

Program Announcement

Department of Defense Congressionally Directed Medical Research Programs

Gulf War Illness Research Program

Innovative Treatment Evaluation Award

Funding Opportunity Number: W81XWH-11-GWIRP-ITEA

Catalog of Federal Domestic Assistance Number: 12.420

SUBMISSION AND REVIEW DATES AND TIMES

- **Pre-application Submission Deadline: 5:00 p.m. Eastern time (ET), May 25, 2011**
- **Invitation to Submit an Application: June 24, 2011**
- **Application Submission Deadline: 11:59 p.m. ET, August 24, 2011**
- **Scientific Peer Review: November 2011**
- **Programmatic Review: January 2012**

New for fiscal year 2011 (FY11): The formal protocol for the proposed clinical trial should not be submitted as the Innovative Treatment Evaluation Award (ITEA) application. A formal protocol will be requested if the ITEA application is recommended for funding.

New for FY11: The Grants.gov Research & Related Budget form is a mandatory component of all Grants.gov application packages.

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I. FUNDING OPPORTUNITY DESCRIPTION

A. Program Description

The Gulf War Illness Research Program (GWIRP) was established in FY94 to study the health effects of deployment to the 1990-1991 Persian Gulf War on U.S. warfighters. Appropriations for the GWIRP from FY94 through FY10 totaled \$243 million (M). The FY11 appropriation is \$8.0M.

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 chronic headache, widespread pain, cognitive difficulties, debilitating fatigue, gastrointestinal problems, respiratory symptoms, and other abnormalities that are not explained by established medical diagnoses or standard laboratory tests.

The population of ill Gulf War veterans 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 32 percent (or 175,000 to 210,000) of Gulf War veterans continue to experience symptoms associated with their deployment as described above.

The GWIRP focuses its funding on innovative projects that have the potential to make a significant impact on GWI. These may take the form of identification of objective indicators of pathology that distinguish ill from healthy veterans, or studies to understand the underlying pathobiology of GWI, and development of effective treatments for GWI. The GWIRP encourages risk-taking research; however, all projects must demonstrate solid judgment and sound rationale.

B. Award Information

The FY11 GWIRP is offering two award mechanisms to evaluate potential interventions for Gulf War Illness: the Clinical Trial Award (CTA) and the Innovative Treatment Evaluation Award (ITEA).

The Innovative Treatment Evaluation Award described in this Program Announcement/Funding Opportunity is intended to support the initial evaluation of a treatment or intervention in smaller, early phase or pilot clinical trials (Phase II or I/II, devices in FDA Class I-III), and does not require preliminary data.

In contrast, the CTA supports the evaluation of interventions in larger, more definitive clinical trials (Phase II or III), where preliminary and pre-clinical evidence indicates the potential for substantial benefit for veterans with GWI. (For more information about the CTA, see <http://cdmrp.army.mil/funding/gwirp.htm>).

The ITEA mechanism was first offered in FY09. Since then, 10 ITEA applications have been received, and 4 have been recommended for funding.

The ITEA supports the early systematic evaluation of innovative treatment interventions with the potential to impact the health and lives of veterans with GWI. The results of preliminary studies funded by this award can provide proof of principle data, and support future development of broader efficacy studies of the proposed interventions.

Innovation is an important component of the ITEA. An application may demonstrate innovation not only by investigating a novel therapeutic approach for GWI, but also by studying a treatment that may have been utilized for other chronic multi-symptom illnesses, but has not yet been studied in ill Gulf War veterans. For example, a pharmacological treatment or nutritional supplement suggested by previous research to be beneficial for fibromyalgia or chronic fatigue syndrome could be evaluated in veterans with GWI under the ITEA. However, the focus of the research must be clearly on GWI and not on another disease process.

This award mechanism is designed to evaluate a broad scope of treatment approaches with potential for widespread application for GWI. Treatment approaches may include pharmacologic or other physiological interventions, including either conventional or complementary treatments, or combinations of these approaches. A variety of experimental and non-experimental study designs are acceptable under this award mechanism. The proposed study design will depend on the specific treatment or intervention to be assessed, resources available to clinical investigators, and the level of evidence currently available to support the proposed treatment for GWI. Examples of potential prospective designs may include systematic case series, prospective outcome evaluation studies, small-scale randomized trials, a combination of these, or other innovative prospective methods. Also of interest are interventions based on biological alterations identified in veterans with GWI. All studies involving interventions, regardless of design, are considered clinical trials.

