



PennState Health
Children's Hospital



**Children's
Miracle Network
Hospitals**

**PENN STATE CHILDREN'S HOSPITAL AT
PENN STATE HEALTH MILTON S. HERSHEY MEDICAL CENTER**

To: Researchers whose work impacts the lives of children

Date: November 21, 2019

From: Dr. Sarah Iriana
Interim Chair, Department of Pediatrics and Pediatrician-in-Chief, Penn State Health Milton S. Hershey Medical Center; Medical Director, Penn State Children's Hospital

Re: Requests for 2020-2021 Children's Miracle Network (CMN) Faculty Research Grants

On behalf of Children's Miracle Network (CMN), I am pleased to announce that CMN will continue to support research relevant to children's health at Penn State Children's Hospital. It is exciting to see how CMN funds have enabled our Children's Hospital to continue to provide the very best pediatric patient care and support numerous research projects that might not otherwise have been possible. As in previous years, I would like to extend the opportunity to request these research funds by completing the attached application.

When preparing your request for research funds, please remember the main goal set by CMN Hospitals is for the use of CMN funds to remain local to "improve the quality of life for children in need of medical care." If your department can or does provide services to children directly or indirectly, and is located at the Hershey campus, you are eligible to apply for funding.

Attached is a research application with instructions. Applicants are encouraged to utilize any departmental research administration resources to assist with CMN grant applications.

Requests for allocation of 2020-2021 CMN research funds are due on or before January 29, 2020. Submit applications following the instructions on page 4 to the Research Development Document Drop. Please use a SIMS budget and the attached cover page for this submission.

If you were awarded 2019-2020 CMN research funds, this is a reminder that a condition of your award is to send a research progress report by February 1, 2020 using the template that was included in your award letter to CMNApplications@pennstatehealth.psu.edu. When requesting a renewal of CMN funds, the Review Committee will review this update and this will have an impact on the consideration of renewal requests.

Please direct any questions about the form or this application process via email to CMNApplications@pennstatehealth.psu.edu

CHILDREN'S MIRACLE NETWORK (CMN) FACULTY RESEARCH GRANTS 2020-2021

A. PROGRAM GUIDELINES: Applications for the CMN Faculty Research Grants mechanism may request up to \$40,000 direct costs (**indirect costs are not allowed**) for a period of up to 24 months to support research projects at the Penn State College of Medicine/Milton S. Hershey Medical Center. Faculty Research Grant funds **may not** support the salary and fringe benefits for either the Principal Investigator or other faculty. Funds **may** be requested to support salaries and benefits for trainees, research staff, student stipends, supplies, equipment, and expenses related to the use of human subjects and animals. Proposals to obtain preliminary data to be used in applications to external research sponsors are particularly encouraged.

The Principal Investigator (PI) on a CMN Faculty Research Grant must have a primary academic appointment at the College of Medicine at the rank of Assistant Professor, Associate Professor, or Professor. In addition to the basic science faculty, virtually all physicians and psychologists employed by the Penn State Health Milton S. Hershey Medical Center have a primary academic appointment in the College of Medicine and are therefore eligible.

PIs of funded CMN Research Grants must agree to: a) submit a final report at the completion of the CMN award; b) provide the CMN Director with a copy of any publications resulting from the CMN project; c) notify the CMN Director regarding any external funding that is subsequently received using preliminary data obtained with support; d) submit an abstract to the next Pediatric Research Day; e) present findings to the CMN Advisory Board if asked by the CMN Director.

It is expected that all the necessary compliance protocols (IACUC, IRB, etc.) will be submitted by September 30, 2020. Failure to do so will result in termination of the award unless dispensation is applied for and awarded.

PIs of funded CMN grants requesting an extension will be required to complete an extension form that will be circulated for approval. This extension form will be included with your award letter.

Investigators working in a lab that is already supported by Four Diamonds are not eligible for CMN funding. A lab that has received prior CMN funding may re-apply for new CMN funds.

All oncology related grants should be directed to Four Diamonds.

B. INSTRUCTIONS FOR APPLICANTS (Applications must follow the following format):

Paper Size and Page Margins. Use standard paper size (8 1/2" x 11). Use at least 1/2 inch margins (top, bottom, left, and right) for all pages. No information should appear in the margins **except** page numbers.

Font. Use an Arial, Helvetica, Palatino Linotype, or Georgia typeface, a black font color, and a font size of 11 points or larger.

Page Limits. Follow page limits described below. Applications exceeding limits will be rejected.

Application Content.

1. **Cover Page** (see attached): Include a descriptive title of the project; the name, degree, department, and the signature of the Principal Investigator and all Collaborator(s); the email and phone number of the PI; and the funding requested (direct costs) in the application.

2. **Table of Contents:** Number all pages consecutively and include a short Table of Contents.

3. Project Narrative: Using no more than two or three sentences, describe the relevance of this research to children's health. In this section, be succinct and use plain language that can be understood by a general, lay audience.

4. Project Abstract: The Project Abstract is meant to serve as a succinct and accurate description of the proposed work when separated from the application. State the application's broad, long-term objectives and specific aims, **making reference to the goals of CMN** as described on the first page of the instructions. Describe concisely the research design and methods for achieving the stated goals. Avoid describing past accomplishments and the use of the first person. This section must be no longer than 30 lines of text, and follow the required font and margin specifications.

