

Department of Health and Human Services

Part 1. Overview Information

Participating Organization(s)	National Institutes of Health (NIH (http://www.nih.gov))
Components of Participating Organizations	National Cancer Institute (NCI (http://www.nci.nih.gov/))
Funding Opportunity Title	Improving Outcomes in Cancer Treatment-Related Cardiotoxicity (R21 Clinical Trial Optional)
Activity Code	R21 (//grants.nih.gov/grants/funding/ac_search_results.htm?text_curr=r21&Search.x=0&Search.y=0&Search_Type=Activity) Exploratory/Developmental Research Grant
Announcement Type	Reissue of PA-18-013 (https://grants.nih.gov/grants/guide/pa-files/pa-18-013.html)
Related Notices	None
Funding Opportunity Announcement (FOA) Number	PA-19-111
Companion Funding Opportunity	PA-19-112 (https://grants.nih.gov/grants/guide/pa-files/PA-19-112.html)
Number of Applications	See Section III. 3. Additional Information on Eligibility.
Catalog of Federal Domestic Assistance (CFDA) Number(s)	93.393; 93.837
Funding Opportunity Purpose	This Funding Opportunity Announcement (FOA) encourages collaborative applications that will contribute to the identification and characterization of patients at risk of developing cancer treatment-related cardiotoxicity. The primary intent is to mitigate cardiovascular dysfunction while optimizing cancer outcomes. To accomplish this, methods that evaluate cardiovascular risk prior to treatment and integrate evidence-based cancer treatment regimens with cardiovascular screening, diagnostic, and/or management

strategies are sought. Research applications should focus on mitigation/management of adverse effects associated with anti-cancer treatments including: cytotoxic chemotherapies, targeted agents, immunomodulatory therapies and radiation (that occur during cancer treatment and/or long-term survivorship) as defined by cardiac and/or vascular specific common terminology criteria for adverse events (CTCAE).

Key Dates

Posted Date	December 17, 2018
Open Date (Earliest Submission Date)	January 16, 2019
Letter of Intent Due Date(s)	Not Applicable
Application Due Date(s)	<p>Standard dates (//grants.nih.gov/grants/guide/url_redirect.htm?id=11111) apply, by 5:00 PM local time of applicant organization. All types of non-AIDS applications allowed for this funding opportunity announcement are due on these dates.</p> <p>Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.</p>
AIDS Application Due Date(s)	Not applicable
Scientific Merit Review	<p>Standard dates (//grants.nih.gov/grants/guide/url_redirect.htm?id=11113) (http://grants1.nih.gov/grants/funding/submissionschedule.htm#reviewandawa) apply</p>
Advisory Council Review	<p>Standard dates (//grants.nih.gov/grants/guide/url_redirect.htm?id=11113) (http://grants1.nih.gov/grants/funding/submissionschedule.htm#reviewandawa) apply</p>
Earliest Start Date	<p>Standard dates (//grants.nih.gov/grants/guide/url_redirect.htm?id=11113) apply</p>
Expiration Date	January 8, 2022

Due Dates for E.O. 12372

Not Applicable

Required Application Instructions

It is critical that applicants follow the Research (R) Instructions in the [SF424 \(R&R\) Application Guide](http://grants.nih.gov/grants/guide/url_redirect.htm?id=12000) ([//grants.nih.gov/grants/guide/url_redirect.htm?id=12000](http://grants.nih.gov/grants/guide/url_redirect.htm?id=12000)), except where instructed to do otherwise (in this FOA or in a Notice from the [NIH Guide for Grants and Contracts](http://grants.nih.gov/grants/guide/) ([//grants.nih.gov/grants/guide/](http://grants.nih.gov/grants/guide/))). Conformance to all requirements (both in the Application Guide and the FOA) is required and strictly enforced. Applicants must read and follow all application instructions in the Application Guide as well as any program-specific instructions noted in [Section IV](#). When the program-specific instructions deviate from those in the Application Guide, follow the program-specific instructions. **Applications that do not comply with these instructions may be delayed or not accepted for review.**

There are several options available to submit your application through Grants.gov to NIH and Department of Health and Human Services partners. You **must** use one of these submission options to access the application forms for this opportunity.

1. Use the NIH ASSIST system to prepare, submit and track your application online.

[Apply Online Using ASSIST](#)

2. Use an institutional system-to-system (S2S) solution to prepare and submit your application to Grants.gov and [eRA Commons](http://public.era.nih.gov/commons/) (<http://public.era.nih.gov/commons/>) to track your application. Check with your institutional officials regarding availability.
3. Use [Grants.gov](http://www.grants.gov/web/grants/applicants/download-application-package.html#search=true&oppNum=PA-19-111) (<http://www.grants.gov/web/grants/applicants/download-application-package.html#search=true&oppNum=PA-19-111>) Workspace to prepare and submit your application and [eRA Commons](http://public.era.nih.gov/commons/) (<http://public.era.nih.gov/commons/>) to track your application.

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Part 2. Full Text of Announcement

Section I. Funding Opportunity Description

Purpose

The purpose of this Funding Opportunity Announcement (FOA) is to stimulate collaborative applications that will contribute to the identification and characterization of patients at risk of developing cancer treatment-related cardiotoxicity with the primary intent to mitigate cardiovascular dysfunction while optimizing cancer outcomes. To accomplish this, methods are sought that evaluate cardiac and vascular risk prior to treatment and integrate evidence-based cancer treatment regimens with cardiovascular screening, diagnostic, and/or management strategies throughout the cancer continuum.

This FOA will utilize the Exploratory/Developmental Grant (R21) mechanism which supports investigation of novel scientific ideas or new model systems, tools or technologies that have the potential for significant impact on biomedical or biobehavioral research. An R21 application need not have extensive background material or preliminary information.

This FOA runs in parallel with an FOA of identical scientific scope, [PA-19-112](https://grants.nih.gov/grants/guide/pa-files/PA-19-112.html) (<https://grants.nih.gov/grants/guide/pa-files/PA-19-112.html>), which utilizes the Research Project Grant (R01) mechanism

Background

The 14 million pediatric and adult cancer survivors living in the United States clearly demonstrate continued improvements in anti-cancer treatment efficacy; however, this success has been tempered by a parallel rise in the incidence of cancer treatment-related toxicity, leading to morbidity and mortality. Cancer treatment-related cardiotoxicity can occur as a consequence of direct effects on cardiac myocytes (function or protective mechanisms) and may include damage to the vascular endothelium, hemodynamic flow alterations and thrombotic events. Cardiotoxicity can present acutely during cancer treatment, potentially limiting dose and reducing the effectiveness of cancer therapy, as well as months or decades after treatment, leading to accelerated treatment-induced cardiovascular disease and early mortality.