Health outcomes of interest for the proposed trial should include effects of interventions on:

- Global health measures (biomarkers) and/or functional status
- Improvements in symptom complexes (e.g., cognitive function, musculoskeletal/pain symptoms, gastrointestinal symptoms, fatigue, respiratory problems, skin abnormalities, sleep difficulties) individually and as they may interact with each other
- GWI subgroups characterized by symptom or other clinical characteristics

Studies whose principal focus is on treatment of psychiatric conditions, including Post-Traumatic Stress Disorder (PTSD), will not be funded under this Program Announcement/Funding Opportunity.

While Gulf War veterans are affected by Amyotrophic Lateral Sclerosis (ALS, or Lou Gehrig's disease), at twice the rate of veterans who did not serve in the Gulf War, the GWIRP will not accept proposals focusing on ALS research. The Office of the Congressionally Directed Medical Research Programs (CDMRP) is offering a separate ALS Research Program in FY11 (see <http://cdmrp.army.mil/alsrp>).

Applications must clearly indicate how GWI cases, including any targeted illness subgroups, will be defined for purposes of the study. ***Principal Investigators (PIs) must provide a published case definition they intend to use to define their GWI population.*** Any case definition must recognize the multi-symptom nature of GWI. ***NOTE:*** The 2008 report of the Research Advisory Committee on Gulf War Veterans' Illnesses, *Gulf War Illness and the Health of Gulf War Veterans*, provides information on GWI case definitions (pp. 29-30, p. 57), previous treatment research in Gulf War veterans (pp. 36-39), and treatment research related to other multisymptom conditions (pp. 285-287). The report is available online at: <http://www1.va.gov/RACGWVI>

Given the innovative nature of the ITEA, applications are not required to include preliminary data. However, if provided, preliminary data do not necessarily have to come from the GWI research field. Whether or not preliminary data is included in the application, the proposed research project should be based on sound scientific rationale that is established through logical reasoning and critical review and analysis of the literature.

If there is significant preliminary and preclinical data reflecting considerable development of a treatment with applicability to GWI, the proposal would not be deemed innovative in keeping with the intent of the ITEA. In this case, investigators are encouraged to apply to the GWIRP CTA, which supports Phase II or Phase III clinical trials (<http://cdmnp.army.mil/funding/gwirp>).

Funding from this award mechanism must support a clinical trial and cannot 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 exploratory information, safety, effectiveness, and/or efficacy. This outcome represents a direct effect on the human subject of that intervention or interaction. PIs seeking funding for a preclinical research project should consider one of the other award mechanisms/funding opportunities being offered. The term "human subjects" is used in this Program Announcement/Funding Opportunity to refer to individuals who will be recruited for or who will participate in the proposed clinical trial.

PIs must clearly specify which type of clinical trial is being proposed: Phase II or Phase I/II for drug trials, Class I-III for device trials, or a description of other innovative trial designs. For descriptions of each type of clinical trial, please refer to the FDA 21CFR 312.21 ([link](#)), www.clinicaltrials.gov, or the NIH PH398 Instructions (p.III-26). For more information on clinical research, a Human Subject Resource Document is provided at https://cdmnp.org/Program_Announcements_and_Forms. Retrospective or non-interventional study designs are not considered clinical trials and should be submitted to the FY11 GWIRP Investigator-Initiated Research Award (see <http://cdmnp.army.mil/funding/gwirp>).

If the study proposed involves the use of a drug that has not been approved by the Food and Drug Administration (FDA) for its investigational use then an Investigational New Drug (IND) application to the FDA may be required and must be submitted to the FDA prior to the grant submission. If the proposed study involves an Investigational Device that has not been approved or cleared by FDA for its investigational clinical use, the study may be required to comply with the FDA Investigational Device Exemption (IDE) regulations. If applicable, the IDE application

must be submitted prior to the grant submission. The Government reserves the right to withdraw funding if the documented status of the IND or IDE has not been obtained within 6 months of the award date.

