Program Announcement

Department of Defense Congressionally Directed Medical Research Programs

Psychological Health/Traumatic Brain Injury (PH/TBI) Research Program

Concept Award

Funding Opportunity Number: W81XWH-09-PH/TBIRP-CA

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I. FUNDING OPPORTUNITY DESCRIPTION

A. Program Background

The Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) was established in 2007 under Department of Defense (DoD) Health Affairs to lead a collaborative global network to optimize Psychological Health (PH) and Traumatic Brain Injury (TBI) treatment for the DoD. The support of basic, translational and clinical research is critical to DCoE's mission to validate, oversee, and facilitate prevention, resilience, identification, treatment, outreach, rehabilitation, and reintegration for the nation's warriors and their families. The DCoE takes a holistic approach to serving warriors, Veterans, families, caregivers and communities, and is a source of leadership for a national network of medical, organizational, community support, academic, research, and advocacy assets.

B. Program Objectives

The objective of the current program is to promote research that will advance the prevention, detection, diagnosis, and treatment of military-relevant PH issues and TBI. Funding will be focused on innovative projects that have the potential to make a significant near-term impact on improving the function, wellness, and overall quality of life for warriors, Veterans, families, caregivers, and communities. It is anticipated that approximately $40.6M will be available to support PH/TBI research in FY09. The Government reserves the right to increase or decrease the PH/TBI funding of $40.6M to execute the program.

Proposals involving multidisciplinary collaborations among academia, industry, the military Services, the Department of Veterans Affairs, and other Federal Government agencies are highly encouraged. Though the program supports groundbreaking research, all projects must demonstrate solid judgment and rationale.

C. FY09 PH/TBI Research Program Congressionally Directed Topic Areas

This Program is focused on the spectrum of PH and TBI research from basic, applied, and clinical research, to translational research that transforms scientific discoveries into clinical applications and best practices that prevent, mitigate, and effectively treat TBI and optimize PH in the short and long term. The goal is to increase understanding of the etiology of PH problems, TBIs, and associated comorbidities – including patients with TBI and/or Post-Traumatic Stress Disorder (PTSD), depression, anxiety, and/or substance dependence/abuse – in order to develop preventive interventions and new treatments and to arrive at evidenced-based solutions.

The following paragraphs describe in greater detail examples of broad categories of interest, and include incorporating training, combat theater operations, and post-deployment evidence-based preventive and early intervention measures, practices, or procedures to reduce the likelihood that personnel in combat will develop PTSD or other stress-related conditions or sustain traumatic brain injuries. Priorities include interventions across the deployment lifecycle for warriors, Veterans, families, caregivers, and communities, particularly those at risk for mental disorders and psychosocial problems. Investigators are encouraged to take into account considerations for

special populations, such as gender-specific or racial/ethnic groups as a focus. Consideration of Active Duty, Reserve Component, National Guard and/or Veteran populations is also encouraged.

All applications for funding must specifically and clearly address <u>at least one</u> of the following topic areas and have direct relevance to the health care needs of warriors, Veterans, families, caregivers, and/or communities. Proposals should focus on basic, translational, clinical, and/or preventive medicine research within PH/TBI. The intended or target population (Active Duty, Reserve Component, National Guard and/or Veterans) should be noted. Specific areas of interest are those listed below.

1. Studies aimed at improving the understanding of military-related psychological health issues in specific areas of interest.

The objective of this topic area is to improve the understanding of combat-related psychological health, as related to diagnosis, treatment, and prevention. Studies must be clearly aimed at developing evidence-based solutions to improve the diagnosis, treatment, and prevention of military-related stress disorders and co-morbid conditions such as drug/alcohol abuse and depression. Basic research solutions should be developed to fill gaps that may be related to improving therapeutic approaches. Preference will be given to studies that clearly demonstrate immediate impact. Specifically, topic areas include:

- Identification/validation of risk factors associated with PTSD and co-morbid conditions that can be used to develop improved metrics and tools for assessment of combat-related psychological health disorders.
- Identification of risk factors for the safety of redeployment of Service members for multiple tours.
- Identification of barriers to treatment for PH issues and TBI, especially for Service members returning to the civilian community from their Reserve and National Guard status.
- Basic research aimed at improving understanding of psychological resilience in military populations that can be used to develop and/or validate novel strategies to reduce psychological health disorders.
- Validated resilience-building interventions demonstrating improved or enhanced mental health and/or well-being.
- Studies of novel and early interventions using mono-, adjunctive, or combination therapeutic approaches for combat-related psychological health disorders.
- Basic research on the biological mechanisms that underlie human emotional reactions to combat stress and associated clinical symptoms or disorders.
- Basis of neuropsychiatric disorders associated with combat-related PTSD and TBI.

