

Program Announcement

for the

Department of Defense

Defense Health Program

Congressionally Directed Medical Research Programs

Gulf War Illness Research Program

Treatment Evaluation Award

Funding Opportunity Number: W81XWH-16-GWIRP-TEA

**Catalog of Federal Domestic Assistance Number: 12.420 Military Medical
Research and Development**

SUBMISSION AND REVIEW DATES AND TIMES

- **Pre-Application Submission Deadline:** 5:00 p.m. Eastern time (ET), July 15, 2016
- **Invitation to Submit an Application:** August 2016
- **Application Submission Deadline:** 11:59 p.m. ET, October 20, 2016
- **End of Application Verification Period:** 5:00 p.m. ET, October 25, 2016
- **Peer Review:** December 2016
- **Programmatic Review:** February 2017

This Program Announcement/Funding Opportunity is one of two documents with instructions to prepare and submit an application for this funding opportunity. The second document, the General Application Instructions, is available for downloading from Grants.gov.

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I. FUNDING OPPORTUNITY DESCRIPTION

A. Program Description

Applications to the Fiscal Year 2016 (FY16) Gulf War Illness Research Program (GWIRP) are being solicited for the Defense Health Agency, Research, Development, and Acquisition (DHA RDA) Directorate, by the U.S. Army Medical Research Acquisition Activity (USAMRAA). As directed by the Office of the Assistant Secretary of Defense for Health Affairs (OASD[HA]), the DHA RDA Directorate manages the Defense Health Program (DHP) Research, Development, Test, and Evaluation (RDT&E) appropriation. The managing agent for this Program Announcement/Funding Opportunity is the Congressionally Directed Medical Research Programs (CDMRP). The GWIRP was initiated in 2006 to provide support for research of exceptional scientific merit for studying the effects of deployment in the 1990-1991 Persian Gulf War on U.S. Warfighters. Appropriations for the GWIRP from FY06 through FY15 totaled \$109 million (M). The FY16 appropriation is \$20M.

The GWIRP challenges the scientific community to design high-impact research that will improve the health and lives of Veterans who have Gulf War illness (GWI). GWI is characterized by multiple diverse symptoms that typically include widespread pain, cognitive difficulties, debilitating fatigue, gastrointestinal problems, respiratory symptoms, chronic headache, sleep problems, and other abnormalities that are not explained by established medical diagnoses or standard laboratory tests.

The population of Veterans affected by GWI is a subset of the nearly 700,000 who served during the Gulf War. Specifically, these Gulf War Veterans were deployed to the theatre of operations in Southwest Asia, including Iraq, Kuwait, and Saudi Arabia. Studies indicate that approximately 25% to 33% (or 175,000 to 210,000) of Gulf War Veterans continue to experience symptoms associated with their deployment as described above.

The GWIRP focuses on innovative projects that have the potential to make a significant impact on finding treatments for GWI. While such projects may include identification of objective indicators of pathology that distinguish ill from healthy Gulf War Veterans or studies to understand the underlying pathobiology of GWI, projects should exhibit clear translational potential that leads to treatments for Veterans with GWI. Beginning in FY15, the GWIRP has included an additional focus on patterns of health and disease in Gulf War Veterans that is supported by the Gulf War Illness Epidemiology Research Award (GWIERA). For information about the GWIERA (Funding Opportunity Number: W81XWH-16-GWIRP-GWIERA), see <http://cdmrp.army.mil/funding/gwirp>.

B. Award Information

The Treatment Evaluation Award is being offered for the first time in FY16; however, this mechanism is derived from the previously offered FY08-FY15 GWIRP Innovative Therapeutic Evaluation Award (ITEA).

Impact: The Treatment Evaluation Award supports evaluation of a treatment or intervention in early phase or pilot clinical trials (Phase 0, I, or I/II) with the potential to have a significant impact on the health and lives of Veterans with GWI. Health outcomes of interest should

include improvements in overall functional status or in symptom complexes (e.g., cognitive function, musculoskeletal/pain symptoms, gastrointestinal symptoms, fatigue, respiratory problems, skin abnormalities, sleep difficulties and others) individually and/or as they may interact with each other. The results of preliminary studies funded by this award should have the potential to provide clinical proof-of-principle data and support future development of broader efficacy studies of the proposed interventions.

Scope of Research Rationale: Interventions proposed under this award mechanism may be at different stages of research development. The applicant should select one of two tracks, described below, depending on the level and type of GWI-relevant evidence available to support the proposed intervention. It is the responsibility of the Principal Investigator (PI) to select the track that is most appropriate for the intervention proposed. The two tracks are described below:

- **Data-Based Treatment Track:** This track is intended for therapeutic approaches supported by significant preliminary data in GWI models or based on biological alterations identified in Veterans with GWI. The Data-Based Treatment Track may also include trials intended to replicate or expand prior pilot trials in GWI. **Preliminary data to support the proposed treatment for GWI is required.** Treatment approaches may include pharmacologic or other physiological interventions, including conventional, alternative, or complementary (combination of alternative and conventional) approaches.
- **Symptom-Based Treatment Track:** This track is intended for innovative approaches to treat GWI that may have been utilized for other illnesses, but have not yet been studied in Veterans with GWI. For example, a pharmacological treatment or nutritional supplement suggested by previous research to be beneficial for fibromyalgia or chronic fatigue syndrome that could be evaluated in Veterans with GWI. Given the emphasis on innovation, applications are **not required to include preliminary data.** However, the applicant must present a sound scientific rationale established through logical reasoning and critical review and analysis of the literature explaining how the proposed therapeutic approach would be expected to be effective in treating GWI. The rationale should preferably be supported by peer-reviewed medical literature; however, other objective sources and alternative reasoning approaches will be considered.

The following are important aspects for submission to the Treatment Evaluation Award:

- The proposed clinical trial is expected to begin no later than 6 months after the award date. The 6 months includes the time required for all regulatory review and approval processes.
- The application should include a clearly articulated statistical analysis plan appropriate to the phase of the clinical trial, a power analysis reflecting sample size projections that will clearly answer the objectives of the study, and appropriate statistical expertise.
- The application must demonstrate documented availability and accessibility of the drug/compound, device, and/or other materials needed, e.g., a letter from the manufacturer assuring an adequate supply of the agent (and placebo, if necessary). The quality of the product should be commensurate with U.S. Food and Drug Administration (FDA) manufacturing standards applicable to the type and phase of

product being developed (i.e., Quality System Regulation, Good Manufacturing Practices [GMP]).

- Demonstration that the applicant has experience interacting with the FDA to include previous FDA submissions, etc. is encouraged.
- PIs must demonstrate availability of and access to a suitable Gulf War Veteran population that will support a meaningful outcome for the study. PIs are encouraged to collaborate with an investigator who has demonstrated access to a population of Gulf War Veterans, particularly investigators within the U.S. Department of Veterans Affairs (VA). PIs should consider collaboration with one of the VA War Related Illness and Injury Study Centers <http://www.warrelatedillness.va.gov/WARRELATEDILLNESS/index.asp>.
- The application must include, as appropriate, a study coordinator(s) who will guide the clinical protocol through the local Institutional Review Board (IRB) of record and other regulatory approval processes, coordinate activities from all sites participating in the clinical trial, and coordinate participant accrual.
- The application should include a transition plan (including potential funding and resources) showing how the anticipated product will progress to the next clinical trial phase and/or delivery to Veterans suffering from GWI after the successful completion of the FY16 GWIRP Treatment Evaluation Award.
- The application should clearly demonstrate strong institutional support and commitment.
- The proposed clinical trial design should include clearly defined and appropriate endpoints, and follow Good Clinical Practice (GCP) guidelines.
- The application should include a clearly articulated clinical monitoring plan, outlining how the study will be monitored for GCP compliance.
- The application should include a clearly articulated data management plan and use of an appropriate database to safeguard and maintain the integrity of the data.
- The application should include a clearly articulated safety management plan, outlining how safety pharmacovigilance will be conducted as applicable.
- The application should acknowledge commitment to filing the study in the National Institutes of Health (NIH) clinical trials registry, <http://www.clinicaltrials.gov>.

Applications Involving Industry: Applications involving the biotechnology/pharmaceutical industry are encouraged. Biotechnology or pharmaceutical companies that apply for the Treatment Evaluation Award, as an individual applicant or as part of a collaboration, are encouraged to leverage their own resources to complement the funding provided by this award.

Applications proposing studies whose principal focus is on the treatment of psychiatric conditions, including post-traumatic stress disorder, will be administratively withdrawn and will not be funded under this Program Announcement/Funding Opportunity.

While Gulf War Veterans are affected by amyotrophic lateral sclerosis (ALS) at twice the rate of Veterans who did not serve in the Gulf War, ***the GWIRP will not accept applications focusing***

on ALS research. However, applications that focus on GWI symptomatology may include Gulf War Veterans with ALS if the latter disorder is included in the study's GWI case definition. For those interested in pursuing ALS-focused studies, the office of the CDMRP offers a separate ALS Research Program; see <http://cdmrp.army.mil/alsrp>.