The following are important aspects of submission for the ITEA:

- The proposed clinical trial is expected to begin no later than 12 months after the award date.
- It is expected that the intervention, drug, or device to be used in the proposed trial will be available in sufficient quantities and ready for clinical trials at the time that the award is made.
- PIs must demonstrate availability of and access to a suitable Gulf War veteran population that will support a meaningful outcome for the study. Discuss how accrual goals will be achieved, and how standards of care may impact the study population. PIs are encouraged to collaborate with an investigator who has demonstrated access to a population of ill and healthy Gulf War veterans, particularly investigators within the U.S. Department of Veterans Affairs.
- Clearly articulate the statistical analysis plan, as applicable to the research design. Include a power analysis reflecting sample size projections that will clearly answer the objectives of the study.
- Discuss the potential impact of the study results for ill Gulf War veterans.
- Include a study coordinator who will guide the clinical protocol through Institutional Review Board (IRB), and other regulatory approval processes, coordinate activities from all sites participating in the trial, and coordinate human subject accrual, as appropriate to the study design.
- Demonstrate institutional support.

Use of Human Subjects and Human Anatomical Substances: All Department of Defense (DOD)-funded research involving new and ongoing research with human subjects and human anatomical substances must be reviewed and approved by the US Army Medical Research and Materiel Command (USAMRMC) Office of Research Protections (ORP), Human Research Protection Office (HRPO), in addition to the local IRB of record. Local IRB approval at the time of submission is NOT required. The HRPO is mandated to comply with specific laws and directives governing all research involving human subjects that is supported by the DOD. These laws and directives are rigorous and detailed, and will require information in addition to that supplied to the local IRB. Allow a minimum of 4 months for regulatory review and approval processes. Refer to the General Application Instructions, Appendix 5, D., for more information.

C. Eligibility Information

- Independent investigators at all academic levels (or equivalent) are eligible to apply.
- Cost sharing/matching is not an eligibility requirement.
- Refer to the General Application Instructions, Appendix 1, for general eligibility information.

D. Funding

- The maximum period of performance is **3** years.
- The maximum allowable direct costs for the entire period of performance are **\$450,000** plus indirect costs. However, investigators are encouraged to submit applications for smaller-scale projects that require lower funding levels.
- 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.
- All direct and indirect costs of any subaward (subgrant or subcontract) must be included in the total direct costs of the primary award.
- Regardless of the period of performance proposed, the applicant may not exceed the maximum allowable direct costs. Indirect costs shall be proposed in accordance with the organization's negotiated rate agreement.

Refer to the General Application Instructions, Section II.C., for budget regulations and instructions for the Research & Related Budget form. In addition, for this award mechanism, direct costs:

Must be requested for:

- Travel for the PI to attend one DOD military research-related meeting to be determined by the CDMRP during the award performance period.

May be requested for (not all-inclusive):

- Salary
- Equipment
- Research supplies
- Clinical research costs
- Support for multidisciplinary collaborations
- Travel between collaborating organizations
- Travel costs of up to \$1,800 per year to attend scientific/technical meetings

The CDMRP expects to allot approximately \$1.44M of the \$8M FY11 GWIRP appropriation to fund approximately 2 Innovative 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 is a multi-step process requiring both (1) pre-application submission through the CDMRP eReceipt System (<https://cdmrp.org/>) and (2) application submission through Grants.gov (<http://www.grants.gov/>).

Submission of the same research project to different funding opportunities within the same program and fiscal year is discouraged. The Government reserves the right to reject duplicative applications.

A. Where to Obtain the Application Package

To obtain the complete application package, including all required forms, perform a Grants.gov (<http://www.grants.gov/>) basic search using the Funding Opportunity Number: W81XWH-11-GWIRP-ITEA.

B. Pre-Application Submission Content and Form

All pre-application components must be submitted by the PI through the CDMRP eReceipt System (<https://cdmrp.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.

Changes in the PI or organization after the pre-application deadline are strongly discouraged. If a change in PI or organization is necessary after submission of the pre-application, the PI must contact the CDMRP Help Desk at help@cdmrp.org or 301-682-5507. Approval of a change in PI or organization for an ITEA application will be reviewed on a case-by-case basis.

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

- **Application Information – Tab 1**
- **Application Contacts – Tab 2**
- **Collaborators and Conflicts of Interest (COI) – Tab 3**
- **Required Files – Tab 4**

Preproposal Narrative (three-page limit): The Preproposal Narrative page limit applies to text and any figures, tables, graphs, photographs, diagrams, chemical structures, pictures, pictorials, and cartoons.

The Preproposal Narrative should include the following:

- **Research Idea:** State the ideas and reasoning on which the proposed intervention is based. Describe how the preliminary data, if provided, and rationale support the research idea.
- **Research Strategy:** Concisely state the project's objectives and specific aims. Describe the published case definition of GWI to be used in the study.

