institution to maintain good and timely accounting records with the proper classification of expenditures. Through full utilization of the 90 days available for submission of the annual or final reports of expenditures, the grantee must make every effort to check and correct its records so that accurately filed initial reports will keep the requirement for later revisions to a minimum.

3. When the grantee detects an excessive claim on a previously submitted report of expenditures a revision must be submitted no matter how long the lapse of time.

4. When a revised report representing additional claims by the grantee is necessary, it should be submitted to NIH as promptly as possible and must be submitted with appropriate explanation no later than one year from the due date of the original report (15 months following termination date of the budget period).

5. If under unusual or exceptional circumstances a grantee finds that significant expenditures should have been charged against a grant budget for which the time limit of one year from the due date of the initial report has lapsed, a revised report may be presented for consideration provided complete documentation is submitted with the report explaining in detail both the reason for the adjustment and, particularly, the untimely delay in reporting. The awarding unit will decide, based on the circumstances surrounding the individual case, whether or not to accept the revision.

E. *IMPLEMENTING GUIDELINES*

1. The Grants Section, Federal Assistance Accounting Branch, Division of Financial Management, NIH, in exercising its responsibility for receipt, processing, and auditing of all annual and final reports of expenditures will not accept revised reports with additional claims by the grantee unless the revised report is received within one year from the due date of the initial report.

2. In those cases described in D.5. above where the grantee has submitted a revised report beyond the allowed time period but provided a detailed explanation of special or extenuating circumstances, the Grants Section will forward the material to the appropriate awarding unit for its acceptance or recommendation. The awarding unit must take decisive action within 30 days and return the materials to the Grants Section to process the revised report or notify the grantee of nonacceptance.

3. For those revised reports of expenditures which indicate a balance due the Government and are submitted without regard to timing limitations, the Grants Section will review and audit the report and advise the grantee as to the necessary action. If the project period involved has been closed in a prior fiscal year, the grantee will be requested to submit a check for the overpayment. If the project period is still active or was closed within the current fiscal year, the grantee institution's account will be adjusted through the DHEW Federal Assistance Financing System (DFAFS).

F. *EFFECTIVE DATE* This policy is effective October 1, 1976.

REQUEST FOR RESEARCH GRANT APPLICATIONS: RFA ANNOUNCEMENT

TITLE: *HUMAN INFERTILITY*

The Population and Reproduction Grants Branch (PRGB) of the Center for Population Research at the National Institute of Child Health and Human Development (CPR/NICHD) is inviting research grant applications for investigations of human infertility.

This type of solicitation (the RFA) is used when CPR wishes to stimulate investigator interest in a particular research area that is important to its mission. Unlike Request for Contract Proposals (termed RFP's), the RFA identifies the scope of the Center's interest but does not require that proposals conform to narrowly specified research requirements for methodology. Applications submitted in response to an RFA are supported through the customary NIH research project grant mechanism but differ from other research grants in that they are specifically problem-oriented. Ongoing evaluation, in addition to the usual review of formal progress, may include periodic visits.

This program announcement is for a single competition with a specified deadline (March 1, 1977) for receipt of applications. Applications in response to this RFA will compete for funding in the general, ongoing research grant program of NICHD and will be reviewed by a special review group or groups in the Division of Research Grants, NIH. The National Advisory Child Health and Human Development Council will review the applications in the Fall of 1977, and the earliest requested start date for the grants will be December 1, 1977. Applications should be prepared in accordance with the aims and requirements described in the following sections:

I. PROGRAM SPECIFICATIONS

A. The PRGB Program

B. RFA Program Objectives

II. METHOD OF APPLYING

A. Application Format

B. Application Procedure

If you have questions relating to this announcement, you may contact Dr. V. Jeffery Evans, RFA Officer, PRGB, CPR, NICHD at (301) 496-6515.

HUMAN INFERTILITY

I. PROGRAM SPECIFICATIONS

A. The PRGB Program

The Population and Reproduction Grants Branch, Center for Population Research, National Institute of Child Health and Human Development, supports population research on biomedical aspects of reproduction and on behavioral-social aspects of the antecedents and consequences of population change. This RFA is intended to encourage clinicians and other biomedical, behavioral and social scientists to submit research grant proposals designed to study the causes and treatment of human infertility.

B. RFA Program Objectives

Concern for human infertility has always been within the mandate of the CPR and has been designated as a problem of high priority. This competition will be limited to studies in men and women. Studies involving experimental animals will be accepted and reviewed in the traditional NIH research grant program. In this solicitation infertility is defined simply as the inability of a couple to have children when it wishes.

Five general areas of concern have been identified by the CPR for this RFA. Teamwork among clinical and other biomedical and behavioral-social scientists may be necessary to achieve some of the objectives of the RFA. Such collaborations are encouraged where appropriate. The research areas for this RFA are:

1. Evaluation of current therapy

An important source of confusion in this field is the lack of precision in quantifying the effect of treatment currently employed. Modern techniques of epidemiological and statistical analysis should be applied to evaluate these methods.

2. Male factors

A variety of conditions in the male have been identified as warranting a special study. These include cryptorchidism, varicocoele (particularly its incidence and establishment of its true relationship to male infertility), infections (such as mycoplasma and PPLO infections), congenital and secondary occlusions of the male reproductive tract, environmental effects on sperm production (particularly toxins, drugs, and heat), the importance of genetic factors in abnormal sperm production (such as poor motility and necrospermia), the contribution of male factors to habitual abortion, local events affecting sperm (such as circulatory changes, local endocrine factors, and enzyme defects), autoimmunity, and psychological factors affecting sexual activity and semen quality.

