

**NATIONAL DEAFNESS AND OTHER COMMUNICATION DISORDERS  
ADVISORY COUNCIL**

**May 20, 2005**

**National Institutes of Health  
Bethesda, Maryland**

**MINUTES**

The National Deafness and Other Communication Disorders Advisory Council convened on May 20, 2005 in Building 31, Conference Room 10, National Institutes of Health (NIH), Bethesda, MD. Dr. James F. Battey, Jr., Director, National Institute on Deafness and Other Communication Disorders (NIDCD), served as Chairperson. In accordance with Public Law 92-463, the meeting was:

Open: May 20, 2005: 8:30 a.m. to 11:20 a.m., for the review and discussion of program development needs and policy; and

Closed: May 20, 2005: 12:30 p.m. to 2:25 p.m. for review of individual grant applications.

Council members in attendance:<sup>1</sup>

Dr. Barry W. Ache  
Dr. Patricia D. Cayne  
Dr. Edward Conture  
Dr. Richard A. Chole  
Dr. Susan Goldin-Meadow  
Dr. Ray D. Kent  
Ms. Susan M. Greco

Dr. David J. Lim  
Dr. Richard T. Miyamoto  
Dr. John J. Ngai  
Dr. Donata Oertel  
Dr. Adrian A. Perachio  
Dr. Brenda M. Ryals

Council members not attending:

Dr. Noma Anderson  
Dr. Gary K. Beauchamp  
Dr. Harry Seymour

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<sup>1</sup>For the record, it is noted that members absent themselves from the meeting when the Council is discussing applications (a) from their respective institutions or (b) in which a real or apparent conflict of interest might occur. This procedure applies only to individual discussion of an application and not to "en bloc" actions.

Ex-Officio Members Not Participating:

Dr. Lucille B. Beck (represented at the open session by Dr. Kyle Dennis)  
Dr. John R. Franks  
Dr. Michael E. Hoffer

The Council roster is found as Appendix 1.

Various members of the public, as well as NIDCD staff and other NIH staff, were in attendance during the open session of the Council meeting. A complete list of those present for all or part of the meeting is found in Appendix 2.

**I. Call To Order and Opening Remarks ..... Dr. James F. Battey, Jr.**

The meeting was called to order by Dr. Battey, Director, NIDCD. Dr. Battey expressed his appreciation to the Council members for their service and advice to the Institute.

Dr. Harry Seymour, Dr. Noma Anderson, Dr. Gary Beauchamp and Dr. Lucille Beck were unable to attend today's meeting. Because this was to have been Dr. Beauchamp's last meeting as a member of the Council, he submitted a farewell letter, which was read to the Council by Dr. Barry Ache.

**II. Council Procedures ..... Dr. Craig A. Jordan**

Procedural Matters

Dr. Jordan discussed important procedural matters, including requirements imposed by the Government in the Sunshine Act and the Federal Advisory Committee Act. The necessity of members to avoid conflict of interest, or the appearance thereof, was stressed, as was the need to maintain confidentiality concerning the proceedings and materials related to the closed portion of the meeting. Dr. Jordan announced that the Council meeting would be open to the public during the morning session, but would be closed for consideration of grant applications during the afternoon.

Consideration of Minutes of the Meeting of January 28, 2005

Dr. Battey called members' attention to the minutes of the January 28, 2005 meeting of the Advisory Council. The minutes were approved as written.

### Confirmation of Dates for Future Council Meetings

Dates for the Council meetings through September 2007 have been established. A list of these meetings was distributed to the Council members and posted on the web site prior to this meeting. The next meeting of Council is scheduled for Thursday, September 1, 2005, in Building 31, Conference Room 10 on the NIH campus, Bethesda, Maryland.

