

**DEFENSE HEALTH AGENCY RESEARCH & DEVELOPMENT-MEDICAL
RESEARCH AND DEVELOPMENT COMMAND (DHA R&D-MRDC)
CONGRESSIONALLY DIRECTED MEDICAL RESEARCH PROGRAMS (CDMRP)
FISCAL YEAR 2025 (FY25) PEER REVIEWED CANCER RESEARCH PROGRAM
(PRCRP)**

DESCRIPTION OF REVIEW PROCEDURES

The FY25 PRCRP called for applications in response to program announcements (PAs) for three award mechanisms released in May 2025:

- Clinical Trial Award
- Idea Award
- Impact Award

The PRCRP received pre-applications for the Clinical Trial Award, Idea Award and Impact Award in June 2025 and screened them in July 2025. The screening followed the pre-application evaluation criteria specified in the PAs to determine which investigators to invite to submit full applications. The PRCRP received applications in September 2025, and they underwent peer review in November 2025. The PRCRP conducted programmatic review in March 2026.

In response to the Clinical Trial Award PA, the PRCRP received 128 pre-applications and invited 58 of these to submit a full application. The PRCRP received 44 compliant applications and recommended funding 8 (18.2%) for a total of \$32.3 million (M).

In response to the Idea Award PA, the PRCRP received 642 pre-applications and invited 220 of these to submit a full application. The PRCRP received 207 compliant applications and recommended funding 25 (12.1%) for a total of \$13.9M.

In response to the Impact Award PA, the PRCRP received 483 pre-applications and invited 183 of these to submit a full application. The PRCRP received 175 compliant applications and recommended funding 30 (17.1%), representing 40 awards, for a total of \$45.4M.

Table 1 shows submission and award data summarized for the FY25 PRCRP.

Table 1. Submission/Award Data for the FY25 PRCRP*

Mechanism	Pre-Applications Received	Pre-Applications Invited (%)	Compliant Applications Received	Applications Recommended for Funding (%)	Total Funds
Clinical Trial Award	128	58 (45.3%)	44	8 (18.2%)	\$32.26M
Idea Award	642	220 (34.2%)	207	25 (12.1%)	\$13.92M
Impact Award ⁺	483	183 (37.9%)	175	30 (17.1%)	\$45.38M

Mechanism	Pre-Applications Received	Pre-Applications Invited (%)	Compliant Applications Received	Applications Recommended for Funding (%)	Total Funds
Total	1,253	461 (36.8%)	426	63[^] (14.8%)	\$91.56M

*These data reflect funding recommendations only. Pending FY25 award negotiations, final numbers will be available after September 30, 2026.

⁺The Impact Award offered a Partnering PI Option. The PRCRP recommended 30 applications for funding representing 40 awards.

[^]The PRCRP recommended 63 applications for funding representing 73 awards.

Table 2. FY25 PRCRP Application Data by Topic Area

Topic Area	Compliant Applications Received	Applications Recommended for Funding (%)	Total Funds
Bladder cancer	11	1 (9.1%)	\$0.56M
Blood cancer	38	6 (15.8%)	\$10.70M
Brain cancer	28	4 (14.3%)	\$8.02M
Colorectal cancer	50	4 (8.0%)	\$9.75M
Endometrial cancer	11	2 (18.2%)	\$2.30M
Esophageal cancer	7	1 (14.3%)	\$4.20M
Germ cell cancers	3	0 (0.0%)	\$0.00M
Kidney cancer	8	4 (50.0%)	\$3.39M
Liver cancer	27	5 (18.5%)	\$6.51M
Lung cancer	40	5 (12.5%)	\$5.63M
Lymphoma	28	6 (21.4%)	\$6.95M
Mesothelioma	4	0 (0.0%)	\$0.00M
Metastatic cancers	23	3 (13.0%)	\$1.68M
Myeloma	8	1 (12.5%)	\$0.56M
Neuroblastoma	9	1 (11.1%)	\$4.20M
Neuroendocrine tumors	4	1 (25.0%)	\$0.56M
Pancreatic cancer	46	4 (8.7%)	\$5.90M
Pediatric, adolescent and young adult cancers (PAYAC)	14	2 (14.3%)	\$3.13M
Pediatric brain tumors	27	7 (25.9%)	\$6.79M
Sarcoma	24	4 (16.7%)	\$7.56M
Stomach cancer	9	1 (11.1%)	\$1.40M
Thyroid cancer	7	1 (14.3%)	\$1.75M
Total	426	63 (14.8%)	\$91.54M

THE TWO-TIER REVIEW SYSTEM

The CDMRP developed a review model based on recommendations of the National Academy of Sciences report *Strategies for Managing the Breast Cancer Research Program: A Report to the Army Medical Research and Development Command*. The report recommended a two-tier review process that reflects not only the traditional strengths of existing peer review systems but is also tailored to accommodate program goals. The CDMRP adheres to this proven approach for evaluating competitive applications. An application must be favorably reviewed by both levels of the two-tier review system to be funded.

