

NIH GUIDE

For Grants and Contracts

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The NIH Guide announces scientific
initiatives and provides policy and
administrative information to indi-
viduals and organizations who need to
be kept informed of opportunities,
requirements, and changes in extra-
mural programs administered by the
National Institutes of Health.

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NOTICES

HUMAN LIVER FOR SCIENTIFIC INVESTIGATION

P.T. 34; K.W. 0745065, 0765035, 0780000

National Institute of Diabetes and Digestive and Kidney Diseases

The Liver Tissue Procurement and Distribution System (LTPADS) is an NIH service contract to obtain human liver from regional centers for distribution to scientific investigators throughout the United States. These regional centers have active liver transplant programs with human subjects approval to provide portions of the resected pathologic liver for which the transplant is performed. Human pathologic liver prepared according to the investigator's specifications provides the opportunity to verify if animal liver investigations are relevant to human liver pathophysiology. The preparation of these livers has been excellent for the usual molecular biologic techniques. Therefore, we are primarily interested in soliciting proposals from investigators interested in studying pathologic liver specimens. Examples would include a particular metabolic disorder or disease process or the general process of cirrhosis. A very limited supply of "normal" liver specimens may also be requested. Because 23 investigators are presently listed for "normal" liver, preferences in the future will be given to new proposals also requesting pathologic tissue.

Further information and proposal forms for interested investigators can be obtained from:

Harvey L. Sharp, M.D.
Principal Investigator, LTPADS
c/o Elizabeth Webster
Box 279 UMHC
University of Minnesota Hospitals
Minneapolis, Minnesota 55455
Telephone: (612) 624-1133

RECRUITMENT OF UNDERREPRESENTED MINORITIES INTO INSTITUTIONAL NATIONAL RESEARCH SERVICE AWARD (NRSA) PROGRAMS

P.T. 22, 44, FF; K.W. 0720005

National Institutes of Health
Alcohol, Drug Abuse, and Mental Health Administration

The policy of the National Institutes of Health (NIH) and the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) is to promote broad and systematic efforts to recruit individuals from minority groups currently underrepresented in biomedical and behavioral research. National Research Service Award programs are intended to attract and train individuals to pursue independent careers as investigators. Accomplishments of NRSA programs in these areas with respect to minority groups will ensure that minority scientists are progressively better represented in the national research effort.

To this end, in the NIH Guide for Grants and Contracts, Vol. 15, No. 4, March 28, 1986, the NIH notified potential NRSA applicants of renewed emphasis in this area, noting that applicants' plans for recruiting individuals from underrepresented groups and applicants' past records in selecting and training them for research positions would be assessed. Since that time, the NIH and ADAMHA have required an administrative note on NRSA summary statements that reflects initial review group (IRG) comments about recruitment plans and the current status of minority individuals who have been trained in the program. The additional instructions for form PHS 398 (REV 9/86; 10/88) for preparing institutional NRSA applications serve as a continuing reminder to applicants to provide the required information for review. With this notice, applicants are again reminded that NIH and ADAMHA are assessing the merit, effectiveness, and adequacy of the SPECIAL PLANS OR EFFORTS of the Program Director to recruit minorities specifically into his/her program, in addition to the institution's overall efforts to recruit minority individuals. APPLICATIONS WITHOUT SUCH SPECIFIC PLANS WILL BE DEFERRED; FUNDING DECISIONS MAY BE DELAYED FOR UP TO A YEAR.