Cancer treatments associated with cardiovascular risk include cytotoxic chemotherapies, targeted agents, immunomodulatory therapies and radiation, all of which have different anti-tumor mechanisms and on- and off-target effects that subsequently influence the types of cardiovascular damage observed in patients with cancer. While mechanisms contributing to cardiotoxicity for selected agents have been proposed, few have been explored in the clinical setting that would result in more effective prediction, prevention, detection and management methods for cancer treatment-related cardiotoxicity during cancer treatment and survivorship care. The discovery and increasing use of molecularly targeted cancer therapies, multi-modality treatments, and multi-drug regimens for cancer treatment has widened this knowledge gap and changed the profile of cardiotoxicity in terms of timing and presentation. Current evidenced-based guidelines for preventing and controlling cancer treatment-related cardiotoxicity are broad, based primarily on anthracycline regimen experience and lack specific risk evaluation, prevention, monitoring, and management strategies for subgroups of patients treated with newer therapeutic modalities.

The patient population developing cancer treatment-related cardiovascular injury differs from those with primary cardiovascular dysfunction, underscoring the need for collaboration between oncologists, cardiologists and multidisciplinary team members to maximize cancer and cardiovascular outcomes. Given the heterogeneity among patients with respect to cardiotoxicity risk, timing of onset, clinical presentation, and outcome, the development and translation of individualized cardio-oncology risk stratification, prevention, monitoring, and management plans during cancer treatment and survivorship care is of utmost importance.

Specific Areas of Research Interest

Applications submitted to this FOA should focus on mitigation/management of cardiac and/or vascular adverse

events associated with anti-cancer treatments (e.g. cytotoxic chemotherapies, targeted agents, immunomodulatory therapies; radiation), including single, repeat and chronic dosing regimens, that occur during cancer treatment and/or throughout the cancer survivorship continuum.

This FOA encourages multidisciplinary collaboration among researchers to 1) develop models to test the efficacy of potential cardiotoxic and cardio-protective agents and therapy combinations; 2) differentiate and quantify characteristics associated with short- and long-term cardiotoxicity; 3) develop and test methods to identify early onset cardiovascular dysfunction; and 4) develop, test and evaluate existing and novel prevention, management and care coordination strategies for cardiotoxicity.

This FOA supports studies that aim to: 1) translate known and emerging clinical profiles, genetic profiles, and biologic mechanisms of cardiotoxicity pathogenesis into improvements in cardiotoxicity risk stratification, prevention and detection; 2) develop and test novel prevention strategies and improve upon known methods; 3) develop and translate therapeutic methodologies for the management of cancer treatment-related cardiotoxicity and 4) focus on understudied cancer populations and emerging treatments. Studies must include one or more translational aim.

Studies on all cardiac and vascular specific common terminology criteria for adverse events (CTCAE) are encouraged and collaboration between oncology and cardiology specialties is required on all applications. Studies solely focused on mechanisms underlying cancer treatment-related cardiotoxicity without a translational aim are not supported by this FOA.

Research topics of interest include, but are not limited to:

- What are the incidence and severity of cancer treatment-related cardiotoxicities (short- and long-term) and their progression among understudied populations and emerging treatments?
- How can we define and utilize available patient clinical, genetic and behavioral risk factors to quantify short- and long-term cardiotoxicity risk and influence management plans for cancer treatment?
- What are the most representative translational models to test the efficacy of potential cardio-protective agents and other drug combinations proposed to optimize cancer treatment and mitigate cardiovascular damage?
- How can we utilize therapeutic and behavioral interventions that do not interfere with the efficacy of cancer therapy but can mitigate or reverse cardiovascular damage?
- What are the optimal pharmacologic and non-pharmacologic approaches to prevent cancer treatment-related cardiotoxicity during cancer treatment and survivorship care, and what risk assessment strategies can best identify higher risk patient subgroups that are most likely to receive the greatest benefit from these approaches?
- How can we utilize known and novel genetic markers, pharmacogenomic profiles, biomarkers, imaging tools and other indices, including combinations of measures, to identify sub-clinical derangements, define cardio-oncology risk, monitor cardiovascular function and guide effective and safe management strategies?
- What are the best approaches to manage acute and delayed onset cardiotoxicity and which patient subgroups receive the greatest benefits? Do evidence-based guidelines for primary cardiovascular disease management provide equal benefit in cancer-treatment-related cardiotoxicity?
- How does early detection and management of cardiotoxicity impact cardiovascular and cancer short- and long-term outcomes?
- What forms of care coordination and communication methods among cardio-oncology multidisciplinary teams have the greatest potential to improve cancer and cardiovascular outcomes?

See [Section VIII. Other Information](#) for award authorities and regulations.

Section II. Award Information

Funding Instrument	Grant: A support mechanism providing money, property, or both to an eligible entity to carry out an approved project or activity.
Application Types Allowed	New Resubmission Revision The OER Glossary (//grants.nih.gov/grants/guide/url_redirect.htm?id=11116) and the SF424 (R&R) Application Guide provide details on these application types.
Clinical Trial?	Optional: Accepting applications that either propose or do not propose clinical trial(s) Need help determining whether you are doing a clinical trial? (https://grants.nih.gov/grants/guide/url_redirect.htm?id=82370)
Funds Available and Anticipated Number of Awards	The number of awards is contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.
Award Budget	The combined budget for direct costs for the two-year project period may not exceed \$275,000. No more than \$200,000 may be requested in a single year.
Award Project Period	The maximum project period is 2 years.

NIH grants policies as described in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11120\)](http://grants.nih.gov/grants/guide/url_redirect.htm?id=11120) will apply to the applications submitted and awards made from this FOA.