2. Studies to examine cellular regrowth and interconnection strategies and therapies in the central nervous system (brain and spinal cord).

The objective of this topic area is to increase understanding of neuroregeneration and to facilitate the translation of that understanding into improved treatment of neurological conditions and improved neurorehabilitation. Research areas of interest include:

- Investigation of basic mechanisms of cellular regrowth.
- Examination of pharmaceutical and/or other approaches to neural regrowth and injury including, blast-related cell damage and resulting effects on neurological response.

3. Research on evidence-based prevention and rehabilitation strategies for TBI, PTSD, and co-occurring conditions encompassing cognitive, motor, emotional, psychological, and sensory functioning.

The objective of this topic is to improve rehabilitative approaches to the treatment of PTSD, TBI, and co-morbid conditions. Research must employ rigorous validation criteria to assure safety and efficacy, and proper control groups and sham conditions where appropriate. Therapeutic approaches must be applicable to use in the military population. Approaches of interest include:

- "Activity-based" physical therapy
- Computer-based approaches
- Complementary or alternative medicine approaches
- Combination therapies

4. Three-dimensional models of Improvised Explosive Device (IED) blast waves to develop equipment to mitigate injury to Service members.

The objective of this topic area is to develop biomedically-valid computational models of blast-related TBI that can be used to design, build, and test personal protection systems, such as combat helmets, and combat vehicle crew protection systems that prevent blast-related TBI.

Furthermore, this topic area is intended to support studies that take an end-to-end approach that combines appropriate animal injury and/or post-mortem human studies (PMHS) with computational modeling, and which include model validation. Blast-related TBI mechanisms of interest include:

- Blunt force impact
- Blast overpressure
- Acceleration

- Force transference
- Combinations of the above

5. PH and/or TBI research exploring the use of advanced neuroimaging, behavioral and/or genetic information to identify biomarkers and to develop diagnostics and treatments for semi-acute, acute, and chronic injury stages, and for the possible integration of informatics and advanced computational research to better understand the intersection of psychological health and TBI.

The objective of this topic area is to identify reliable, biologically based, and assayable indicators of psychological health status or TBI. Special areas of interest include:

- DA-EEG assessment and MRI quantization to allow accurate assessment of TBI.
- Identification of biomarkers specific to and capable of distinguishing between PTSD, TBI, and their co-occurance. Computational approaches to integrate global transcriptomics and proteomics information to identify the biological networks that are altered following TBI.
- A fully automated, self-contained, disposable chip to diagnose TBI at the point of injury based on validated criteria for diagnosis.

If the proposed project is not relevant to a specified FY09 PH/TBI Research Program topic area, the Government reserves the right to administratively withdraw the proposal.

D. Award Description

The PH/TBI Research Program Concept Award is intended to support the exploration of a highly innovative new concept or untested theory that addresses an important problem relevant to one or more of the FY09 PH/TBI topic areas. The Concept Award is not intended to support a logical progression of an already established research project but, instead, allows Principal Investigators (PIs) the opportunity to pursue serendipitous observations. This award mechanism supports high-risk studies that have the potential to reveal entirely new avenues for investigation. Proposals must describe how the new idea will enhance existing knowledge of PH/TBI or create an entirely new avenue for investigation. Research completed through a Concept Award may provide sufficient preliminary data to enable the PI to prepare a proposal for future research. All applications must specifically and clearly address the military relevance of the proposed research. Collaboration with military researchers and clinicians is encouraged.

Use of human subjects and human biological substances: These awards are designed to support human research that falls under the categories of Exempt status or Expedited Review by the IRB of Record (DOD Directives 3216.02 and 6200.2). The Federal Regulations establish nine categories that IRBs may use to invoke the expedited review process (32 CFR 219 and 21 CFR 56). There are six categories of research that are eligible for exempt status (32 CFR 219 and 45 CFR 46). ***Studies that do not qualify for either exempt or expedited status during review at any level will be administratively withdrawn and will not be funded.*** Additional information may be found on the US Army Medical Research and Materiel Command (USAMRMC) Human Research

Protection Office website [https://mrmc.amedd.army.mil/rodorphrpo.asp] and US Department of Health and Human Services Office for Human Research Protections (OHRP) [http://www.hhs.gov/ohrp/policy/].

