

» In This Issue

[News From the Director of OER: Solicited and Unsolicited Research—Making Choices Balancing Needs, Opportunities, and the Unpredictability of Science](#)

[Electronic Grant Application Submission:](#)

◆ [NIH eSubmission Transition—80 Percent Complete, 20 Percent to Go](#)

[The NIH Electronic Application Validation Process—Why We Do What We Do](#)

[Designating Roles in Electronic Applications—PIs, Multiple PIs, And Co-Investigators](#)

[Eye on PI:](#)

**NEWS FROM THE DIRECTOR OF OER:**

**Solicited and Unsolicited Research—Making Choices Balancing Needs, Opportunities, and the Unpredictability of Science**



The NIH is asked frequently to explain how it determines the need to solicit research grant applications in specific scientific areas. We have no simple answer to this question. NIH has always recognized and valued the inherent unpredictability of science, the need to allow investigators to propose studies that support the development of fundamental knowledge, and the application of that knowledge to the [improvement of health](#) and the reduction of illness and disability. As a publicly funded agency, however, the NIH must also be able to create special initiatives to respond to scientific needs, take advantage of scientific opportunities, and address public health crises. These special initiatives often require a concentration of funds in specific areas.

Examples of NIH special initiatives that have benefited the scientific community as a whole abound. A recent example in the basic science category is the [Human Genome Project](#), which in a few short years has completely transformed biomedical research. The sequences and sequencing technologies that were developed as part of the Human Genome Project, and their application, have ushered in a new era in medicine—an era in which the genetic and molecular understanding of human biology and disease is leading to more effective ways to predict and pre-empt the occurrence of disease, and personalize its treatment.

And who among us has not benefited directly or indirectly from the [Framingham Heart Study](#)? Since its inception in 1948, the Study has led to the identification of the major risk factors of cardiovascular disease: high blood pressure, high blood cholesterol, smoking, obesity, and physical inactivity among others. Preventive strategies and clinical treatment of these factors have profoundly benefited many, many people. The Study is currently recruiting its third generation of subjects,

- ◆ [Genotype and Phenotype Data Now Available From dbGaP Database—Request Process Involves New Procedures for Principal Investigators and Signing Officials](#)
- ◆ [Roadmap Update— Initiative Selections Made](#)
- ◆ [Should the NIH R01 Grant Application Be Shorter?](#)
- ◆ [North Carolina NIH Regional Seminar Draws Largest Attendance Ever](#)

**Announcements:**

- ◆ [In Memoriam Stephen E. Straus, M.D. First Director of NIH's National Center for Complementary and Alternative Medicine and Internationally Recognized Physician-Scientist](#)
- ◆ [OER Web Site Gets a Facelift](#)
- ◆ [NIH Investment in Extramural Research and Training Programs Slide Set Now Available](#)

the children of the Offspring Cohort (i.e., the grandchildren of the Original Cohort), who will be examined in an attempt to learn how genetic factors relate to cardiovascular disease. In this, the Framingham Heart Study stands to benefit greatly from results from the Human Genome Project and in ways that the originators of these studies could not have predicted when the programs began.

NIH continues to engage in special initiatives. Some are trans-NIH, such as the [NIH Roadmap for Medical Research](#); others involve several NIH Institutes and Centers, such as the [Blueprint for Neuroscience Research](#); and some are specific to the mission of single Institutes or Centers. These initiatives are the result of input from many sources—scientific advisors, members of congress, professional societies, and advocates from groups representing specific diseases or disciplines, among others. These constituent groups and individuals identify specific areas of science that are in need of special emphasis or that address a gap in existing research needed to move a field forward. As for the Human Genome Project and the Framingham Heart Study when they began, the return on investment for new NIH initiatives cannot be accurately predicted—serendipity rules even in special initiatives. Nevertheless, with input from its constituents and the advice and consent of its advisory councils and boards, NIH will continue to support special projects and programs—we must continue to invest in the future.