- **Impact:** State explicitly 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 trial will, if successful, lead to future large-scale clinical trials.
- **Innovation:** Describe how the proposed intervention is new or unstudied in the population of ill Gulf War veterans.
- **Personnel:** Briefly state the qualifications of the PI and key personnel to perform the proposed research project.

Pre-Application Supporting Documentation: The items to be included as supporting documentation for the pre-application are limited to:

- References Cited (one-page limit): List relevant references 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). The inclusion of Internet URLs to references is encouraged.
- PI and Key Personnel Biographical Sketches (four-page limit per individual)
- **Submit Pre-application – Tab 5**
- **Other Documents Tab**

No additional documents are required.

Pre-Application Screening

- **Pre-Application Screening Criteria**

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

- **Research Idea:** How the focus of the research will advance treatments or interventions for GWI. How well the preliminary data, if provided, and rationale support the research idea.
- **Research Strategy:** How well the specific aims support the research idea. Whether the PI proposed to use a published case definition of GWI in conducting the research.
- **Impact:** How the research describes a potentially effective treatment or intervention for GWI. How the described research, if successful, will lead to future large-scale clinical trials.
- **Innovation:** How the research is innovative in bringing a new or unstudied treatment or intervention to the population of Gulf War veterans.
- **Personnel:** How the qualifications of the PI and key personnel are appropriate to perform the proposed research project.

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

Following the pre-application screening, PIs will be notified of whether or not they are invited to submit an application; however, they will not receive feedback (e.g., a critique of strengths and weaknesses) on their pre-application.

Pre-application notification dates are indicated on the [title page](#) of this Program Announcement/Funding Opportunity.

C. Application Submission Content and Form

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

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

Grants.gov application package components: For the Innovative 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. **SF 424 (R&R) Application for Federal Assistance Form:** Refer to the General Application Instructions, Section II.C., for detailed information.

2. **Attachments Form**

New for FY11: The Project Narrative is NOT the formal clinical trial protocol (as in previous years). 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.”

Describe the proposed project in detail using the outline below.

- **Background:** Describe the rationale for the study questions and/or hypotheses. Include a literature review and preliminary data, if provided, that led to the development of the proposed clinical trial. The background section should clearly support the choice of study variables. This section should establish the relevance of the study for ill Gulf War veterans 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 and declare the source of prior funding. Specifically identify the portions of the study that will be supported with funds from this award.

- **Objectives/Specific Aims/Hypotheses:** Describe the purpose and objectives of the study with detailed specific aims and/or study questions/hypotheses.
- **Study Design:** Describe the type of study to be performed (e.g., prospective, randomized, case control, etc.). Clearly specify which type of clinical trial is being proposed: Phase II or Phase I/II for drug trials, Class I-III for device trials, or a description of other innovative designs. Outline the proposed methodology in sufficient detail to show a clear course of action.
 - Describe the intervention to be tested and identify the projected outcomes.
 - Define the study variables and endpoints and how they will be measured.
 - Describe the methods that will be used to obtain a sample of human subjects from the accessible population (i.e. convenience, simple random, stratified random).
 - 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).
 - Describe the reliability and validity of psychometric measures, if applicable.
 - Describe the case definition of Gulf War illness to be used in the study. Use of a published case definition is required. Any case definition must recognize the multi-symptom nature of GWI.
- **Statistical Plan and Data Analysis:** Include a power analysis to demonstrate that the sample size is appropriate to meet the objectives of the study. Specify the approximate number of human subjects that will be enrolled. If multiple study sites are involved, state the approximate number to be enrolled at each site. Describe the data analysis plan in a manner that is consistent with the study objectives.
- **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. ***Each component has no page limit unless otherwise noted.***
 - **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 USAMRMC. Indicate if Government-owned facilities or equipment are proposed for use.

Reference should be made to the original or present contract under which the facilities or equipment items are now accountable. There is no form for this information.

- Publications and/or Patent Abstracts (five-document limit): Include relevant publication URLs and/or patent abstracts. If publications are not publicly available, then they must be included. Extra items will not be reviewed.
- Letters of Organizational Support (two-page limit per letter): Provide a letter (or letters if applicable), signed by the Department Chair or appropriate organization official, reflecting the laboratory space, equipment, and other resources available for the project.

If the PI is a clinician, the organization must clearly demonstrate a commitment to the clinician's research.

- Letters of Collaboration (if applicable) (two-page limit per letter): 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.
- Intellectual and Material Property Plan (if applicable): Provide a plan for resolving intellectual and material property issues among participating organizations.
- 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, for more information about the CDMRP expectations for making data and research resources publically available.
- **Attachment 3: Technical Abstract (one-page limit):** Upload as "TechAbs.pdf."

