APPENDICES

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LEGISLATIVE CHRONOLOGY

NOV. 1, 1948

The National Microbiological Institute was established under authority of section 202 of the Public Health Service Act, as implemented by General Circular No. 55, Organization Order No. 20, dated October 8, 1948.

DEC. 29, 1955

NIAID was established (replacing the National Microbiological Institute) under authority of the Omnibus Medical Research Act (Public Law 81-692, 64 Stat. L. 443), as implemented by a Public Health Service Briefing Memorandum of November 4, 1955, from the Surgeon General to the Secretary of Health, Education, and Welfare.

NOV. 4, 1988

NIAID was provided with additional authorities for AIDS research under Title II of the Health Omnibus Programs Extension of 1988 (HOPE legislation) (Public Law 100-07), the first major law to address AIDS research, information, education, and prevention.

AUG. 14, 1991

The Public Health Service Act was amended by Public Law 102-96, the Terry Beirn Community-Based AIDS Research Initiative Act of 1991, which reauthorized NIAID's Community Programs for Clinical Research on AIDS (CPCRA). CPCRA was renamed in honor of Mr. Beirn (an AIDS activist and congressional staffer who died in 1991) and was reauthorized for an additional 5 years.

JUNE 10, 1993

The Public Health Service Act was amended by Public Law 103-43, the National Institutes of Health Revitalization Act of 1993. This comprehensive legislation required NIAID to include research on tropical diseases in its mission statement and directs the Secretary, U.S. Department of Health and Human Services, to ensure that individuals with expertise in chronic fatigue syndrome or neuromuscular diseases are appointed to appropriate NIH advisory committees.

DEC. 14, 1993

The Preventive Health Amendments of 1993 were passed, which included provisions requiring the Director, NIAID, to conduct or support research and research training regarding the cause, early detection, prevention, and treatment of tuberculosis. (The Institute already had authority to conduct such research under its authorities in Title IV, Public Health Service Act.)

NOV. 29, 1999

The fiscal year 2000 Appropriations Act (Public Law 106-113) established the NIH Challenge Grants program to promote joint ventures between the NIH and the biotechnology, pharmaceutical, and medical device industries. A one-time funding level of $20 million was provided within the Public Health and Social Services Emergency Fund.

OCT. 17, 2000

The Children's Health Act (Public Law 106-310) required the Directors of NIAID and the National Institute of Arthritis and Musculoskeletal and Skin Diseases to expand and intensify the activities of their Institutes with respect to research and related activities concerning juvenile arthritis and related conditions.

NOV. 13, 2000

The Public Health Improvement Act (Public Law 106-505) authorized the NIAID Director to establish a program of clinical research and training awards for sexually transmitted infections.

July 21, 2004

The Project Bioshield Act (Public Law 108-276) authorized the Director of NIH to employ expedited peer review procedures for grants, contracts, and cooperative agreements addressing qualified countermeasures research. In addition, the Act authorized the Director of NIAID to award grants or contracts to public and nonprofit private entities to expand, remodel, renovate, or alter existing research facilities or construct new facilities.

Previous Directors

Victor H. Haas, M.D., 1948–1957
Justin M. Andrews, Sc.D., 1957–1964
Dorland J. Davis, M.D., D.P.H., 1964–1975
Richard M. Krause, M.D., 1975–1984

TECHNOLOGY TRANSFER

Technology transfer in Federal laboratories facilitates the dissemination of new technologies and research materials developed by Government scientists. This technology transfer fuels further innovation and commercialization by the extramural research and development community, ultimately resulting in improved public health and increased competitiveness by U.S. industry. Federal legislation mandates and defines the Government's technology transfer activities. The key pieces of legislation are the Federal Technology Transfer Act of 1986 and the National Technology Transfer and Advancement Act of 1995.

The NIAID Office of Technology Development (OTD) accomplishes technology transfer by facilitating the transfer of significant research advances and resources to the broader scientific community and promoting development of collaborative relationships among NIAID scientists, industry, and academia. NIAID uses various mechanisms to accomplish these ends, including Material Transfer Agreements (MTAs), Cooperative Research and Development Agreements (CRADAs), Materials-CRADAs (M-CRADAs), Confidential Disclosure Agreements (CDAs), Clinical Trial Agreements (CTAs), Drug Screening Agreements, Research Collaboration Agreements (RCAs), and, through the NIH Office of Technology Transfer (OTT), patenting of inventions and negotiation of various license agreements.