As you know, NIH announces its areas of special research interest in the [NIH Guide for Grants and Contracts](#). New with the advent of electronic grant applications is that all applications must identify a Funding Opportunity Announcement (FOA) in Grants.gov. An FOA can be a very broad description of the general research interests and priorities of an NIH Institute or Center (IC) or it can delineate a specific or even narrow research area to encourage scientists to address an identified gap, answer a specific research question, or develop a needed resource. The FOA simply sets up a funding mechanism-specific application shell within Grants.gov. In response to the requirement that all applications must identify a FOA, NIH has introduced the Parent Announcement, a new type of FOA. The Parent Announcement and the other four types of FOA used by NIH are explained below:

◆ [NIH Launches New Web Site to Promote the Advancement of Women in Biomedical Research Careers](#)

[Science in the News](#)

[Guide Notices](#)

[Feedback](#)

[This Issue's Printer-Friendly Version](#)

» [Back to top](#)

- ◆ **Program Announcement (PA):** A broad description of general research interests and priorities. All PAs involve multiple receipt dates, and applications are reviewed with those that do not cite any announcement.
- ◆ **Program Announcement with Special Referral Characteristics (PAR):** A PA that includes special receipt, referral or review characteristics to accommodate special programmatic needs.
- ◆ **Program Announcement with a Setaside (PAS):** A PA that delineates a specific pool of money to encourage applications in this area.
- ◆ **Request for Applications (RFA):** Used to define a specific area of science that has been identified for special attention by one or more ICs. Usually RFAs have a funding setaside, a specific receipt date, special review criteria, and are generally reviewed by a special peer review committee.
- ◆ **Parent Announcement:** Used to set up a funding mechanism-specific electronic application (e.g. R01). Does not describe research interests or priorities.

In this new age of electronic submissions, all electronic applications must be in response to one of these five funding opportunity announcements. Although this new approach blurs yesterday's distinction between solicited and unsolicited research, it does not diminish the value of both approaches to NIH's ability to manage its biomedical research portfolio.

In the future as in the past, individuals and groups will advocate for new programs and for increases or decreases in existing programs. Emerging approaches such as the ability to define with better accuracy the types of research being funded using [knowledge management](#) technologies and other approaches may help identify new scientific areas to explore or specific gaps in the portfolio. The proportion of applications responding to RFAs may increase or decrease in response to scientific or public health need and opportunity. NIH will continue to seek broad community input of the type that led to the NIH Roadmap. I can assure you, however, that regardless of the mix of solicited and unsolicited applications, the NIH will continue to look for and fund the very best science.

» [Science in the News](#)



[NIDA Offers Psychiatrists a Look at State-of-the-Science on Addiction and Mental Illnesses](#)

[NIH Study Tracks Brain Development in Some](#)

[500 Children across U.S.](#)

[Scientists Develop Method to Track Immune System Enzyme in Live Animals](#)

[Skin Cancer Information is Newest Offering on NIH Senior Health Web Site](#)

[The Quest for an Effective HIV Vaccine Presents New Possibilities, Challenges](#)

[Integrative Medicine Consult Service Established at the NIH Clinical Center](#)

[Can an Omega-3 Fatty Acid Slow the Progression of Alzheimer's Disease? NIH-Supported Researchers Launch Nationwide Trial](#)

[NIDA Looks at Non-Injection Drug Use and Spread of HIV / AIDS](#)

[Pinn Point on Women's Health Breast Cancer Advances in Detection, Treatment and Cure](#)

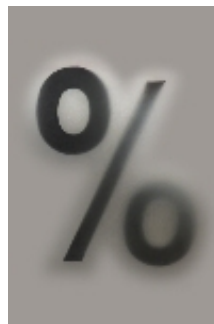
If you have comments or questions please write to me at [DDER@NIH.gov](mailto:DDER@NIH.gov).

