

**DEFENSE HEALTH AGENCY RESEARCH & DEVELOPMENT-MEDICAL  
RESEARCH AND DEVELOPMENT COMMAND (DHA R&D-MRDC)  
CONGRESSIONALLY DIRECTED MEDICAL RESEARCH PROGRAMS (CDMRP)  
FISCAL YEAR 2025 (FY25) TOXIC EXPOSURES RESEARCH PROGRAM (TERP)**

**DESCRIPTION OF REVIEW PROCEDURES**

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

- Clinical Trial Partnership Award
- Investigator-Initiated Research Award
- Translational Research Partnership Award

The TERP received pre-applications for the Clinical Trial Partnership Award, Investigator-Initiated Research Award, and Translational Research Partnership Award in July 2025 and screened them in August 2025 and September 2025. The screening followed the pre-application evaluation criteria specified in the PAs to determine which investigators to invite to submit full applications. The TERP received applications in October 2025, and they underwent peer review in December 2025. The TERP conducted programmatic review in February 2026.

In response to the Clinical Trial Partnership Award PA, the TERP received 23 pre-applications and invited 13 of these to submit a full application. The TERP received 10 compliant applications and recommended funding one (10.00%), representing two awards, for a total of \$2.85 million (M).

In response to the Investigator-Initiated Research Award PA, the TERP received 402 pre-applications and invited 89 of these to submit a full application. The TERP received 78 compliant applications and recommended funding seven (8.97%) for a total of \$5.39M.

In response to the Translational Research Partnership Award PA, the TERP received 105 pre-applications and invited 47 of these to submit a full application. The TERP received 43 compliant applications and recommended funding two (4.65%), representing five awards, for a total of \$4.48M.

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

**Table 1. Submission/Award Data for the FY25 TERP\***

<b>Mechanism</b>	<b>Pre-Applications Received</b>	<b>Pre-Applications Invited (%)</b>	<b>Compliant Applications Received</b>	<b>Applications Recommended for Funding (%)</b>	<b>Total Funds</b>
Clinical Trial Partnership Award	23	13 (56.5%)	10 <sup>†</sup>	1 <sup>‡</sup> (10.00%)	\$2.85M
Investigator-Initiated Research Award	402	89 (22.1%)	78	7 (8.97%)	\$5.39M
Translational Research Partnership Award	105	47 (44.8%)	43 <sup>§</sup>	2 <sup>**</sup> (4.65%)	\$4.48M
<b>Totals</b>	<b>530</b>	<b>149 (28.0%)</b>	<b>131</b>	<b>10<sup>††</sup> (7.63%)</b>	<b>\$12.72M</b>

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

<sup>†</sup>Ten (10) applications representing 23 potential awards.

<sup>‡</sup>One (1) application representing 2 awards.

<sup>§</sup>Forty-three (43) applications representing 100 potential awards.

<sup>\*\*</sup>Two (2) applications representing 5 awards.

<sup>††</sup>Ten (10) applications representing 14 awards.

## **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 TERP conducted peer review of the Clinical Trial Partnership Award, Investigator-Initiated Research Award, and Translational Research Partnership Award applications in December 2025 utilizing 10 panels 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, an average of one technology transfer specialist, an average of two biostatisticians 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 TERP 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 TERP 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 February 2026. The panel included a diverse group of basic and clinical scientists and consumer advocates, each of whom contributed special expertise or interest in toxic exposures. 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 PAs were as follows: ratings and evaluations of the scientific peer review panels, adherence to the intent of the award mechanism, program portfolio composition and balance, and relative impact and relevance to military health. After programmatic review, the TERP routed the applications recommended for funding to a designated official for review and approval.