

# NIH GUIDE

# for GRANTS and CONTRACTS

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

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*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.*

AUG 11 1976

PHS TRAINING GRANT APPLICATION FORMS,  
RESEARCH AND NON-RESEARCH

A N N O U N C E M E N T

The two basic competing application forms for PHS training programs are numbered PHS-6025 (11/74) and PHS 2499-1 (Rev. 2/75). PHS-6025 is used for biomedical and behavioral research training under the National Research Service Award Institutional Grant. This form is available from the Office of Grants Inquiries, Division of Research Grants, National Institutes of Health, or the grants management officer of the appropriate Institute in the Alcohol, Drug Abuse, and Mental Health Administration. PHS 2499-1 is used for non-research training in a variety of PHS programs and is available from the awarding component sponsoring the particular program. This form is not available from the Division of Research Grants, NIH.

MINORITY HYPERTENSION RESEARCH DEVELOPMENT  
SUMMER PROGRAM, DIVISION OF HEART AND  
VASCULAR DISEASES, NATIONAL HEART AND  
LUNG INSTITUTE

A N N O U N C E M E N T

Under authority of Section 472 of the Public Health Service Act as amended (42 USC 4821-1), the Division of Heart and Vascular Diseases of the National Heart and Lung Institute is accepting applications for Institutional National Research Service Awards for research training under the Minority Hypertension Research Development Summer Program.

The Minority Hypertension Research Development Summer Program is intended to (1) encourage the recruitment and development of minority investigators in specialized areas of research, prevention, control, and education related to hypertension and (2) stimulate hypertension research, prevention, control, and education by offering minority school faculty members and graduate students the opportunity to enhance their research capabilities in these areas.

Training will be offered through HYPERTENSION TRAINING CENTERS which have well-established hypertension research and training programs and are within 100 miles of a minority school(s) or provide satisfactory alternative arrangements for communication and exchange. The CENTERS will collaborate with MINORITY SCHOOLS to work out plans for the identification, selection, and development of participating MINORITY SCHOOL FACULTY MEMBERS OR GRADUATE STUDENTS. The Training Center is expected to make commitments for hypertension training, establish communications with the minority schools and select training center members for a joint panel which selects participants. Alternatively, a minority school may identify a hypertension training center and initiate communication toward development of a summer training program.

Minority schools are those in which a majority or significant proportion of its enrollment is comprised of students of minority ethnic groups including, but not limited to, Blacks, Spanish Americans, Native Americans, and Pacific-Asian Americans and has a demonstrated commitment to the special encouragement of minority faculty, students, and investigators. The Minority School must commit itself to encouraging appropriate faculty members or graduate students to participate in this program, to continue the faculty member or graduate student in status after the summer session(s) and guarantee at least limited resources for his or her hypertension research and teaching activities. Participating faculty members or graduate students must be nominated by the Minority School, be accepted by the Training Center, complete the formal Payback Agreement required of all individuals receiving support under the National Research Service Award authority, and agree to report annually for six years after training on his or her academic status, publications, grants or contracts, and teaching activities related to hypertension.

Institutions wishing to participate as Hypertension Training Centers should submit an application after communications have been established with one or more Minority Schools. The National Heart and Lung Institute proposes to award up to 20 Minority Hypertension Research Development Summer Program grants, each with a duration of five years. Applications may request funds to provide stipends for the duration of a summer program of \$192-\$269 per week for minority school faculty participants and \$75 per week for minority school graduate student participants. In addition, funds may be requested for tuition and fees essential to the training; medical insurance coverage for participants; and up to 25% of the total award for personnel, including laboratory and secretarial; supplies, not to exceed \$1,000 per trainee; equipment essential to the program; and consultant costs when specifically justified. Indirect costs will be allowed at 8% of the total allowable direct costs or the actual rate, whichever is less.