— *Norka Ruiz Bravo, Ph.D.*, Director, Office of Extramural Research and NIH Deputy Director for Extramural Research

[» Back to top](#)

## ELECTRONIC GRANT APPLICATION SUBMISSION:

**NIH eSubmission Transition—  
80 Percent Complete, 20 Percent to Go**



Since December 2005, NIH has systematically transitioned grant programs from paper PHS 398 application forms to electronic SF424 (R&R) application packages submitted through Grants.gov. Approximately 80 percent of all NIH competing grant applications now use the electronic process.

Among the remaining grant programs to transition are Career Development (K), Fellowships (F), Training (T) and complex programs (primarily P and U). The transition of these grant programs to electronic applications was delayed in January (see NIH *Guide* notice [NOT-OD-07-038](#)) as Grants.gov focused all of its efforts on transitioning to Adobe®-based forms and system processing improvements.

NIH is working closely with Grants.gov while they continue to refine forms and systems. We expect to make an announcement soon about the transition of K, F, T and complex grant mechanisms to electronic application submission.

[» Back to top](#)

[» Back to top](#)

[The NIH Electronic Application Validation Process—Why We Do What We Do](#)



[NIH Announces Changes to eRA Commons, Particularly the Electronic Streamlined Non-competing Award Process \(eSNAP\) Function](#)

[Notice of Intent to Publish Program Announcements with Review to Support Behavioral and Social Science Research on Understanding and Reducing Health Disparities](#)

[Notice of Intent to Publish a Request for Applications \(RFA\) for the Rare Diseases Clinical Research Consortia](#)

[Change in Agency Contacts and Letter of Intent Receipt Date for: PAR-07-018 – Understanding and Promoting Health Literacy \(R21\), PAR-07-019 - Understanding and](#)



Did you submit your electronic application, check the status in the Electronic Research Administration (eRA) Commons and let out a sigh as you read your errors and / or warnings? Did you think, “Sure, the system flagged an error, but why can’t I just take care of it later, after I get rave reviews and NIH is ready to fund my research?” If you did, you were not alone. In fact, some

of you took it one step further and provided specific feedback on the process. We have reviewed your feedback, analyzed the submission results to date, and offer the following response.

### ***Responding to feedback and striking a balance***

Receiving clean and fully compliant applications is a worthy target. However, we must acknowledge the importance of striking a balance between obtaining consistent, error-free application data and preventing an application from going forward due to seemingly small administrative issues. We continue to adjust and refine the NIH validation process with the goal of reaching this important balance.

There are two main types of validation messages. “errors” and “warnings.” Errors curtail further processing of the application and must be addressed to complete the submission process. Your application is not advanced to the Division of Receipt and Referral (DRR) until all errors are addressed.

Although we try to provide a comprehensive list of errors and warnings for a submission, it is not always possible. For example, if the application has missing or incorrect Data Universal Numbering System (DUNS) number or eRA Commons username information, the system will flag those errors and the validation process will not be completed until the items are corrected. The organization and profile data must be verified.

NIH has reviewed all the errors and warnings applicants have received to date. As a result of that review and your feedback, we are taking steps to improve the process. Some of the actions below are already in place, and others will be implemented in June.

- ◆ Clarify message text and application guide instructions for the most frequent error and warning messages.

[Promoting Health Literacy \(R03\), and PAR-07-020 – Understanding and Promoting Health Literacy \(R01\)](#)

[NIH Revised Notice of Award Letter](#)

[Continuation of the Extension of the NIH Pilot Study to Shorten the Review Cycle for New Investigator R01 Applications](#)

[» Back to top](#)

- ◆ Remove many warning messages (more than 50 percent of the R01 warnings received have been flagged for removal).
- ◆ Increase system tolerance for minor inconsistencies in names provided in the application when compared to names included in the eRA Commons profile.
- ◆ When possible, change “errors” to “warnings” to allow the submission to proceed.
- ◆ Soften the tone of messages and reserve more explicit language or descriptions for cases where delays in application processing are most likely to occur.
- ◆ Critically examine errors and warnings that are not required for review and could be addressed prior to award.