### **III. Report of the Director, NIDCD ..... Dr. Battey**

#### Budget Considerations:

Dr. Battey discussed how the \$281.3 million available for research project grants is allocated for FY2005. From this total, \$9.3 million is reserved for Small Business Innovation Research grants, \$1.5 million for administrative supplements, \$213 million for commitments to noncompeting grants, \$1.1 million for carryover commitments from prior Council meetings, \$10.4 million for program requirements in FY2005, and \$260 thousand for the NIH Neuroscience Blueprint. Twenty percent of the remaining \$45.7 million is designated for High Program Priority (HPP). When apportioned for the three Council meetings in FY 2005, \$3.0 million is available for HPP applications at the May meeting. The budget has \$12.2 million available for the initial payline at this meeting, which should allow funding of all applications up to the 19.0 percentile, plus the \$3.0 million available to fund additional HPP applications. A copy of the slides Dr. Battey used for his budget presentation is included in these minutes as Appendix 3.

#### Possible Strategies: Dealing With Limited Funds in FY06:

Dr. Battey presented a number of strategies for dealing with limited funds in the coming fiscal year. He discussed the advantages and disadvantages of each strategy, and possibilities for implementing them. The potential strategies he presented for discussion include the following:

- Reduce Non-Competing (Type 5) awards
- Impose more stringent downward negotiation for new awards (Types 1 and 2)
- Limit the number of NIDCD R01s per principal investigator
- Restrict acceptance of large investigator-initiated R01s
- Limit the number of initiatives with set-aside dollars
- Limit percent increase in budget of competing Type 2 compared to final year of Type 5
- Consider a hiatus on P30s

Council members discussed the options and raised some additional issues. In general, members were supportive of broadly sharing the burden of budget reductions or limitations. They suggested considering more general limits on R01 budgets, queried about the impact of reducing years of support, and suggested the use of modeling to help project the impact of the different options.

#### **IV. Report of the Director, Division of Extramural Activities..... Dr. Jordan**

Dr. Jordan presented the report of the Director of the Division of Extramural Activities.

##### *Peer Review at NIH*

Prior to 1996, the Division of Research Grants (DRG) Advisory Committee advised the DRG Director (later to become the Center for Scientific Review [CSR]) on peer review issues. In 1996, the Peer Review Oversight Group (PROG) was established by Dr. Harold Varmus, former Director, NIH. He directed the group to address review policy issues that are common to the entire NIH rather than focus on specific applications or study sections. In 2005, however, it was decided that the NIH needed an advisory committee that focuses on peer review policy and operations issues in the context of the overall extramural program. This new advisory committee, the NIH Peer Review Advisory Committee (PRAC), was established in January 2005. It is co-chaired by the Directors of the Center for Scientific Review (CSR), and the NIGMS.

The sixteen-member committee includes individuals knowledgeable in the fields relevant to the peer review mission of NIH. Members include experts such as physicians, basic and clinical investigators, and educators, as well as high-level NIH leadership officials, including some members of the Extramural Activities Working Group (EAWG). The EAWG oversees CSR governance and has oversight over peer review related issues at NIH and reports directly to the NIH Steering Committee. This PRAC/EAWG overlap should facilitate coordination of peer review issues among components of NIH's governance structure.

The PRAC charter specifies that the Committee is to advise the NIH regarding monitoring, coordination and evaluation of peer review at NIH. It is also to advise the CSR regarding receipt, referral and peer review at CSR; and also advise the NIH ICs regarding the scope and manner of operation of peer review within the ICs.

Dr. Jordan discussed some of the challenges that PRAC may consider in the future. Such challenges include integration of technology in the review process to make it more efficient and effective, and setting priorities in this area. Also, now that NIH is entering the realm of electronic receipt of applications, steps must be taken to identify and avoid pitfalls for peer review, as well as identify potential enhancements for peer review and ways to implement them.

PRAC also must carefully consider whether change really is needed in NIH's peer review process and at what cost. It will also evaluate what NIH can do to ensure appropriate expertise on its review panels given the demands on researchers' time. Locus of review and resource management are also listed among the challenges being evaluated by this new Committee.