The present announcement is for a single competition with a specific deadline, October 15, 1976, for receipt of applications. Guidelines for the development of applications and application forms may be obtained by contacting Dr. D. M. MacCanon, (301) 496-1846.

LETTER OF INTENT

Prospective applicants should submit a letter of intent not later than August 1, 1976, to:

Dr. D. M. MacCanon  
Chief, Manpower Branch  
Division of Heart and Vascular Diseases  
National Heart and Lung Institute  
Room C-918, Landow Building  
Bethesda, Maryland 20014

The Institute requests such letters to obtain an indication of the number and the scope of applications which will require merit review. A letter of intent is not binding and will not enter into the review of any proposal subsequently submitted. The letter should briefly describe the composition of the prospective

Hypertension Training Center, the overall approach, and areas of interest envisioned for the Minority Hypertension Research Development Summer Program. These letters will also form the basis for selecting a representative number of prospective applicants to attend a program orientation seminar in August/September 1976.

Minority Schools desirous of participating in such a program are also invited to write. Every possible effort will be made to place them in communication with a Hypertension Center in their vicinity.

Questions regarding this announcement should be referred to Dr. D. M. MacCanon at (301) 496-1846.

YOUNG INVESTIGATOR RESEARCH GRANT,  
NATIONAL HEART AND LUNG INSTITUTE

A N N O U N C E M E N T

I. OBJECTIVES

The Young Investigator Research Grant Program is intended to:

- encourage independent investigators to develop their research interests in the cardiovascular, pulmonary, blood disease, and blood resource areas;
- provide support for the initial research effort of investigators in these areas so that they can explore their own research ideas;
- foster an overall expansion of new research ideas in both fundamental and clinical areas.

II. BACKGROUND AND RATIONALE

Despite a recent decline in the death rate from coronary heart disease, cardiovascular disease continues to be the number one killer in the United States. Arteriosclerosis and hypertension account for over one million deaths annually. An estimated 30 million Americans have diseases of the heart and blood vessels, resulting in a large burden of acute and chronic illness and disability. Heart and blood vessel diseases cost the economy more than \$40 billion per year in wages, lost productivity, and expenses for medical care.

Diseases of the lung constitute a major national health problem. An estimated 10 million Americans, both young and old, are currently affected by these diseases with an annual estimated cost to the nation of over \$17 billion. In the newborn, the most common cause of death is neonatal respiratory distress syndrome. Neonatal RDS is implicated in the development of adult respiratory diseases, as well. Fibrotic and immunologic lung diseases are a major cause of lung problems in the young adult and may cause chronic obstructive pulmonary disease. Of the adult respiratory diseases, emphysema and chronic bronchitis are the major causes of death.

Together with asthma, emphysema and chronic bronchitis represent a particularly pressing health problem, since the death rate and prevalence of these conditions have increased at an alarming rate over the past 15 years. As a disabling disease, emphysema is the third leading cause of worker retirement on social security disability payments.

Bleeding and clotting disorders underlie or are a major contributor to many disease processes and, as a consequence, are a major cause of death and disability in the United States. No valid estimate of its adverse economic impact can be realistically made, since disorders of the blood not only affect the blood itself, but all of the organs and tissues through which it flows. Similarly, when estimating the economic consequences of an inadequate blood resource system, quantitative figures are difficult to determine, since the supply and management of blood and blood products underlie much routine and emergency medical practice. A small but significant segment of the population has Sickle Cell Anemia or other hemolytic diseases; however, the economic impact of these, too, is serious.

The Young Investigator Research Grant Program is designed to encourage young investigators in basic or clinical science disciplines to develop their research interests and capabilities in heart, lung, and blood disease areas. To help bridge the transition from training status to that of a productive investigator, this special grant program provides support for young scientists and physicians with meritorious research ideas of their own design.

This research grant program provides the initial independent research support for talented young scientists who wish to address the challenging research problems presented by cardiovascular, lung, and blood diseases; a special effort is made to reach the young investigator who wishes to establish independent research support for the first time.