NIAID scientists report inventions to OTD by submitting Employee Invention Reports (EIRs). The EIRs are reviewed by OTD and, with the assistance of the NIAID Technology Evaluation Advisory Committee (TEAC), are evaluated for the appropriateness of filing domestic and foreign patent applications. In FY 2005, TEAC reviewed 36 EIRs and recommended that patent applications be filed on 23 of them. At the end of FY 2005, NIAID had 422 active U.S. patent properties, including 213 issued patents and 209 pending patent applications.

NIAID had a total of 245 active license agreements at the end of FY 2005 for both patented inventions and biological materials. Fifty-eight new licenses were executed during FY 2005. These licenses generated about $14.5 million in royalty income, which was first used to pay NIAID inventors their share according to Federal law and NIH policy. The Institute also distributed royalty income to intramural laboratories to support research projects and equipment acquisition that otherwise would not have been accomplished with appropriated funds. The remaining royalties were used to pay OTD's entire operating budget, including patent prosecution fees, staff salaries, associated office expenses, and overhead charged by OTT.

In FY 2005, a total of 149 MTAs (of which 17 were with for-profit companies), 9 CTAs, 92 CDAs, 4 CRADAs, 12 M-CRADAs, 8 RCAs, and 15 other agreements were negotiated by OTD and executed. NIAID extramural divisions referred technology transfer issues to OTD on 23 contracts, and OTD NIAID scientists performed research under 28 CRADAs and 38 M-CRADAs in FY 2005. The following table provides a history of NIAID's patent, license, and CRADA activities.

NIAID Technology Transfer Activities

Fiscal Year	Pending Patents	Issued Patents	Licenses In Effect	Active CRADAs
1992	77	48	65	21
1994	85	65	84	29
1995	96	71	101	31
1996	95	84	120	42
1997	128	91	131	71
1998	154	83	155	95
1999	169	94	195	74
2000	229	100	196	86
2001	194	125	190	93
2002	147	139	197	85
2003	174	168	245	71
2004	177	209	226	70
2005	212	255	270	76

Technology Transfer Highlights

In FY 2005, OTD negotiated or facilitated the following public-private partnerships:

- **Development of Live-Attenuated Vaccines for Pandemic Influenza. (MedImmune)** The emergence of new strains of influenza infectious to humans is recognized globally as a genuine public health concern. Although the specific location or source of an outbreak cannot be precisely predicted, there is worldwide recognition that such an occurrence could be devastating to human populations. NIAID will collaborate under this CRADA with MedImmune Vaccines to use genetic techniques to develop vaccines against potential pandemic strains of influenza. The NIAID/MedImmune partnership was announced in September 2005. For more details, see *www3.niaid.nih.gov/news/newsreleases/2005/medimmune.htm*.

- **Genome Integration Site Analysis Following *Ex Vivo* Transduction of Hematopoietic Stem/Progenitor Cells by Replication Incompetent Retrovirus Vectors. (Johnson and Johnson Research Pty Limited)** NIAID and Johnson and Johnson Research Pty Limited will determine the pattern of distribution of retrovirus vector insert sites in the genome of human hematopoietic progenitor cells that are transduced with retrovirus vectors that have been used in the past by each of the groups for *ex vivo* gene transfer targeting human hematopoietic progenitor cells. This is relevant to the important safety issue of determining the risk of cancer induction (insertional oncogenesis) associated with *ex vivo* gene transfer targeting human hematopoietic progenitor cells. The study will determine whether particular genes or locations within genes are targeted in hematopoietic progenitor cells with different marrow reconstitution potential and whether the pattern is different in different retrovirus vectors. Such knowledge could not only allow assessment of risk, but could guide changes in vector design and/or *ex vivo* transduction conditions that might reduce the risk of insertion-site-mediated oncogenesis.

- **Development of Procedures to Validate, Reagents, Assays, and Instrumentation for Measuring Immunogenicity. (ReaMetrix)** Under this CRADA, investigators in the ImmunoTechnology Section of the Vaccine Research Center (VRC) at NIAID and ReaMetrix will devise standardized technology for the validation and implementation of complex immune assays, with the development of a novel high-throughput imaging-based cytotoxicity assay as a core project.

