# NIH GUIDE

## for GRANTS

### and **CONTRACTS**

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

Vol. 3, No. 8, May 24, 1974

### NIH MANPOWER REPORT

ANNOUNCEMENT

The Manpower Report (Form NIH 1749) is to be completed by all principal investigators, program directors or contractors for each separate research grant or contract. The report provides basic data needed for an annual assessment of the impact that the NIH research support has on the Nation's biomedical and health related manpower. It is used in the decision-making process related to national health programs and policies. The data obtained is used as aggregated totals and not to evaluate or audit specific projects. Information on individuals is treated as privileged and will be used only in summary form.

Initially, a special procedure was instituted to establish a usable data base for grants active as of June 30, 1973 (see NIH Guide for Grants and Contracts, Vol. 2, No. 9, Nov. 23, 1973). The report form was mailed to all applicable principal investigators and program directors during December 1973. Two dates for return of the completed form were provided. Those grants with budget periods ending between June 30, 1973, and December 31, 1973, were due by January 31, 1974. Grants having a budget period that ended after December 31, 1973, were given a due date of April 30, 1974. Where a grant had a budget period ending after April 30, 1974, it was requested that the form be completed and returned by that date with a reasonable estimate for the period following the due date.

The method described in the preceding paragraph served as a starting point for the reporting of manpower. In the future, the procedure for submission of the report will be that set forth in the following paragraphs.

The principal investigator or program director of an NIH research project, program project or center that is not in its terminal year will complete the report and return it with the Application for Continuation Grant forms submitted for the next period of committed support. The Manpower Report should be for the current budget period and should coincide with the period covered in the Summary Progress Report. Since submission of the report is required several months prior to the end of the current budget period, reasonable estimates for the remaining time will be satisfactory. Blank forms will be included in the application kit for continuation grants; at present they are being sent directly to the principal investigator or program director.

The GUIDE is published at irregular intervals to provide policy, program, 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.

The principal investigator or program director of an NIH research project, program project, or center whose grant is in its terminal year—the last year of non-competing support—will be supplied a copy of the Manpower Report form 30 days prior to the project end date and will return the completed form within 30 days after close of the terminal budget period. The report will cover the last budget period of the project.

NIH contractors will complete the Manpower Report for the current contract period and will submit it as part of the annual report. Blank forms may be obtained from the contracting NIH Institute or Division.

### BIOTECHNOLOGY RESOURCE CENTERS AVAILABLE TO NIH GRANTEES AND CONTRACTORS

ANNOUNCEMENT

The Division of Research Resources, NIH, is currently funding a number of biotechnology centers for the further development of certain techniques for biomedical analyses and for increasing the availability of these resources on a shared basis to National Institutes of Health grantees and contractors. Types of resources currently available under this program are mass spectrometry, nuclear magnetic resonance, and electron microscopy.

Each resource is responsible for:

- Developing and improving the technology for serving biomedical researchers.
- Providing analytical support for NIH grantees and contractors who do not otherwise have access to certain research instruments.
- Providing training and educational opportunities for scientists wishing to become more familiar with the techniques.

A list of facilities, including the type of resources provided and the principal contact, follows:

University of Pittsburgh Pittsburgh, Pennsylvania 15261 Mass Spectrometry Facility for Biomedical Research (Gas Chromatography-low resolution) Dr. Richard Abrams, P.I.

Massachusetts Institute of Technology Boston, Massachusetts 02139 Mass Spectrometry Facility for Biomedical Research (High resolution, gas chromatography-low resolution, chemical ionization) Dr. Klaus Biemann, P.I.

Research Triangle Institute
Research Triangle Park, North Carolina 27709
Mass Spectrometry Center for the Research Triangle Region
(High resolution, gas chromatography-low resolution)
Dr. David Rosenthal, P.I.

Cornell University
Ithaca, New York 14850
High Resolution Mass Spectrometry Facility
(High resolution, low resolution)
Dr. Martin F. Semmelhack, P.I.

Yale University
New Haven, Connecticut 06250
Physical Sciences Instrumentation Facility
(High resolution and low resolution mass spectrometry: carbon-13 and proton NMR)
Dr. Seymour R. Lipsky, P.I.

Michigan State University
East Lansing, Michigan 48823
Mass Spectrometry Facility
(High resolution, field desorption, gas chromatography-low resolution)
Dr. Charles C. Sweeley, P.I.

University of California, Berkeley
Berkeley, California 94720
Biomedical Clinical Mass Spectrometry Resource
(High resolution, gas chromatography-high resolution, low resolution)
Dr. Alma L. Burlingame, P.I.

Rockefeller University
New York, New York 10021
Mass Spectrometric Biotechnology Resource
(Chemical ionization)
Dr. Frank H. Field, P.I.

Battelle Memorial Institute
Columbus, Ohio 43201
Regional Biomedical Mass Spectrometry Resource
(High resolution, gas chromatography-mass spectrometry, chemical ionization)
Rodger L. Foltz, P.I.