Section III. Eligibility Information

1. Eligible Applicants

Eligible Organizations

Higher Education Institutions

- Public/State Controlled Institutions of Higher Education
- Private Institutions of Higher Education

The following types of Higher Education Institutions are always encouraged to apply for NIH support as

Public or Private Institutions of Higher Education:

- Hispanic-serving Institutions
- Historically Black Colleges and Universities (HBCUs)
- Tribally Controlled Colleges and Universities (TCCUs)
- Alaska Native and Native Hawaiian Serving Institutions
- Asian American Native American Pacific Islander Serving Institutions (AANAPISIs)

Nonprofits Other Than Institutions of Higher Education

- Nonprofits with 501(c)(3) IRS Status (Other than Institutions of Higher Education)
- Nonprofits without 501(c)(3) IRS Status (Other than Institutions of Higher Education)

For-Profit Organizations

- Small Businesses
- For-Profit Organizations (Other than Small Businesses)

Governments

- State Governments
- County Governments
- City or Township Governments
- Special District Governments
- Indian/Native American Tribal Governments (Federally Recognized)
- Indian/Native American Tribal Governments (Other than Federally Recognized)
- Eligible Agencies of the Federal Government
- U.S. Territory or Possession

Other

- Independent School Districts
- Public Housing Authorities/Indian Housing Authorities
- Native American Tribal Organizations (other than Federally recognized tribal governments)
- Faith-based or Community-based Organizations
- Regional Organizations
- Non-domestic (non-U.S.) Entities (Foreign Institutions)

Foreign Institutions

Non-domestic (non-U.S.) Entities (Foreign Institutions) **are** eligible to apply.

Non-domestic (non-U.S.) components of U.S. Organizations **are** eligible to apply.

Foreign components, as [defined in the NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11118\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11118), **are** allowed.

Required Registrations**Applicant Organizations**

Applicant organizations must complete and maintain the following registrations as described in the SF 424 (R&R) Application Guide to be eligible to apply for or receive an award. All registrations must be completed prior to the application being submitted. Registration can take 6 weeks or more, so applicants should begin the registration process as soon as possible. The [NIH Policy on Late Submission of Grant Applications \(//grants.nih.gov/grants/guide/notice-files/NOT-OD-15-039.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-15-039.html) states that failure to complete registrations in advance of a due date is not a valid reason for a late submission.

- [Dun and Bradstreet Universal Numbering System \(DUNS\) \(http://fedgov.dnb.com/webform\)](http://fedgov.dnb.com/webform) - All registrations require that applicants be issued a DUNS number. After obtaining a DUNS number, applicants can begin both SAM and eRA Commons registrations. The same DUNS number must be used for all registrations, as well as on the grant application.
- [System for Award Management \(SAM\) \(https://www.sam.gov/portal/public/SAM/\)](https://www.sam.gov/portal/public/SAM/)– Applicants must complete and maintain an active registration, **which requires renewal at least annually**. The renewal process may require as much time as the initial registration. SAM registration includes the assignment of a Commercial and Government Entity (CAGE) Code for domestic organizations which have not already been assigned a CAGE Code.
 - [NATO Commercial and Government Entity \(NCAGE\) Code \(//grants.nih.gov/grants/guide/uri_redirect.htm?id=11176\)](https://grants.nih.gov/grants/guide/uri_redirect.htm?id=11176) – Foreign organizations must obtain an NCAGE code (in lieu of a CAGE code) in order to register in SAM.
- [eRA Commons \(//grants.nih.gov/grants/guide/uri_redirect.htm?id=11123\)](https://grants.nih.gov/grants/guide/uri_redirect.htm?id=11123) - Applicants must have an active DUNS number to register in eRA Commons. Organizations can register with the eRA Commons as they are working through their SAM or Grants.gov registration, but all registrations must be in place by time of submission. eRA Commons requires organizations to identify at least one Signing Official (SO) and at least one Program Director/Principal Investigator (PD/PI) account in order to submit an application.
- [Grants.gov \(//grants.nih.gov/grants/guide/uri_redirect.htm?id=82300\)](https://grants.nih.gov/grants/guide/uri_redirect.htm?id=82300) – Applicants must have an active DUNS number and SAM registration in order to complete the Grants.gov registration.

Program Directors/Principal Investigators (PD(s)/PI(s))

All PD(s)/PI(s) must have an eRA Commons account. PD(s)/PI(s) should work with their organizational officials to either create a new account or to affiliate their existing account with the applicant organization in eRA Commons. If the PD/PI is also the organizational Signing Official, they must have two distinct eRA Commons accounts, one for each role. Obtaining an eRA Commons account can take up to 2 weeks.

Eligible Individuals (Program Director/Principal Investigator)

Any individual(s) with the skills, knowledge, and resources necessary to carry out the proposed research as the Program Director(s)/Principal Investigator(s) (PD(s)/PI(s)) is invited to work with his/her organization to develop an application for support. Individuals from underrepresented racial and ethnic groups as well as individuals with disabilities are always encouraged to apply for NIH support.

For institutions/organizations proposing multiple PDs/PIs, visit the Multiple Program Director/Principal Investigator Policy and submission details in the Senior/Key Person Profile (Expanded) Component of the SF424 (R&R) Application Guide.

2. Cost Sharing

This FOA does not require cost sharing as defined in the [NIH Grants Policy Statement. \(//grants.nih.gov/grants/guide/uri_redirect.htm?id=11126\)](https://grants.nih.gov/grants/guide/uri_redirect.htm?id=11126)

3. Additional Information on Eligibility

Number of Applications

Applicant organizations may submit more than one application, provided that each application is scientifically distinct.

The NIH will not accept duplicate or highly overlapping applications under review at the same time. This means

that the NIH will not accept:

- A new (A0) application that is submitted before issuance of the summary statement from the review of an overlapping new (A0) or resubmission (A1) application.
- A resubmission (A1) application that is submitted before issuance of the summary statement from the review of the previous new (A0) application.
- An application that has substantial overlap with another application pending appeal of initial peer review (see [NOT-OD-11-101 \(//grants.nih.gov/grants/guide/notice-files/NOT-OD-11-101.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-11-101.html)).

Section IV. Application and Submission Information

1. Requesting an Application Package

The application forms package specific to this opportunity must be accessed through ASSIST, Grants.gov Workspace or an institutional system-to-system solution. Links to apply using ASSIST or Grants.gov Workspace are available in [Part 1](#) of this FOA. See your administrative office for instructions if you plan to use an institutional system-to-system solution.

2. Content and Form of Application Submission

It is critical that applicants follow the Research (R) Instructions in the [SF424 \(R&R\) Application Guide \(//grants.nih.gov/grants/guide/url_redirect.htm?id=12000\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=12000), except where instructed in this funding opportunity announcement to do otherwise. Conformance to the requirements in the Application Guide is required and strictly enforced. Applications that are out of compliance with these instructions may be delayed or not accepted for review.