The following list of potential elements of a minority recruitment plan is intended as guidance for applicants:

- o Advertisements in scientific or science-oriented journals (specialty and general publications) indicating that the program is actively recruiting minorities.
- o Posters and/or flyers for display and distribution at scientific/educational meetings, as well as at the NIH Minority Biomedical Research Support (MBRS) Symposium and the NIH Minority Access to Research Careers (MARC) Honors Undergraduate Symposium.
- o Visits by program director and/or preceptors to minority institutions to advertise training opportunities.
- o Cooperative programs with nearby minority colleges (summer internships; establishing science courses at minority colleges); and more general programs designed to attract and identify potential applicants from minority colleges:
 - summer research programs for minorities
 - minority research opportunity seminars
 - minority recruitment conferences
- o Specific procedures of the institution's Office of Graduate Studies or Research Administration to identify potential applicants: graduate opportunity programs; minority student services programs; minority education department; affirmative action office.
- o Individual letters to prospective applicants identified through the above, and/or from various other lists:
 - students supported by MARC and MBRS
 - National Science Foundation (NSF) predoctoral minority scholarships
 - National Institute of Science
 - Scientific societies' minority mailing lists
 - Minority Graduate Student Locator Service of the Educational Testing Service
 - Lists compiled by the institution or shared by affiliated institutions
- o Invitations to prospective minority applicants to visit the campus and meet with faculty and students, using funds available from the institution.

This list is not exhaustive, and applicants are encouraged to explore other mechanisms that will attract underrepresented minority individuals into their research training programs.

"OTHER SUPPORT" IN PHS GRANT APPLICATIONS

P.T. 34; K.W. 1014002, 1014006

National Institutes of Health

The PHS 398 (Rev. 10/88 and 9/86) and PHS 2590 (Rev. 9/86) grant application forms include a section on OTHER SUPPORT, where applicants are expected to list all, including both Federal and non-Federal, active support and pending and planned requests for support of research and research-related activities by all key personnel listed for each application. This information is important to PHS review-award processes to help evaluate the compatibility of application requests with investigators' capabilities and responsibilities, and eliminate unwarranted duplication of support for investigators' efforts. Application instructions emphasize the requirement for complete, accurate, and reliable information. In signing the face page of the application the principal investigator/program director and the applicant institution official certify that the application information is accurate and complete.

Applicants are reminded of the necessity to provide the full and reliable information requested. As noted in the instructions, "Incomplete, inaccurate, or ambiguous information about OTHER SUPPORT could lead to delays in review of the application." Further, applicants should be cognizant that serious consequences could result if failure to provide complete and accurate information be construed as an attempt to mislead PHS agency advisory groups and staff in their review and award responsibilities.

"OTHER SUPPORT" IN NIH R&D CONTRACT PROPOSALS

P.T. 34; K.W. 1014002, 1014006

National Institutes of Health

Documentation required in Section J of the NIH uniform Request for Proposal format includes Standard Form 1411, Contract Pricing Proposal Cover Sheet, which instructs offerors to identify any contracts or subcontracts they have been awarded "for the same or similar items" within the past three years. Additionally, offerors are required to provide a Summary of Related Activities, identifying all active federal contracts, cooperative agreements, grants, and commercial agreements, and submitted proposals, including actual and proposed levels of effort for all key individuals in the proposal to NIH.

As for PHS grant applications, mentioned just above, offerors should be aware that serious consequences could result if their failure to provide complete and accurate information be construed as an attempt to mislead agency advisory groups and staff in their review and award responsibilities.

PHS GRANT APPLICATION FORM 398--REMINDERS

P.T. 34; K.W. 0710030, 1014002

National Institutes of Health

The newly revised form PHS 398 (dated 10/88 or 9/86) must now be used for all NRSA Institutional Training Grant applications and by all research grant applications. The page limitations indicated in the instructions for the 10/88 or 9/86 revision must be observed. PLEASE NOTE THAT ANY APPLICATION SUBMITTED ON ANY VERSION OF THE PHS 398 OTHER THAN THE 10/88 or 9/86 REVISION WILL BE RETURNED WITHOUT REVIEW, AS WILL APPLICATIONS THAT EXCEED THE PAGE LIMITS SPECIFIED IN THE PHS 398 INSTRUCTIONS OR SUPPLEMENTAL INSTRUCTIONS PERTAINING TO A PARTICULAR PROGRAM.