More information about PRAC is available at <http://grants2.nih.gov/grants/peer/prac>.

## **V. Report of the Director, Division of Scientific Programs ..... Dr. Judith Cooper**

### Staff Changes

Dr. Cooper introduced Ling Chin, MD, MPH, who recently joined the Division of Scientific Programs. Dr. Chin serves as Chief, Translational Research Branch and will help lead NDCD in this important area. In this capacity, Dr. Chin will take over some of the activities previously directed by Dr. Julia Gulya, who retired from the Institute in March 2005.

### Staff Awards

Dr. Cooper announced that several members of the Institute staff had recently received awards for their work at NIH. These include the following:

- *Dr. Amy Donahue* was recently the recipient of the 2005 American Academy of Audiology Presidential Award. This award is presented at the president's discretion to those who have distinguished themselves in the profession. The award read: "In grateful appreciation for her significant contributions to the American Academy of Audiology and the profession of audiology".
- *Dr. Christopher Platt*, Program Director, Balance/Vestibular Sciences, is the recipient of a 2005 NIH Director's Group Award, Scientific/Medical Category for "exemplary leadership, dedication, creativity, and teamwork in planning and designing the NIH Neuroscience Blueprint."
- *Dr. Barry Davis*, Director of the Smell and Taste Program and *Dr. Craig Jordan*, Director, Division of Extramural Activities, are among seventeen recipients of a group cash award for their work with the NIH Pioneer Awards. The NIH Pioneer Awards Program is a new and highly visible program to support scientists who propose creative and pioneering approaches to major contemporary challenges in biomedical research.

### NIDCD Extramural Scientists: Intramural Collaborations and Interactions

Next, Dr. Cooper discussed a recent analysis of intramural collaborations and interactions involving NIDCD extramural scientists. As part of an activity related to the NIH Roadmap initiative, the Institute gathered information about collaborations between NIDCD grantees and NIH intramural scientists. Currently-funded NIDCD PIs supported by grants in the R and P mechanisms were contacted via e-mail and asked whether their NIH collaborations in the past three years involved basic or clinical research, and which institutes were involved. Sixty-four PIs reported that they were involved in "formal/informal collaborations;" an additional seven reported "helpful/in-depth/ongoing discussions."

The majority of these collaborations were described by the PIs as basic research; only four described their activities as clinical. In addition, the vast majority reported only one collaboration—that being with NIDCD intramural researchers. However, fifteen PIs reported collaboration with other IC intramural staff within the NHLBI, NIDCR, NHGRI, NEI, NIA and NIMH in addition to collaboration with NIDCD intramural researchers.

Fourteen NIDCD extramural investigators reported only collaborations with non-NIDCD intramural investigators; these involved NIDDK, NIAID, NHGRI, NIMH, NHLBI, NICHD, and/or NCI. Some of these extramural investigators also reported collaborations with more than one non-NIDCD intramural lab.

These formal, informal and discussion-type collaborations are indicative of a far-reaching impact of the NIH intramural scientists on the extramural community, and further imply a healthy, collegial relationship.

### Clinical Research Workshop

Dr. Cooper introduced Dr. Amy Donahue, who discussed the proceedings of the NIDCD Clinical Research Workshop, which was held March 7-8 in Bethesda. This workshop was the first activity of the Clinical Research Discussion Group, which NIDCD formed in July 2004. That Group was formed to periodically consider issues related to clinical research, identify barriers to and opportunities in clinical research, and suggest activities to further strengthen the NIDCD clinical research enterprise.

The purpose of the Workshop was to broadly discuss the relationship between academia, government, and industry; learn lessons from other disciplines; consider infrastructure issues; critically consider NIDCD clinical research needs; and identify ways to provide the best possible support for clinical research. Participants included NIDCD Staff, Clinical Research Discussion Group members, and additional invited extramural scientists in NIDCD mission areas. Speakers were mostly from outside the NIDCD mission areas, and were experienced in basic, clinical, behavioral and epidemiological research. The workshop was organized as an educational and learning experience only, and was not intended to develop a consensus statement or prioritized set of recommendations.