- **Development of Electroporation (EP) or Prophylactic Therapeutic HIV Plasmid DNA (pDNA) Vaccines. (Vical)** Investigators at the NIAID VRC and Vical, Inc., will collaborate in the development and evaluation of HIV DNA vaccine candidates. The VRC and Vical will evaluate electroporation as a means of delivery that could enhance or improve the immune response to HIV and select the best constructs and formulations of HIV DNA vaccine candidates appropriate for clinical development.

New CRADAs

During FY 2005, NIAID scientists entered into the following four new CRADAs:

Collaborator	Investigator	Title
Johnson and Johnson Research (Australia)	Harry Malech, M.D. Laboratory of Host Defenses	Genome Integration Site Analysis Following *Ex Vivo* Transduction of Hematopoietic Stem/Progenitor Cells by Replication Incompetent Retrovirus Vectors
MedImmune	Kanta Subbarao, M.B.B.S., M.P.H. Laboratory of Infectious Diseases	Development of Live-Attenuated Vaccines for Pandemic Influenza
ReaMetrix	Mario Roederer, Ph.D. Vaccine Research Center	Development of Procedures to Validate, Reagents, Assays, and Instrumentation for Measuring Immunogenicity
Vical	Phillip Gomez III, Ph.D., M.B.A. Vaccine Research Center	Development of EP or Prophylactic Therapeutic HIV pDNA Vaccines

Ongoing CRADAs

In addition to the new CRADAs listed above, during FY 2005, NIAID scientists also conducted research under the following CRADAs:

Collaborator	Investigator	Title
Anacor Pharmaceuticals	Clifton E. Barry III, Ph.D. Laboratory of Immunogenetics	*In Vitro* and *In Vivo* screening of Novel Anti-tubercular Agents
BioVex	Phillip Gomez III, Ph.D., M.B.A. Vaccine Research Center	Evaluation of HSV Vectors Encoding HIV-1 Proteins
Chiron	Harlan D. Caldwell, Ph.D., Laboratory of Intracellular Parasites	Chlamydia Antigen Discovery
Chiron	H. Clifford Lane, M.D. Laboratory of Immunoregulation	Research and Development of IL-2 as a Treatment for HIV Infection
Crucell	Phillip Gomez III, Ph.D., M.B.A. Vaccine Research Center	Development of an Improved Recombinant Adenovirus Vector for Vaccination Against the Ebola Virus
Genetics Institute	Ethan Shevach, M.D. Laboratory of Immunology	Analysis of Gene Expression in Immunoregulatory T Cells that Co-express the CD4 and CD25 Surface Markers
GenVec	Phillip Gomez III, Ph.D., M.B.A. Vaccine Research Center	Evaluation of Adenoviral Vectors Encoding HIV-1 Proteins
GenVec	Phillip Gomez III, Ph.D., M.B.A. Vaccine Research Center	Evaluation of Adenoviral Vectors Encoding Proteins Associated with SARS
GlaxoSmithKline	Holli Hamilton, M.D., M.P.H. Barbara Savarese, R.N. Division of Microbiology and Infectious Diseases	A Double-Blind, Randomized, Controlled Phase III Study to Assess the Prophylactic Efficacy of rgD/Alum/MPL Vaccine in the Prevention of Genital Herpes Disease in Young Sexually Active Women (DMID#01–643)
Ichor Medical Systems	Phillip Gomez III, Ph.D., M.B.A. Vaccine Research Center	Evaluation of Electroporation-Mediated Delivery of an HIV DNA Vaccine