We believe the above listed validation improvements are appropriate and necessary, but understand that shifting requirements also is an issue for applicants. Although minor adjustments will always be needed, we plan to fully implement the overall validation streamlining quickly to provide a stable environment as the next R01 submission dates near. For specifics on the most frequently occurring errors / warnings and some of the actions NIH is taking, see [NIH Electronic Submission Validations and the 80-20 Rule](#).

### ***Why does NIH use a multi-step validation process for electronic applications?***

Grants.gov provides a single location to find and apply for federal grants, develops the forms applicants use for submission, and performs initial processing of applications. NIH, like all other federal grant-making entities, is required to post funding opportunities on Grants.gov. Since Grants.gov services a several agencies, each with their own specific requirements and instructions, it only performs very basic application checks known as validations (e.g., all mandatory forms and fields are completed, email addresses and dates are properly formatted, DUNS number provided on the application matches records on file for the submitting credentials, and virus checks). The grantor agency is responsible for verification of application content and compliance with specific program requirements.

[» Feedback](#)

**COMMUNICATE WITH THE NIH EXTRAMURAL NEXUS—WE WANT TO HEAR FROM YOU**

[Feedback from recipients and subscribers of the NIH Extramural Nexus is vital. Comments, questions, and suggestions for topics will enable Nexus editorial staff to deliver appropriate content to](#)

the grantee community.

» [Back to top](#)

Some agencies manually verify the content of applications after Grants.gov submission. In fact, NIH continues to do manual validations for applications that have not yet transitioned to Grants.gov submission. However, NIH processes approximately 80,000 unique grant applications each year and is committed to electronic processing through the complete life cycle of the application / grant. Therefore, for electronically-submitted applications, we have moved as much as possible to electronic validations and only a small number of manual checks remain.

The NIH system validations ensure that:

- ◆ Business rules are applied consistently.
- ◆ Information of special interest to NIH (e.g. new PI designation, phase III clinical trials, use of human embryonic stem cells) is included.
- ◆ Your application is attributed to the appropriate PD / PI and applicant organization to facilitate review and improve reporting, career tracking, etc.
- ◆ Information provided on your application can be stored in our databases.
- ◆ NIH is better positioned to reduce the time from submission to award by automating some of the effort required to process your application.
- ◆ Applications are complete, have all the information needed for peer review, and the information is presented in a consistent way to facilitate the review process.

---

**This Issue's Printer-Friendly Version**

(Adobe® Reader® Required)

---

The validations are in place to benefit applicants as well as NIH. Without the NIH validations, many applications would easily pass the submission process only to be deemed non-responsive in the Division of Receipt and Referral. Other applications would proceed to review where reviewers would discover that instructions were not followed. Since all post-submission changes and revisions are provided separately to reviewers, there is no longer the ability to just “replace page 20” in the original application.

The validation process catches many issues up-front and allows you to correct the application in a way that is transparent to reviewers. Do not

worry; reviewers never see any errors or warnings encountered during the process. They only see the end result—a clean, compliant application that can be reviewed and considered for funding.

We are doing our best to communicate clear requirements and to provide a manageable process with the necessary checks and balances. Thanks to your feedback we are headed in a positive direction. Keep the input coming, we are listening.

[» Back to top](#)

---

### **Designating Roles in Electronic Applications— PIs, Multiple PIs and Co-Investigators**



NIH has received numerous inquiries about how to designate the roles of Principal Investigator, Multiple Principal Investigator, and Co-Investigator on electronic applications. Here is a quick explanation on NIH's approach for designating these roles.

#### ***Principal Investigator***

The SF424 (R&R) cover component includes a section for the Project Director / Principal Investigator (PD / PI). The information from this section is used to auto-fill other sections of the application including the Senior / Key Person Profile and the R&R Budget forms. The role of PD / PI is automatically set as the default.