Encouraged DOD Collaboration and Alignment: Military relevance is a key feature of this award. Therefore, PIs are strongly encouraged to collaborate, integrate, and/or align their research projects with military and/or VA research laboratories and programs. The following websites may be useful in identifying information about ongoing DOD areas of research interest within the FY09 PH/TBI Research Program topic areas:

Defense Technical Information Center
http://www.dtic.mil

Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury
http://www.dcoe.health.mil

Defense and Veterans Brain Injury Center
http://www.dvbic.org/

Center For Deployment Psychology
http://www.deploymentpsych.org/

Deployment Health Clinical Center
http://www.pdhealth.mil/

Center For The Study of Traumatic Stress
http://www.centerforthestudyoftraumaticstress.org/

National Center for Telehealth and Technology
http://www.t2health.org/

Congressionally Directed Medical Research Programs
http://cdmrp.army.mil

U.S. Army Medical Research and Materiel Command
https://mrmc.amedd.army.mil

Air Force Research Laboratory
http://www.wpafb.af.mil/afrl

Navy and Marine Corps Public Health Center
www-nmcphc.med.navy.mil/main.htm

U.S. Department of Veterans Affairs, Office of Research and Development
www.research.va.gov

Office of Naval Research
http://www.onr.navy.mil/

U.S. Army Research Laboratory
http://www.arl.army.mil

U.S. Naval Research Laboratory
www.nrl.navy.mil
Defense Advanced Research Projects Agency:
http://www.darpa.mil/

U.S. Army Medical Research Acquisition Activity
http://www.usamraa.army.mil

Naval Health Research Center
http://www.nhrc.navy.mil/

U.S. Department of Defense Blast Injury Research Program
https://blastinjuryresearch.amedd.army.mil

Office of the Under Secretary of Defense for Acquisition, Technology and Logistics
http://www.acq.osd.mil/

Use of Military Populations: Describe the military population(s) to be used for the proposed study, if applicable. Coordination of access to various military populations is described below.

1. **Active Duty, National Guard, Reserve troops, and/or military patient populations** (not CENTCOM Area of Responsibility)**:** Unless the PI has an already established Service member population, access to Active Duty, National Guard, or Reserve troops must be coordinated

through the CDMRP. ***PIs who do not have a previously established study population should not contact unit Commanders at this time or during preparation of the proposal submission. If selected for funding, the PI will be provided guidance on how to obtain access to the appropriate population.***

2. CENTCOM Area of Responsibility military populations: Access to military populations in these areas is very limited and will be coordinated through the CDMRP as described above.

Research conducted using military populations in Iraq is conducted with oversight by the Multi-National Force-Iraq (MNF-I). PIs that are outside of this system and submit a research proposal designed to recruit patients within MNF-I must coordinate with the in-theater Deployed Combat Casualty Research Team charged with facilitating an in-theater review, and be approved by the MNF-I Command and the MNF-I designated Institutional Review Board (IRB). The same is true for research conducted in Afghanistan in the US Forces-Afghanistan (USFOR-A) Area of Responsibility. PIs who are outside of this system and submit a research proposal designed to recruit patients within USFOR-A must coordinate with the in-theatre Deployed Combat Casualty Research Team charged with facilitating an in-theatre review, and be approved by the USFOR-A Command and the USFOR-A designated IRB. If selected for funding, CDMRP will assist with guidance on how to obtain the required in-theatre approvals.

Given the constraints of wartime operations, investigators without an ongoing collaboration with an appropriate military investigator should strongly consider alternatives to conducting in-theater research. DOD-supported human subjects research can only be conducted by institutions (including those in-theater) with approved Federal Assurances of Compliance from the Human Research Protection Office (HRPO). It is strongly suggested that proposals necessitating the use of this population involve civilian and non-deployed military populations as an alternative.

3. Department of Veterans Affairs (VA) Medical Centers patient populations: Access to patient populations from VA Medical Centers or use of information from VA data systems must be coordinated by the PI. PIs who submit a research proposal designed to recruit patients from a VA Medical Center or use information from VA data systems, and who do not have an appointment at one of the VA Medical Centers, must include a collaborator with a VA appointment. This collaborator must be willing to assume the role of PI for the VA component of the research.