Research Involving Human Anatomical Substances, Human Subjects, or Human Cadavers: *Funding from this award mechanism must support a clinical trial and may not be used for preclinical research studies.* A clinical trial is defined as a prospective accrual of human subjects where an intervention (e.g., device, drug, biologic, surgical procedure, rehabilitative modality, behavioral intervention, or other) is tested on a human subject for a measurable outcome with respect to safety, effectiveness, and/or efficacy. This outcome represents a direct effect on the human subject of that intervention. All Department of Defense (DoD)-funded research involving new and ongoing research with human anatomical substances, human subjects, or human cadavers must be reviewed and approved by the U.S. Army Medical Research and Materiel Command (USAMRMC) Office of Research Protections (ORP), Human Research Protection Office (HRPO) prior to research implementation. This administrative review requirement is in addition to the local IRB or Ethics Committee (EC) review. Local IRB/EC approval at the time of submission is *not* required. The HRPO is mandated to comply with specific laws and requirements governing all research involving human anatomical substances, human subjects, or human cadavers that is supported by the DoD. These laws and requirements will necessitate information in addition to that supplied to the IRB/EC. *Allow a minimum of 2 to 3 months for HRPO regulatory review and approval processes.* Refer to the General Application Instructions, Appendix 6, and the Human Subject Resource Document available on the eBRAP "Funding Opportunities & Forms" web page (<https://ebrap.org/eBRAP/public/Program.htm>) for additional information.

If the IRB determines that a trial presents greater than minimal risk to human subjects, the DoD requires an independent research monitor with expertise consistent with the nature of risk(s) identified within the research protocol. If applicable, please refer to the General Application Instructions, Appendix 6, for more information on study reporting authorities and responsibilities of the research monitor.

If the clinical trial involves the use of a drug that has not been approved by the FDA for the proposed investigational use, evidence that an Investigational New Drug (IND) exemption application that meets all requirements under the Code of Federal Regulations, Title 21, Part 312 (21 CFR 312) has been submitted or will be submitted to the FDA *within 60 days of award* is required. If the investigational product is a device, and does not meet the requirements of an abbreviated IDE, evidence that an Investigational Device Exemption (IDE) application that meets all requirements under 21 CFR 812 has been submitted or will be submitted to the FDA *within 60 days of award*, or that the device is exempt from an IDE, is required. The Government reserves the right to withdraw funding if the IND or IDE application has not been submitted to the FDA within 60 days of the DoD award date or if the documented status of the IND or IDE has not been obtained within 6 months of the award date.

Access to Veterans of the 1990-1991 Persian Gulf War: Applicants are encouraged to collaborate with an investigator who has demonstrated access to Gulf War Veterans, particularly investigators within the VA, to ensure access to Gulf War Veteran populations as applicable to

the proposed project. Access to a Gulf War patient population(s) should be confirmed at the time of application submission. A letter of support, signed by the lowest ranking person with approval authority, should be included for studies involving active duty military, Veterans, military and/or VA-controlled study materials, and military and/or VA databases.

GWV Case Definitions: In 2014, the Institute of Medicine (IOM) released a report titled “Chronic Multisymptom Illness in Gulf War Veterans: Case Definitions Reexamined” (available online at <http://www.iom.edu/Reports/2014/Chronic-Multisymptom-Illness-in-Gulf-War-Veterans-Case-Definitions-Reexamined.aspx>). In this report, the IOM recommends the use of both the Centers for Disease Control and Prevention (CDC) definition of GWV and the Kansas definition for GWV. Therefore, applicants may construct a definition of subgroups or symptom clusters as appropriate to the specific treatment, intervention or trial design; however, all cases and controls must additionally be scored and analyzed according to both the CDC and the Kansas definitions for GWV for comparative purposes. Any additional project-specific case definition must recognize the multisymptom nature of GWV.

Another resource includes the 2014 report of the Research Advisory Committee on Gulf War Veterans’ illnesses, “Gulf War Illness and the Health of Gulf War Veterans: Research Update and Recommendations, 2009-2013,” which provides information on GWV, including case definitions and research on epidemiology, etiology, pathobiology, and treatment. This report can be found online at <http://www.bu.edu/sph/files/2014/04/RAC2014.pdf>.

Collaborative Systems Biology Facility: SysBioCube is the USAMRMC medical research big data/omics suite whose operation is directed by the U.S. Army Center for Environmental Health Research Systems Biology Collaboration Center (SBCC). SysBioCube is hosted by the National Cancer Institute/National Institutes of Health. The SysBioCube comprises military relevant medical research data repositories, data integration and analysis tools, and a networked portal that links databases to computational biology analysis tools. The SBCC facilitates systems biology collaborations among, and information sharing by, USAMRMC investigators and partnering investigators at other Army, DoD, and extramural organizations. Interested researchers should inquire at sysbiocube@mail.nih.gov.

The CDMRP intends that information, data, and research resources generated under awards funded by this Program Announcement/Funding Opportunity be made available to the research community (which includes both scientific and consumer advocacy communities) and to the public at large. For additional guidance, refer to the General Application Instructions, Appendix 4, Section K.

C. Eligibility Information

- Independent investigators at any academic level (or equivalent) are eligible to apply.
- Cost sharing/matching is not an eligibility requirement.
- Eligible investigators must apply through an organization. Organizations eligible to apply include Federal agencies, national, international, for-profit, nonprofit, public, and private organizations.

- An intramural investigator is defined as a DoD military or civilian employee working within a DoD laboratory or medical treatment facility, or working in a DoD activity embedded within a civilian medical center. Submissions from intramural (DoD) organizations are allowed and encouraged for this Program Announcement/Funding Opportunity. Applicants submitting through their intramural organizations are reminded to coordinate receipt and commitment of funds through their respective resource managers. *If an investigator at an intramural organization is named as a collaborator on an application submitted through an extramural organization, the application must include a letter from the collaborator's Commander or Commanding Officer at the intramural organization that authorizes the collaborator's involvement.*
- Refer to the General Application Instructions, Appendix 1, for general eligibility information.

D. Funding

- The maximum period of performance is **3** years.
- The anticipated direct costs budgeted for the entire period of performance will not exceed **\$700,000**. Indirect costs are to be budgeted in accordance with the organization's negotiated rate. No budget will be approved by the Government exceeding **\$700,000** direct costs or using an indirect rate exceeding the organization's negotiated rate.
- All direct and indirect costs of any subaward (subgrant or subcontract) must be included in the total direct costs of the primary award.
- The applicant may request the entire maximum funding amount for a project that may have a period of performance less than the maximum **3** years.

For this award mechanism, direct costs may be requested for (not all-inclusive):

- Salary
- Research supplies
- Veteran subject reimbursement and compensation
- Clinical trial costs
- Support for multidisciplinary collaborations, including travel between collaborating organizations
- Travel costs for up to one investigator to travel to one scientific/technical meeting per year.

Shall not be requested for:

- Preclinical research costs

Awards to extramural organizations will consist solely of assistance agreements (Cooperative Agreements and Grants). Awards to intramural (DoD) agencies and other Federal agencies may

be managed through a direct fund transfer (e.g., the Military Interdepartmental Purchase Request [MIPR]; Funding Authorization Document [FAD] process; or DD Form 1144 Support Agreement). Direct transfer of funds from the recipient to a DoD agency is not allowed except under very limited circumstances. Refer to the General Application Instructions, Section II.C.4., for budget regulations and instructions for the Research & Related Budget. ***For Federal agencies or organizations collaborating with Federal agencies, budget restrictions apply as are noted in Section II.C.4. of the General Application Instructions.***

The CDMRP expects to allot approximately \$4.48M of the \$20M FY16 GWIRP appropriation to fund approximately four Treatment Evaluation Award applications, depending on the quality and number of applications received. Funding of applications received in response to this Program Announcement/Funding Opportunity is contingent upon the availability of Federal funds for this program.

II. SUBMISSION INFORMATION

Submission of applications that are essentially identical or propose essentially the same research project to different funding opportunities within the same program and fiscal year is prohibited and will result in administrative withdrawal of the duplicative application(s).

Submission is a two-step process requiring both (1) pre-application submission through the electronic Biomedical Research Application Portal (eBRAP) (<https://eBRAP.org/>) and (2) application submission through Grants.gov (<http://www.grants.gov/>). Refer to the General Application Instructions, Section II.A., for registration and submission requirements for eBRAP and Grants.gov.

The pre-application and application submission process should be started early to avoid missing deadlines. There are no grace periods. Federal applicants must be familiar with Grants.gov requirements, including the need for an active System for Award Management (SAM) registration and a Data Universal Numbering System (DUNS) number. Refer to Appendix 3 of the General Application Instructions for further information regarding Grants.gov requirements.

eBRAP is a multifunctional web-based system that allows PIs to submit their pre-applications electronically through a secure connection, to view and edit the content of their pre-applications and full applications, to receive communications from the CDMRP, and to submit documentation during award negotiations and period of performance. A key feature of eBRAP is the ability of an organization's representatives and PIs to view and modify the Grants.gov application submissions associated with them. eBRAP will validate Grants.gov application files against the specific Program Announcement/Funding Opportunity requirements and discrepancies will be noted in an email to the PI and in the Full Application Files tab in eBRAP. It is the applicant's responsibility to review all application components for accuracy as well as ensure proper ordering as specified in this Program Announcement/Funding Opportunity.