The technical abstract is used by all reviewers; however, programmatic reviewers do not have access to the full application and rely on the technical abstract for appropriate description of the project's key aspects.

Use the outline below.

- Background: Present the ideas and reasoning behind the proposed work.
- Objective/Hypothesis: State the objective/hypothesis to be tested. Provide evidence or rationale that supports the objective/hypothesis.
- Specific Aims: State the specific aims of the study.
- Study Design: Briefly describe the study design including appropriate controls.
- Impact: Summarize briefly how the proposed project will have an impact on ill Gulf War veterans.

- **Attachment 4: Public Abstract (one-page limit):** Upload as “PublicAbs.pdf.”
Do not duplicate the technical abstract. The public abstract is used by consumer peer reviewers along with other components of the application package.
 - Describe the scientific objective and rationale for the proposed project in a manner that will be readily understood by readers without scientific or medical backgrounds.
 - Describe the ultimate applicability 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 treatments for Gulf War Illness?
- **Attachment 5: Statement of Work (SOW) (three-page limit):** Upload as “SOW.pdf.” Refer to the General Application Instructions, Section II.C., for detailed information.
- **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 Gulf War veteran 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 (population from which the sample will be recruited/drawn). Demonstrate that the research team has access to the proposed study population.

In addition, discuss past efforts in recruiting human subjects from the target population for previous clinical trials (if applicable), any potential barriers to accrual, and plans for addressing unanticipated delays. Include justification of any age, race, ethnicity, or sex limitations provided.
 - 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.

Inclusion of Women and Minorities in Study. Consistent with the Belmont Report 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, health care provider identification, etc.).
- 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.
 - Include a detailed description of and justification for the compensation plan if the human subjects will be compensated for participation in the study.
 - Describe the recruitment and advertisement materials. The recruitment materials should not be coercive or offer undue inducements, and should accurately reflect the study.
 - Provide a letter(s) from an appropriate authority showing approved access to Gulf War veterans or use of data from veterans (e.g., Defense Manpower Data Center Data Request System, collaborating investigator(s) from the Veterans Administration, etc.), if applicable.
- d. Description of the Informed Consent Process:** Specifically describe the plan for obtaining informed consent from human subjects.
- Identify who is responsible for explaining the study, answering questions, and obtaining informed consent.
 - 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, if human subjects who cannot give their own consent to participate will be included 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://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=>

[browse usc&docid=Cite:+10USC980](#). Please refer to the General Application Instructions, Appendix 5, for more information.

- Provide a draft in English of the proposed Informed Consent Form. A plan for ensuring that human subjects' questions will be addressed during the consent process and throughout the trial should be included.
 - **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. 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 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, etc.).
 - 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.
 - **Potential benefits:** Describe real 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:** As applicable, the description of the intervention should include the following components: source, dose, schedule, administration route, washout period, duration of the intervention, and concomitant medications allowed. Descriptions of devices should include detailed operational instructions, any potential risks to users, and intended benefits. Other types of interventions should be fully described.
 - 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.
- **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 study 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 USAMRMC are eligible to review study records.
 - Address requirements for reporting sensitive information to state or local authorities.
 - **Disposition of data:** Describe where data (both electronic and hard copy) will be stored, who will keep the data, how the data will be stored, and the length of time data will be stored.
 - **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 will be stored, any special conditions required, labeling, and 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.
 - **Laboratories 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):** Upload as “Personnel.pdf.” The Study Personnel and Organization attachment should include the components listed below.
 - a. **Principal Investigator/Study Staff:** Provide an organizational chart identifying key members of the study team including institution/center/department. Briefly describe their roles on the project. A medical monitor (external to the study and not reimbursed by the study) and study coordinator should be included if appropriate for the proposed study design.
 - b. **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).
 - **Attachment 10: Surveys, Questionnaires, and Other Data Collection Instruments, if applicable (no page limit):** Upload as “Surveys.pdf.” The Surveys, Questionnaires, and Other Data Collection Instruments attachment should include a copy of the most recent version of surveys, questionnaires, data collection forms, rating scales, interview guides, or other instruments. For each instrument, describe how the information collected is related to the objectives of the study.
 - **Attachment 11: Impact Statement (one-page limit).** Upload as “Impact.pdf.” The Impact Statement attachment should include the components listed below.