E. Eligibility

Investigators at all academic levels (or equivalent) are eligible to submit applications. Refer to the Application Instructions & General Information, Appendix 1, for general eligibility information.

F. Funding

- The maximum period of performance is **18 months**.
- The maximum allowable funding for the entire period of performance is **$300K** in direct costs.

- The applicant may request the entire maximum direct cost amount for a project that may be less than the maximum 18 month period of performance.
- Regardless of the period of performance proposed, the applicants may not exceed the maximum direct cost. In addition to the direct costs, indirect costs may be proposed in accordance with the institution's negotiated rate agreement.

Within the guidelines provided in the Application Instructions & General Information, funds can cover:

- Salary
- Research supplies
- Equipment
- Travel to scientific/technical meetings
- Travel between collaborating institutions
- Other direct costs as described in Application Instructions & General Information, Detailed Budget and Justification

The DCoE expects to allot approximately $3M of the $40.6M FY09 PH/TBI Research Program appropriation to fund approximately 7 Concept Award applications, depending on the quality and number of proposals received. Funding of applications received in response to this Program Announcement/Funding Opportunity is contingent upon the availability of Federal funds for this program.

G. Award Administration

Refer to the Application Instructions & General Information, Appendix 5, for general award administration information.

II. TIMELINE FOR SUBMISSION AND REVIEW

Submission is a two-step process consisting of (1) pre-application submission and (2) application submission.

Pre-application Submission Deadline:	**August 21, 2009, 5:00 p.m. Eastern time (ET)**
Application Submission Deadline:	**August 28, 2009, 11:59 p.m. ET**
Scientific Peer Review:	**October 2009**
Programmatic Review:	**December 2009**

Awards will be made approximately 4 to 6 months after receiving a funding notification letter, but no later than September 30, 2010.

III. SUBMISSION PROCESS

Submission is a two-step process consisting of (1) a pre-application submission through the CDMRP eReceipt system (https://cdmrp.org/) and (2) a proposal submission through Grants.gov (http://www.grants.gov/). ***Pre-application submission is a required first step***.

PIs and organizations identified in the proposal submitted through Grants.gov should be the same as those identified in the pre-application. If there is a change in PI or organization after submission of the pre-application, the PI must contact the eReceipt help desk at help@cdmrp.org or 301-682-5507.

The Government reserves the right to reject duplicative applications submitted to different award mechanisms within the same program or to other CDMRP programs.

A. Step 1 – Pre-Application Components and Submission

Pre-application submission is the required first step. The pre-application consists of the components discussed below. All pre-application components must be submitted electronically through the CDMRP eReceipt system by ***5:00 p.m. ET on the deadline date***. Refer to the Application Instructions & General Information for detailed information.

- Proposal Information
- Proposal Contacts
- Collaborators and Conflicts of Interest (COI)
- Letter of Intent (LOI) Narrative (one-page limit)

B. Step 2 –Application Components and Submission

Application submissions will not be accepted unless the pre-application process is completed by the pre-application deadline. Applications must be submitted electronically by the Authorized Organizational Representative (AOR) through Grants.gov (www.grants.gov).

Each application submission must include the completed application package of forms and attachments identified in www.grants.gov for the US Army Medical Research Acquisition Activity (USAMRAA) Program Announcement/Funding Opportunity. In addition to the specific instructions below, please refer to the Application Instructions & General Information for detailed requirements of each component.

The package includes:

1. **SF-424 (R&R) Application for Federal Assistance Form**

2. **Attachments Form**

   Reviewers will be blinded to the identity of the PI and the PI's institution. Due to the blinded nature of the review process, references to the PI or the institution in the project narrative are prohibited and will result in administrative withdrawal of the proposal. In addition, the use of "I," "our," "this institution," or similar phrases that make it possible

to identify the PI and/or institution through the references listed will result in administrative withdrawal of the proposal.

- **Attachment 1: Project Narrative (2-page limit)**

  Describe the proposed project in detail using the outline below. PIs must demonstrate logical reasoning, and a rationale for the work must be provided. Proposals must describe how the new concept could create an entirely new avenue for investigation, and how it is relevant to at least one FY09 PH/TBI topic area.