#### ***Multiple PIs***

NIH has chosen the approach recommended by the Office of Science and Technology Policy (published in the [Federal Register](#)) that considers all PD / PIs on a multiple PI application to be equal in terms of responsibility, authority and accountability. Therefore, they should have the same role designation on the application. It was determined that designating one individual as the PD / PI and all others as Co-PD / PIs implied some hierarchy that does necessarily not exist. For this reason, PD / PI is the only role that NIH recognizes for PI status and each of the multiple PIs should use this role. Realizing that some other federal



agencies may use Co-PD / PI for their multiple PI implementations (e.g., National Science Foundation), NIH provides a warning message when the Co-PD / PI role is used to let you know that if you meant to designate multiple PIs, you have not used the appropriate role for NIH applications. NIH guidance is to avoid the use of Co-PD / PI entirely for NIH applications to avoid confusion. If you choose to ignore the warning, the Co-PD / PI role is stored but no PI status is provided.

### **Co-Investigators**

NIH views the roles of Co-Investigator and PD / PI as distinct. Although NIH does not give PI status to anyone designated as a Co-Investigator, it is an acceptable project role for NIH while the role of Co-PD / PI is not. Co-Investigator is not a value listed in the role picklist of the Senior / Key Person Profile form. To assign the role of Co-Investigator you must select "Other" for the Project Role field and then insert the appropriate role descriptor of "Co-Investigator" in the Other Project Role Category field. In the R&R detailed budget component the Project Role field is free-form text so you can insert any appropriate role.

[» Back to top](#)

---

## **EYE ON PI:**

**Genotype and Phenotype Data Now Available From dbGaP Database—Request Process Involves New Procedures for Principal Investigators and Signing Officials**



Researchers may now begin requesting individual-level genotype and phenotype data from dbGaP, the **database of Genotype and Phenotype**. The database, which was developed and is operated by the National Library of Medicine's National Center for Biotechnology Information (NCBI), archives and distributes data from studies that have investigated the relationship between phenotype and genotype, such as genome-wide association studies (GWAS).

dbGaP provides for two levels of access: open (available to anyone with no restrictions), and controlled (requiring preauthorization). NCBI launched the database in December 2006 with the open-access data on two studies; the open-access section allows users to view study documents, such as protocols, as well as summaries of the genotype and phenotype data. The controlled-access portion of the database is just now coming online; with authorization, it provides for downloads of

individual-level genotype and phenotype data that have been de-identified (i.e., no personal identifiers, such as name, etc.).

Beginning in late May, researchers may request access to the individual-level data from several studies: the Age-Related Eye Diseases Study (AREDS) on macular degeneration and cataracts, the National Institute of Neurological Disorders and Stroke Parkinsonism Study, and six studies conducted under the Genetic Association Information Network (GAIN). The data from AREDS, the Parkinsonism Study, and a GAIN study on an attention deficit hyperactivity disorder are expected to be available for download around June 9. Data from the other five GAIN studies will be rolled out over the next six months as they become available. Additionally, there will be many other studies added to dbGaP in the future, including the Framingham SHARe Study, which is associating genotype data with phenotype information collected in the landmark Framingham Heart Study.

To request access to any of the individual-level datasets within the Controlled Access portions of the database, the Principal Investigator (PI) and the Signing Official (SO) at the investigator's institution will need to co-sign a request for data access to be reviewed by an NIH Data Access Committee at the appropriate Institute or Center. To complete this step, which uses the SF424 (R&R) form, both will need to have NIH Electronic Research Administration (eRA) Commons accounts. These are the same accounts used to apply for grants, and PIs and SOs who already have such accounts do not need to do anything further to make them applicable to the dbGaP controlled-access authorization process. Visit the [eRA Commons](#) Web site for information on establishing an account.