- State explicitly how the proposed work will, if successful, introduce a new, promising treatment for GWI.
 - Describe the short-term impact: Explain how the results of the proposed pilot trial will be used to design more advanced clinical trials in ill Gulf War veterans in the future.
 - 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.
 - Compare the proposed intervention to pharmacologic agents, devices, and/or clinical guidance currently available, if applicable.
 - **Attachment 12: Transition Plan (one-page limit).** Upload as “Transition.pdf.” Provide information on the methods and strategies proposed to move the product to the next phase of clinical trials after successful completion of the award. The transition plan should include the components listed below.
 - Outline a funding strategy that could be used to bring the outcome(s) to the next level of clinical trials.
 - Describe collaborations and other resources that could be used to provide continuity of development.
 - Provide a brief schedule and milestones for bringing the outcome(s) to the next phase of clinical trials.
 - **Attachment 13: Innovation Statement (one-page limit):** Upload as “Innovation.pdf.”
 State how the pilot trial demonstrates innovation in bringing a new or unstudied treatment or intervention to the population of ill Gulf War veterans. Innovation may include adapting treatments for a related disorder, such as fibromyalgia or chronic fatigue syndrome, for application to ill Gulf War veterans.
- 3. Research & Related Senior/Key Person Profile (Expanded) Form:** Refer to the General Application Instructions, Section II.C., for detailed information.
- PI Biographical Sketch (four-page limit): Upload as “Biosketch_LastName.pdf.”
 - PI Current/Pending Support (no page limit): Upload as “Support_LastName.pdf.”
 - Key Personnel Biographical Sketches (four-page limit each): Upload as “Biosketch_LastName.pdf.”
 - Key Personnel Current/Pending Support (no page limit): Upload as “Support_LastName.pdf.”
- 4. Research & Related Budget:** Refer to the General Application Instructions, Section II.C., for detailed information.
- Budget Justification (no page limit): Upload as “BudgetJustification.pdf.”

5. **Project/Performance Site Location(s) Form:** Refer to the General Application Instructions, Section II.C., for detailed information.
6. **R & R Subaward Budget Attachment(s) Form (if applicable):** Refer to the General Application Instructions, Section II.C., for detailed information.

D. 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 any one of the deadlines shall result in application rejection.

E. Other Submission Requirements

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

All applications must be submitted through Grants.gov. Organizations are required to provide a Data Universal Number System (DUNS) number and register with the Central Contractor Registry (CCR) to submit applications through the Grants.gov portal. Refer to the General Application Instructions, Appendix 3, for information on Grants.gov requirements.

III. APPLICATION REVIEW INFORMATION

A. Application Review and Selection Process

All applications are evaluated by scientists, clinicians, and consumer advocates using a two-tier review process. The first tier is a peer review of applications against established criteria for determining technical merit. The second tier is a programmatic review that compares applications to each other and makes recommendations for funding to the Commanding General, (USAMRMC), based on technical merit, the relevance to the mission of the DOD and CDMRP, and the specific intent of the award mechanism. The highest scoring applications from the first tier of review are not automatically recommended for funding. Additional information about the two-tier review 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. Each level of review requires panelists to sign a non-disclosure statement attesting that application and evaluation information will not be disclosed outside the panel. Violations of the non-disclosure statement can result in the dissolving of a panel(s) and other corrective actions. Organizational personnel and PIs 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 panelists or PIs that compromise the confidentiality of the review process may also result in suspension or debarment of their employing organizations from Federal awards. Furthermore, it is a crime for Federal officials to disclose confidential information of one party to another third party (Title 18 United States Code 1905).

B. Application Review Criteria

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**

- How the results of the proposed pilot trial will affect potential clinical applications for GWI (e.g., treatment, symptom management, and/or quality of life).
- How relevant the anticipated outcomes of the proposed clinical trial are to veterans with Gulf War Illness.
- How well the sample population represents the targeted population of ill Gulf War veterans that might benefit from the proposed intervention
- If successful, how the results of the proposed pilot trial will be used to design more advanced clinical trials in the future, providing short-term benefits for ill Gulf War veterans.
- How significantly the long-term benefits of the intervention may impact patient care and/or quality of life for ill Gulf War veterans.

- **Innovation**

- How the proposed treatment is new or unstudied in the ill Gulf War veteran population.
- If applicable, how the research demonstrates innovation by adapting treatments used for a related disorder, such as Fibromyalgia or Chronic Fatigue Syndrome, for application to the ill Gulf War veteran population.