  - **Topic Area:** State the FY09 PH/TBI topic area addressed in the proposed work.
  - **Innovation:** Innovation should be the primary feature of the proposed study. Describe what is innovative about the proposed research.
  - **Hypothesis and Rationale**: State the hypothesis to be tested and rationale for the proposed research. Do not include preliminary data.
  - **Objectives:** State concisely the specific aims and research strategy of the study. Do not request funding as part of a larger study.
  - **Research Strategy:** Describe the experimental design, methods, and analyses including appropriate controls in sufficient detail for analysis. Address potential problem areas and present alternative methods and approaches.
  - **Impact:** Provide a brief statement in nontechnical terms regarding the potential impact of this work on PH/TBI. Describe how the project, if successful, will lead to an original and important contribution to the goal of improving the prevention, detection, diagnosis, and/or treatment of military-relevant PH issues and/or TBI

  The 2-page limit of the Project Narrative is inclusive of any figures, tables, graphs, photographs, diagrams, chemical structures, pictures, pictorials, cartoons, and other relevant information needed to judge the proposal.

- **Attachment 2: Supporting Documentation**
  - References Cited
  - Acronyms and Symbol Definitions
- **Attachment 3: Statement of Work (SOW) (three-page limit)**
- **Attachment 4: Detailed Budget and Justification**
- **Attachment 5: Request for Information on Study Population (if applicable, four-page limit)**
- **Attachment 6: Federal Agency Financial Plan (if applicable)**
- **Attachments 7–15: Subaward Detailed Budget and Justification (if applicable)**

3. **Research & Related Senior/Key Person Profile (Expanded Form)**

   - PI Biographical Sketch (four-page limit)

     Although requested, the Biographical Sketch will not be forwarded for review due to the blinded nature of each level of review for this award. The biographical sketch will be used for administrative purposes only.

4. **Research & Related Project/Performance Site Location(s) Form**

Although requested, the Statement of Work (SOW), Detailed Budget and Justification, Federal Agency Financial Plan (if applicable), Subaward Detailed Budget and Justification (if applicable), and Biographical Sketch will not be forwarded for review due to the blinded nature of each level of review for this award. These documents will be used for administrative purposes only.

IV. INFORMATION FOR APPLICATION REVIEW

A. Application Review and Selection Overview

All applications are evaluated by scientists, clinicians, and consumer advocates using a two-tier review process. The first tier is a scientific peer review of applications against established criteria for determining scientific merit. The second tier is a programmatic review that compares submissions to each other and recommends proposals for funding based on scientific merit, the overall goals of the program, military relevance, and the specific intent of the award mechanism. Additional information about the two-tier review process used by the CDMRP may be found at http://cdmrp.army.mil/fundingprocess.htm.

The peer review and programmatic review processes are conducted confidentially to maintain the integrity of the merit-based selection process. Each tier of review requires panelists to sign a non-disclosure statement attesting that application and evaluation information will not be disclosed outside the panel. Violations of the non-disclosure statement can result in the dissolving of a panel(s) and other corrective actions. Institutional personnel and PIs are prohibited from contacting persons involved in the application review process to gain protected evaluation information or to influence the evaluation process. Violations of these prohibitions will result in the administrative withdrawal of the institution's application. Violations by panelists or PIs that compromise the confidentiality of the peer review and programmatic review processes may also result in suspension or debarment of their employing institutions from Federal awards. Furthermore, it is a crime for Federal officials to disclose confidential information of one party to another third party (Title 18 United States Code 1905).

The Government reserves the right to review all proposals based on one or more of the required attachments or supporting documentation.

B. Review Criteria

1. Peer Review: All proposals will be evaluated according to the following criteria, which are listed in order of decreasing importance:

- **Impact**
  - How the study addresses at least one of the FY09 PH/TBI topic areas.
  - How the project will lead to an original and important contribution to the goal of advancing basic, translational, or clinical PH/TBI research, or on the quality of life of individuals with PH issues or TBI.
  - What impact this study will have on the concepts or methods that drive the field.
- **Innovation**
  - How the proposed research is innovative in one or more of the following ways: Concept or question, research methods or technologies, adaptations of existing methods or technologies, clinical interventions, or other ways.
  - Whether the concept is untested.
  - How the proposed research represents more than an incremental advance upon published data.
- **Research Strategy**
  - How the rationale supports the project.
  - How the concept will give rise to a testable hypothesis if successful.

The following criteria will not be individually scored, but they may impact the overall evaluation of the application:

- **Application Presentation**
  - How the writing and components of the application influenced the review.