Collaborator	Investigator	Title
Innogenetics	Robert H. Purcell, M.D. Laboratory of Infectious Diseases	Analysis of the Immune Response to Hepatitis C Virus
Invitrogen	Thomas Kindt, Ph.D. Michael Wilson, Ph.D. Research Technologies Branch, Division of Intramural Research	Oligonucleotide Control Sets for Microarray Applications
MacroGenics, Inc.	Robert H. Purcell, M.D. Laboratory of Infectious Diseases	Development of Prophylactic and Therapeutic Monoclonal Antibodies to Vaccinia/Smallpox, SARS, and Anthrax
Maxygen	Louis Miller, M.D. Carole Long, Ph.D. Allan Saul, Ph.D. Laboratory of Parasitic Disease	Novel, Polyspecific Malaria Vaccine Development Based on PfEMP1 Using Molecular Breeding™ Directed Molecular Evolution Technologies
Merck	Gary Nabel, M.D., Ph.D. Vaccine Research Center	Development of an Adenoviral-Based HIV Vaccine
Merck	Stephen Straus, M.D. Laboratory of Clinical Investigation	A Double-Blind, Placebo-Controlled Study of the Efficacy of Live-Attenuated Oka/Merck Varicella Zoster Vaccine in Reducing the Incidence and/or Severity of Shingles in Adults
Merial	José Ribeiro M.D., Ph.D. Laboratory of Parasitic Disease	Evaluation of DNA Vaccines Encoding Sand Fly Salivary Proteins as Candidates to Control *Leishmania infantum* Infection in Dogs
Osel	Edward Berger, Ph.D. Laboratory of Viral Diseases	SCD4-17b Expressed by/on *Lactobacillus* as an Anti-HIV Topical Microbicide
Quantum Dot	Mario Roederer, Ph.D. Vaccine Research Center	Use of Quantum Dots for Improved Cellular Classification in Flow Cytometry
Vical, Inc.	Phillip Gomez III, Ph.D., M.B.A. Vaccine Research Center	Development and Selection of Research-Grade Plasmid DNA Vectors Encoding West Nile Virus Proteins and Formulations for Potential Use as Prophylactic Vaccines in Human and Veterinary Applications
Wyeth-Lederle Vaccines	George Curlin, M.D. Division of Microbiology and Infectious Diseases	Preventing Childhood Mortality—An Efficacy Trial of a Pneumococcal Conjugate Vaccine in Upper and Central River Divisions, The Gambia

NIH EXTRAMURAL FUNDING MECHANISMS USED BY NIAID

Fellowship Programs

F31 Predoctoral Individual National Research Service Award (NRSA)—provides predoctoral individuals with supervised research training in specified health and health-related areas leading toward the research degree (e.g., Ph.D.).

F32 Postdoctoral Individual NRSA—provides postdoctoral research training to individuals to broaden their scientific background and extend their potential for research in specified health-related areas.

F33 NRSA for Senior Fellows—provides opportunities for experienced scientists to make major changes in the direction of their research careers, to broaden their scientific background, or to acquire new research capabilities.

F35 Intramural NRSA Individual Postdoctoral Program—supports a postdoctoral trainee in the NIH intramural program.

Research Career Programs

K02 Independent Scientist Award—provides support for newly independent scientists who can demonstrate the need for a period of intensive research focus as a means of enhancing their research careers.

K08 Clinical Investigator Award—provides the opportunity for promising medical scientists (with demonstrated aptitude to develop into independent investigators) or faculty members who will pursue research aspects of categorical areas applicable to the awarding unit, and aids in filling the important academic faculty gap in these shortage areas within health professional institutions of the country.

K22 Career Transition Award—provides support to outstanding newly trained basic or clinical investigators to develop their independent research skills through a two-phase program: an initial period involving an intramural appointment of the NIH and a final period of support at an extramural institution. The award is intended to facilitate the establishment of a record of independent research by the investigator to sustain or promote a successful research career.

K23 Mentored Patient-Oriented Research Career Development Award—provides support for the career development of investigators who have made a commitment to focus their research endeavors on patient-oriented research. This mechanism provides support for a 3-year minimum up to a 5-year period of supervised study and research for clinically trained professionals who have the potential to develop into productive clinical investigators.

K24 Midcareer Investigator Award in Patient-Oriented Research—provides support for experienced clinicians to allow them protected time to devote to patient-oriented research and to act as mentors for beginning clinical investigators.

K25 Mentored Quantitative Research Career Development Award—supports junior faculty-level investigators with quantitative scientific and engineering backgrounds outside of biology or medicine who have the potential to integrate their expertise with biomedicine and to develop into productive investigators with a period of mentored study and research.

K30 Clinical Research Curriculum Award (CRCA)—awarded to institutions to stimulate the inclusion of high-quality, multidisciplinary didactic training as part of the career development of clinical investigators. This award supports the development of new didactic programs in clinical research at institutions that do not offer such programs or in institutions with existing programs in clinical research. In the latter, it supports the expansion of programs or improvement in the quality of instruction.

Research and Development-Related Contracts

N01 Research and Development (R&D) Contract—develops or applies new knowledge or tests, screens, or evaluates a product, material, device, or component for use by the scientific community.