3. Female factors

High priority problems in the female include studies of the cervix (such as the importance of certain infections including mycoplasma infections, mucus production, and the effect of cryosurgery and other treatments), the uterine environment (particularly the importance of infection and events preceding and concurring with implantation), tubal factors (particularly anatomical defects, biophysical and biochemical environmental factors, infection, the effect of ectopic pregnancy on subsequent infertility), and studies of the ovary (particularly ovarian dysfunction, polycystic disease, and local factors such as environmental toxins, effects of surgical treatment, etc.). Other problems identified for study include female sex behavior (leading to avoidance of intercourse, for example), the importance of psychological stress in producing infertility, endometriosis, and factors controlling follicular atresia and ovarian senescence. Also post-contraceptive infertility and habitual abortion require special study.

4. Couple factors

Topics in this category include immunological studies (with emphasis on the clinical significance of new developments in this field), marital and coital problems, and studies of the psychological effects of the processes leading to and involved in diagnosis and treatment.

5. Improved diagnostic and therapeutic techniques

Included in this category are semen analysis (with establishment of criteria for normal and abnormal findings, including age-specific parameters), new measures of analysis (including determination of sperm fertilizing ability and evaluation of spermatogenesis by morphological and biochemical means), methods for the detection of fertilization and implantation, means to monitor the migration of sperm in the female reproductive tract, and improved post-coital semen tests.

II. METHODS OF APPLYING

A. Application Format

Applications should be submitted on form NIH-398, the application form for the traditional research grant. The conventional presentation for research grant applications should be used.

B. Application Procedure

The original and six copies of the application must be received before 5:00 p.m. Eastern time on March 1, 1977. Applications should be sent or delivered to:

Division of Research Grants
National Institutes of Health
Westwood Building
5333 Westbard Avenue
Bethesda, Maryland 20016

A brief covering letter should accompany the application indicating that it is in response to this Program Announcement. The letter should specify the title of the application and scientific field and discipline of the principal investigator and the other scientists, if any, involved in the project. A copy of the covering letter should be sent to Dr. V. Jeffery Evans, RFA Officer, PRGB, CPR, NICHD, Room C-733, Landow Building, 7910 Woodmont Avenue, Bethesda, Maryland 20014.

INDEX

NIH GUIDE FOR GRANTS AND CONTRACTS
(Vol. 1, No. 1, April 30, 1970, to Vol. 5, No. 18, October 8, 1976)

LEGEND FOR AWARD MECHANISMS AND FOR CONTRACTS:

1. Research Project Grants
2. Program Project Grants
3. Center Grants
4. Resource Grants
5. Research Career Development Awards
6. Institutional Training Grants
7. Individual Fellowships
8. Academic or Clinical Investigator Awards (K-7's)
9. Minority Programs
10. Research and Development Contracts

October 1976

OUTDATED MATERIAL

NIH GUIDE FOR GRANTS AND CONTRACTS

DISCARD:

Vol. 1, No.	1	pages 1 through 5
	2	pages 1 through 4
	3	pages 1 through 7
		pages 9 and 10
	4	pages 1 through 3
		page 5
	5	pages 1 and 2
		pages 4 through 6
	6	pages 1 through 4
		pages 7 through 10
	7	pages 1 and 2
		pages 6 through 11
	8	page 1 to end
	9	pages 1 through 7
		pages 14 through 20
	10	pages 1 through 6
	11	pages 1 through 7
	12	none
	13	pages 1 through 5
	14	pages 1 through 9
	15	pages 1 through 9
	16	page 1
		page 25
	17	pages 1 through 3
	18	page 1
		page 5 - article on "Applicability of Policies and Procedures Published in the Guide"
		page 17
	19	pages 1 through 6
	20	page 1
		pages 17 through 19
	21	pages 1 through 4
	22	pages 1 through 6
		pages 9 through 12
Vol. 2, No.	1	pages 7 and 8
	2	page 1
		page 3 to end
	3	page 1
	4	pages 1 through 8
	5	pages 1 and 2
	6	none
	7	pages 1 through 35
	8	none
	9	page 1 to end
	10	none
	11	none

Vol. 3, No. 1	none	
2	page 1	
3	pages 7 and 8	
4	none	
5	page 1	
6	page 1	
7	page 1	
	pages 5 and 6	
8	pages 1 and 2 and 9	
9	pages 5 and 6	
10	page 1	
11	none	
12	page 3	
13	page 5	
14	pages 1 and 2	
15	none	
16	pages 1 through 5	
17	pages 1 through 3	
18	none	
19	pages 4 through 6	
20	none	
21	pages 1 through 37	
22	none	

THOMAS E. MALONE
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Vol. 4, No. 1	none
2	none
3	page 1
4	pages 1 through 36
5	page 9 - article on "NIH RCDA Program"
	page 10 - article on "NIH Special Research Career Programs" - discard only "National Eye Institute"
6	none
7	pages 1 and 2 - article on "New Review Cycle for Grant Applications"
8	page 2 - article on "Research Fellowships to Sweden and Switzerland"
	page 3
	pages 11 through 20
9	pages 1 through 6
10	none
11	pages 7 and 8
	page 9 - article on "RFA - Lung Tissue Culture"
	pages 10 through 18
12	pages 1 and 2 - article on "MARC Program"
	pages 5 through 9
13	pages 1 through 7
Vol. 5, No. 1	page 2 - article on "Travel Between U.S. and Canada"
12	page 1 - article on "MARC Program"
15	pages 13 and 14 - article on "Prohibited or Restricted Research"
18	page 9