- **Ethical Considerations**

- How the level of risk to human subjects are minimized.
- How well the information provided shows that the procedures are consistent with sound research design and, when appropriate, that these procedures are already in use for diagnostic or treatment purposes.
- To what degree privacy issues are appropriately considered.
- To what degree the process for seeking informed consent is appropriate, and whether safeguards are in place for vulnerable populations.

- **Intervention**

- Whether there is evidence to support availability of the intervention, if applicable, for the proposed clinical trial.
- To what degree the intervention addresses the clinical need(s) described.
- How the intervention advances patient care beyond the currently available interventions.

- Whether a member of the study team holds the IND/IDE and whether the timeline proposed for IND/IDE application is appropriate (if applicable).
- For investigator-sponsored INDs, whether there is institutional support to serve as a sponsor and whether they are equipped to assume the monitoring required by the FDA (if applicable).
- Whether measures are described to ensure the consistency of dosing of active ingredients for nutritional supplements (if applicable).
- **Recruitment, Accrual, and Feasibility**
 - How well the PI addresses the availability of and access to Gulf War veterans for the proposed clinical trial and the prospect of their participation.
 - Whether the PI has demonstrated access to the proposed Gulf War veteran population. Whether the PI has provided a letter from an appropriate authority showing approved access to Gulf War veterans or use of data from veterans.
 - How the recruitment, informed consent, screening, and retention processes for human subjects will be conducted to meet the needs of the proposed clinical trial.
 - Identification of possible delays and evidence of a contingency plan to resolve potential delays (e.g., slow accrual, attrition).
 - To what extent the proposed clinical trial affects 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?).
- **Research Strategy**
 - How well the scientific rationale for testing the intervention is supported by the preliminary data (if provided), critical review and analysis of the literature.
 - How well the study aims, hypotheses or objectives, experimental design, methods, data collection procedures, outcome measures, and analyses are designed to clearly answer the clinical objective.
 - How well the PI described a published case definition for GWI to be used in the proposed clinical trial.
 - How well the inclusion and randomization criteria meet the needs of the proposed clinical trial.
 - How well the exclusion criteria are justified.
- **Statistical Plan** (as appropriate for the proposed clinical trial)
 - How the statistical plan, including sample size projections and power analysis, is adequate for the proposed clinical trial and any proposed correlative studies.
- **Transition Plan**
 - Whether the funding strategy outlined to bring the outcome(s) to the next level of clinical trials is appropriate.

- How the described collaborations and other resources that could be used to provide continuity of development are appropriate.
- How the brief schedule and milestones for bringing the outcome(s) to the next phase of clinical trials is appropriate.

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

- **Personnel and Communication**

- As applicable, whether the composition of the study team (e.g., study coordinator, statistician) is appropriate.
- To what degree the PI and study team's background and expertise are appropriate to accomplish the proposed work (i.e. statistical expertise, expertise in the disease, and clinical studies).
- How the levels of effort of the PI and study team members, as applicable, are appropriate for successful conduct of the proposed trial.
- To what degree the logistical aspects of the proposed clinical trial (e.g., communication plan, data transfer, standardization of procedures) are adequate.

- **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.
- If applicable, how the intellectual and material property plan that is agreed upon by each participating institution is appropriate for the proposed clinical trial.

- **Budget**

- Whether the budget is appropriate for the proposed clinical trial and within the limitations of this Program Announcement/Funding Opportunity.

- **Application Presentation**

- To what extent the writing, clarity, and presentation of the application components influenced the review.

2. Programmatic Review: To determine the application's relevance to the mission of the DOD and CDMRP, as well as to make funding recommendations, the following equally considered criteria are used by programmatic reviewers:

- Ratings and evaluations of the peer reviewers
- Programmatic relevance
- Relative impact and innovation for GWI

- Program portfolio composition
- Adherence to the intent of the award mechanism

C. Recipient Qualification

Refer to the General Application Instructions, Appendix 1, for additional information on organization and Government agency requirements.

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 notification of the funding recommendation. PIs will receive a scientific peer review summary statement on the strengths and weaknesses of the application.

IV. ADMINISTRATIVE ACTIONS

After receipt of pre-applications from CDMRP eReceipt 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 exceeds page limit.
- Preproposal Narrative is missing.

The following will result in administrative rejection of the application:

- Project Narrative is missing.
- Project Narrative exceeds page limit.
- Budget is missing.
- Human Subject Recruitment and Safety Procedures attachment (Attachment 6) is missing.
- Intervention attachment (Attachment 7) is missing.
- Data Management attachment (Attachment 8) is missing.
- Submission of an application for which a letter of invitation was not received.