The application title, eBRAP log number, and all information for the PI, Business Official(s), performing organization, and contracting organization must be consistent for the entire pre-application and application submission process. Inconsistencies may delay application processing and limit the ability to view, modify, and verify the application in eBRAP. If any

changes need to be made, the applicant should contact the CDMRP Help Desk at help@eBRAP.org or 301-682-5507 prior to the application deadline.

Application viewing, modification, and verification in eBRAP is strongly recommended, but not required. ***The Project Narrative and Budget cannot be changed after the application submission deadline.*** Prior to the full application deadline, a corrected or modified full application package may be submitted. Revisions to the Project Narrative or Budget will require a changed/corrected application to be submitted to Grants.gov prior to the application deadline. Other application components may be changed until the end of the [application verification period](#). After the end of the application verification period, the full application cannot be modified.

A. Where to Obtain the Grants.gov Application Package

To obtain the Grants.gov application package, including all required forms, perform a basic search using the Funding Opportunity Number W81XWH-16-GWIRP-TEA in Grants.gov (<http://www.grants.gov/>).

B. Pre-Application Submission Content

The pre-application process should be started early to avoid missing deadlines. There are no grace periods. During the pre-application process, each submission is assigned a unique log number by eBRAP. This unique eBRAP log number will be needed during the application process on Grants.gov.

All pre-application components must be submitted by the PI through eBRAP (<https://eBRAP.org/>). Because the invitation to submit an application is based on the contents of the pre-application, investigators should not change the title or research objectives after the pre-application is submitted.

PIs and organizations identified in the pre-application should be the same as those intended for the subsequent application submission. If any changes are necessary after submission of the pre-application, the PI must contact the CDMRP Help Desk at help@eBRAP.org or 301-682-5507.

The pre-application consists of the following components, which are organized in eBRAP by separate tabs (refer to the General Application Instructions, Section II.B., for additional information on pre-application submission):

- **Tab 1 – Application Information**
- **Tab 2 – Application Contacts**
 - Enter contact information for the PI. Enter the organization’s Business Official responsible for sponsored program administration (the “person to be contacted on matters involving this application” in Block 5 of the Grants.gov SF424 (R&R) Form). The Business Official must either be selected from the eBRAP list or invited in order for the pre-application to be submitted.

- Select the performing organization (site at which the PI will perform the proposed work) and the contracting organization (organization submitting on behalf of the PI, which corresponds to Block 5 on the Grants.gov SF424 (R&R) Form), and click on “*Add Organizations to this Pre-application.*” The organization(s) must either be selected from the eBRAP drop-down list or invited in order for the pre-application to be submitted.
 - It is recommended that PIs identify an Alternate Submitter in the event that assistance with pre-application submission is needed.
- **Tab 3 – Collaborators and Key Personnel**
 - Enter the name, organization, and role of all collaborators and key personnel associated with the application.
 - [FY16 GWIRP Programmatic Panel members](#) should not be involved in any pre-application or application. For questions related to Panel members and pre-applications or applications, refer to [Section IV.C., Withdrawal](#), or contact the CDMRP Help Desk at help@eBRAP.org or 301-682-5507.
 - To preserve the integrity of its peer and programmatic review processes, the CDMRP discourages inclusion of any employee of its review contractors having any role in application preparation, research, or other duties for submitted applications. For FY16, the identities of the peer review contractor and the programmatic review contractor may be found at the CDMRP website (<http://cdmrp.army.mil/about/2tierRevProcess>). Applications that include names of personnel from either of these companies will be administratively withdrawn unless plans to manage conflicts of interest (COIs) are provided and deemed appropriate by the Government. Refer to the General Application Instructions, Appendix 1, for detailed information.
 - **Tab 4 – Conflicts of Interest**
 - List all individuals other than collaborators and key personnel who may have a COI in the review of the application (including those with whom the PI has a personal or professional relationship). Refer to Appendix 1, Section C of the General Application Instructions for further information regarding COIs.
 - **Tab 5 – Pre-Application Files**

Note: *Upload documents as individual PDF files unless otherwise noted. eBRAP will not allow a file to be uploaded if the number of pages exceeds the limit specified below.*

Preproposal Narrative (three-page limit): The Preproposal Narrative page limit applies to text and non-text elements (e.g., figures, tables, graphs, photographs, diagrams, chemical structures, drawings) used to describe the project. Inclusion of URLs that provide additional information to expand the Preproposal Narrative and could confer an unfair competitive advantage is prohibited and may result in administrative withdrawal of the pre-application.

- **Research Idea:** Describe the ideas and reasoning that form the basis of the proposed intervention; include relevant literature citations. Clearly identify under which track the proposed research is being submitted:
 - **Data-Based Treatment Track:** Provide preliminary data in GWI models or based on biological alterations identified in Veterans with GWI that strongly support the proposed treatment for GWI.
 - **Symptom-Based Treatment Track:** State the ideas and reasoning on which the proposed intervention is based. Explain why an intervention that may have been used for the treatment of similar symptoms in other diseases or conditions is expected to be effective for GWI.
- **Research Strategy:** Concisely state the project’s objectives and specific aims. Clearly describe the intervention to be tested. Describe any case definition of GWI, in addition to the required CDC and Kansas definition, to be used in the proposed trial and why it is necessary.
- **Impact:** State how the proposed project will accelerate the movement of a promising treatment for GWI into clinical application. Describe how the results of the proposed pilot clinical trial will, if successful, lead to future large-scale clinical trials.
- **Personnel:** Briefly state the qualifications of the PI and key personnel to perform the proposed research project. Describe the composition of the clinical team. Provide details on how the team (including investigator(s), study coordinator, statistician) possesses the appropriate expertise in conducting clinical trials.

Pre-Application Supporting Documentation: The items to be included as supporting documentation for the pre-application *must be uploaded as individual files* and are limited to:

- References Cited (one-page limit): List the references cited (including URLs if available) in the Preproposal Narrative using a standard reference format that includes the full citation (i.e., author[s], year published, title of reference, source of reference, volume, chapter, page numbers, and publisher, as appropriate).
- List of Abbreviations, Acronyms, and Symbols: Provide a list of abbreviations, acronyms, and symbols used in the Preproposal Narrative.
- Key Personnel Biographical Sketches (five-page limit per individual). *All biographical sketches should be uploaded as a single combined file.* Biographical sketches should be used to demonstrate background and expertise through education, positions, publications, and previous work accomplished.

- **Tab 6 – Submit Pre-Application**

- This tab must be completed for the pre-application to be accepted and processed.

Pre-Application Screening

- **Pre-Application Screening Criteria**

To determine the technical merits of the pre-application and the relevance to the mission of the DHP and the GWIRP, pre-applications will be screened based on the following criteria:

- **Research Idea:** To what extent the research is appropriate for the proposed Data-Based or Symptom-Based Track.
 - *For the Data-Based Treatment Track*, how well the preliminary data and rationale support the research idea.
 - *For Symptom-Based Treatment Track*, how the proposed intervention is based on ideas and reasoning that appropriately supports the study.
- **Research Strategy:** How well the specific aims support the research idea. Whether the phase of the proposed clinical trial is appropriate for the Treatment Evaluation Award mechanism. If applicable, whether there is sufficient justification for any case definition to be used in addition to the Kansas or CDC case definitions.
- **Impact:** How the research describes a potentially effective intervention for GWI. How the proposed clinical trial will, if successful, lead to future large-scale clinical trials.
- **Personnel:** How the qualifications of the PI and research team are appropriate to perform the proposed research project.

- **Notification of Pre-Application Screening Results**

Following the pre-application screening, PIs will be notified as to whether or not they are invited to submit applications; however, they will not receive feedback (e.g., a critique of strengths and weaknesses) on their pre-application. The estimated timeframe for notification of invitation to submit an application is indicated on the [title page](#) of this Program Announcement/Funding Opportunity. Invitations to submit a full application are based on the Pre-Application Screening Criteria as published above.

C. Full Application Submission Content

The application process should be started early on Grants.gov to avoid missing deadlines. There are no grace periods. Verify the status of the applicant's organization's Entity registration in SAM well in advance of the application submission deadline. Allow 3 to 4 weeks to complete the entire SAM registration process. Refer to the General Application Instructions, Section II, for additional information.

Applications will not be accepted unless the PI has received notification of invitation.

All contributors and administrators to the application must use matching compatible versions of Adobe software when editing and preparing application components. The use of different

software versions will result in corruption of the submitted file. See Section II.C. of the General Application Instructions for details on compatible Adobe software.

The CDMRP cannot make allowances/exceptions to its policies for submission problems encountered by the applicant organization using system-to-system interfaces with Grants.gov.

Each application submission must include the completed Grants.gov application package for this Program Announcement/Funding Opportunity. The Grants.gov application package is submitted by the Authorized Organizational Representative through the Grants.gov portal (<http://www.grants.gov/>).