Dr. Donahue discussed several of the ideas generated at the Workshop and addressed some review issues and planning actions that might be involved in implementing them.

### **VI. New Investigator Presentation:**

**“The Mental Lexicon in Acquisition” ..... Dr. Holly Storkel**

Dr. Battey informed the Council that time was set aside on today’s agenda for a New Investigator Forum and was pleased that two of our New Investigators accepted our invitation to discuss their research. Dr. Dan Sklare introduced each speaker.

Holly L. Storkel is an Assistant Professor of the Department of Speech-Language-Hearing: Sciences and Disorders at the University of Kansas, Lawrence. She is the Director of the Word and Sound Learning Lab. Her current research focuses on how children build a lexicon by examining the acquisition, organization, and processing of novel words and known words. Following is an abstract of her presentation:

### **The Mental Lexicon in Acquisition**

The mental lexicon is the store of words in long-term memory, consisting of representations of both the sound-form of words (e.g., 'cat') as well as the meaning of words (e.g., "small four-legged furry animal that purrs"). Word learning can be decomposed into two components: initial mapping and extended mapping. Initial mapping is the ability to create a preliminary representation in the mental lexicon of a novel word's sound-form and meaning. These preliminary representations are further refined in the second component of word learning, extended mapping, where representations are corrected or expanded. Children show variability in word learning with typically developing children demonstrating robust abilities to rapidly acquire new words but children with language impairments showing deficits in both initial and extended mapping. Likewise, children from economically disadvantaged backgrounds appear to know fewer words than other children due to environmental differences in vocabulary exposure. Importantly, word learning seems to set the foundation for other aspects of language acquisition including grammar, decoding, and reading comprehension. Thus, early identification and treatment of word learning deficits may aid in preventing or minimizing potential deficits in other areas of language.

The current program of research focuses on understanding how typically developing children learn words so rapidly and why children with language impairments learn words so slowly. The current focus is on sound-form factors with two factors being explored: (1) the structure of sound-forms in the language and (2) the structure of sound-form representations in the mental lexicon. The structure of sound-forms in the language is indexed by phonotactic probability, the likelihood of occurrence of a sound sequence. The structure of sound-form representations in the mental lexicon is indexed by neighborhood density, the number of words that sound similar to a given word. Our studies show that typically developing children learn high probability/density novel words more rapidly than low probability/density words during initial mapping (Storkel, 2001, 2003; Storkel & Maekawa, in review). In contrast, children with delayed sound development show the opposite pattern, learning low probability/density words more rapidly than high probability/density words during initial mapping (Storkel, 2004). In addition, each variable appears to have a unique effect on initial mapping. Specifically, low probability words are learned more rapidly than high probability words, whereas high density words are learned more rapidly than low density words (Storkel, Hogan, & Giles, in progress; Storkel, Armbruster, & Hogan, in preparation; Storkel & Slegers, in preparation). Moreover, phonotactic probability/neighborhood density appears to influence extended mapping with typically developing children demonstrating adult-like representations for high probability/density known words and holistic representations for low probability/density known words (Storkel, 2002).

These findings lead to the hypothesis that the structure of language (e.g., phonotactic probability) triggers the word learning process during initial mapping, whereas the structure of mental representations (e.g., neighborhood density) aids in stabilizing and refining new representations during both initial and extended mapping. Children with delayed sound development may show differences in either or both of these aspects of word learning, an issue being addressed in our current work. Future work will focus on developmental changes in the use of each type of structure, differences between children with word learning delays and typically developing children, and facilitation of word learning through manipulation of each type of structure.