Research Program Projects and Centers

P01 Research Program Project—provides a qualified institution, on behalf of a principal investigator, with the support of a broad-based, multidisciplinary, often long-term research program with a particular major objective or theme. A program project involves the organized efforts of groups of investigators who conduct research projects related to the overall program objective. The grant can provide support for the projects and for certain shared resources necessary for the total research effort. Each project supported under a program project grant is expected to contribute to the overall program objective.

P30 Center Core Grant—supports shared resources and facilities for categorical research by a number of investigators from different disciplines who provide a multidisciplinary approach to a joint research effort or from the same discipline who focus on a common research problem. Although funded independently of the center's component projects or program projects, the core grant relates integratively to them. By providing more accessible resources, this support is expected to ensure greater productivity than that obtained from the separate projects and program projects.

P50 Specialized Center—supports any part of the full range of R&D, from basic to clinical, and may involve ancillary supportive activities, such as protracted patient care necessary to the primary research or R&D effort. The spectrum of activities comprises a multidisciplinary attack on a specific disease entity or biomedical problem area. These grants differ from program project grants in that they are usually developed in response to an announcement of the programmatic needs of an Institute or Division and subsequently receive continuous attention from its staff. Centers also may serve as regional or national resources for special research purposes.

Research Project Grants and Grants Related to Research Projects

R01 Research Project Grant (traditional)—provides support to an institution (domestic or foreign) on behalf of a principal investigator for a discrete project related to the investigator's interests and competence. Most of the research that the NIH supports is maintained through this funding mechanism. Although rare, such a grant may be awarded directly to an individual.

R03 Small Grant—provides research support specifically limited in time and amount for studies in categorical program areas. Small grants provide flexibility for initiating studies, which are generally for preliminary short-term projects and are nonrenewable.

R09 Scientific Evaluation—provides the chairman of an initial review group funds for operation of the initial review group.

R13 Conference Grant—provides funding for conferences to coordinate, exchange, and disseminate information related to program interests. In general, such awards are modest and limited to participation with other organizations in the support of conferences rather than as a provision of sole support. Among the costs eligible for support are salaries, equipment rental, travel, consultant services, and supplies. Prospective applicants should inquire in advance concerning possible interest on the part of an Institute.

R15 Academic Research Enhancement Award (AREA)—provides support to scientists at eligible domestic institutions for small-scale, new, or expanded health-related research projects, such as pilot research projects and feasibility studies; development, testing, and refinement of research techniques; secondary analysis of available data sets; and similar discrete research projects that demonstrate research capability. This award is directed toward smaller, less-prominent 4-year public and private colleges and universities that provide undergraduate training for a significant number of U.S. research scientists but have not had an adequate share in the growth of the NIH extramural program.

R18 Research Demonstration and Dissemination Project—provides support to develop, test, and evaluate health-service activities and to foster the application of existing knowledge for the control of categorical diseases.

R21 Exploratory/Developmental Grant—used by NIAID for bridge awards. The bridge award provides support for a limited time and amount to investigators to enable them to continue meritorious research and improve the competitiveness of future grant applications.

R24 Resource-Related Research Project—supports research projects that will enhance the capability of resources to serve biomedical research.

R25 Education Project—provides support to develop or implement a program in education, information, training, technical assistance, coordination, or evaluation.

R33 Exploratory and Developmental Grants, Phase II—provide a second phase of support for innovative, exploratory, and developmental research begun as an R21 award. Only R21 awardees are eligible to apply for R33 support. Applications are accepted only in response to RFAs and PAs that specify the R33 mechanism.

R34 Clinical Trial Planning Grant—provides support for initial development of a clinical trial, for example, establishing a research team, developing tools for managing data and overseeing the research, and developing a trial design, protocol, recruitment strategies, and procedure manuals. Only those investigators who have received the R34 planning grant are eligible to apply for the clinical trial implementation (U01) grant.

R37 Method to Extend Research in Time (MERIT) Award—provides long-term, stable support to investigators who are likely to continue to perform in an outstanding manner and spares them the administrative burdens associated with preparing and submitting research grant applications. An initial 5-year award is accompanied by an opportunity for a 3- to 5-year extension, based on an expedited review of the accomplishments during the initial award period. Investigators may not apply for a MERIT award. NIH staff and advisors base their selection of MERIT award recipients on competing R01 applications, prepared and submitted in accordance with NIH procedures. MERIT awards are awarded to a limited number of selected investigators who have demonstrated superior competence and outstanding productivity during previous research endeavors.