It is important to submit legible copies of the application. The original pages of the PHS 398 form, printed in orange ink, should be used. However, if these pages are not reproducible by any copying machine available to your institution, you may substitute the draft pages of the form (which are in black ink) after deleting the words "Remove and Use for Draft Copy" in the margin. DO NOT SUBSTITUTE THE 5/82 VERSION OF THE PHS 398. An application will be considered incomplete and returned if the original and all copies are not legible.

PHS 398 MISCONDUCT IN SCIENCE ASSURANCE

P.T. 34; K.W. 0710030, 1014002

National Institutes of Health

Applicant organizations should note that an assurance related to misconduct in science has been added to the Public Health Service grant application form 398 (Rev. 10/88 and 9/86). This assurance is required under section 493 of the PHS Act as amended by P.L. 99-158, the "Health Research Extension Act". That statute requires the Department of Health and Human Services (DHHS) to issue regulations requiring applicant organizations to establish an administrative process for reviewing reports of scientific fraud and to report to the Secretary any investigation of alleged scientific fraud that appears substantial.

PHS published a notice of Proposed Rulemaking (NPRM) in September 1988, and hopes to publish a final rule in the near future. It would be appropriate for you to check "yes" if your institution has procedures in place now. However, applicants will not be required to provide this certification until the regulation becomes final. Future announcements in the GUIDE will note the date of the final regulations.

ELECTRONIC AVAILABILITY OF THE NIH GUIDE FOR GRANTS AND CONTRACTS

P.T. 04, 16, 22, 34, 42, 44; K.W. 1014002, 1004017

National Institutes of Health

The National Institutes of Health (NIH) proposes to make the NIH Guide for Grants and Contracts (Guide) available electronically via the computer communications network "BITNET". An electronic distribution system seems likely to make the publication more readily available to institutions and individual investigators and would eliminate the 1-3 week delay in receiving hard copies that are sent through the mail. It also would lay the groundwork for electronic searches and indexing systems.

The proposed electronic distribution system is the following. One designated person at each institution would be responsible for receiving the electronic version of the Guide and for distributing it or otherwise making it available to interested persons at that institution. The NIH would continue to mail hard copies of the Guide to individuals at that institution until we can ascertain that the electronic system of transmission is fully functional. It is intended that hard copy issues of the Guide will no longer be available after a reasonable transition period.

Prior to sending the Guide electronically to all institutions, the NIH intends to provide electronic access to a cross sectional sample of approximately fifty institutions in order to assess the feasibility of distributing the Guide electronically on a broader scope and to determine what changes should be made.

As part of this evaluation, the NIH welcomes input and ideas from individual investigators, as well as administrators and institutional officials. The following are considerations with respect to assessing the relative merits of hard copy versus electronic receipt of the Guide:

- o Your current access to the Guide
- o The amount of time required to receive the Guide by current mechanisms
- o Advantages or disadvantages experienced because of the electronic transmission of the Guide
- o Relative importance of quick access to information published in the Guide
- o Perceived improvements in electronic transmission of the Guide

In the near future, the NIH will send invitations to a sample of approximately fifty organizations, selected randomly from the following categories of organizations who currently receive research support through the NIH: institutions of high education who currently receive a small (fewer than 10), a medium (11 to 99), or a large (more than 100) number of research grants from the NIH; foundations, laboratories, etc.; independent hospitals; other health, environmental, and community organizations; and other organizations, including those for profit. These organizations will be invited to receive the Guide electronically and then to provide their views on the process as outlined above.

In addition, any other institution that wishes to receive the Guide electronically and/or participate in the evaluation and that has the BITNET service, should send the name and BITNET address of the person designated by that institution to receive and to distribute the Guide on its behalf. This information should be sent to:

Ms. Rebecca Duvall
Institutional Liaison Office
Building 31, Room 5B33
National Institutes of Health
Bethesda, Maryland 20892
Telephone: (301) 496-5366

Questions, comments, or evaluative information concerning electronic transmission of the Guide should be sent to Dr. M. Janet Newburgh, Institutional Liaison Officer, at the address given above.