Assuming eRA accounts are in place, the process for requesting access is as follows: the PI goes to the [dbGaP Web site](#), reviews the open access information on available projects and, after deciding which datasets are applicable to his or her research questions, clicks on the link for requesting data. The PI will then be asked to fill in his or her eRA name and password; if it is the PI's first dbGaP request, they will be taken to a "preferences" page to fill out contact information; the PI clicks on the "my projects" tab, where a link is provided for new data requests; the PI then follows the provided directions for completing the SF424

(R&R) application.

Among the information the PI will provide in these forms is the name of the preferred SO (registered SOs at the PI's institution are pre-listed on the form), a statement summarizing the proposed research use for the requested data, and a list of collaborating investigators at the same institution. (Collaborators at other institutions will need to submit separate requests for co-submission with their SOs). Submission of the data access request will constitute agreement and acknowledgment by both the PI and the SO to the terms of use for the specific dataset(s) requested, which are detailed in the accompanying "Data Use Certification" (DUC) documents that are provided on the Web site.

The DUC statements outline policies and procedures for using the data, such as limiting use to the project described in the Data Access Request form; not distributing the data beyond those permitted to handle it; not attempting to identify or contact study participants from whom phenotype data and DNA were collected; awareness of the specified principles regarding intellectual property; adhering to policies regarding the timeframe for publications stemming from the data; and other provisions designed to protect the confidentiality of study participants and to foster scientific advance.

After the PI completes the electronic data request process, the SO will be notified by email that a request has been submitted and is awaiting his signoff. The SO then uses his or her eRA name and password to enter the dbGaP authorized access system, where he or she will be presented with the PI's application to review. The SO has the option of editing the forms, returning the forms to the PI for revision, or signing off that the submitted application is valid. To help ensure applications move through the submission and review process in a timely way, the SO and PI will receive various emails updating them on the status of a request or any required actions. The data access request is then reviewed by the appropriate Data Access Committee(s) at NIH, and both the PI and SO will be notified by email of approval or disapproval.

Visit the [dbGaP site](#) for more information on dbGaP and links to the information pertaining to each available dataset.

---

Roadmap Update—Initiative Selections Made



The idea selection process for a new cohort of [Roadmap](#) initiatives has concluded.

Through the summer and fall of 2006, NIH solicited ideas for new initiatives from a wide array of constituents to help senior NIH staff identify crosscutting challenges in biomedical research that meet special [criteria](#) established for Common Fund (Roadmap) initiatives.

NIH's [Office of Portfolio Analysis and Strategic Initiatives](#) (OPASI) coordinated programmatic review of the submitted ideas and collaborated with NIH Institutes and Centers (ICs) to assess currently funded research related to several of the broad areas highlighted by the ideas. IC Directors then selected the broad areas that were to be pursued as either:

- ◆ Major Roadmap initiatives
- ◆ Pilot studies
- ◆ Coordination areas
- ◆ Strategic planning areas

Earlier this month, IC Directors met to review and prioritize specific proposals. Four topics were chosen to move forward as major Roadmap initiatives, with the first two approved for immediate implementation as five year programs and the second two approved for staged implementation:

- ◆ Microbiome
- ◆ Epigenetics
- ◆ Protein capture tools / Proteome tools
- ◆ Phenotyping services and tools

The genetic connectivity map was selected as an NIH Roadmap pilot study.

The Working Group on Roadmap Coordination Groups will assess current efforts in regenerative medicine, pharmacogenomics and bioinformatics. The Working Group on Roadmap Strategic Planning Activities will focus on training / careers, health disparities and the science of science administration.

Complete information about the Roadmap emphasis areas is available at the [NIH Roadmap for Medical Research Web page](#).

[» Back to top](#)

---

#### Should the NIH R01 Grant Application Be Shorter?



At the recent NIH Peer Review Advisory Committee (PRAC) meeting, co-chairs of the NIH Grant Application Committee presented responses to the NIH's [Request for Information \(RFI\): Possible Page Limit Reduction For the Research Plan Section of the Research Project Grant \(R01\) Application](#) submitted by over 5,000 applicants and reviewers.