Mellon-Carnegie-Pittsburgh Corporation Pittsburgh, Pennsylvania 15213 NMR Facility for Biomedical Studies (High-frequency, multi-nuclear capability) Dr. Aksel A. Bothner-By, P.I.

Johnson Research Foundation University of Pennsylvania School of Medicine Philadelphia, Pennsylvania 19104 Middle Atlantic NMR Research Facility (High resolution proton resonance) Dr. Mildred Cohn, P.I.

University of Utah
Salt Lake City, Utah 84113
Regional Research Facility in NMR
(Carbon-13)
Dr. David M. Grant, P.I.

Albert Einstein College of Medicine Bronx, New York 10461 Biotechnology Resource for NMR Studies of Biomolecules (Proton, Flourine-19, Carbon-13, Phosphorus-31) Dr. Arthur P. Grollman

Stanford University School of Medicine Stanford, California 94306 High Frequency NMR Biotechnology Resource (High frequency-360 MHz) Dr. Oleg Jardetzky, P.I.

University of California, San Diego
La Jolla, California 92037
Special Resource for NMR and Mass Spectrometry
(High resolution NMR, gas chromatography-low resolution mass spectrometry)
Dr. Nathan O. Kaplan, P.I.

University of Connecticut Health Center Farmington, Connecticut 06032 A New England Area NMR Research Resource (Proton, carbon-13) Dr. Jay A. Glasel, P.I.

University of Wisconsin
Madison, Wisconsin 53706
Electron Microscope Facility for Biomedical Research
(One-million volt electron microscope, AEI)
Dr. Hans Ris, P.I.

University of Colorado
Boulder, Colorado 80302
High Voltage Electron Microscopy of Biological Systems
(One-million volt electron microscope, JEOL)
Dr. Keith Porter, P.I.

U. S. Steel Corporation
Monroeville, Pennsylvania 15146
Electron Microscope Services to Biomedical Scientists
(One-million volt electron microscope, RCA)
Dr. Robert Fisher, Project Director

Harvard Medical School Boston, Massachusetts 02115 Biotechnology Resource in Electron Microanalysis (Electron microprobe, Cameca) Dr. Clifford A. Barger, P.I.

The majority of these centers are available for use by NIH grantees and contractors on a regional or national basis. The research service aspect of these resource centers is intended to become self-supporting through user charges. Additional information on this program can be obtained from:

Biotechnology Resources Branch Division of Research Resources National Institutes of Health Bethesda, Maryland 20014

Pages 7 and 8 of the NIH Guide for Grants and Contracts, Vol. 3 No. 3, dated February 21, 1974, are rescinded.

#### ACUPUNCTURE RESEARCH

#### ANNOUNCEMENT

The National Institute of General Medical Sciences (NIGMS) encourages and supports research on basic and clinical aspects of acupuncture.

Of particular interest are well-controlled studies to determine the effectiveness of acupuncture relative to that of conventional therapy, both for use in well-defined chronic pain syndromes and for surgical anesthesia.

Applications for study of the physiological and neurological mechanisms of any acupuncture effect as well as to differentiate these from possible psychological effects are similarly welcomed.

Interested investigators may discuss their ideas informally with NIGMS staff prior to application for grant support.

Inquiries may be directed to:

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Acting Deputy Director
Clinical and Physiological Sciences Program
National Institute of General Medical Sciences
5333 Westbard Avenue
Bethesda, Maryland 20014

Howard P. Jenerick, Ph.D. Special Assistant to the Director National Institute of General Medical Sciences Building 31, Room 4A-31 National Institutes of Health Bethesda, Maryland 20014

### PHS GRANTS POLICY STATEMENT DISTRIBUTION AND APPLICABILITY

#### ANNOUNCEMENT

The Public Health Service will shortly begin distribution of its new Grants Policy Statement, DHEW Publication (OS) 74-500, to grantee institutions, recipients of DHEW Grants Manual Chapters, DHEW regional offices, and State health officers. In addition, NIH will distribute a number of copies to institutional application control offices.

Except where PHS has been delegated responsibility to act for all DHEW agencies in certain specific areas, such as the protection of human subjects and institutional cost sharing agreements, the policies set forth in this booklet are intended to apply only to grants made by constituent agencies and regional offices of the Public Health Service, and not necessarily to those made by other components of DHEW. For the most part, this publication represents a reflection of current NIH grants policies, and to that extent is immediately applicable. In those instances where modifications of current NIH policy do occur, the changes will become effective July 1, 1974.

Because the publication is not required to complete a grant application, it will not be included routinely with each application kit. Replacement copies for the original distribution may be requested from the Division of Research Grants, NIH, Bethesda, MD 20014.

As of July 1, 1974, the following NIH policy publications are superseded:

NIH Grants for Research Projects, Policy Statement, DHEW Publication No. (NIH) 74-8, July 1, 1972.

NIH Grants for Training Projects, Policy Statement, DHEW Publication No. (NIH) 73-9, December 1, 1972.

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