Note: The Project Narrative and Budget Form cannot be changed after the application submission deadline.

If either the Project Narrative or the budget fails eBRAP validation or if the Project Narrative or Budget Form needs to be modified, an updated Grants.gov application package must be submitted via Grants.gov as a “Changed/Corrected Application” with the previous Grants.gov Tracking ID *prior to the application submission deadline*.

The Grants.gov application package must be submitted using the unique eBRAP log number to avoid delays in application processing.

Grants.gov application package components: For the Treatment Evaluation Award, the Grants.gov application package includes the following components (refer to the General Application Instructions, Section II.C., for additional information on application submission):

- 1. SF424 (R&R) Application for Federal Assistance Form:** Refer to the General Application Instructions, Section II.C., for detailed information.
- 2. Attachments Form**

Each attachment to the Grants.gov application forms must be uploaded as an individual PDF file in accordance with the formatting guidelines listed in Appendix 2 of the General Application Instructions. For all attachments, ensure that the file names are consistent with the guidance. Grants.gov will reject attachments with file names longer than 50 characters or incorrect file names that contain characters other than the following: A-Z, a-z, 0-9, underscore, hyphen, space, and period. In addition, Grants.gov has file size limits that may apply in some circumstances. Individual attachments may not exceed 20 MB and the file size for the entire Grants.gov application package may not exceed 200 MB.

The Project Narrative is NOT the formal clinical trial protocol. Instead, all essential elements of the proposed clinical trial necessary for scientific review must be included as directed in Attachment 1 (the Project Narrative) and Attachments 6-8 described below. Failure to submit these attachments as part of the application package will result in rejection of the entire application.

- **Attachment 1: Project Narrative (12-page limit): Upload as “ProjectNarrative.pdf.”** The page limit of the Project Narrative applies to text

and non-text elements (e.g., figures, tables, graphs, photographs, diagrams, chemical structures, drawings, etc.) used to describe the project. Inclusion of URLs that provide additional information to expand the Project Narrative and could confer an unfair competitive advantage is prohibited and may result in administrative withdrawal of the application.

Describe the proposed project in detail using the outline below.

- **Background:** Describe in detail the rationale for the study. Provide a literature review and describe any preliminary studies and/or preclinical data that led to the development of the proposed clinical trial. Provide a summary of other relevant ongoing, planned, or completed clinical trials and describe how the proposed study differs. Include a discussion of any current clinical use of the intervention under investigation, and/or details of its study in clinical trials for other indications (as applicable). The background section should clearly support the choice of study variables and should explain the basis for the study questions and/or study hypotheses. This section should establish the relevance of the study for Veterans with GWI and explain the applicability of the proposed findings.

If the proposed clinical trial was initiated using other funding prior to this application, explain the history and background of the clinical trial. Specifically identify the portions of the study that would be supported with funds from this award.

- ***For the Data-Based Treatment Track:*** Background information must include preliminary data relevant to GWI from prior studies involving use of the treatment in GWI models, exploitation of biological alterations previously identified in Veterans with GWI, or from previous pilot trials in Veterans with GWI.
- ***For the Symptom-Based Treatment Track:*** Background information must include a rationale based on treatment of similar symptoms in other diseases or conditions and explain why the proposed intervention would be expected to be effective for GWI.
- **Hypothesis or Objectives/Specific Aims:** State the hypothesis to be tested or the objective to be reached. Concisely explain the project's specific aims to be funded by this application. If the proposed work is part of a larger study, present only tasks that this award will fund.
- **Clinical Trial:** Provide detailed plans for initiating and conducting the clinical trial during the course of the award. Describe the type of study to be performed (e.g., prospective, randomized, controlled) and outline the proposed methodology in sufficient detail for review. Describe potential challenges and alternative strategies where appropriate.
 - Identify the intervention to be tested and describe the projected outcomes.
 - Describe how access to Veteran populations, to VA or military databases and/or VA- or military-controlled study materials will be gained.

- All subjects and controls must be scored at least according to both CDC and Kansas case definitions for GWI for the purpose of comparative analysis. If any additional case definition other than the CDC or Kansas definition is to be used, describe this definition and explain the rationale behind its inception and use.
- Define the study variables, outline why they were chosen, and describe how they will be measured. Include a description of appropriate controls and the endpoints to be tested.
- Describe the human subject-to-group assignment process (e.g., randomization, block randomization, stratified randomization, age-matched controls, alternating group, or other procedures), if applicable. Explain the specific actions to accomplish the group assignment (e.g., computer assignment, use of table of random numbers).
- If using psychometric measures, describe their reliability and validity.
- **Statistical Plan and Data Analysis:** Describe the statistical model and data analysis plan with respect to the study objectives. Specify the approximate number of human subjects to be enrolled. If multiple study sites are involved, state the approximate number to be enrolled at each site. Include a complete power analysis to demonstrate that the sample size is appropriate to meet the objectives of the study. If a subpopulation of a recruited sample population will be used for analysis, complete a statistical analysis to ensure appropriate power can be achieved within the subpopulation study.
- **Attachment 2: Supporting Documentation.** Start each document on a new page. **Combine and upload as a single file named “Support.pdf.”** If documents are scanned to pdf, the lowest resolution (100 to 150 dpi) should be used. *There are no page limits for any of these components unless otherwise noted. Include only those components described below; inclusion of items not requested will result in the removal of those items or may result in administrative withdrawal of the application.*
 - **References Cited:** List the references cited (including URLs, if available) in the Project Narrative using a standard reference format that includes the full citation (i.e., author[s], year published, title of reference, source of reference, volume, chapter, page numbers, and publisher, as appropriate).
 - **List of Abbreviations, Acronyms, and Symbols:** Provide a list of abbreviations, acronyms, and symbols.
 - **Facilities, Existing Equipment, and Other Resources:** Describe the facilities and equipment available for performance of the proposed project and any additional facilities or equipment proposed for acquisition at no cost to the award. Indicate whether or not Government-furnished facilities or equipment are proposed for use. If so, reference should be made to the original or present Government award under which the facilities or equipment items are now accountable. There is no form for this information.

- Publications and/or Patents: Include a list of relevant publication URLs and/or patent abstracts. If publications are not publicly available, then copies of up to five published manuscripts may be included in Attachment 2. Extra items will not be reviewed.
- Letters of Organizational Support: Provide a letter (or letters, if applicable), signed by the Department Chair or appropriate organization official, confirming the laboratory space, equipment, and other resources available for the project. Letters of support not requested in the Program Announcement/Funding Opportunity, such as those from members of Congress, do not impact application review or funding decisions.
- Letters of Collaboration (if applicable): Provide a signed letter from each collaborating individual or organization that will demonstrate that the PI has the support or resources necessary for the proposed work. Letters should demonstrate:
 - Availability of, access to, and quality control for all critical reagents.
 - Expertise and resources (physical and process resources or intellectual properties) that each collaborator will bring to the effort and how they are best suited to carry out the proposed research.
- Letters of Commitment: If the proposed study involves use of a commercially produced investigational drug, device, or biologic, provide a letter of commitment from the commercial entity indicating availability of the product for the duration of the study, support for the proposed phase of research, and support for the indication to be tested.
- Access to Gulf War Veterans: Provide a letter of support, signed by the lowest ranking person with approval authority demonstrating access to Gulf War Veterans (e.g., from collaborating investigators within the VA, approval from the Defense Manpower Data Center Data Request System).
- Intellectual Property
 - Intangible property acquired, created or developed under this award will be subject to all rights and responsibilities established at 2 CFR 200.315. Should the applicant intend to use, in the performance of this program, pre-existing, legally protected and perfected intangible property and for which no Federal funds had been used in the development of said property, the applicant must:
 - Clearly identify all such property;
 - Identify the cost to the Federal government for use or license of such property, if applicable; or
 - Provide a statement that no property meeting this definition will be used on this project.

- Intellectual and Material Property Plan (if applicable): Provide a plan for resolving intellectual and material property issues among participating organizations.
- GMP (if applicable): Provide information regarding the resources available to aid in the development of sufficient quantities of the drug or reagent under GMP.
- Data and Research Resources Sharing Plan: Describe how data and resources generated during the performance of the project will be shared with the research community. Refer to the General Application Instructions, Appendix 4, Section K for more information about the CDMRP expectations for making data and research resources publicly available.

- **Attachment 3: Technical Abstract (one-page limit): Upload as “TechAbs.pdf.”** The technical abstract is used by all reviewers. Abstracts of all funded research projects will be posted publicly. ***Do not include proprietary or confidential information.*** Use only characters available on a standard QWERTY keyboard. Spell out all Greek letters, other non-English letters, and symbols. Graphics are not allowed.

The technical abstract is used by all reviewers. Of particular importance, programmatic reviewers typically do not have access to the full application and therefore rely on the technical abstract for appropriate description of the project’s key aspects. Therefore, clarity and completeness within the space limits of the technical abstract are highly important.

Technical abstracts should be written using the outline below. Abstracts of all funded research projects will be posted on the CDMRP website (<http://cdmrp.army.mil>).