## **VII. New Investigator Presentation:**

### **“Mechanotransduction in Flies: Bug in Your Ear” ..... Dr. Richard Walker**

The next new investigator presentation was made by Dr. Richard Walker, who was also introduced by Dr. Sklare. Seeking a genetic approach to the mechanical senses, Dr. Walker trained as a postdoctoral fellow at the University of California, San Diego with Dr. Charles Zuker. It was during this time that the mechanosensory transduction channel NompC was identified. In 2000, Dr. Walker was appointed to his current position as Assistant Professor at the Oregon Hearing Research Center with a joint appointment in the Vollum Institute.

Following is an abstract of Dr. Walker’s presentation:

### **“Mechanotransduction in Flies: Bug in Your Ear”**

The umbrella of mechanical senses covers a diverse set of sensory modalities, including touch, hearing, balance, and proprioception. While very different cells perform the task of collecting information about the mechanical world for each mechanosensory system, they all appear to do it in the same way: *directly* converting energy in a mechanical stimulus, be it whisper or a hammer blow to your thumb, to an electrical signal that is passed on to the central nervous system. How, then, do sensory cells transduce mechanical stimuli into electrical signals? To answer this question, research in our lab takes advantage of the ease and elegance of *Drosophila* research and can be divided into two parts: a molecular-genetic path to identify the genes involved in mechanosensory transduction and an electrophysiological approach to understanding both wild-type and mutant mechanosensory responses. While each of these approaches is powerful in its own right, combining them gives a comprehensive set of tools both to identify the molecules of mechanosensation and to show how they work together converting mechanical stimuli into electrical signals.

We recently identified a *Drosophila* mechanosensory transduction channel, called NompC, that mediates about 90% of the mechanotransduction current. The cloning of NompC represents the first peek into the molecules that make up the transduction machinery in flies. Using NompC as a toehold into the transduction cascade gives us a tremendous advantage over traditional genetic screens: the proteins that interact with NompC either genetically or biochemically can now be precisely targeted. While



identifying other transduction components will be necessary to comprehend mechanosensation, an in-depth understanding will require a great deal more biophysical experimentation, particularly on isolated mechanosensory neurons. We are, therefore, developing an isolated-cell preparation to record whole-cell, voltage-clamped transduction currents. This preparation will allow simultaneous manipulation of both the interior and exterior of the mechanoreceptor neuron and its transduction machinery. This precise control will be key to the identification of transduction molecules and understanding how they transform a mechanical force into electrical information.

**VIII. Strategic Research Plan Update ..... Dr. Ray Kent; Dr. Barry Ache;  
Dr. Richard Miyamoto and Dr. Donata Oertel**

Dr. Ray Kent led a discussion of the progress made by the Strategic Plan Working Group in their efforts to update the 2006-2008 Strategic Research Plan. Council provided the Institute with the following comments concerning this draft.

- Consider including more on the natural history of the diseases - epidemiology
- Need for biomarkers in Priority Area I
- Need brief headers for the four Priority Areas
- Update of burden of disease items (how these diseases impact people)
- Revision of research accomplishments - more specific language of scientific landmarks
- Update of research opportunities to include gap areas and new areas by "looking forward"

The Council was asked to provide by e-mail any additional suggested revisions by July 1st. A revised draft will be posted on the Council web site for additional discussion at the September 1, 2005 NDCD Advisory Council meeting. Once the staff and Council revisions are incorporated, the NIDCD will solicit public comment, conduct a final review, and post the new 2006-2008 Strategic Research Plan.

**CLOSED SESSION**

**IX. Council Consideration of Pending Applications**

The Council gave special attention to applications involving issues related to protection of human subjects, animal welfare, biohazards and/or women/minority/children representation in study populations as identified by the initial review groups. The Council individually discussed applications being considered for High Program Priority, from New Investigators, and whenever additional discussion was required.

## **A. Research Project Grant Awards**

1. Consideration of Applications: On the Council's agenda was a total of 150 investigator-initiated research grant applications; 134 applications had primary assignment to NIDCD, in the amount of \$36.9 million first-year direct costs. It is anticipated that, of the applications competing at this Council, NIDCD will be able to award grants to applications scoring up to the 19.0 percentile.