### III. IMPLEMENTATION

Beginning in fiscal year 1977, under the authorizations in Public Health Service Act, Section 301(c) and Section 412, the National Heart and Lung Institute plans to award new Young Investigator Research Grants. Each grant will have a duration of not more than three years. Funding beyond the first year of the grant will be contingent on satisfactory progress during the preceding year.

The status of the Young Investigator Research Grant Program will be reviewed four years from the date of the first awards to determine whether or not the program should be continued. To assess the effectiveness of the program in fulfilling its objectives, the Institute intends, after termination of each grant, to follow the progress of the recipient for a period of six years to determine (1) the investigator's professional affiliation(s), (2) his/her subsequent grant or contract support, and (3) his/her scientific publications.

It is anticipated that the results achieved with this grant will, in a majority of cases, provide the basis for successful competition in the regular research support programs of the Institute.

The first receipt date for applications will be November 1, 1976. They will be reviewed by Study Sections in February/March and by the National Advisory Heart and Lung Council in May 1977. July 1, 1977, will be the earliest starting date for successful applicants.

#### IV. CRITERIA FOR ELIGIBILITY

The project must be:

- relevant to problems of cardiovascular, pulmonary, or blood diseases and resources;
- a well-defined study to answer a specific scientific question, or a pilot study, but not supplemental to a project supported by other funds;
- designed for completion within a 3-year period; and
- acceptable in accordance with the customary criteria of scientific merit.

The investigator must:

- provide a satisfactory plan for completing the project within three years;
- submit with the application the names of three persons who are present or past supervisors or preceptors and who will forward letters attesting to his/her ability to undertake the project;
- have a doctoral degree by the time of the award;
- present evidence of prior research experience;
- not be or have been the recipient of an NIH Special Fellowship, Research Career Development Award, nor the principal investigator on a research grant, research contract, or the equivalent, either at present or in the past; however, trainees or regular research fellows are not excluded;
- be a citizen or a non-citizen national of the United States or its possessions and territories, or have been lawfully admitted to the United States for permanent residence at the time of submitting the grant application;
- agree to keep the National Heart and Lung Institute informed about scientific accomplishments, change in professional status, and change in institutional affiliation for a period of six years after the grant terminates;

- agree to devote at least 70 percent of his/her time to the project.

The applicant institution, through the chairperson of the sponsoring department, must:

- indicate its commitment to the project;
- provide space and facilities necessary to pursue the project;
- release the principal investigator from other responsibilities for the proportion of time or effort to be devoted to the project.

Institutions may submit more than one application. Only domestic institutions may apply.

V. SUPPORT PROVIDED BY THE GRANT

The Young Investigator Research Grant will provide support for a period of up to three years in an amount not to exceed \$90,000 direct costs, of which no more than \$35,000 may be requested for any 12-month period. These grants are not renewable and because of their special nature certain limitations are placed on the items which can be supported, as specified below.

Personnel

- Salary and fringe benefits for the principal investigator may be requested to the extent that they reflect the time or effort devoted to the project. In no event, however, will the salary support of the investigator exceed \$22,500/year from this grant. The effort of one part-time technical assistant may also be supported, if justified in terms of the research.

Equipment

- the facilities available should include most of the necessary equipment. Some specialized equipment essential to the specific research effort may, however, be justified. Only in unusual and well-justified circumstances should equipment purchases be made during the third year of the award.

Supplies

- the cost of necessary supplies must be detailed and justified.

Travel

- expenses to attend one national meeting closely related to the project may be requested for each 12-month period.

Hospitalization

- support for patient expenses may be requested, if needed for the project, but must be strongly justified.

Publication costs

- since publishable results are seldom expected in the first 12 months, publication costs will be approved only for subsequent portions of the project period.

Other expenses

- if other items are necessary for performance of the research effort, these must be clearly justified in terms of that need.