Page Limitations

All page limitations described in the SF424 Application Guide and the [Table of Page Limits \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11133\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11133) must be followed.

Instructions for Application Submission

The following section supplements the instructions found in the SF424 (R&R) Application Guide and should be used for preparing an application to this FOA.

SF424(R&R) Cover

All instructions in the SF424 (R&R) Application Guide must be followed.

SF424(R&R) Project/Performance Site Locations

All instructions in the SF424 (R&R) Application Guide must be followed.

SF424(R&R) Other Project Information

All instructions in the SF424 (R&R) Application Guide must be followed.

SF424(R&R) Senior/Key Person Profile

All instructions in the SF424 (R&R) Application Guide must be followed.

R&R or Modular Budget

All instructions in the SF424 (R&R) Application Guide must be followed.

Travel: Applicants are required to include travel support for an investigator from their research team to attend scientific meetings in Bethesda, Maryland. Costs associated with travel to one meetings during the life of the grant should be included

R&R Subaward Budget

All instructions in the SF424 (R&R) Application Guide must be followed.

PHS 398 Cover Page Supplement

All instructions in the SF424 (R&R) Application Guide must be followed.

PHS 398 Research Plan

All instructions in the SF424 (R&R) Application Guide must be followed, with the following additional instructions:

Resource Sharing Plan: Individuals are required to comply with the instructions for the Resource Sharing Plans as provided in the SF424 (R&R) Application Guide, with the following modification:

- All applications, regardless of the amount of direct costs requested for any one year, should address a Data Sharing Plan.

Appendix:

Only limited Appendix materials are allowed. Follow all instructions for the Appendix as described in the SF424 (R&R) Application Guide.

PHS Human Subjects and Clinical Trials Information

When involving NIH-defined human subjects research, clinical research, and/or clinical trials (and when applicable, clinical trials research experience) follow all instructions for the PHS Human Subjects and Clinical Trials Information form in the SF424 (R&R) Application Guide, with the following additional instructions:

If you answered “Yes” to the question “Are Human Subjects Involved?” on the R&R Other Project Information form, you must include at least one human subjects study record using the **Study Record: PHS Human Subjects and Clinical Trials Information** form or **Delayed Onset Study** record.

Study Record: PHS Human Subjects and Clinical Trials Information

All instructions in the SF424 (R&R) Application Guide must be followed.

Delayed Onset Study

Note: [Delayed onset \(https://grants.nih.gov/grants/glossary.htm#DelayedOnsetHumanSubjectStudy\)](https://grants.nih.gov/grants/glossary.htm#DelayedOnsetHumanSubjectStudy) does NOT apply to a study that can be described but will not start immediately (i.e., delayed start).

All instructions in the SF424 (R&R) Application Guide must be followed.

PHS Assignment Request Form

All instructions in the SF424 (R&R) Application Guide must be followed.

Foreign Institutions

Foreign (non-U.S.) institutions must follow policies described in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/uri_redirect.htm?id=11137\)](https://grants.nih.gov/grants/guide/uri_redirect.htm?id=11137), and procedures for foreign institutions.

3. Unique Entity Identifier and System for Award Management (SAM)

See Part 1. Section III.1 for information regarding the requirement for obtaining a unique entity identifier and for completing and maintaining active registrations in System for Award Management (SAM), NATO Commercial and Government Entity (NCAGE) Code (if applicable), eRA Commons, and Grants.gov

4. Submission Dates and Times

[Part I. Overview Information](#) contains information about Key Dates and times. Applicants are encouraged to submit applications before the due date to ensure they have time to make any application corrections that might be necessary for successful submission. When a submission date falls on a weekend or [Federal holiday](#) (https://grants.nih.gov/grants/guide/url_redirect.htm?id=82380), the application deadline is automatically extended to the next business day.

Organizations must submit applications to [Grants.gov](#) (https://grants.nih.gov/grants/guide/url_redirect.htm?id=11128) (the online portal to find and apply for grants across all Federal agencies). Applicants must then complete the submission process by tracking the status of the application in the [eRA Commons](#) (https://grants.nih.gov/grants/guide/url_redirect.htm?id=11123), NIH's electronic system for grants administration. NIH and Grants.gov systems check the application against many of the application instructions upon submission. Errors must be corrected and a changed/corrected application must be submitted to Grants.gov on or before the application due date and time. If a Changed/Corrected application is submitted after the deadline, the application will be considered late. Applications that miss the due date and time are subjected to the NIH Policy on Late Application Submission.

Applicants are responsible for viewing their application before the due date in the eRA Commons to ensure accurate and successful submission.

Information on the submission process and a definition of on-time submission are provided in the SF424 (R&R) Application Guide.

5. Intergovernmental Review (E.O. 12372)

This initiative is not subject to [intergovernmental review](#). (https://grants.nih.gov/grants/guide/url_redirect.htm?id=11142)

6. Funding Restrictions

All NIH awards are subject to the terms and conditions, cost principles, and other considerations described in the [NIH Grants Policy Statement](#) (https://grants.nih.gov/grants/guide/url_redirect.htm?id=11120).

Pre-award costs are allowable only as described in the [NIH Grants Policy Statement](#) (https://grants.nih.gov/grants/guide/url_redirect.htm?id=11143).

7. Other Submission Requirements and Information

Applications must be submitted electronically following the instructions described in the SF424 (R&R) Application Guide. Paper applications will not be accepted.

Applicants must complete all required registrations before the application due date. [Section III. Eligibility Information](#) contains information about registration.

For assistance with your electronic application or for more information on the electronic submission process, visit [How to Apply – Application Guide](#) (<https://grants.nih.gov/grants/how-to-apply-application-guide.html>). If you encounter a system issue beyond your control that threatens your ability to complete the submission process on-time, you must follow the [Dealing with System Issues](#) (<https://grants.nih.gov/grants/how-to-apply-application-guide/due-dates-and-submission-policies/dealing-with-system-issues.htm>) guidance. For assistance with application submission, contact the Application Submission Contacts in [Section VII](#).

Important reminders:

All PD(s)/PI(s) must include their eRA Commons ID in the Credential field of the Senior/Key Person Profile Component of the SF424(R&R) Application Package. Failure to register in the Commons and to include a valid PD/PI Commons ID in the credential field will prevent the successful submission of an electronic application to NIH. See [Section III](#) of this FOA for information on registration requirements.