Small Business Funding Opportunities

R41 Small Business Technology Transfer Research (STTR) Grant, Phase I—supports cooperative R&D projects between small business concerns and research institutions, limited in time and amount, to establish the technical merit and feasibility of ideas that have potential for commercialization. Awards are made to small business concerns only.

R42 STTR Grant, Phase II—supports cooperative R&D projects between small business concerns and research institutions, limited in time and amount, to establish the technical merit and feasibility of ideas that have potential for commercialization. Awards are made to small business concerns only.

R43 Small Business Innovation Research (SBIR) Grant, Phase I—enables small businesses to contribute to the R&D mission of the NIH. Phase I grants support projects, limited in time and amount, to establish the technical merit and feasibility of ideas that ultimately might lead to commercial products or services. The research must be conducted in the United States.

R44 SBIR Grant, Phase II—enables small businesses to contribute to the R&D mission of the NIH. Phase II grants support indepth development of ideas whose feasibility has been established in Phase I and that are likely to result in commercial products or services. The research must be conducted in the United States.

Research Training Programs

T32 Institutional NRSA—enables institutions to grant NRSAs for predoctoral and postdoctoral research training in specified shortage areas to individuals selected by the institutions.

T35 NRSA Short-Term Research Training—provides individuals with research training during off-quarters or summer periods to encourage research careers or research in areas of national need.

Cooperative Agreements

U01 Research Project (Cooperative Agreement)—provides an assistance relationship between NIH and a recipient, but with substantial programmatic involvement by NIH. NIH assists, supports, or stimulates the recipients and is involved substantially with recipients in conducting projects similar in program content to those for

grants, with NIH playing a "partner" role in the effort.

U19 Research Program (Cooperative Agreement)—supports a research program of multiple projects directed toward a specific major objective, basic theme, or program goal that requires a broad-based, multidisciplinary, and often long-term approach.

U24 Resource-Related Research Projects/ Cooperative Agreements—support research projects contributing to improvement of the capability of resources to serve biomedical research.

U42 Animal (Mammalian and Nonmammalian) Model and Animal and Biomedical Materials Resource Cooperative Agreements (National Center for Research Resources)—develop and support an animal (mammalian and nonmammalian) model or animal or biological materials resources available to all qualified investigators without regard to the scientific disciplines or disease orientations of their research activities or specifically directed to a categorical program. Nonmammalian resources include nonmammalian vertebrates, invertebrates, cell systems, and nonbiological systems.

U54 Specialized Centers Cooperative Agreements—support research and development from basic to clinical, including ancillary supportive activities that create a multidisciplinary focus on a disease or a biomedical problem. Centers also can serve as regional or national resources for special research purposes.

U56 Exploratory Grants Cooperative Agreements—support planning for new programs, expansion or modification of existing resources, and feasibility studies for interdisciplinary programs that can lead to specialized or comprehensive centers.

UC1 NIH Challenge Grants and Partnerships Program, Phase II, Cooperative Agreements (NIAID)—promote joint ventures between NIH and both domestic and global entities to facilitate rapid biomedical or biotechnology R&D for infectious diseases to benefit public health; projects should have a commercial potential that could not have been attained without matching funds.

Interagency and Intra-Agency Agreements

Y01 NIH Interagency Agreement—provides a written reimbursable agreement by which a component of NIH provides a source of funds to another Federal organization outside the Department of Health and Human Services (DHHS) to acquire specific products, services, or studies.

Y02 NIH Intra-agency Agreement—provides a written reimbursable agreement by which a component of NIH provides funds to another NIH component or to another organization within DHHS to acquire specific products, services, or studies.