## **B. Special Programs Actions**

1. Clinical Investigator Award (K08): The Council recommended support for one application.
2. HL-04-004 Clinical Research Curriculum Award: Forty-nine K30 applications submitted under this announcement will be funded by NCRR, on behalf of all NIH ICs. The Council concurred with this action.
3. Small Grants (R03): The Council recommended support for ten applications.
4. Academic Research Enhancement Awards (AREA) (R15): The Council recommended support for four applications.
5. NIH Exploratory/Developmental Research Grant Award (R21): The Council recommended support for six applications.
6. Small Business Technology Transfer (STTR): The Council recommended support for two Phase I (R41) applications.
7. Small Business Innovation Research Awards (SBIR): The Council recommended support for three Phase I (R43) applications and three Phase II (R44) applications.
8. NIDCD Research Core Center Grant (P30): The Council recommended support for two applications.
9. DC-04-003 Protein Interactions in Auditory and Vestibular Biology: The Council recommended support of four R01 applications.
10. PAR-04-514 Collaborative Research in Computational Neuroscience (CRCNS) – Innovative Approaches to Science and Engineering Research on Brain: The Council recommended support for three R01 applications.

- X. Adjournment**: The meeting was adjourned at 2:25 p.m. on May 20, 2005.

## **XI. Certification of Minutes**

We certify that, to the best of our knowledge, the foregoing minutes and attachments are accurate and correct.<sup>2</sup>

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Craig A. Jordan, Ph.D.  
Executive Secretary  
National Deafness and Other Communication  
Disorders Advisory Council

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James F. Battey, Jr., M.D., Ph.D.  
Chairman  
National Deafness and Other Communication  
Disorders Advisory Council

Director  
National Institute on Deafness and  
Other Communication Disorders

Jeannie Combs  
Council Assistant

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<sup>2</sup> These minutes will be formally considered by the NDCD Advisory Council at its next meeting; corrections or notations will be incorporated in the minutes of that meeting.

**APPENDICES**

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**Roster**  
**National Deafness and Other Communication Disorders Advisory Council**

Chairperson

James F Battey, Jr., M.D., Ph.D., Director  
National Institute on Deafness and Other Communication Disorders  
Bethesda, Maryland 20892

<p>ACHE, Barry W., Ph.D. 2007  Director, Center for Smell and Taste  Distinguished Professor of Zoology  and Neuroscience, Whitney Laboratory  University of Florida  Gainesville FL 32610</p>	<p>GRECO, Susan M. 2005  Director of Strategic Alliances  Sonomax Hearing Healthcare Inc.  Washington, DC 20036</p>
<p>ANDERSON, Noma B., Ph.D. 2006  Director and Professor  Florida International University  School of Health  Miami, FL 33199</p>	<p>KENT, Ray D., Ph.D. 2006  Professor  Department of Communicative Disorders  University of Wisconsin  Madison, WI 53705-2280</p>
<p>BEAUCHAMP, Gary K., Ph.D. 2005  Director and President  Monell Chemical Senses Center  Philadelphia, PA 19104-3308</p>	<p>LIM, David J., M.D. 2005  Executive Vice President, Research  Head, Dept of Cell and Molecular Biology  House Ear Institute  Los Angeles, CA 90057</p>
<p>CAYNE, Patricia D., Ph.D. 2006  Educational Neuropsychologist  Private Practice  New York, NY 10022</p>	<p>MIYAMOTO, Richard T., M.D. 2006  Professor and Chairman  Department of Otolaryngology  Indiana University  School of Medicine  Indianapolis, IN 46202</p>
<p>CHOLE, Richard A., M.D., Ph.D. 2005  Lindburg Professor and Head  Department of Otolaryngology  Washington University School of Medicine  St. Louis, MO 63110</p>	<p>NGAI, John J., Ph.D. 2007  Professor of Neurobiology  Department of Molecular &amp; Cell Biology  University of California  Berkeley, CA 94720-3200</p>
<p>CONTURE, Edward G., Ph.D. 2008  Professor &amp; Director  Department of Hearing &amp; Speech Sciences  Vanderbilt University  Nashville, TN 37212</p>	<p>OERTEL, Donata, Ph.D. 2007  Professor  Department of Physiology  University of Wisconsin  Madison, WI 53706</p>
<p>GOLDIN-MEADOW, Susan J., Ph.D. 2008  Irving B. Harris Professor of Psychology  Department of Psychology  Division of Social Sciences  University of Chicago  Chicago, IL 60637</p>	<p>PERACHIO, Adrian A., Ph.D. 2006  Professor &amp; Vice President for Research  Department of Otolaryngology  University of Texas Medical Branch  Galveston, TX 77555</p>