The applicant organization must ensure that the DUNS number it provides on the application is the same number used in the organization's profile in the eRA Commons and for the System for Award Management. Additional information may be found in the SF424 (R&R) Application Guide.

See [more tips \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11146\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11146) for avoiding common errors.

Upon receipt, applications will be evaluated for completeness and compliance with application instructions by the Center for Scientific Review, NIH. Applications that are incomplete or non-compliant will not be reviewed.

Post Submission Materials

Applicants are required to follow the instructions for post-submission materials, as described in [the policy \(//grants.nih.gov/grants/guide/url_redirect.htm?id=82299\)](#). Any instructions provided here are in addition to the instructions in the policy.

Section V. Application Review Information

1. Criteria

Only the review criteria described below will be considered in the review process.

Applications submitted to the NIH in support of the [NIH mission \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11149\)](#) are evaluated for scientific and technical merit through the NIH peer review system.

The R21 exploratory/developmental grant supports investigation of novel scientific ideas or new model systems, tools, or technologies that have the potential for significant impact on biomedical or biobehavioral research. An R21 grant application need not have extensive background material or preliminary information. Accordingly, reviewers will emphasize the conceptual framework, the level of innovation, and the potential to significantly advance our knowledge or understanding. Appropriate justification for the proposed work can be provided through literature citations, data from other sources, or, when available, from investigator-generated data. Preliminary data are not required for R21 applications; however, they may be included if available.

A proposed Clinical Trial application may include study design, methods, and intervention that are not by themselves innovative but address important questions or unmet needs. Additionally, the results of the clinical trial may indicate that further clinical development of the intervention is unwarranted or lead to new avenues of scientific investigation.

Overall Impact

Reviewers will provide an overall impact score to reflect their assessment of the likelihood for the project to exert a sustained, powerful influence on the research field(s) involved, in consideration of the following review criteria and additional review criteria (as applicable for the project proposed).

Scored Review Criteria

Reviewers will consider each of the review criteria below in the determination of scientific merit, and give a separate score for each. An application does not need to be strong in all categories to be judged likely to have major scientific impact. For example, a project that by its nature is not innovative may be essential to advance a field.

Significance

Does the project address an important problem or a critical barrier to progress in the field? Is the prior research that serves as the key support for the proposed project rigorous? If the aims of the project are achieved, how will scientific knowledge, technical capability, and/or clinical practice be improved? How will successful completion of the aims change the concepts, methods, technologies, treatments, services, or preventative interventions that drive this field?

In addition, for applications involving clinical trials

Are the scientific rationale and need for a clinical trial to test the proposed hypothesis or intervention well supported by preliminary data, clinical and/or preclinical studies, or information in the literature or knowledge of biological mechanisms? For trials focusing on clinical or public health endpoints, is this clinical trial necessary for testing the safety, efficacy or effectiveness of an intervention that could lead to a change in clinical practice, community behaviors or health care policy? For trials focusing on mechanistic, behavioral, physiological, biochemical, or other biomedical endpoints, is this trial needed to advance scientific understanding?

Investigator(s)

Are the PD(s)/PI(s), collaborators, and other researchers well suited to the project? If Early Stage Investigators or those in the early stages of independent careers, do they have appropriate experience and training? If established, have they demonstrated an ongoing record of accomplishments that have advanced their field(s)? If the project is collaborative or multi-PD/PI, do the investigators have complementary and integrated expertise; are their leadership approach, governance and organizational structure appropriate for the project?

In addition, for applications involving clinical trials

With regard to the proposed leadership for the project, do the PD/PI(s) and key personnel have the expertise, experience, and ability to organize, manage and implement the proposed clinical trial and meet milestones and timelines? Do they have appropriate expertise in study coordination, data management and statistics? For a multicenter trial, is the organizational structure appropriate and does the application identify a core of potential center investigators and staffing for a coordinating center?

Innovation

Does the application challenge and seek to shift current research or clinical practice paradigms by utilizing novel theoretical concepts, approaches or methodologies, instrumentation, or interventions? Are the concepts, approaches or methodologies, instrumentation, or interventions novel to one field of research or novel in a broad sense? Is a refinement, improvement, or new application of theoretical concepts, approaches or methodologies, instrumentation, or interventions proposed?

In addition, for applications involving clinical trials

Does the design/research plan include innovative elements, as appropriate, that enhance its sensitivity, potential for information or potential to advance scientific knowledge or clinical practice?

Approach

Are the overall strategy, methodology, and analyses well-reasoned and appropriate to accomplish the specific aims of the project? Have the investigators included plans to address weaknesses in the rigor of prior research that serves as the key support for the proposed project? Have the investigators presented

strategies to ensure a robust and unbiased approach, as appropriate for the work proposed? Are potential problems, alternative strategies, and benchmarks for success presented? If the project is in the early stages of development, will the strategy establish feasibility and will particularly risky aspects be managed? Have the investigators presented adequate plans to address relevant biological variables, such as sex, for studies in vertebrate animals or human subjects?

If the project involves human subjects and/or NIH-defined clinical research, are the plans to address

- 1) the protection of human subjects from research risks, and
- 2) inclusion (or exclusion) of individuals on the basis of sex/gender, race, and ethnicity, as well as the inclusion or exclusion of individuals of all ages (including children and older adults), justified in terms of the scientific goals and research strategy proposed?

In addition, for applications involving clinical trials

Does the application adequately address the following, if applicable

Study Design

Is the study design justified and appropriate to address primary and secondary outcome variable(s)/endpoints that will be clear, informative and relevant to the hypothesis being tested? Is the scientific rationale/premise of the study based on previously well-designed preclinical and/or clinical research? Given the methods used to assign participants and deliver interventions, is the study design adequately powered to answer the research question(s), test the proposed hypothesis/hypotheses, and provide interpretable results? Is the trial appropriately designed to conduct the research efficiently? Are the study populations (size, gender, age, demographic group), proposed intervention arms/dose, and duration of the trial, appropriate and well justified?