ACRONYMS

AACTG	Adult AIDS Clinical Trials Group
ACE	Autoimmunity Center of Excellence
ACTG	AIDS Clinical Trials Group
ADCC	Autoimmune Diseases Coordinating Committee
ADV	adenoviral
AIDS	acquired immunodeficiency syndrome
ARAC	AIDS Research Advisory Committee
AREA	Academic Research Enhancement Award
ART	antiretroviral therapy
ASIR	Richard M. Asofsky Scholars In Research award
AVRWG	AIDS Vaccine Research Working Group
BFMB	Budget and Financial Management Branch
BSC	Board of Scientific Counselors
BSE	bovine spongiform encephalopathy
BSIP	Bioinformatics and Scientific IT Program
BSL	biosafety level
CAB	community advisory board
CASG	Collaborative Antiviral Study Group
CAVE	Capital Area Vaccine Effort
CBO	community-based organization
CCTPT	Cooperative Clinical Trials in Pediatric Transplantation
CDA	Confidential Disclosure Agreements
CDC	U.S. Centers for Disease Control and Prevention
CEG	Community Education Group
CEOPP	Community Education and Outreach Partnership Program
CFAR	Centers for AIDS Research
CHAVI	Center for HIV/AIDS Vaccine Immunology
CIPRA	Comprehensive International Program of Research on AIDS
CJD	Creutzfeldt-Jakob disease
CMP	Contract Management Program
CMV	cytomegalovirus
CoV	corona virus
CPCRA	Community Programs for Clinical Research on AIDS
CRADA	Cooperative Research And Development Agreement
CRC	Cooperative Research Centers
CRCA	Clinical Research Curriculum Award
CTA	Clinical Trial Agreement

CWD	chronic wasting disease
DAIDS	Division of Acquired Immunodeficiency Syndrome
DAIT	Division of Allergy, Immunology, and Transplantation
DC	dendritic cell
DEA	Division of Extramural Activities
DHHS	Department of Health and Human Services
DIR	Division of Intramural Research
DMID	Division of Microbiology and Infectious Diseases
DoD	Department of Defense
DTPA	diethylenetriaminepentaacetate
EAMB	Extramural Administrative Management Branch
EIR	Employee Invention Reports
ELISPOT	enzyme-linked immunospot
EM	erythema migrans
EP	electroporation
ESB	Extramural Services Branch
ESPRIT	Evaluation of Subcutaneous Proleukin in a Randomized Intervention
FDA	U.S. Food and Drug Administration
GALT	gut-associated lymphoid tissue
GAS	Group A streptococci
GBS	Group B streptococci
GMB	Grants Management Branch
HAART	highly active antiretroviral therapy
HALT-C	hepatitis C antiviral long-term treatment against cirrhosis
HCV	hepatitis C virus
HIV	human immunodeficiency virus
HLA	human leukocyte antigen
HOPE	Health Omnibus Programs Extension of 1988 (legislation)
HPTN	HIV Prevention Trials Network
HSV	herpes simplex virus
HVAD	HIV Vaccine Awareness Day
HVCC	HIV Vaccine Communications Campaign
HVDDT	HIV Vaccine Design and Development Teams
HVTN	HIV Vaccine Trials Network
IAMB	Intramural Administrative Management Branch
ICER	International Centers for Excellence in Research

ICIDR	International Collaborations in Infectious Diseases Research
ICU	intensive care unit
IHWG	International Histocompatibility Working Group
IL-2	interleukin-2
IL-4	interleukin-4
IND	investigational new drug
INRO	Intramural NIAID Research Opportunities
IOD	Immediate Office of the Director
IOM	Institute of Medicine
IPCP-HTM	Integrated Preclinical/Clinical Program for HIV Topical Microbicides
IPM	International Partnership for Microbicides
IRES	internal ribosome entry site
IRID	International Research in Infectious Diseases
IRTA	Intramural Research Training Awards
ISB	Intramural Services Branch
ITN	Immune Tolerance Network
KMO	Knowledge Management Office
LACMB	Legislative Affairs and Correspondence Management Branch
M.tb	*Mycobacterium tuberculosis*
MACS	Multicenter AIDS Cohort Study
MADGC	Multiple Autoimmune Disease Genetics Consortium
MSB	Management Services Branch
M-CRADA	Materials-CRADA
MDDT	Microbicide Design and Development Team
MDR-TB	multidrug-resistant tuberculosis
MERIT	Method to Extend Research in Time award
MHC	major histocompatibility complex
MIP	Microbicide Innovation Program
MPIB	Mission Planning and Integration Branch
MR4	Malaria Research and Reference Reagent Resource Center
MRSA	methicillin-resistant *Staphylococcus aureus*
MS	multiple sclerosis
MSM	men who have sex with men
MTA	Material Transfer Agreement
MTCT	mother-to-child transmission
MVA	modified vaccinia Ankara
MVDB	Malaria Vaccine Development Branch