RYALS, Brenda M., Ph.D. 2007  
Professor  
Dept of Communication Sciences &  
Disorders  
James Madison University, MSC 4304  
Harrisonburg, VA 22807

JORDAN, Craig A., Ph.D.  
Director, Division of Extramural  
Activities  
National Institute on Deafness and  
Other Communication Disorders  
Bethesda, MD 20892

SEYMOUR, Harry N., Ph.D. 2008  
Professor Emeritus  
Department of Communication Disorders  
University of Massachusetts  
Amherst, MA 01003

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**EX-OFFICIO MEMBERS:**

BECK, Lucille B., Ph.D.  
Director  
Audiology & Speech Pathology Service  
(117A)  
Department of Veterans Affairs  
Washington, DC 20422

FRANKS, John R., Ph.D.  
Chief, Bioacoustics and  
Occupational  
Vibration Section  
Physical Agent Effects Branch  
Division of Biomedical and Behavioral Science  
National Inst for Occupational Safety & Health  
Cincinnati, OH 45226

HOFFER, Michael E., M.D.  
Co-Director  
Department of Defense Spatial Orientation  
Center  
Department of Otolaryngology  
Naval Medical Center  
San Diego, CA 92134-5000

THOMPSON, The Honorable Tommy G.  
Secretary  
Department of Health  
And Human Services  
Hubert H. Humphrey Building  
Washington, DC 20201

ZERHOUNI, Elias Adam, M.D.  
Director  
National Institutes of Health  
Bethesda, MD 20892

**EXECUTIVE SECRETARY**

## Appendix 2

### ATTENDANCE LIST

Other than Council members, attendees at the May 20, 2005 Council meeting included:

#### NIDCD Staff:

##### Office of Health Communication and Public Liaison

Blessing, Patricia, Acting Chief

##### Office of Administration

Kerr, W. David, Executive Officer

##### Financial Management Branch

Rotariu, Mark, Budget Officer

Lee, Mimi, Budget Analyst

##### Science Policy and Planning Branch

Wong, Baldwin, Chief

Cole, Laura, Ph.D., Science Policy Analyst

Montney, Lisa, Science Policy Analyst

##### Division of Extramural Activities

Jordan, Craig A., Ph.D., Director

Combs, Jeannie, Program Analyst

Kemmerle, Donna, Program Specialist

##### Grants Management Branch

Myers, Christopher, Chief

Dabney, Sherry, Grants Management Officer

Doan, Hoai, Grants Management Specialist

Hamilton, Gail, Grants Management Specialist

Hickman, Leslie, Grants Management Specialist

McNamara, Castilla, Ph.D., Grants Management Specialist

Ranney, Meigs, Grants Management Officer

##### Scientific Review Branch

Stick, Melissa J., Ph.D., M.P.H., Chief

Oaks, Stanley C., Ph.D., Scientific Review Administrator

Singh, Sheo, Ph.D., Scientific Review Administrator

Wu, Da-Yu, Ph.D., Scientific Review Administrator

Yang, Shiguang A., Ph.D., Scientific Review Administrator

Division of Scientific Programs

Cooper, Judith, Ph.D., Director

Voice, Speech, Language, Smell and Taste Branch

Cooper, Judith, Ph.D., Program Director, Language Program

Davis, Barry, Ph.D., Program Director, Smell and Taste Program

Sklare, Daniel A., Ph.D., Program Director, Research Training and  
Development Program