Indirect costs

- will be provided in accordance with established DHEW policies for regular research grants.

VI. APPLICATION

Applications must be submitted on the regular research grant application form NIH 398. The original copy and the folder in which it is submitted • should be clearly labeled (in red ink) NHLI Young Investigator Research Grant. The proposed project should be presented using the format described in the "Instructions" in the application kit.

The chairperson of the department sponsoring the research should submit a signed statement, as part of the application, detailing the commitments made to the project.

The completed grant application should be mailed to the Division of Research Grants, National Institutes of Health, Bethesda, Maryland 20014. Upon receipt of each application at NIH, a postal card acknowledging receipt will be mailed to the investigator. When the application has been assigned to an initial review group (study section), the applicant will again be notified by mail. The applicant should ask three present or former supervisors or preceptors to send a letter to the review group in the Division of Research Grants attesting to his/her potential for conducting research but these need not comment on the merit of the specific project. These reference letters should not be mailed to NIH until the applicant has received the middle part of the Receipt Card indicating the review group (study section) and its address. The applicant is responsible for making the necessary arrangements to insure that the reference letters are mailed by the supervisors/preceptors directly to the review group. (NIH staff is unable to respond to individual inquiries concerning the receipt of these reference letters.)



Applications may be submitted on the regular new research project grant receipt dates as follows:

<u>Receipt Date</u>	<u>Study Section Meeting</u>	<u>Council Meeting</u>	<u>Results Announced by</u>
Nov. 1	Feb./March	May	June
March 1	June	Sept./Oct.	November
July 1	Oct./Nov.	Jan./Feb.	March

Applications received too late for one review cycle will be held for consideration at the next.

Applications will be screened for relevance to the programs of the Institute in heart and vascular, lung, or blood diseases, and blood resources. The initial scientific and technical merit review of these proposals will be conducted in the Division of Research Grants. Applicants will be informed of the results of the review shortly after final consideration by the National Heart and Lung Advisory Council. Successful applicants may plan to initiate their research efforts as early as the first of the month following their notification.

Questions or request for further information should be directed to the staff of the National Heart and Lung Institute program area to which the research will be related. For other information and appropriate referral, call (301) 496-7225.

PEDIATRIC CLINICAL PHARMACOLOGY GRANT  
APPLICATIONS SOUGHT BY THE NATIONAL  
INSTITUTE OF GENERAL MEDICAL SCIENCES

A N N O U N C E M E N T

The National Institute of General Medical Sciences through its Pharmacology-Toxicology Program has a continuing interest in the study of pharmacologic effects of therapeutic drugs in children. The purpose of this announcement is to re-emphasize this interest in appropriate research grant applications. Studies are encouraged in the following general areas: (1) distribution and metabolism of therapeutic drugs in children; (2) elucidation of differences in the pharmacologic effects of drugs between children and adults; and (3) development of analytical and statistical methodology especially applicable to the study of pediatric patients. Studies utilizing protocols for the investigation of the pharmacology of drugs in children receiving those drugs for therapeutic indications are of special interest. Studies in animals or in other model systems in response to this announcement are of lesser interest. The primary interest of the NIGMS is in the pharmacology of therapeutic drugs in the immature human. Factors influencing specific diseases of childhood are of secondary interest.

Applications should be submitted on PHS Form 398 to the Division of Research Grants, National Institutes of Health, Westwood Building, Bethesda, Maryland 20014. Receipt dates for grant applications are November 1, March 1, and July 1. Review and award of research grants in pediatric clinical pharmacology will be through the usual NIH peer review procedures.

Preliminary drafts of proposals and other inquiries regarding this program may be addressed to either Dr. Sara A. Gardner (301) 496-7181 or Dr. Raymond E. Bahor (301) 496-7707, Program Administrators, Pharmacology-Toxicology Program, National Institute of General Medical Sciences, National Institutes of Health, Bethesda, Maryland 20014.