An initial analysis of the input revealed that the majority supported shortening the grant application. Of the total responses submitted, committee members then analyzed 500 randomly selected responses in detail. Based on this input, the committee made the following recommendations:

- ◆ The research plan section of the application should be shortened—a majority favored 15 pages
- ◆ Instructions to applicants and reviewers should be modified to emphasize impact
- ◆ Sections of the application should be more closely aligned with the review criteria

Additional information and other presentations from the April 19 PRAC

meeting are available on the [PRAC Web site](#).

[Peer Review Notes](#), published by NIH's Center for Scientific Review also provides information about grant application review policies, procedures and plans.

[» Back to top](#)

---

#### **North Carolina NIH Regional Seminar Draws Largest Attendance Ever**

More than 900 researchers and research administrators from 39 U.S. states, the District of Columbia, and as far away as Africa attended the most recent [NIH Regional Seminar on Program Funding and Grants Administration, held in Research Triangle Park, NC](#) from April 24–26. Participation was the largest of any NIH Regional Seminar to date.

The OER has coordinated these two-day seminars since 1979 to clarify federal regulations and policies, provide the fundamentals of the application and review processes, and highlight current areas of special interest, such as electronic submission of grant applications. Policy, grants management, review and program staff members from across the NIH provide a broad array of expertise and encourage a friendly, open dialog with seminar participants.

NIH Electronic Research Administration (eRA) labs for Principal Investigators and administrators were offered in conjunction with the seminar, providing some 200 people with hands-on experience in how to interact electronically with NIH.

[Presentation materials](#) from the Research Triangle Park NIH Regional Seminar are now available.



*Diane Dean, director, and Jeannette Gordon, assistant grants compliance officer, OER Office of Policy for Extramural Research Administration, Division of Grants Compliance and Oversight present Common Compliance Pitfalls and Strategies for Success.*

(Click image for larger view; image opens in new window)



*Rebecca Claycamp, chief grants management officer, National Institute of Mental Health briefs a full auditorium on Multiple Principal Investigators: Going Where No One Has Gone Before!*

In 2008, the OER will conduct Regional Seminars in San Antonio, TX, tentatively March 25-27 and in Chicago, IL, tentatively June 18-20. Formal announcements and additional information about the 2008 Regional Seminars will be published in the [NIH Guide for Grants and Contracts](#).

[» Back to top](#)

---

#### **ANNOUNCEMENTS:**

**In Memoriam Stephen E. Straus, M.D. First Director of NIH's National Center for Complementary and Alternative Medicine and Internationally Recognized Physician-Scientist**

The National Center for Complementary and Alternative Medicine (NCCAM) has [published](#) a notice about the recent death of Stephen Straus, M.D. The release details Dr. Straus' NIH career and achievements, and provides further information about NCCAM's condolence message board.

[» Back to top](#)

---

**OER Web Site Gets a Facelift**



OER announces exciting changes coming during the week of July 9 to the [OER Home Page](#), a frequently used Web site for grants process information and links to various NIH grant resources and information.

◆ ***What is new for you, applicants and grantees?***

The new site will offer a user-friendly layout, valuable content areas, a new color scheme, updated links, revised content throughout and much more.

A section with a summary of and helpful links to elements of the NIH Grants Process (e.g., Grant Basics, an interactive NIH Grants Process At-A-Glance chart, an activity code search, expanded funding mechanism chart, etc.)

A revamped, customer-focused Electronic Research Administration (eRA) home page that provides helpful facts and links for busy users inside and outside of NIH. Look for newly developed fact sheets on commonly used electronic applications (e.g., streamlined noncompeting award process (SNAP), no cost extension notification, financial status report submission, etc.), easy access to Commons support pages, quick links to databases and more.

Updated commonly visited OER Web pages, including active and helpful links, text, and contact information.

◆ ***What about current links?***

In general, the changes are cosmetic and will not affect current links. If a current Web page link is changed, however, a screen will appear in its place providing users with a redirect and/or alternate resources.