Are potential ethical issues adequately addressed? Is the process for obtaining informed consent or assent appropriate? Is the eligible population available? Are the plans for recruitment outreach, enrollment, retention, handling dropouts, missed visits, and losses to follow-up appropriate to ensure robust data collection? Are the planned recruitment timelines feasible and is the plan to monitor accrual adequate? Has the need for randomization (or not), masking (if appropriate), controls, and inclusion/exclusion criteria been addressed? Are differences addressed, if applicable, in the intervention effect due to sex/gender and race/ethnicity?

Are the plans to standardize, assure quality of, and monitor adherence to, the trial protocol and data collection or distribution guidelines appropriate? Is there a plan to obtain required study agent(s)? Does the application propose to use existing available resources, as applicable?

Data Management and Statistical Analysis

Are planned analyses and statistical approach appropriate for the proposed study design and methods used to assign participants and deliver interventions? Are the procedures for data management and quality control of data adequate at clinical site(s) or at center laboratories, as applicable? Have the methods for standardization of procedures for data management to assess the effect of the intervention and quality control been addressed? Is there a plan to complete data analysis within the proposed period of the award?

Environment

Will the scientific environment in which the work will be done contribute to the probability of success? Are the institutional support, equipment and other physical resources available to the investigators adequate for the project proposed? Will the project benefit from unique features of the scientific environment, subject populations, or collaborative arrangements?

In addition, for applications involving clinical trials

If proposed, are the administrative, data coordinating, enrollment and laboratory/testing centers, appropriate for the trial proposed?

Does the application adequately address the capability and ability to conduct the trial at the proposed site(s) or centers? Are the plans to add or drop enrollment centers, as needed, appropriate?

If international site(s) is/are proposed, does the application adequately address the complexity of executing the clinical trial?

If multi-sites/centers, is there evidence of the ability of the individual site or center to: (1) enroll the proposed numbers; (2) adhere to the protocol; (3) collect and transmit data in an accurate and timely fashion; and, (4) operate within the proposed organizational structure?

Additional Review Criteria

As applicable for the project proposed, reviewers will evaluate the following additional items while determining scientific and technical merit, and in providing an overall impact score, but will not give separate scores for these items.

Study Timeline

Specific to applications involving clinical trials

Is the study timeline described in detail, taking into account start-up activities, the anticipated rate of enrollment, and planned follow-up assessment? Is the projected timeline feasible and well justified? Does the project incorporate efficiencies and utilize existing resources (e.g., CTSA, practice-based research networks, electronic medical records, administrative database, or patient registries) to increase the efficiency of participant enrollment and data collection, as appropriate?

Are potential challenges and corresponding solutions discussed (e.g., strategies that can be implemented in the event of enrollment shortfalls)?

Protections for Human Subjects

For research that involves human subjects but does not involve one of the categories of research that are exempt under 45 CFR Part 46, the committee will evaluate the justification for involvement of human subjects and the proposed protections from research risk relating to their participation according to the following five review criteria: 1) risk to subjects, 2) adequacy of protection against risks, 3) potential benefits to the subjects and others, 4) importance of the knowledge to be gained, and 5) data and safety monitoring for clinical trials.

For research that involves human subjects and meets the criteria for one or more of the categories of research that are exempt under 45 CFR Part 46, the committee will evaluate: 1) the justification for the exemption, 2) human subjects involvement and characteristics, and 3) sources of materials. For additional information on review of the Human Subjects section, please refer to the [Guidelines for the Review of Human Subjects \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11175\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11175).

Inclusion of Women, Minorities, and Individuals Across the Lifespan

When the proposed project involves human subjects and/or NIH-defined clinical research, the committee will evaluate the proposed plans for the inclusion (or exclusion) of individuals on the basis of sex/gender, race, and ethnicity, as well as the inclusion (or exclusion) of individuals of all ages (including children and older adults) to determine if it is justified in terms of the scientific goals and research strategy proposed. For additional information on review of the Inclusion section, please refer to the [Guidelines for the Review of Inclusion in Clinical Research \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11174\)](https://grants.nih.gov/grants/guide/redirect.htm?id=11174).

Vertebrate Animals

The committee will evaluate the involvement of live vertebrate animals as part of the scientific assessment according to the following criteria: (1) description of proposed procedures involving animals, including species, strains, ages, sex, and total number to be used; (2) justifications for the use of animals versus alternative models and for the appropriateness of the species proposed; (3) interventions to minimize discomfort, distress, pain and injury; and (4) justification for euthanasia method if NOT consistent with the AVMA Guidelines for the Euthanasia of Animals. Reviewers will assess the use of chimpanzees as they would any other application proposing the use of vertebrate animals. For additional information on review of the Vertebrate Animals section, please refer to the [Worksheet for Review of the Vertebrate Animal Section \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11150\)](https://grants.nih.gov/grants/guide/redirect.htm?id=11150).

Biohazards

Reviewers will assess whether materials or procedures proposed are potentially hazardous to research personnel and/or the environment, and if needed, determine whether adequate protection is proposed.

Resubmissions

For Resubmissions, the committee will evaluate the application as now presented, taking into consideration the responses to comments from the previous scientific review group and changes made to the project.

Renewals

Not Applicable

Revisions

For Revisions, the committee will consider the appropriateness of the proposed expansion of the scope of the project. If the Revision application relates to a specific line of investigation presented in the original application that was not recommended for approval by the committee, then the committee will consider whether the responses to comments from the previous scientific review group are adequate and whether substantial changes are clearly evident.

Additional Review Considerations

As applicable for the project proposed, reviewers will consider each of the following items, but will not give scores for these items, and should not consider them in providing an overall impact score.

Applications from Foreign Organizations

Reviewers will assess whether the project presents special opportunities for furthering research programs through the use of unusual talent, resources, populations, or environmental conditions that exist in other countries and either are not readily available in the United States or augment existing U.S. resources.

Select Agent Research

Reviewers will assess the information provided in this section of the application, including 1) the Select

Agent(s) to be used in the proposed research, 2) the registration status of all entities where Select Agent(s) will be used, 3) the procedures that will be used to monitor possession use and transfer of Select Agent(s), and 4) plans for appropriate biosafety, biocontainment, and security of the Select Agent(s).

Resource Sharing Plans

Reviewers will comment on whether the following Resource Sharing Plans, or the rationale for not sharing the following types of resources, are reasonable: (1) [Data Sharing Plan \(//grants.nih.gov/grants/guide/redirect.htm?id=11151\)](https://grants.nih.gov/grants/guide/redirect.htm?id=11151); (2) [Sharing Model Organisms \(//grants.nih.gov/grants/guide/redirect.htm?id=11152\)](https://grants.nih.gov/grants/guide/redirect.htm?id=11152); and (3) [Genomic Data Sharing Plan \(GDS\) \(//grants.nih.gov/grants/guide/redirect.htm?id=11153\)](https://grants.nih.gov/grants/guide/redirect.htm?id=11153).