2. Programmatic Review: The following criteria are used by programmatic reviewers to make funding recommendations that maintain the program's broad portfolio:

- Responsiveness to at least one of the FY09 PH/TBI topic areas,
- Military relevance,
- Ratings and evaluations of the peer reviewers,
- Programmatic relevance,
- Program portfolio balance,
- Relative innovation and impact, and
- Adherence to the intent of the award mechanism.

Scientifically sound proposals that best fulfill the above criteria and most effectively address the unique focus and goals of the program will be identified by the PH/TBI Research Program Integration Panel (IP) and recommended for funding to the Director, Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury. The highest scoring applications from the first tier of review are not automatically recommended for funding. All applications are carefully considered to ensure that the funds available are allocated to those proposals that best fulfill the goals and objectives.

V. ADMINISTRATIVE ACTIONS

After receipt of applications from Grants.gov, the following administrative actions may occur:

A. Rejection

The following will result in administrative rejection of the application:

- Project Narrative exceeds page limit.
- Project Narrative is missing.
- Budget is missing.
- PI's name or institution is included in the Project Narrative.
- Use of "I," "our," "this institution," or similar phrases in the Project Narrative that refer to the PI and/or institution through the references listed.
- Page size is larger than 8.5 inches x 11.0 inches (approximately 21.59 cm x 27.94 cm).

B. Modifications

- Pages exceeding the specified limits will be removed for all documents other than the Project Narrative.
- Documents not requested will be removed.
- ***NEW for FY09:*** Following the application deadline, you may be contacted by email from CDMRP with a request to provide certain missing supporting documents (excluding those listed directly above in Section A, Rejection). The missing documents must be provided by 5:00 p.m. ET on the second full business day following the date the email was sent. Otherwise, the application will be peer reviewed without the missing documents.

C. Withdrawal

The following may result in administrative withdrawal of the application:

- The proposed research is not relevant to any of the FY09 PH/TBI topic areas.
- FY09 IP member(s) is found to be involved in the pre-application or application processes including, but not limited to, concept design, application development, budget preparation, and the development of any supporting document. A list of the FY09 IP members may be found at http://cdmrp.army.mil/phtbi/panel09.htm.
- Inclusion of studies that do not qualify for either exempt status under Title 32, Code of Federal Regulations, Part 219, Section 101(b) (32 CFR 219.101[b]) or expedited review (32 CFR 219.110 or 21 CFR 56.110).
- Submission of the same research project to different award mechanisms within the same program or to other CDMRP programs.
- The application does not conform to this Program Announcement/Funding Opportunity description to an extent that precludes appropriate scientific peer and programmatic review.

- Direct costs as shown on the detailed budget form exceed the maximum allowed by the award mechanism.
- Inclusion of URLs, with the exception of links to published references.

D. Withhold

Applications that appear to involve research misconduct will be administratively withheld from further consideration pending institutional investigation. The institution will be requested to provide the findings of the investigation to the USAMRAA Contracting/Grants Officer for a determination of the final disposition of the application.

VI. CONTACT INFORMATION

A. Program Announcement/Funding Opportunity, application format, or required documentation: To view all funding opportunities offered by the CDMRP, perform a Grants.gov basic search using the CFDA Number 12.420. Submit questions as early as possible. Response times will vary depending upon the volume of inquiries. Every effort will be made to answer questions within 5 working days.

Phone: 301-619-7079
Fax: 301-619-7792
Email: cdmrp.pa@amedd.army.mil

B. eReceipt system: Questions related to pre-application components through the CDMRP eReceipt system should be directed to the eReceipt help desk, which is available Monday through Friday from 8:00 a.m. to 5:00 p.m. ET.

Phone: 301-682-5507
Website: https://cdmrp.org
Email: help@cdmrp.org

C. Grants.gov contacts: Questions related to application submission through the Grants.gov (http://www.grants.gov/) portal should be directed to the Grants.gov help desk, which is available Monday through Friday, 7:00 a.m. to 9:00 p.m. ET. Deadlines for application submission are 11:59 p.m. ET on the deadline date. Please note the CDMRP help desk is unable to answer questions about Grants.gov submissions.

Phone: 800-518-4726
Email: support@grants.gov

Grants.gov will notify PIs of changes made to this Program Announcement/Funding Opportunity and/or application package ONLY if the PI subscribes to the mailing list by clicking on the "send me change notification emails" link on the Opportunity Synopsis page for this announcement. If the PI does not subscribe and the application package is updated or changed, the original version of the application package may not be accepted.