- Background: Present the ideas and rationale behind the proposed clinical trial.
 - For the Data-Based Treatment Track, this should include a description of supporting data from the field of GWI research.
 - For the Symptom-Based Treatment Track, this should include a rationale for use of the proposed treatment based on treatment of similar symptoms in other diseases or conditions.
 - Objective/Hypothesis: State the objective/hypothesis to be tested. Provide evidence that supports the objective/hypothesis.
 - Specific Aims: State the specific aims of the study.
 - Study Design: Briefly describe the study design including the intervention to be tested, the study population, outcome measures, and appropriate controls.
 - Clinical Impact: Briefly describe how the proposed project will have an impact on Veterans with GWI.
- **Attachment 4: Lay Abstract (one-page limit): Upload as “LayAbs.pdf.”** The lay abstract is used by all reviewers. Abstracts of all funded research projects will

be posted publicly. **Do not include proprietary or confidential information.** Use only characters available on a standard QWERTY keyboard. Spell out all Greek letters, other non-English letters, and symbols. Graphics are not allowed.

Lay abstracts should be written using the outline below. **Do not duplicate the technical abstract.** Minimize use of acronyms and abbreviations. The lay abstract is used by all reviewers. It is an important component of the application review process because it addresses issues of particular interest to the consumer advocate community.

- Clearly describe the objectives and rationale for the proposed study in a manner readily understood by readers without a background in science or medicine.
- Describe the ultimate applicability and impact of the research.
 - What types of patients will it help, and how will it help them?
 - What are the potential clinical applications, benefits, and risks?
 - What is the projected time it may take to achieve a patient-related outcome?
 - What are the likely contributions of this study in advancing treatment for GWI?
- **Attachment 5: Statement of Work (SOW) (three-page limit): Upload as “SOW.pdf.”** The suggested SOW format and examples specific to different types of research projects are available on the eBRAP “Funding Opportunities & Forms” web page (<https://ebrap.org/eBRAP/public/Program.htm>). For the Treatment Evaluation Award mechanism, use the SOW format example titled “SOW for Clinical Research.” The SOW must be in PDF format prior to attaching. Refer to the General Application Instructions, Section II.C.2., for detailed guidance on creating the SOW.

The GWIRP strongly encourages timely dissemination of the results of GWIRP-sponsored research as a product of the research program. Timely dissemination is critical to improvement of the lives of Veterans with GWI, the advancement of the field, and the continued success of the program. Therefore, SOWs submitted to the GWIRP must include at least one task or aim focused on preparation and submission of publications. This task or aim must be scheduled to commence at least 6 months prior to the end of the award’s period of performance.

- **Attachment 6: Human Subject Recruitment and Safety Procedures (no page limit): Upload as “HumSubProc.pdf.”** The Human Subject Recruitment and Safety Procedures attachment should include the components listed below.
 - a. **Study Population:** Describe the target population (to whom the study findings will be generalized) and the nature, approximate number, and pertinent demographic characteristics of the accessible population at the study site(s) (population from whom the sample will be recruited/drawn). Demonstrate that the research team has access to the proposed study population. Furthermore, discuss past efforts in recruiting human subjects from the target population for previous clinical trials (if applicable). Address any potential barriers to accrual

and plans for addressing unanticipated delays. Include justification of any age, race, ethnicity, or sex limitations provided. ***For clinical trials proposing to include military personnel, please refer to the General Application Instructions, Appendix 6, for more information.***

- b. Inclusion/Exclusion Criteria:** List the inclusion and exclusion criteria for the proposed clinical trial. Inclusion/exclusion criteria should take into consideration the specific risk profile of the studies to be conducted and the standard of care for that patient population. Provide detailed justification for exclusions. Indicate how the proposed inclusion and exclusion criteria might impact the similarity between the study population and the eventual target population for the treatment.

Inclusion of Women and Minorities in Study. Consistent with the Belmont Report, “Ethical Principles and Guidelines for the Protection of Human Subjects,” and Congressional legislation, special attention is given to inclusion of women and/or minorities in studies funded or supported by the USAMRMC. This policy is intended to promote equity both in assuming the burdens and in receiving the benefits of human subjects research. Include an appropriate justification if women and/or minorities will be excluded from the clinical trial.

- c. Description of the Recruitment Process:** Explain methods for identification of potential human subjects (e.g., medical record review, obtaining sampling lists, healthcare provider identification).
- Describe the recruitment process in detail. Address who will identify potential human subjects, who will recruit them, and what methods will be used to recruit them.
 - If human subjects will be compensated for participation in the study, include a detailed description of and justification for the compensation plan.
 - Describe the recruitment and advertisement materials. The recruitment materials should not be coercive or offer undue inducements and should accurately reflect the study.
- d. Description of the Informed Consent Process:** Specifically describe the plan for obtaining informed consent from human subjects.
- ***For the proposed study, provide a draft, in English, of the Informed Consent Form.***
 - Identify who is responsible for explaining the study, answering questions, and obtaining informed consent. Include a plan for ensuring that human subjects’ questions will be addressed during the consent process and throughout the trial.
 - Include information regarding the timing and location of the consent process.
 - Address issues relevant to the mental capacity of the potential human subject (e.g., altered capacity due to administration of any mind-altering

substances such as tranquilizers, conscious sedation or anesthesia, brain injury, stress/life situations, or human subject age), if applicable.

- Address how privacy and time for decision making will be provided and whether or not the potential human subject will be allowed to discuss the study with anyone before making a decision.
 - Consider the need for obtaining ongoing consent or for re-assessing capacity over the course of a long-term study and describe any relevant procedures to assure continued consent.
 - Describe the plan for the consent of the individual's Legally Authorized Representative (LAR) to be obtained prior to the human subject's participation in the study. State law defines who may act as the LAR. The local IRB of record should be consulted for guidance regarding who can serve as LAR for research at the study site. Note: The PI must describe a clear intent to benefit for human subjects who cannot give their own consent to participate in the proposed clinical trial to be in compliance with Title 10 United States Code Section 980 (10 USC 980) (<http://www.gpo.gov/fdsys/pkg/USCODE-2011-title10/pdf/USCODE-2011-title10-subtitleA-partII-chap49-sec980.pdf>). If applicable, please refer to the General Application Instructions, Appendix 6, for more information.
 - **Assent.** If minors or other populations that cannot provide informed consent are included in the proposed clinical trial, a plan to obtain assent (agreement) from those with capacity to provide it, or a justification for a waiver of assent, should be provided. PIs should consult with their local IRB to identify the conditions necessary for obtaining assent.
- e. Screening Procedures:** List and describe any evaluations (e.g., laboratory procedures, history, or physical examination) that are required to determine eligibility/suitability for study participation and the diagnostic criteria for entry. Please note that some screening procedures may require a separate consent or a two-stage consent process. Informed consent must be obtained prior to initiation of any procedures for the purpose of determining eligibility.
- f. Risks/Benefits Assessment:**
- **Foreseeable risks:** Clearly identify all study risks, including potential safety concerns and adverse events. Study risks include any risks that the human subject is subjected to as a result of participation in the clinical trial. Consider psychological, legal, social, and economic risks as well as physical risks. If the risks are unknown, this should be stated. If applicable, any potential risk to the study personnel should be identified.
 - **Risk management and emergency response:**
 - Describe how safety surveillance and reporting to the IRB and FDA (if applicable) will be managed and conducted.
 - Describe all safety measures to minimize and/or eliminate risks to human subjects and study personnel or to manage unpreventable risks.

Include safeguards and planned responses such as dose reduction or stopping criteria based on toxicity grading scales or other predetermined alert values.

- Discuss the overall plan for provision of emergency care or treatment for an adverse event for study-related injuries, to include who will be responsible for the cost of such care.
- Address any special precautions to be taken by the human subjects before, during, and after the study (e.g., medication washout periods, dietary restrictions, hydration, fasting, pregnancy prevention).
- Describe any special care (e.g., wound dressing assistance, transportation due to side effects of study intervention impairing ability to drive) or equipment (e.g., thermometers, telemedicine equipment) needed for human subjects enrolled in the study.
- If the IRB determines that a trial presents greater than minimal risk to human subjects, the DoD requires an independent research monitor with expertise consistent with the nature of risk(s) identified within the research protocol. If applicable, refer to the General Application Instructions, Appendix 6, for more information on study reporting authorities and responsibilities of the research monitor.
- **Potential benefits:** Describe known and potential benefits of the study to the human subject, a specific community, or society.
- **Attachment 7: Intervention (no page limit): Upload as “Intervention.pdf.”**
The Intervention attachment should include the components listed below.
 - a. **Description of the Intervention:** Identify the intervention to be tested and describe the particular outcomes. As applicable, the description of the intervention should include the following components: complete name and composition, storage and handling information, source, dose, schedule, administration route, washout period, duration of the intervention, and concomitant medications allowed. Description of devices should include general concept of design, detailed operational instructions, any potential risks to users, and intended benefits. Other types of interventions should be fully described.