Authentication of Key Biological and/or Chemical Resources:

For projects involving key biological and/or chemical resources, reviewers will comment on the brief plans proposed for identifying and ensuring the validity of those resources.

Budget and Period of Support

Reviewers will consider whether the budget and the requested period of support are fully justified and reasonable in relation to the proposed research.

2. Review and Selection Process

Applications will be evaluated for scientific and technical merit by (an) appropriate Scientific Review Group(s) convened by Center for Scientific Review, in accordance with [NIH peer review policy and procedures \(//grants.nih.gov/grants/guide/redirect.htm?id=11154\)](https://grants.nih.gov/grants/guide/redirect.htm?id=11154), using the stated [review criteria](#). Assignment to a Scientific Review Group will be shown in the eRA Commons.

As part of the scientific peer review, all applications:

- May undergo a selection process in which only those applications deemed to have the highest scientific and technical merit (generally the top half of applications under review) will be discussed and assigned an overall impact score.
- Will receive a written critique.

Applications will be assigned on the basis of established PHS referral guidelines to the appropriate NIH Institute or Center. Applications will compete for available funds with all other recommended applications submitted to this FOA. Following initial peer review, recommended applications will receive a second level of review by the appropriate national Advisory Council or Board. The following will be considered in making funding decisions:

- Scientific and technical merit of the proposed project as determined by scientific peer review.
- Availability of funds.
- Relevance of the proposed project to program priorities.

3. Anticipated Announcement and Award Dates

After the peer review of the application is completed, the PD/PI will be able to access his or her Summary Statement (written critique) via the [eRA Commons \(//grants.nih.gov/grants/guide/redirect.htm?id=11123\)](https://grants.nih.gov/grants/guide/redirect.htm?id=11123). Refer to Part 1 for dates for peer review, advisory council review, and earliest start date.

Information regarding the disposition of applications is available in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/redirect.htm?id=11156\)](https://grants.nih.gov/grants/guide/redirect.htm?id=11156).

Section VI. Award Administration Information

1. Award Notices

If the application is under consideration for funding, NIH will request "just-in-time" information from the applicant as described in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11157\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11157).

A formal notification in the form of a Notice of Award (NoA) will be provided to the applicant organization for successful applications. The NoA signed by the grants management officer is the authorizing document and will be sent via email to the grantee's business official.

Awardees must comply with any funding restrictions described in [Section IV.5. Funding Restrictions](#). Selection of an application for award is not an authorization to begin performance. Any costs incurred before receipt of the NoA are at the recipient's risk. These costs may be reimbursed only to the extent considered allowable pre-award costs.

Any application awarded in response to this FOA will be subject to terms and conditions found on the [Award Conditions and Information for NIH Grants \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11158\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11158) website. This includes any recent legislation and policy applicable to awards that is highlighted on this website.

Individual awards are based on the application submitted to, and as approved by, the NIH and are subject to the IC-specific terms and conditions identified in the NoA.

ClinicalTrials.gov: If an award provides for one or more clinical trials. By law (Title VIII, Section 801 of Public Law 110-85), the "responsible party" must register and submit results information for certain "applicable clinical trials" on the ClinicalTrials.gov Protocol Registration and Results System Information Website (<https://register.clinicaltrials.gov>). NIH expects registration of all trials whether required under the law or not. For more information, see http://grants.nih.gov/ClinicalTrials_fdaaa/

Institutional Review Board or Independent Ethics Committee Approval: Grantee institutions must ensure that the application as well as all protocols are reviewed by their IRB or IEC. To help ensure the safety of participants enrolled in NIH-funded studies, the awardee must provide NIH copies of documents related to all major changes in the status of ongoing protocols. Data and Safety Monitoring Requirements: The NIH policy for data and safety monitoring requires oversight and monitoring of all NIH-conducted or -supported human biomedical and behavioral intervention studies (clinical trials) to ensure the safety of participants and the validity and integrity of the data. Further information concerning these requirements is found at http://grants.nih.gov/grants/policy/hs/data_safety.htm and in the application instructions (SF424 (R&R) and PHS 398).

Investigational New Drug or Investigational Device Exemption Requirements: Consistent with federal regulations, clinical research projects involving the use of investigational therapeutics, vaccines, or other medical interventions (including licensed products and devices for a purpose other than that for which they were licensed) in humans under a research protocol must be performed under a Food and Drug Administration (FDA) investigational new drug (IND) or investigational device exemption (IDE).

2. Administrative and National Policy Requirements

All NIH grant and cooperative agreement awards include the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11120\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11120) as part of the NoA. For these terms of award, see the [NIH Grants Policy Statement Part II: Terms and Conditions of NIH Grant Awards, Subpart A: General \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11157\)](#) and [Part II: Terms and Conditions of NIH Grant](#)

[Awards, Subpart B: Terms and Conditions for Specific Types of Grants, Grantees, and Activities](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11159) ([//grants.nih.gov/grants/guide/url_redirect.htm?id=11159](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11159)). More information is provided at [Award Conditions and Information for NIH Grants](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11158) ([//grants.nih.gov/grants/guide/url_redirect.htm?id=11158](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11158)).

Recipients of federal financial assistance (FFA) from HHS must administer their programs in compliance with federal civil rights law. This means that recipients of HHS funds must ensure equal access to their programs without regard to a person's race, color, national origin, disability, age and, in some circumstances, sex and religion. This includes ensuring your programs are accessible to persons with limited English proficiency. HHS recognizes that research projects are often limited in scope for many reasons that are nondiscriminatory, such as the principal investigator's scientific interest, funding limitations, recruitment requirements, and other considerations. Thus, criteria in research protocols that target or exclude certain populations are warranted where nondiscriminatory justifications establish that such criteria are appropriate with respect to the health or safety of the subjects, the scientific study design, or the purpose of the research.