The purpose of the new design for each site is to be helpful, accurate, and user-friendly, so if you have any technical problems, feel free to contact the [OER Webmaster](#).



OER Web page updates will be ongoing. Plans include an interactive and comprehensive glossary, and helpful charts and tools to aid the extramural grants community and general public in understanding the NIH grants process and effectively locating NIH resources. The eRA Web site will continue to evolve over the next several months as we continually evaluate and improve the resources available to NIH customers.

◆ ***Who was involved in the redesign process?***

The new OER site format, language, content, colors, and other attributes are the result of an extensive evaluation of the current site content, affiliated Web pages, and navigation system performed by a consulting firm that specializes in Web site usability.

Input was gathered from grantees and NIH users and formal usability testing was also conducted with grantees and NIH users, leading to recommendations used by OER in the new site design.

The eRA pages of the OER site are in the stages of the redesign process based on an internal evaluation and review of user comments and needs, as well as discussions with applicant users.

◆ ***Look for the OER Web site on a new NIH Home Page***

The launch of the OER and eRA Web sites will coincide with the unveiling of the new NIH home page. These sites will go live within days of one another; additional notification will be sent to you at that time.

The OER is working diligently to provide the NIH extramural community with the tools necessary to navigate the grants process. Email any questions or comments to the [OER Webmaster](#).

» [Back to top](#)

---

**NIH Investment in Extramural Research and Training Programs Slide Set Now Available**



Now posted on the [OER Award Data Web site](#) is the [NIH Investment in Extramural Research and Training Programs](#) (PowerPoint®) slide set.

The presentation, titled *Facts and Figures on National Institutes of Health Extramural Programs* is produced by the OER Division of Information Services, Office of Research Information Systems. It includes frequently requested information on NIH extramural programs, organized by major program areas.

Each January, an update of the slide set will be published and will reflect data collected shortly following the end of the prior fiscal year.

Data associated with the slide set's tables, charts and graphs are linked within the publication and can be accessed by right clicking the slide, selecting "edit slide" then double clicking the graphic.

[» Back to top](#)

---

#### **NIH Launches New Web Site to Promote the Advancement of Women in Biomedical Research Careers**



The NIH announces [Women in Biomedical Careers](#), a new Web site that provides information about the recently created NIH Working Group on Women in Biomedical Careers. The Working Group was appointed by NIH Director Elias A. Zerhouni, M.D. to develop innovative strategies and tangible actions to promote the advancement of women in biomedical research. "The Web site is an important new resource that will highlight the activities of the NIH Working Group on Women in Biomedical Careers and provide information about NIH career development programs," says Vivian W. Pinn, M.D., NIH Associate Director for Research on Women's Health, and co-chair of the Working Group.

The NIH Working Group on Women in Biomedical Careers was created to respond to the challenges issued to federal funding agencies by the National Academies report, *Beyond Bias and Barriers: Fulfilling the Potential of Women in Academic Science and Engineering*, and also to

promote the career advancement of women in the intramural research community. The Web site provides information about the Working Group, including the list of members, the subcommittee tasks and members, and the initial charge.

The site also provides links to useful career development resources from the NIH Offices of Intramural Research, Extramural Research, and Research on Women's Health. It also includes links to career development and mentoring resources from professional societies and other organizations, including the Association for Women in Science and the Association of American Medical Colleges.

The NIH invites you to explore the [Women in Biomedical Careers](#) Web site and contact us at [womeninscience@nih.gov](mailto:womeninscience@nih.gov).

[» Back to top](#)



---

The *NIH Extramural Nexus* is a bimonthly update from the NIH Office of Extramural Research. Send articles, comments, questions and suggestions to the [Editor](#). The *NIH Extramural Nexus* reserves the right to select and edit submissions.

To subscribe to or unsubscribe from the *NIH Extramural Nexus*, visit the [Subscription Center](#).

---

[NIH Extramural Nexus Web site and archives](#)