Summarize key preclinical pharmacological findings, dosage studies, and other clinical studies (if applicable) that examine the safety of the intervention.
 - b. **Study Procedures:** Describe the interaction with the human subject to include the study intervention that he/she will experience. Provide sufficient detail in chronological order for a person uninvolved in the study to understand what the human subject will experience. Provide a schedule (e.g., flowchart or diagram) of study evaluations and follow-up procedures. Discuss how compliance with Good Laboratory Practices (GLP), GMP, and other regulatory considerations will be established, monitored, and maintained, as applicable.

- c. **Clinical Monitoring Plan:** Describe how the study will be conducted by and monitored for ICH E6 (International Conference on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use) GCP compliance, by an independent clinical trial monitor (or clinical research associate). The monitoring plan should describe the types of monitoring visits to be conducted, the intervals (based on level of risk), how corrective actions will be reported to the Sponsor and PI, and how they will be corrected and prevented by the clinical trial site/PI.
- **Attachment 8: Data Management (no page limit): Upload as “Data_Manage.pdf.”** The Data Management attachment should include the components listed below.
 - a. **Data Management:** Describe all methods used for data collection to include the following:
 - **Identifiers:** Describe the unique identifiers or specific code system to be used to identify human subjects, if applicable.
 - **Confidentiality:**
 - Explain measures taken to protect the privacy of human subjects and maintain confidentiality of study data. Strategies to protect the privacy and confidentiality of study records, particularly those containing identifying information, should be addressed.
 - Address who will have access to study records, data, and specimens, including an acknowledgment that representatives of the DoD are eligible to review study records.
 - Address requirements for reporting sensitive information to state or local authorities.
 - **Data capture, verification, and disposition:** Describe how data will be captured and verified. Describe where data (both electronic and hard copy) will be stored, who will keep the data, how the data will be stored, the process for locking the database at study completion, and the length of time data will be stored. Describe the proposed database, how it will be developed and validated, and its capability to safeguard and maintain the integrity of the data. For FDA-regulated studies, compliance with 21 CFR 11 is required.
 - **Sharing study results:** In cases where the human subject could possibly benefit medically or otherwise from the information, explain whether or not the results of screening and/or study participation will be shared with human subjects or their primary care provider, to include results from any screening or diagnostic tests performed as part of the study.

b. Laboratory Evaluations:

- **Specimens to be collected, schedule, and amount:** All specimens that will be collected for study purposes must be clearly stated. The collection schedule and amount of material collected must also be clearly described.
 - **Evaluations to be made:** Describe all evaluations that will be made for study purposes. Explain how the results of laboratory evaluations will be used to meet the objectives of the study (or to monitor safety of human subjects).
 - **Storage:** Describe specimen storage, to include location of storage, how long specimens will be stored, any special conditions required, labeling, and specimen disposition. Outline the plan to store specimens for future use to include considerations for informed consent and providing human subjects with an opportunity to decline participation in the study.
 - **Labs performing evaluations and special precautions:** Identify the laboratory performing each evaluation, as well as any special precautions that should be taken in handling the samples. Special precautions that should be taken by the human subject before, during, or after the laboratory procedure should be clearly defined. If transport of samples is required, describe provisions for ensuring proper storage during transport.
- **Attachment 9: Study Personnel and Organization (no page limit): Start each document on a new page. Combine into one document and upload as “Personnel.pdf.”** The Study Personnel and Organization attachment should include the components listed below.
 - a. **Organizational Chart:** Provide an organizational chart identifying key members of the study team including institution/center/department and name each person’s position on the project. If applicable, include any external consultants or other experts who will assist with FDA applications. While there is no specified format for this information, a table(s) or diagram is recommended.
 - b. **Study Personnel Description:** Briefly describe the roles of the individuals listed in the organizational chart on the project. Describe relevant experience and qualifications that demonstrate appropriate expertise for the given role. Name the individuals who will provide statistical and bioethical expertise. If these are to be provided through institutional resources rather than named team members, then indicate the institutional resources that will be used.
 - c. **Study Management Plan:** Provide a plan for ensuring the standardization of procedures among staff and across sites (if applicable). If the proposed clinical trial is multi-institutional, plans for communication and data transfer between the collaborating institutions, as well as how data, specimens, and/or imaging products obtained during the study will be handled, should be included. Provide a plan for real-time communication among collaborating institutions (if applicable). Describe how statistical and bioethical issues will be managed in

the study organization: Describe how emergent statistical or ethical issues would be raised and resolved.

- **Attachment 10: Impact Statement (one-page limit). Upload as “Impact.pdf.”**

- **Impact**

- Identify the volunteer population(s) that will participate in the proposed intervention, describe how they represent the target population that would benefit from the intervention, and describe the potential impact of the proposed clinical trial on the outcomes of Veterans with GWI.
- Describe the short-term impact: Detail the anticipated outcomes that will be directly attributed to the results of the proposed clinical trial.
- Describe the long-term impact: Explain the long-range vision for implementation of the intervention in the clinic or field, and describe the anticipated long-term benefits for the targeted population.

- **Attachment 11: Transition Plan (one-page limit). Upload as “Transition.pdf.”**

Describe/discuss the methods and strategies proposed to move the intervention to the next phase of development (clinical trials, commercialization, and/or delivery to the civilian or military market) after successful completion of the award. The post-award transition plan should include the components listed below.

- The planned indication for the product label, if appropriate, and an outline of the development plan required to support that indication.
- Details of the funding strategy that will be used to bring the outcomes to the next level of development or delivery to Veterans with GWI (e.g., specific potential industry partners, specific funding opportunities to be applied for).
- For Knowledge Products, a description of collaborations and other resources that will be used to provide continuity of development including proposed development or modification of clinical practice guidelines and recommendations, provider training materials, patient brochures, and other clinical support tools, scientific journal publications, models, simulations, and applications. A “Knowledge Product” is a non-materiel product that addresses an identified need, topic area, or capability gap, is based on current evidence and research, aims to transition into medical practice, training, tools, or to support materiel solutions (systems to develop, acquire, provide, and sustain medical solutions and capabilities), and educates or impacts behavior throughout the continuum of care, including primary prevention of negative outcomes.
- A description of collaborations and other resources that will be used to provide continuity of development. If an industry applicant or collaborator is involved, indicate any resources the industrial entity will be leveraging in this investigation.
- A risk analysis for cost, schedule, manufacturability, and sustainability.

- **Attachment 12: IND/IDE Documentation:** If submitting multiple documents, start each document on a new page. **Combine and upload as a single file named “IND-IDE.pdf.”** The IND/IDE Documentation Form located on the eBRAP website may *not* be used in place of this information.
 - State whether the trial requires regulation by the FDA. If FDA regulation is required, describe the planned indication for the proposed product and whether an IND/IDE is necessary.
 - If an IND or IDE has already been obtained for the investigational drug or device pertaining to the indication to be studied, provide evidence in the form of formal communication (e.g., letterhead correspondence) from the FDA.
 - If an IND or IDE application has been submitted, provide an explanation of the status of the IND or IDE application (e.g., past the critical 30-day period, pending response to questions raised by the Agency, on clinical hold). Provide a summary of previous meetings with the FDA on development of this product, if appropriate. A copy of the Agency meeting minutes should be included if available. Provide copies of communications from the FDA relevant to the most recent status of the IND or IDE application.
 - If the IND or IDE application is not yet submitted, provide evidence that an IND or IDE will be submitted within 60 days of award. Examples include results and minutes of a pre-IND or pre-IDE meeting with the FDA, a pre-IND/pre-IDE meeting request to the FDA, or other communication with the FDA. Provide the anticipated date of IND/IDE submission.
 - If an IND or IDE is not required for the proposed study, provide evidence in the form of formal communication (e.g., letterhead correspondence) from the FDA or the IRB of record to that effect.
- **Attachment 13: Outcomes Statement (if applicable, one-page limit): Upload as “Outcomes.pdf.”** If applicable, list all prior research projects/awards relating to GWI, including resulting publications, abstracts, patents or other tangible outcomes. Only research and outcomes directly relevant to GWI should be listed. Note: This item will be made available for programmatic review.
- **Attachment 14: Collaborating DoD Military Facility Budget Form(s), if applicable: Upload as “MFBudget.pdf.”** If a Military Facility (military health system facility, research laboratory, treatment facility, dental treatment facility, or a DoD activity embedded with a civilian medical center) will be a collaborator in performance of the project, complete the Collaborating DoD Military Facility Budget Form, available for download on the eBRAP “Funding Opportunities & Forms” web page (<https://ebrap.org/eBRAP/public/Program.htm>), including a budget justification, for each Military Facility as instructed. The costs per year should be included on the Grants.gov Research and Related Budget form under subaward costs. Refer to the General Application Instructions, Section II.C.7., for detailed information.

3. Research & Related Senior/Key Person Profile (Expanded): Refer to the General Application Instructions, Section II.C.4., for detailed information.

- PI Biographical Sketch (five-page limit): Upload as “Biosketch_LastName.pdf.” The suggested biographical sketch format is available on the “Funding Opportunities & Forms” web page (<https://ebrap.org/eBRAP/public/Program.htm>) in eBRAP. The five-page NIH Biographical Sketch may also be used. All biographical sketches should be submitted in the portable document format (pdf) that is not editable.