Hearing and Balance/Vestibular Branch

Donahue, Amy, Ph.D., Chief; and Program Director, Hearing

Freeman, Nancy, Ph.D., Program Director, Hearing

Luethke, Lynn, Ph.D., Program Director, Hearing

Miller, Roger, Ph.D., Program Director, Hearing

Platt, Christopher, Ph.D., Program Director, Balance/Vestibular

Watson, Bracie, Ph.D., Program Director, Hearing

Translational Research Branch

Chin, Ling, M.D., MPH, Chief

Chiu, May, Management Analyst

Hoffman, Howard, Program Director for Epidemiology & Biostatistics

Jelen, Janet, Information Technology Specialist

Gorritz, Magdaliz, Partnership Intern

Division of Intramural Research

Van Waes, Carter, M.D., Acting Clinical Director

Division of Extramural Administrative Support, OER, NIH

Holmes, Debbie, Extramural Support Assistant

Stephenson, Nanette, Extramural Support Assistant

Center for Scientific Review, NIH

Clayton, Edwin, Scientific Review Administrator

Kim, Joseph, Scientific Review Administrator

Melchior, Christine, Chief, IFCN

Ni, Weijia, Scientific Review Administrator

Others

Gayle, Sherie, American Academy of Audiology

Dennis, Kyle, Department of Veterans Affairs



Appendix 3

**NIDCD Director's Report Slides**

As Presented By

James F. Battey, Jr., M.D., Ph.D.  
Director, NIDCD

NIDCD Advisory Council Meeting

May 20, 2005

**National Institute on Deafness and Other Communication Disorders**

**MAY 2005 Council  
Competing Research Project Grants  
(Dollars in thousands)**

**May Council Funds for FY 2005 Competing R01's**  
(\$ in thousands)

Total RPG Funds FY05 Conference Allowance	\$281,270 *
Less SBIR/STTR Budget	-9,300
Less Administrative Supplement Budget	-1,500
Less Noncompeting Budget	-213,045
Less FY05 "Carryover" Commitments from prior Council meetings	-1,105
Less FY05 Program Requirements	-10,400
Less FY05 Neuroscience Blueprint estimate	-260
Plus FY 04 Funds utilized for Sept. Council	0
<i>Total</i>	\$ 45,660

	<u>20% HPP</u>	<u>80% Regular</u>
For FY 2005	\$9,132	\$36,528
Per council meeting	\$3,044	\$12,176

\* Excludes Roadmap funds.

## National Institute on Deafness and Other Communication Disorders

### Budget Mechanism (Dollars in thousands)

<i>Budget Mechanism</i>	<u>FY 2004 Actual</u>		<u>FY 2005 Appropriation*</u>	
	<i>Number</i>	<i>Amount</i>	<i>Number</i>	<i>Amount</i>
Research Projects				
Noncompeting	659	\$197,288	691	\$213,173
Admin. Supplements	(27)	1,500	(27)	1,556
Competing	232	65,339	198	57,612
Subtotal	891	264,127	889	272,341
SBIR/STTR	44	9,107	46	9,300
Subtotal, RPG's	935	273,234	935	281,641
Research Centers	22	17,247	21	18,404
Other Research	61	9,715	66	10,594
Total Research Grants	1,018	300,196	1,022	310,639
Individual Training	148	5,726	143	5,700
Institutional Training	201	7,686	205	7,956
R & D Contracts	47	19,508	47	19,363
Intramural Research		32,430		33,976
Research Mgmt. & Support		15,191		16,626
<b>TOTAL</b>		<b>\$380,737</b>		<b>\$394,260</b>

\*reflects rescission of \$3,247 thousand and \$2,478 thousand for NIH Director's Roadmap.