

Fiscal Year 2000 (FY00)

Department of Defense (DOD) Defense Health Research Program (DHRP)

The Defense Appropriations Act of 2000 (Public Law 106-79) provides \$25 million to support peer-reviewed research on military-relevant, health-related topics. As the executive agent for the DHRP, the U.S. Army Medical Research and Materiel Command (USAMRMC) has assigned this program to the DOD's Office of Congressionally Directed Medical Research Programs (CDMRP). The DHRP was established to provide support for military health-related research and all proposals should address the relevance of the proposed topic to the military.

Proposals are being solicited from agencies of local, state, and federal governments; educational institutions; nonprofit organizations; and private industry on the following topics:

- Acute Lung Injury Research,
- Advanced Soft Tissue Modeling,
- Alcohol Abuse Prevention Research,
- Defense and Veterans Head Injury Program,
- Dengue Fever Vaccine Research,
- Childhood Asthma,
- Diabetes,
- Digital Mammography Imaging,
- Gulf War Illnesses,
- Paget's Disease,
- Retinal Display Technology,
- Smoking Cessation,
- Stem Cell Research¹,
- Volumetrically Controlled Manufacturing,
- Military Relevant Disease Management,
- Laser Eye Injury/Eye Cancer Research and Treatment,
- Healthcare Information Protection, and
- Sleep Management.

¹Applicants submitting proposals involving stem cell research are required to adhere to all laws, regulations, and guidelines. At a minimum, adherence to the guidelines contained in the following sources is required: <http://www.nih.gov/news/stemcell/draftguidelines.htm> and <http://www.nih.gov/news/stemcell/factsheet.htm>.

Proposals will be assessed for how they complement existing DOD healthcare research. To help identify specific research areas of particular interest to the DOD within each research topic listed above, investigators are encouraged to review ongoing solicitations described in the following web sites:

<http://www-usamraa.army.mil>,
<http://www.onr.navy.mil>,
<http://www-nehc.med.navy.mil>,
<http://www.nhrc.navy.mil>,
<http://www.afrl.af.mil>,
<http://www.brooks.af.mil>,
<http://www.va.gov/resdev>, and
<http://www.acq.osd.mil>.

However, the potential areas of research identified through these web sites are not limiting or binding to this DHRP program nor the DHRP funding opportunity decisions. Additionally, investigators are expected to survey the peer-reviewed literature to support their proposals to avoid duplication of previously described research efforts, to include those previously supported by the DOD and/or its investigators. An additional source of previously accomplished research supported by the DOD can be found at the Defense Technical Information Center web site at <http://www.dtic.mil>. Applicants are encouraged to collaborate with federal agencies (military treatment facilities and research laboratories, Department of Veterans Affairs, Centers for Disease Control, etc.).

FY00 individual awards will normally be limited to a total of \$2 million inclusive of direct and indirect costs, with a maximum period of performance of four (4) years. The FY99 DHRP awards averaged \$1.1M and ranged from \$210K to \$2.8M. Reasonableness of budget for the proposed research is a component of the peer review evaluation process.

1. Proposal Submission Requirements

Proposals will be prepared according to Amendment 0002 to Broad Agency Announcement (BAA) 99-1 effective 19 May 2000 and using the procedures described in BAA 99-1 dated December 1998 (available at <http://www-usamraa.army.mil>). The proposal must be written in English. The body of the proposal is to be no longer than 20 pages, with no less than .5 inch margins on 8.5 x 11-inch paper. Type density is to be no more than 15 characters per inch (12 point, 10 pitch). Pages are to be printed on one side only. Submission of color figures, tables, graphs or photographs is not recommended. All other requirements for proposal preparation are listed in BAA 99-1.

1.a. Proposal Abstracts

The abstracts are vitally important to the review of the proposal. Both a 1-page structured, technical abstract and a 1-page public (non-technical) abstract are required. Each proposal abstract page should contain the title of the proposal and the name of the investigator. Do not include figures in either abstract. Programmatic evaluation includes the review of these two

abstracts as part of the peer review summary statements; therefore, it is paramount that the investigators submit abstracts that fully describe the proposed work. Abstracts of all funded proposals will be reproduced in an abstract book and posted on the CDMRP web site at <http://cdmrp.army.mil>. Thus, proprietary information should not be included in the abstract. This request for abstracts supercedes the BAA instructions on pre-proposals.

1.a.i. Structured, Technical Abstract – Start on a new page – 1-page limit

Please use the outline below for preparing the structured, technical abstract.