Biographical Sketches should be used to demonstrate background and expertise through education, positions, publications, and previous work accomplished.

- PI Previous/Current/Pending Support (no page limit): Upload as “Support_LastName.pdf.”
- Key Personnel Biographical Sketches (five-page limit each): Upload as “Biosketch_LastName.pdf.”
- Key Personnel Previous/Current/Pending Support (no page limit): Upload as “Support_LastName.pdf.”

4. Research & Related Budget: Refer to the General Application Instructions, Section II.C.4., for detailed information.

- Budget Justification (no page limit): Upload as “BudgetJustification.pdf.” The budget justification for the entire period of performance must be uploaded to the Research & Related Budget after completion of the budget for Period 1.

5. Project/Performance Site Location(s) Form: Refer to the General Application Instructions, Section II.C.5., for detailed information.

6. R & R Subaward Budget Attachment(s) Form (if applicable): Refer to the General Application Instructions, Section II.C.6., for detailed information.

Collaborating DoD Military Facilities Form: A Military Facility collaborating in the performance of the project should be treated as a subaward for budget purposes. However, do not complete the Grants.Gov R & R Subaward Budget Attachment Form; instead, complete the Collaborating DoD Military Facility Budget Form (use Attachment 14, Collaborating DoD Military Facility Budget Form) to show all direct and indirect costs. The costs per year should be included on the Grants.gov Research and Related Budget form under subaward costs. Refer to the General Application Instructions, Section II.C.7., for detailed information.

D. Applicant Verification of Grants.gov Submission in eBRAP

Prior to the end of the application verification period, PIs and organizational representatives can review and modify in eBRAP certain components of an application submitted to Grants.gov. Following retrieval and processing of the Grants.gov application, eBRAP will notify the organizational representatives and PI by email to log into eBRAP to review, modify, and verify

the Grants.gov application submission. eBRAP will validate retrieved files against the specific Program Announcement/Funding Opportunity requirements and discrepancies will be noted in both the email and in the Full Application Files tab in eBRAP. eBRAP does not confirm the accuracy of file content. It is the applicant's responsibility to review all application components and ensure proper ordering as specified in the Program Announcement/Funding Opportunity. ***If either the Project Narrative or the budget fails eBRAP validation or needs to be modified, an updated Grants.gov application package must be submitted via Grants.gov as a "Changed/Corrected Application" with the previous Grants.gov Tracking ID prior to the application submission deadline.*** The Project Narrative and Budget Form cannot be changed after the application submission deadline.

E. Submission Dates and Times

All submission dates and times are indicated on the [title page](#) of this Program Announcement/Funding Opportunity. Pre-application and application submissions are required. Failure to meet either of these deadlines will result in submission rejection.

F. Other Submission Requirements

Refer to the General Application Instructions, Appendix 2, for detailed formatting guidelines.

All extramural applications must be submitted through Grants.gov. Applicant organizations and all subrecipient organizations must have a DUNS number to submit applications to Grants.gov. The applicant organization must also be registered in the Entity Management functional area of the SAM with an "Active" status to submit applications through the Grants.gov portal. Refer to the General Application Instructions, Section II.A., for information on Grants.gov registration requirements.

III. APPLICATION REVIEW INFORMATION

A. Application Review and Selection Process

All applications are evaluated by scientists, clinicians, and consumers in a two-tier review process. The first tier is peer review of applications against established criteria for determining technical merit. Each application is evaluated for its own merit, independent of other applications. The second tier is a programmatic review that makes recommendations for funding to the DHA RDA Directorate and the OASD(HA), based on technical merit, the relevance to the mission of the DHP and GWIRP, the specific intent of the award mechanism, and to other specified evaluation criteria in the Program Announcement/Funding Opportunity. Programmatic review is a comparison-based process in which applications with scientific and technical merit compete in a common pool. ***The highest-scoring applications from the first tier of review are not automatically recommended for funding. Funding recommendations depend on various factors as described in [Section III.B.2., Programmatic Review](#).*** Additional information about the two-tier process used by the CDMRP can be found at <http://cdmrp.army.mil/about/fundingprocess>.

All CDMRP review processes are conducted confidentially to maintain the integrity of the merit-based selection process. Panel members sign a statement that application and evaluation information will not be disclosed outside the panel. Violations of confidentiality can result in the dissolving of a panel(s) and other corrective actions. In addition, personnel at the applicant or collaborating organizations are prohibited from contacting persons involved in the 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 organization's application. Violations by panel members or applicants that compromise the confidentiality of the review process may also result in suspension or debarment from Federal awards. Furthermore, the unauthorized disclosure of confidential information of one party to another third party is a crime in accordance with Title 18 United States Code 1905.

B. Application Review Process

1. Peer Review: To determine technical merit, all applications will be evaluated according to the following scored criteria, which are of equal importance:

- **Clinical Impact**

- Whether the proposed pilot clinical trial will introduce a promising treatment for GWI.
- How relevant the anticipated outcomes of the proposed clinical trial are to Veterans with GWI.
- How the potential outcomes of the proposed clinical trial will provide/improve short-term benefits for ill Gulf War Veterans.
- How significantly the long-term benefits of the proposed intervention may improve treatment of GWI and quality of life for Veterans with GWI.

- **Clinical Strategy**

- How well the scientific rationale for testing the intervention is supported by the preliminary data or a critical review and analysis of the literature.
 - ***For the Data-Based Treatment Track:*** How well data from previous GWI research supports the proposed trial.
 - ***For the Symptom-Based Treatment Track:*** How strongly the rationale (and any data) suggests the proposed intervention will be effective in treating GWI.
- To what degree the proposed intervention addresses clinical need(s).
- How well the inclusion and randomization criteria are appropriate for the proposed clinical trial in terms of the pathobiology and symptomology of GWI and overall research strategy.
- If the application proposes use of a case definition, in addition to the CDC and Kansas case definitions, how well that case definition is described and justified.

- Whether a member of the study team holds the IND/IDE for the indication proposed or whether the timeline proposed for obtaining the IND/IDE is appropriate (if applicable).
- Whether plans to comply with GMP, GLP, and GCP guidelines are appropriate.
- **Statistical Plan**
 - To what degree the statistical model and data analysis plan are suitable for the planned study.
 - How the statistical plan, including sample size projections and power analysis, is adequate for the study and all proposed correlative studies.
 - Whether the statistical plan compensates for the use of a subpopulation of a recruited sample population to ensure appropriate power can be achieved within the subpopulation study.
- **Recruitment, Accrual, and Feasibility**
 - How well the PI demonstrates the availability of Gulf War Veterans for the proposed clinical trial and the prospect of their participation.
 - Whether the PI has provided a letter from an appropriate authority showing approved access to Gulf War Veterans.
 - The degree to which the recruitment, informed consent, screening, and retention processes for human subjects will meet the needs of the proposed clinical trial.
 - How well the application identifies possible delays (e.g., slow accrual, attrition) and presents adequate contingency plans to resolve them.
 - To what extent the proposed clinical trial might affect the daily lives of the individual human subjects participating in the study (e.g., Will human subjects still be able to take their regular medications while participating in the clinical trial? Are human subjects required to stay overnight in a hospital?).
- **Ethical Considerations**
 - How the level of risk to human subjects is minimized and how the safety monitoring and reporting plan is appropriate for the level of risk.
 - To what degree privacy issues are appropriately considered.
 - To what degree the process for recruitment and seeking informed consent are appropriate with respect to subject protections and whether safeguards are in place for vulnerable populations.
 - To what extent are proposed sample collection and laboratory evaluations planned to coincide with standard clinical care and to otherwise minimize risk, discomfort, and inconvenience to study subjects.
 - The adequacy of integration of bioethical expertise in the project.

- **Personnel and Communication**
 - Whether the composition of the study team (e.g., study coordinator, statistician) is appropriate.
 - To what degree the study team’s background and expertise are appropriate to accomplish the proposed work (e.g., statistical expertise, expertise in the disease, and clinical studies).
 - How the levels of effort of the study team members are appropriate for successful conduct of the proposed trial.
 - How well the logistical aspects of the proposed clinical trial (e.g., communication plan, data transfer and management, standardization of procedures) meet the needs of the proposed clinical trial.
- **Transition Plan**
 - Whether the funding strategy, schedule, and milestones described are appropriate to bring the outcome(s) to the next level of clinical trials or to Veterans with GWL.
 - If applicable, how appropriate and well described is the development plan to support a product label change.
 - Whether appropriate collaborations and other resources for providing continuity of development are established and/or well described.
 - How well the potential risk analysis for cost, schedule, manufacturability, and sustainability is developed.
 - How well the application identifies intellectual property ownership, describes any appropriate intellectual and material property plan among participating organizations (if applicable).

In addition, the following unscored criteria will also contribute to the overall evaluation of the application:

- **Budget**
 - Whether the direct maximum costs are equal to or less than the allowable direct maximum costs as published in the Program Announcement/Funding Opportunity.
 - Whether the budget is appropriate for the proposed research.
- **Environment**
 - To what degree the scientific environment, clinical setting, and the accessibility of institutional resources support the clinical trial at each participating center or institution (including collaborative arrangements).
 - Whether there is evidence for appropriate institutional commitment from each participating institution.