THE FIRST TIER—Scientific Peer Review

The PRCRP conducted peer review of Clinical Trial Award, Idea Award and Impact Award applications in November 2025 utilizing 37 panel(s) of researchers, clinicians and consumer advocates. The panel members based their evaluations on the criteria specified in the PAs.

Each peer review panel included a Chair, an average of eight scientific reviewers, an average of two consumer reviewers, and a nonvoting Scientific Review Officer. The panelists' primary responsibility was to review the technical merit of each application based upon the evaluation criteria specified in the relevant PA.

Individual Peer Review Panels

The Chair for each panel presided over the deliberations. The panels discussed each individual application. The Chair called on the assigned reviewers for an assessment of the merits of each application using the evaluation criteria published in the appropriate PA. Following a panel discussion, the Chair summarized the strengths and weaknesses of each application, and the panel members then rated the applications confidentially.

Application Scoring

Evaluation Criteria Scores: Panel members rated each application based on the peer review evaluation criteria published in the appropriate PA. The panel members used a scale of 10 to 1, with 10 representing the highest merit and 1 the lowest merit, using whole numbers only. The purpose of obtaining the criteria ratings was to (1) place emphasis on the published evaluation criteria and provide guidance to reviewers in determining an appropriate overall score and (2) provide the applicant, the Programmatic Panel and the CDMRP with an informed measure of the quality regarding the strengths and weaknesses of each application. The evaluation criteria scores were not averaged or mathematically manipulated in any manner to connect them to the global or percentile scores.

Overall Score: To obtain an overall score, panel members used a range of 1.0 to 5.0 (1.0 representing the highest merit and 5.0 the lowest merit), with scoring permitted in 0.1 increments. The PRCRP averaged the panel member scores and rounded them to arrive at a two-digit number (1.2, 1.9, 2.7, etc.) that corresponds to the following adjectival equivalents used to guide reviewers: Outstanding (1.0–1.5), Excellent (1.6–2.0), Good (2.1–2.5), Fair (2.6–3.5) and Deficient (3.6–5.0).

Summary Statements: The Scientific Review Officer on each panel was responsible for preparing a Summary Statement reporting the results of the peer review for each application. The Summary Statements included the evaluation criteria and overall scores, peer reviewers' written comments, and the essence of panel discussions. The PRCRP staff used this document to report the peer review results to the Programmatic Panel. In accordance with DHA R&D-MRDC policy, Summary Statements are available to each applicant after completion of the review process.

THE SECOND TIER—Programmatic Review

The FY25 Programmatic Panel conducted programmatic review in March 2026. The panel included a diverse group of basic and clinical scientists and consumer advocates, each of whom contributed special expertise or interest in congressionally directed PRCRP Topic Areas in cancer research. Programmatic review is a comparison-based process that considers scientific evaluations across all disciplines and specialty areas. Programmatic Panel members do not automatically recommend funding applications that received high scores in the technical merit review process; rather, they closely examine the eligible applications to allocate as wisely as possible the limited funds available.

The programmatic review criteria published in the Clinical Trial Award PA were as follows: ratings and evaluations of the scientific peer review panels, relevance to the FY25 PRCRP, as evidenced by the following: Adherence to the intent of the funding opportunity; relative clinical care and patient impact; program portfolio composition; programmatic relevance to the FY25 PRCRP Military Health focus areas; and programmatic relevance to the FY25 PRCRP strategic goals as outlined in the FY25 PRCRP portfolio categories.

The programmatic review criteria published in the Idea Award PA were as follows: ratings and evaluations of the scientific peer review panels, relevance to the FY25 PRCRP, as evidenced by the following: Adherence to the intent of the funding opportunity; relative innovation; program portfolio composition; programmatic relevance to the FY25 PRCRP Military Health focus areas; and programmatic relevance to the FY25 PRCRP strategic goals as outlined in the FY25 PRCRP portfolio categories.

The programmatic review criteria published in the Impact Award PA were as follows: ratings and evaluations of the scientific peer review panels, relevance to the FY25 PRCRP, as evidenced by the following: Adherence to the intent of the funding opportunity; relative impact; program portfolio composition; programmatic relevance to the FY25 PRCRP Military Health focus areas; and programmatic relevance to the FY25 PRCRP strategic goals as outlined in the FY25 PRCRP portfolio categories.

After programmatic review, the PRCRP routed the applications recommended for funding to a designated official for review and approval.