NAAIDC	National Advisory Allergy and Infectious Diseases Council
NARAC	North American Rheumatoid Arthritis Consortium
NARSA	Network on Antimicrobial Resistance in *Staphylococcus aureus*
NDRI	National Disease Research Interchange
NIAID	National Institute of Allergy and Infectious Diseases
NIDDK	National Institute of Diabetes and Digestive and Kidney Diseases
NIH	National Institutes of Health
NP	nucleoprotein
NPIB	News and Public Information Branch
NRSA	National Research Service Award
NVITAL	NIAID Vaccine Immune T-cell and Antibody Laboratory
NVP	nevirapine
NVPO	National Vaccine Program Office
OAS	Office of Administrative Services
OBR	Office of Biodefense Research
OCGR	Office of Communications and Government Relations
OCIO	Office of the Chief Information Officer
OCPL	Office of Communications and Public Liaison
OCTANE	Optimal Combined Therapy after NVP Exposure study
OD	Office of the Director
OE	Office of Ethics
OGR	Office of Global Research
OI	opportunistic infection
OMO	Office of Management and Operations
OSPFM	Office of Strategic Planning and Financial Management
OSPRT	Office of Special Populations and Research Training
OSRD	Office of Scientific Resource Development
OTD	Office of Technology Development
OTIS	Office of Technology Information Systems
OTSEP	Office of Training and Special Emphasis Programs
OTT	Office of Technology Transfer (NIH)
OWER	Office of Workforce Effectiveness and Resources
PACTG	Pediatric AIDS Clinical Trials Group
PATH	Program for Appropriate Technology in Health
PAVE	Partnership for AIDS Vaccine Evaluation
PCR	polymerase chain reaction
pDNA	plasmid DNA
PEG-IFN	pegylated-interferon

PEPFAR	President's Emergency Program for AIDS Relief
PFGRC	Pathogen Functional Genomics Resource Center
PGA	poly-gamma-DL-glutamic acid
PHACS	Pediatric HIV/AIDS Cohort Study
PIDR	Primary Immunodeficiency Diseases Registry
PRMB	Policy and Resources Management Branch
PRP	polyribosylribose phosphate
PRSP	penicillin-resistant *Streptococcus pneumoniae*
R&D	Research and Development
rAd	recombinant adenoviral vector
RBL	Regional Biocontainment Laboratory
RCA	Research Collaboration Agreement
RCE	Regional Center of Excellence
RCMI	Research Center in Minority Institution
RFA	request for application
RFP	request for proposals
RML	Rocky Mountain Laboratories
rPA	recombinant protective antigen
RPAB	Referral and Program Analysis Branch
RSV	respiratory syncytial virus
SAISB	Scientific Applications and Information Systems Branch
SARS	severe acute respiratory syndrome
SBIR	Small Business Innovation Research
SHIV	simian-human immunodeficiency virus
SIV	simian immunodeficiency disease
SMART	Strategies for Management of Anti-Retroviral Therapy study
SPEB	Strategic Planning and Evaluation Branch
STD	sexually transmitted disease
STI	sexually transmitted infection
STTR	Small Business Technology Transfer Research
TAACF	Tuberculosis Antimicrobial Acquisition and Coordinating Facility
TACC/DACC	Tri-Service AIDS Clinical Consortium Data Analysis and Coordinating Center
TB	tuberculosis
TBRU	Tuberculosis Research Unit
TDRU	Tropical Diseases Research Unit
TEAC	Technology Evaluation Advisory Committee
TIGR	The Institute for Genomic Research
TMP-SMX	trimethoprim-sulfamethoxazole

TMRC	Tropical Medicine Research Centers
TRIM	tripartite motif
TSE	transmissible spongiform encephalopathy
USAID	U.S. Agency for International Development
USAMRIID	U.S. Army Medical Research Institute of Infectious Diseases
USAMRMC	U.S. Army's Medical Research and Materiel Command
USMHRP	U.S. Military HIV Research Program
VDRG	Vaccine Developmental Resources Group
VEE	Venezuelan equine encephalitis
VPP	Vaccine Pilot Plant
VRC	Vaccine Research Center
VRE	vancomycin-resistant *Enterococcus*
VRSA	vancomycin-resistant *S. aureus*
WHO	World Health Organization
WIHS	Women's Interagency HIV study
WMRB	Workforce Management Resources Branch
WNV	West Nile virus
WRDB	Workforce Retention and Development Branch

INDEX

C

D

E

F

G

H

I

J

K

L

M

N

O

P

R

S

T

U

V

W

X

Y