B. Modification

- Pages exceeding the specified limits will be removed prior to review for all documents other than the Project Narrative and Preproposal Narrative.
- Documents not requested will be removed.
- Following the application deadline, you may be contacted by CDMRP via email with a request to provide certain missing supporting documents (excluding those listed in Section V.A., Rejection). The missing documents must be provided by 5:00 p.m. ET on the second full business day following the date the email was sent. Otherwise, the application will be reviewed as submitted.

C. Withdrawal

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

- FY11 GWIRP IP member is found to be involved in the pre-application or application processes including, but not limited to, concept design, application development, budget preparation, and the development of any supporting document. A list of the FY11 GWIRP IP members may be found at <http://cdmrp.army.mil/gwirp/panels/panels11>.
- Submission of the same research project to different funding opportunities within the same program and fiscal year.
- The application does not conform to this Program Announcement/Funding Opportunity description to an extent that precludes appropriate review.
- Direct costs as shown on the Research and Related Budget form exceed the maximum allowed by this Program Announcement/Funding Opportunity.
- Inclusion of URLs with the exception of links to published references.
- Page size is larger than 8.5 inches x 11.0 inches (approximately 21.59 cm x 27.94 cm).
- The proposed research is not a clinical trial.
- If applicable, IND/IDE has not been submitted.
- The PI does not meet the eligibility criteria.

D. Withhold

Applications that appear to involve research misconduct will be administratively withheld from further consideration pending institutional investigation. The institution will be required to provide the findings of the investigation to the US Army Medical Research Acquisition Activity (USAMRAA) Contracting/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, 2012. Refer to the General Application Instructions, Appendix 4, for additional award administration information.

B. Administrative and National Policy Requirements

Refer to the General Application Instructions, Appendix 4, Section C, for general information regarding administrative and national policy requirements.

C. Reporting

Refer to the General Application Instructions, Appendix 4, Section D, for general information on reporting requirements. Quarterly technical progress reports will be required.

D. Award Transfers

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

The transfer of an ITEA award to another institution is strongly discouraged. A transfer will not be allowed for any institution that includes a clinical trial at its location. Changes in PI are not allowed, except under extenuating circumstances that will be evaluated on a case-by-case basis and at the discretion of the USAMRAA Contracting/Grants Officer.

E. Pre-Award Meeting

At the Government's discretion, the PI and Clinical Study Coordinator (if applicable) may be requested to participate in a pre-award meeting.

VI. AGENCY CONTACTS

A. CDMRP Help Desk

Questions related to Program Announcement/Funding Opportunity content or submission requirements and questions related to the submission of the pre-application through the CDMRP eReceipt System 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: 1-301-682-5507

Email: help@cdmrp.org

B. Grants.gov Contact Center

Questions related to application submission through the 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: 1-800-518-4726

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. If the 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	Action	Completed
SF-424 (R&R) Application for Federal Assistance Form	Complete form as instructed.	
Attachments Form	Upload Project Narrative (ProjectNarrative.pdf) as Attachment 1.	
	Upload Supporting Documentation (Support.pdf) as Attachment 2.	
	Upload Technical Abstract (TechAbs.pdf) as Attachment 3.	
	Upload Public Abstract (PublicAbs.pdf) as Attachment 4.	
	Upload Statement of Work (SOW.pdf) as Attachment 5.	
	Upload Human Subject Recruitment and Safety Procedures (HumSubProc.pdf) as Attachment 6.	
	Upload Intervention (Intervention.pdf) as Attachment 7.	
	Upload Data Management (Data_Manage.pdf) as Attachment 8.	
	Upload Study Personnel and Organization (Personnel.pdf) as Attachment 9.	
	Upload Surveys, Questionnaires, and Other Data Collection Instruments (Surveys.pdf), if applicable, as Attachment 10.	
	Upload Impact Statement (Impact.pdf) as Attachment 11.	
	Upload Transition Plan (Transition.pdf) as Attachment 12.	
	Upload Innovation Statement (Innovation.pdf) as Attachment 13.	
Research & Related Senior/Key Person Profile (Expanded)	Attach PI Biographical Sketch (Biosketch_LastName.pdf) to the appropriate field.	
	Attach PI 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 Current & Pending Support (Support_LastName.pdf) for each senior/key person to the appropriate field.	
Research & Related Budget	Complete form 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.	