For additional guidance regarding how the provisions apply to NIH grant programs, please contact the Scientific/Research Contact that is identified in Section VII under Agency Contacts of this FOA. HHS provides general guidance to recipients of FFA on meeting their legal obligation to take reasonable steps to provide meaningful access to their programs by persons with limited English proficiency. Please see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/index.html> (<https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/index.html>). The HHS Office for Civil Rights also provides guidance on complying with civil rights laws enforced by HHS. Please see <https://www.hhs.gov/civil-rights/for-individuals/section-1557/index.html> (<https://www.hhs.gov/civil-rights/for-individuals/section-1557/index.html>); and <https://www.hhs.gov/civil-rights/for-providers/laws-regulations-guidance/index.html> (<https://www.hhs.gov/civil-rights/for-providers/laws-regulations-guidance/index.html>).

Recipients of FFA also have specific legal obligations for serving qualified individuals with disabilities. Please see <https://www.hhs.gov/civil-rights/for-individuals/disability/index.html> (<https://www.hhs.gov/civil-rights/for-individuals/disability/index.html>). Please contact the HHS Office for Civil Rights for more information about obligations and prohibitions under federal civil rights laws at <https://www.hhs.gov/ocr/about-us/contact-us/index.html> (<https://www.hhs.gov/ocr/about-us/contact-us/index.html>) or call 1-800-368-1019 or TDD 1-800-537-7697. Also note it is an HHS Departmental goal to ensure access to quality, culturally competent care, including long-term services and supports, for vulnerable populations. For further guidance on providing culturally and linguistically appropriate services, recipients should review the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care at <http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53> (<http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>).

In accordance with the statutory provisions contained in Section 872 of the Duncan Hunter National Defense Authorization Act of Fiscal Year 2009 (Public Law 110-417), NIH awards will be subject to the Federal Awardee Performance and Integrity Information System (FAPIIS) requirements. FAPIIS requires Federal award making officials to review and consider information about an applicant in the designated integrity and performance system (currently FAPIIS) prior to making an award. An applicant, at its option, may review information in the designated integrity and performance systems accessible through FAPIIS and comment on any information about itself that a Federal agency previously entered and is currently in FAPIIS. The Federal awarding agency will consider any comments by the applicant, in addition to other information in FAPIIS, in making a judgement about the applicant's integrity, business ethics, and record of performance under Federal awards when completing the review of risk posed by applicants as described in 45 CFR Part 75.205 "Federal awarding agency review of risk posed by applicants." This provision will apply to all NIH grants and cooperative

agreements except fellowships.

Cooperative Agreement Terms and Conditions of Award

Not Applicable

3. Reporting

When multiple years are involved, awardees will be required to submit the [Research Performance Progress Report \(RPPR\) \(//grants.nih.gov/grants/rppr/index.htm\)](https://grants.nih.gov/grants/rppr/index.htm) annually and financial statements as required in the [NIH Grants Policy Statement. \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11161\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11161)

A final RPPR, invention statement, and the expenditure data portion of the Federal Financial Report are required for closeout of an award, as described in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11161\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11161).

The Federal Funding Accountability and Transparency Act of 2006 (Transparency Act), includes a requirement for awardees of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards issued in FY2011 or later. All awardees of applicable NIH grants and cooperative agreements are required to report to the Federal Subaward Reporting System (FSRS) available at [www.fsrs.gov \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11170\)](http://www.fsrs.gov) on all subawards over \$25,000. See the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.htm?id=11171\)](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11171) for additional information on this reporting requirement.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts from all Federal awarding agencies with a cumulative total value greater than \$10,000,000 for any period of time during the period of performance of a Federal award, must report and maintain the currency of information reported in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently FAPIIS). This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available. Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75 – Award Term and Conditions for Recipient Integrity and Performance Matters.

Section VII. Agency Contacts

We encourage inquiries concerning this funding opportunity and welcome the opportunity to answer questions from potential applicants.

Application Submission Contacts

eRA Service Desk (Questions regarding ASSIST, eRA Commons, application errors and warnings, documenting system problems that threaten submission by the due date, and post-submission issues)

Finding Help Online: <http://grants.nih.gov/support/> (preferred method of contact)

Telephone: 301-402-7469 or 866-504-9552 (Toll Free)

General Grants Information (Questions regarding application instructions, application processes, and NIH grant resources)

Email: GrantsInfo@nih.gov (<mailto:GrantsInfo@nih.gov>) (preferred method of contact)

Telephone: 301-945-7573

Grants.gov Customer Support (Questions regarding Grants.gov registration and Workspace)

Contact Center Telephone: 800-518-4726

Email: support@grants.gov (<mailto:support@grants.gov>)

Scientific/Research Contact(s)

Nonniekaye Shelburne, MS, CRNP, AOCN

National Cancer Institute (NCI)

Telephone: 240-276-6897

Email: nshelburne@mail.nih.gov (<mailto:nshelburne@mail.nih.gov>)

Peer Review Contact(s)

Examine your eRA Commons account for review assignment and contact information (information appears two weeks after the submission due date).

Financial/Grants Management Contact(s)

Carol Perry

National Cancer Institute (NCI)

Telephone: 240-276-6282

Email: perryrc@mail.nih.gov (<mailto:perryrc@mail.nih.gov>)

Section VIII. Other Information

Recently issued trans-NIH [policy notices](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11163) ([//grants.nih.gov/grants/guide/url_redirect.htm?id=11163](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11163)) may affect your application submission. A full list of policy notices published by NIH is provided in the [NIH Guide for Grants and Contracts](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11164) ([//grants.nih.gov/grants/guide/url_redirect.htm?id=11164](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11164)). All awards are subject to the terms and conditions, cost principles, and other considerations described in the [NIH Grants Policy Statement](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11120) ([//grants.nih.gov/grants/guide/url_redirect.htm?id=11120](https://grants.nih.gov/grants/guide/url_redirect.htm?id=11120)).

Authority and Regulations

Awards are made under the authorization of Sections 301 and 405 of the Public Health Service Act as amended (42 USC 241 and 284) and under Federal Regulations 42 CFR Part 52 and 45 CFR Part 75.

[Weekly TOC for this Announcement](https://grants.nih.gov/grants/guide/WeeklyIndex.cfm?12-21-18) ([/grants/guide/WeeklyIndex.cfm?12-21-18](https://grants.nih.gov/grants/guide/WeeklyIndex.cfm?12-21-18))

[NIH Funding Opportunities and Notices](https://grants.nih.gov/grants/guide/index.html) ([/grants/guide/index.html](https://grants.nih.gov/grants/guide/index.html))



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