1. **Background** – Provide a brief statement of the ideas and reasoning behind the proposed work.
2. **Objective/hypothesis** – State the objective/hypothesis to be tested. Provide evidence or rationale that supports the objective/hypothesis.
3. **Specific Aims** – State concisely the specific aims of the study.
4. **Study Design** – Briefly describe the study design.
5. **Relevance** – Provide a brief statement explaining the potential relevance of the proposed work to the military health issues in the specific topic area being addressed. For example, how the study will prevent or improve the detection or treatment of the disease.

1.a.ii. Public Abstract – Start on a new page – 1-page limit

The public abstract is intended to communicate the purpose of and rationale for the study to the nonscientific community. It should be composed in a way to make the scientific objectives of and rationale for the proposal understandable to nonscientifically trained readers.

1.a.iii. Abstract Submission Requirements

In addition to the abstract pages contained within the proposal, submit two additional copies of each abstract in a manila clasp envelope, along with a 3½" computer disk containing the abstract files (clearly labeled with the name of the principal investigator, institution, and word processing program). Submit abstracts in Word, WordPerfect, or ASCII format. These additional copies of each abstract 3½" computer disk are to be submitted with the full proposal packet.

2. Letter of Intent

Letters of Intent (LOI) are desirable, should not exceed one page, and should include the selected principal investigator (PI), institutional affiliation, address of PI, phone and FAX numbers, collaborators and addresses, topic area, and objective of the research. LOI will be used to initiate CDMRP efforts to prepare for the review process. There will be no response to the LOI. LOI are due 26 July 2000 via fax at 703-834-1160 or on-line at <http://www.peerreviewer.org/cdmrp01/>. This request for LOI supercedes the BAA instructions on pre-proposals.

3. Proposal Cover Booklet

Complete proposals must be submitted with a completed Proposal Cover Booklet. These booklets with instructions are available from CDMRP office and can be requested via phone, fax or email.

Phone: 301-619-7079

Fax: 301-619-7792

Email: cdmrp.pa@det.amedd.army.mil

Please allow sufficient time for delivery of these Proposal Cover Booklet materials to you by regular mail.

4. Proposal Receipt Deadline and Procedures

Complete proposals are due no later than 23 August 2000 at 4:00 p.m., Eastern Time.

Clearly mark all proposals as "Defense Health Research Program." The original proposal plus 30 copies of the proposal, and the original Proposal Cover Booklet plus 3 copies of the Proposal Cover Booklet are required. Mail, send by courier, or hand deliver to the following address:

U.S. Army Medical Research Acquisition Activity (USAMRAA)
ATTN: MCMR-AAA (DHRP-00)
820 Chandler Street
Fort Detrick, MD 21702-5014

Any proposal received by USAMRAA after the exact time and date specified for receipt will not be considered unless it is received before FY00 award negotiations have been completed and:

1. It was sent by mail, and it is determined by the Government that late receipt was due solely to mishandling by the Government after receipt at the Government installation, or
2. It was sent by U.S. Postal Service Express Mail Next Day Delivery to Addressee (do not use Second Day Delivery) and postmarked no later than 8:00 p.m. (local time at point of origination) the day before the proposal receipt deadline, or
3. It was placed into the control of a commercial courier service no later than 8:00 p.m. (local time at point of origination) the day before the proposal receipt deadline for delivery by 4:00 p.m. Eastern Time on the due date, or
4. The Government, in its sole discretion, decides to accept the late proposal if it determines that no competitive advantage has been conferred and that the integrity of the competitive grant process will not be compromised.

Investigators are advised that documentation of the time of receipt by the delivery agent may be necessary if a problem should occur.

5. Proposal Evaluation and Selection

Evaluation and selection criteria are described in Amendment 0002 to BAA 99-1 (19 May 2000). Briefly, awards will be made based the recommendations of a two-tiered review process. First-tier review (peer review for scientific merit) criteria include research strategy and objectives,

impact, principal investigator and key personnel qualifications, facilities, and budget. Second-tier review (programmatic review) criteria include peer review recommendations, program priorities, and portfolio balance. For this solicitation, factors included in program priorities are (1) Congressional guidance; (2) impact on military mission and relevance to the health of the force and/or beneficiaries; (3) impact on DOD priorities; (4) Veterans Affairs priorities; and (5) collaborations with federal researchers.

6. Proposal Compliance

Noncompliance to these guidelines may be perceived as an attempt to gain an unfair advantage and may therefore result in proposal rejection. Administrative reasons for rejection of all or part of proposals most frequently result from failure to adhere to timelines, page limits, and font requirements.

Inquiries may be made to Craig D. Lebo, Contracting Officer by phone at 301-619-2036 or e-mail at craig.lebo@amedd.army.mil.