- **Application Presentation**
 - To what extent the writing, clarity, and presentation of the application components influence the review.
- 2. Programmatic Review:** To make funding recommendations and select the application(s) that, individually or collectively, will best achieve the program objectives, the following criteria are used by programmatic reviewers:
- a. Ratings and evaluations of the peer reviewers**
 - b. Relevance to the mission of the DHP and FY16 GWIRP, as evidenced by the following:**
 - Adherence to the intent of the award mechanism
 - Program portfolio composition
 - Relative impact
 - Relative outcomes from the PI’s previous GWI-related research, if applicable.

C. Recipient Qualification

For general information on required qualifications for award recipients, refer to the General Application Instructions, Appendix 1.

D. Application Review Dates

All application review dates and times are indicated on the [title page](#) of this Program Announcement/Funding Opportunity.

E. Notification of Application Review Results

Each PI and organization will receive email notification of posting of the funding recommendation in eBRAP. Each PI will receive a peer review summary statement on the strengths and weaknesses of the application.

IV. ADMINISTRATIVE ACTIONS

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

A. Rejection

The following will result in administrative rejection of the pre-application:

- Preproposal Narrative is missing.

The following will result in administrative rejection of the application:

- Submission of an application for which a letter of invitation was not received.

- Project Narrative exceeds page limit.
- Project Narrative is missing.
- Budget is missing.
- Submission of the same research project to different Funding Opportunities within the same program and fiscal year.
- Human Subject Recruitment and Safety Procedures (Attachment 6) is missing.
- Intervention (Attachment 7) is missing.
- Data Management Plan (Attachment 8) is missing.

B. Modification

- Pages exceeding the specific limits will be removed prior to review for all documents other than the Project Narrative.
- Documents not requested will be removed.

C. Withdrawal

The following may result in administrative withdrawal of the pre-application or application:

- An FY16 GWIRP Programmatic Panel member is named as being involved in the research proposed or is found to have assisted in the pre-application or application processes including, but not limited to, concept design, application development, budget preparation, and the development of any supporting documentation. *A list of the FY16 GWIRP Programmatic Panel members can be found at <http://cdmrp.army.mil/gwirp/panels/panels16>.*
- The application fails to conform to this Program Announcement/Funding Opportunity description to the extent that appropriate review cannot be conducted.
- Inclusion of URLs, with the exception of links in References Cited and Publication and/or Patent Abstract sections.
- Page size is larger than 8.5 inches x 11.0 inches (approximately 21.59 cm x 27.94 cm).
- To preserve the integrity of its peer and programmatic review processes, the CDMRP discourages inclusion of any employee of its review contractors having any role in the preparation, research or other duties for submitted applications. For FY16, the identities of the peer review contractor and the programmatic review contractor may be found at the CDMRP website (<http://cdmrp.army.mil/about/2tierRevProcess>). Applications that include names of personnel from either of these companies will be administratively withdrawn unless plans to manage COIs are provided and deemed appropriate by the Government. Refer to the General Application Instructions, Appendix 1, for detailed information.
- Personnel from applicant or collaborating organizations are found to have contacted persons involved in the review process to gain protected evaluation information or to influence the evaluation process.

- The invited application does not propose the same research project described in the pre-application.
- The proposed research is not a clinical trial.
- The proposed project includes preclinical research.
- For studies requiring an IND or IDE, documentation of IND/IDE status-is not provided.
- The application describes research focusing on ALS. (Applications that focus on GWI symptomatology may include Gulf War Veterans with ALS if the latter disorder is included in the study's GWI case definition.)
- The application describes research whose principal focus is on psychiatric disease or psychological stress as the primary cause of GWI.
- The PI does not meet the eligibility requirement.

D. Withhold

Applications that appear to involve research misconduct will be administratively withheld from further consideration pending organizational investigation. The organization will be required to provide the findings of the investigation to the USAMRAA Grants Officer for a determination of the final disposition of the application.

V. AWARD ADMINISTRATION INFORMATION

A. Award Notice

Awards will be made no later than September 30, 2017. Refer to the General Application Instructions, Appendix 4, for additional award administration information.

Any assistance instrument awarded under this Program Announcement/Funding Opportunity will be governed by the award terms and conditions, which conform to DoD's implementation of the Office of Management and Budget (OMB) circulars applicable to financial assistance. Terms and conditions of new awards made after December 26, 2014 may include revisions to reflect DoD implementation of new OMB guidance in the Code of Federal Regulations, Title 2, Part 200, "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards" (2 CFR part 200).

B. Administrative Requirements

Refer to the General Application Instructions, Appendix 4 for general information regarding administrative requirements.

C. National Policy Requirements

Refer to the General Application Instructions, Appendix 5 for general information regarding national policy requirements.

D. Reporting

Refer to the General Application Instructions, Appendix 4, Section H, for general information on reporting requirements.

Quarterly technical progress reports will be required.

E. Award Transfers

The organization transfer of an award supporting a clinical trial is strongly discouraged and in most cases will not be allowed. Approval of a transfer request will be on a case-by-case basis at the discretion of the Grants Officer. An organizational transfer of an award will not be allowed in the last year of the (original) period of performance or any extension thereof.

Refer to the General Application Instructions, Appendix 4, Section L, for general information on organization or PI changes.

VI. VERSION CODES AND AGENCY CONTACTS

A. Program Announcement/Funding Opportunity and General Application Instructions Version

Questions related to this Program Announcement/Funding Opportunity should refer to the Program name, the Program Announcement/Funding Opportunity name, and the Program Announcement/Funding Opportunity version code [20160210i]. The numeric sequence of the Program Announcement/Funding Opportunity version code will match the General Applications Instructions version code [20160210].

B. CDMRP Help Desk

Questions related to Program Announcement/Funding Opportunity content or submission requirements as well as questions related to the submission of the pre-application through eBRAP should be directed to the CDMRP Help Desk, which is available Monday through Friday from 8:00 a.m. to 5:00 p.m. ET. Response times may vary depending upon the volume of inquiries.

Phone: 301-682-5507

Email: help@eBRAP.org

C. Grants.gov Contact Center

Questions related to application submission through Grants.gov portal should be directed to the Grants.gov Contact Center, which is available 24 hours a day, 7 days a week (closed on U.S. Federal holidays). Note that the CDMRP Help Desk is unable to provide technical assistance with Grants.gov submission.

Phone: 800-518-4726; International 1-606-545-5035

Email: support@grants.gov

Sign up on Grants.gov for “send me change notification emails” by following the link on the Synopsis page for the Program Announcement/Funding Opportunity or by responding to the prompt provided by Grants.gov when first downloading the Grants.gov application package. If the Grants.gov application package is updated or changed, the original version of the application package may not be accepted by Grants.gov.

VII. APPLICATION SUBMISSION CHECKLIST

Grants.gov Application Components	Upload Order	Action	Completed
SF-424 (R&R) Application for Federal Assistance		Complete form as instructed.	
Attachments Form	1	Project Narrative: Upload as Attachment 1 with file name "ProjectNarrative.pdf."	
	2	Supporting Documentation: Upload as Attachment 2 with file name "Support.pdf."	
	3	Technical Abstract: Upload as Attachment 3 with file name "TechAbs.pdf."	
	4	Lay Abstract: Upload as Attachment 4 with file name "LayAbs.pdf."	
	5	Statement of Work: Upload as Attachment 5 with file name "SOW.pdf."	
	6	Human Subject Recruitment and Safety Procedures: Upload as Attachment 6 with file name "HumSubProc.pdf."	
	7	Intervention: Upload as Attachment 7 with file name "Intervention.pdf."	
	8	Data Management: Upload as Attachment 8 with file name "Data_Manage.pdf."	
	9	Study Personnel and Organization: Upload as Attachment 9 with file name "Personnel.pdf."	
	10	Impact Statement: Upload as Attachment 10 with file name "Impact.pdf."	
	11	Transition Plan: Upload as Attachment 11 with file name "Transition.pdf."	
	12	IND/IDE Documentation: Upload as Attachment 12 with file name "IND-IDE.pdf."	
	13	Outcomes Statement: Upload as Attachment 13 with file name "Outcomes./pdf. "	
	14	Collaborating DoD Military Facility Budget Form(s): Upload Attachment 14 with file name "MFBudget.pdf," if applicable.	
Research & Related Senior/Key Person Profile (Expanded)		Attach PI Biographical Sketch (Biosketch_LastName.pdf) to the appropriate field.	
		Attach PI Previous/Current/Pending Support (Support_LastName.pdf) to the appropriate field.	
		Attach Biographical Sketch (Biosketch_LastName.pdf) for each senior/key person to the appropriate field.	
		Attach Previous/Current/Pending (Support_LastName.pdf) for each senior/key person to the appropriate field.	
Research & Related Budget		Complete as instructed. Attach Budget Justification (BudgetJustification.pdf) to the appropriate field.	
Project/Performance Site Location(s) Form		Complete form as instructed.	
R & R Subaward Budget Attachment(s) Form		Complete form as instructed.	