5. Research Plan: Sections **a-b** of the Research Plan should be a maximum of **5 pages (single-spaced including figures and tables,** with 15 characters/inch type), organized as follows:

- a) Specific Aims (1 page maximum)
- b) Research Strategy (4 pages maximum). Organize the Research Strategy in the specified order and using the instructions provided below. Start each section with the appropriate section heading – Significance, Innovation, Approach.
 - i. Significance
 - Explain the importance of the problem or critical barrier to progress in the field that the proposed project addresses.
 - Explain how the proposed project will improve scientific knowledge, technical capability, and/or clinical practice in one or more broad fields.
 - Describe how the concepts, methods, technologies, treatments, services, or preventive interventions that drive this field will be changed if the proposed aims are achieved.
 - ii. Innovation
 - Explain how the application challenges and seeks to shift current research or clinical practice paradigms.
 - Describe any novel theoretical concepts, approaches or methodologies, instrumentation or interventions to be developed or used, and any advantage over existing methodologies, instrumentation, or interventions.
 - Explain any refinements, improvements, or new applications of theoretical concepts, approaches or methodologies, instrumentation, or interventions.
 - iii. Approach
 - Describe the overall strategy, methodology, and analyses to be used to accomplish the specific aims of the project. Include how the data will be collected, analyzed, and interpreted as well as any resource sharing plans as appropriate.
 - Discuss benchmarks for success anticipated to achieve the aims and specifically include a timeline for completion of the proposed work.
- c) Future Plans (maximum ½ page). Assuming that this study is successful, describe anticipated plans to apply for external funding including the identity of the most probable sponsor and the expected receipt date for submitting the first such application.
- d) Human Subjects - describe involvement, if any
- e) Vertebrate Animals - describe involvement, if any
- f) Literature Cited

6. Budget - Please use SIMS to create your budget (see your department research administrator), and include budget justification, relating funds to the scientific plan. CMN will not pay for faculty salaries, publication expenses, indirect costs, or travel to meetings. Per University policy, PI(s) must have some effort which will need to be cost shared by your department. Please list any other faculty as collaborators with 0% effort. All faculty collaborators should be included on the IAF regardless of % effort.

7. Biographical Sketch of Principal Investigator. Use attached updated NIH biosketch with the following 4 sections (maximum 5 pages).

- A. **Personal Statement**
Briefly describe why you are well-suited for your role(s) in the project described in this application. The relevant factors may include aspects of your training; your previous experimental work on this specific topic or related topics; your technical expertise; your collaborators or scientific environment; and your past performance in this or related fields (you may mention specific contributions to science that are not included in Section C). Also, you may identify up to four peer reviewed publications that specifically highlight your experience and qualifications for this project. If you wish to explain impediments to your past productivity, you may include a description of factors such as family care responsibilities, illness, disability, and active duty military service.
- B. **Positions and Honors**
List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any Federal Government public advisory committee.
- C. **Contribution to Science**
Briefly describe up to five of your most significant contributions to science with up to 4 examples for each. For each contribution, indicate the historical background that frames the scientific problem; the central finding(s); the influence of the finding(s) on the progress of science or the application of those finding(s) to health or technology; and your specific role in the described work. For announcement, template, and examples go to <https://grants.nih.gov/grants/forms/biosketch.htm>
- D. **Research Support**
List both selected ongoing and completed research projects for the past three years (Federal or non-Federally-supported). Begin with the projects that are most relevant to the research proposed in the application. Briefly indicate the overall goals of the projects and responsibilities of the key person identified on the Biographical Sketch. Do not include number of person months or direct costs.

C. SUBMITTING THE APPLICATION:

1. **Submit the application by noon, January 29, 2020 following the instructions below, to the Research Development Document Drop. Please save your word documents as PDFs rather than scan them.**
2. **Navigate** to the Research Development Document Drop website (<https://docdrop.med.psu.edu/>).
3. **Upload** your CMN application as a **single PDF file**.
 - a. In the **Title box**, label your submission as follows: Last name of the PI-CMNRResearch-Receipt date (e.g. Smith-CMNRResearch-01-29-2020). Please **do not** put the title of your application in this box.
 - b. In the **PI and Co-PIs box**, include PI name.
 - c. Choose file to upload your application.
 - d. In **Funding Mechanism box**, select 2020-2021 CMN Research Grants.
4. **Click** the Save button. You will see a green box at the top of the page confirming successful upload of your document.



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Cover Page

CHILDREN'S MIRACLE NETWORK (CMN) FACULTY RESEARCH GRANT 2020-2021 APPLICATION

Title of Application: _____

Please indicate the following: New Faculty Application Faculty Renewal

PI Information:

Name and Degree: _____

Title and Department: _____

E-mail: _____ Phone: _____

List all other collaborators including name, degree and department:

If this is a request for CMN funds renewal, please state when you had received CMN funds, award amount and summarize how they were used:

Is this a new area of investigation for PI or an extension of previous work: New Previous

Have you submitted this (or a similar) proposal to other funding sources? Yes No

Funding requested for this proposal (direct costs): _____

If this project is funded by CMN, describe future external funding opportunities (sources and receipt dates).

Please provide the following information:

Are **animals or animal-derived tissues** being used in this study? Yes No

If yes, has the protocol been approved by the IACUC? Yes No

If yes, provide approval date: _____

IACUC Protocol#: _____

Are **human subjects, human-specimens or human data** part of this study? Yes No

If yes, has the protocol been approved by the IRB? Yes No Determined to be Exempt

If yes, provide approval date: _____

IRB Protocol#: _____

Are **Recombinant DNA Techniques/Biohazards** used in this study? Yes No

If yes, has the protocol been approved by the Biological Safety and Recombinant DNA Committee? Yes No

If yes, provide approval date: _____

rDNA Protocol#: _____

Are **shared research cores** being used in this study? Yes No

If yes, provide identify expected core services: _____

Signature:

Principal Investigator: _____

Deadline for Application: **January 29, 2020**

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME:

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE:

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	Completion Date MM/YYYY	FIELD OF STUDY

A. Personal Statement

B. Positions and Honors

C. Contributions to Science

D. Additional Information: Research Support and/or Scholastic Performance