

I. OVERVIEW OF THE FUNDING OPPORTUNITY

Program Announcement for the Department of Defense

Defense Health Program

Congressionally Directed Medical Research Programs

Peer Reviewed Cancer Research Program

Patient Well-Being and Survivorship Award

Announcement Type: Modified

Funding Opportunity Number: HT942524PRCRPPWSA

**Assistance Listing Number: 12.420 Military Medical
Research and Development**

SUBMISSION AND REVIEW DATES AND TIMES

- **Pre-Application (Letter of Intent) Submission Deadline:** 5:00 p.m. Eastern time (ET), July 12, 2024
- **Application Submission Deadline:** 11:59 p.m. ET, July 26, 2024
- **End of Application Verification Period:** 5:00 p.m. ET, July 31, 2024
- **Peer Review:** September 2024
- **Programmatic Review:** November 2024

This program announcement must be read in conjunction with the General Application Instructions, version 901. The General Application Instructions document is available for downloading from the Grants.gov funding opportunity announcement by selecting the “Package” tab, clicking “Preview,” and then selecting “Download Instructions.”

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II. DETAILED INFORMATION ABOUT THE FUNDING OPPORTUNITY

II.A. Program Description

The U.S. Army Medical Research Acquisition Activity (USAMRAA) is soliciting applications to the fiscal year 2024 (FY24) Peer Reviewed Cancer Research Program (PRCRP) using delegated authority provided by United States Code, Title 10, Section 4001 (10 USC 4001). The Congressionally Directed Medical Research Programs (CDMRP) at the U.S. Army Medical Research and Development Command (USAMRDC) is the program management agent for this funding opportunity. Congress initiated the PRCRP in 2009 to provide support for research of high potential impact and exceptional scientific merit. Appropriations for the PRCRP from FY09 through FY23 totaled \$914.8 million (M). The FY24 appropriation is \$130M.

The goal of the PRCRP is to improve mission readiness and quality of life by decreasing the burden of cancer on Service Members, their Families, Veterans, and the American public. The PRCRP is charged by Congress with the mission to investigate cancer risks and knowledge gaps that may be relevant to active-duty Service Members, their Families, Veterans, and the American public.

The proposed research must be relevant to active-duty Service Members, Veterans, military beneficiaries, and/or the American public.

II.A.1. FY24 PRCRP Topic Areas

To be considered for funding, applications for the FY24 PRCRP Patient Well-Being and Survivorship Award (PWSA) **must** address at least one of the congressionally directed FY24 PRCRP Topic Areas. Congressional language stipulates the FY24 PRCRP **must not** address research in melanoma, glioblastoma, or cancers originating in the breast, pancreas, prostate, ovary, kidney, or lung. In addition, FY24 PRCRP funds **must not** be used to study rare cancers except for subtypes of the FY24 PRCRP Topic Areas that are rare by definition. Applicants are directed to apply to the individual CDMRP cancer programs in those disease areas. The FY24 PRCRP Topic Areas are listed below.

- Bladder cancer
- Blood cancers
- Brain cancer (excluding glioblastoma)
- Colorectal cancer
- Endometrial cancer
- Esophageal cancer
- Germ cell cancers
- Liver cancer
- Lymphoma
- Mesothelioma
- Metastatic cancers
- Myeloma
- Neuroblastoma
- Pediatric, adolescent, and young adult cancers¹
- Pediatric brain tumors
- Stomach cancer
- Sarcoma
- Thyroid cancer

Metastatic cancer is cancer that has spread from its original location to another place in the body, representing what are known as stage III and stage IV cancer diagnoses. While recent research has revealed that there is a genetic basis for susceptibility or resistance to metastasis, more research is needed to develop a comprehensive understanding of this complex process.

Applications submitted under any PRCRP Topic Area, including the Metastatic cancers Topic Area, may not address or include research focused on cancers that originate in the breast, kidney, lung, pancreas, prostate, ovaries, or on melanoma, glioblastoma, or rare cancers (excluding relevant subtypes of the FY24 PRCRP Topic Areas) as part of the research study; such applications will be administratively withdrawn.

II.A.2. FY24 PRCRP Military Health Focus Areas

In addition to addressing at least one of the required [FY24 PRCRP Topic Areas](#), ***applications for the FY24 Patient Well-Being and Survivorship Award must define how the research is relevant to Service Members and their Families by addressing at least one of the FY24 PRCRP Military Health Focus Areas listed below.***

It is central to the Vision and Mission of the PRCRP that applications are related to military health and mission readiness, and investigators must demonstrate how the proposed research will decrease the burden of cancer on Service Members, their dependents, Veterans, and other military beneficiaries (i.e., Family members of retirees) (https://cdmrp.health.mil/pubs/video/prc/prcrp_vision_video).

FY24 PRCRP Military Health Focus Areas:

- ***Environmental exposure risk factors associated with cancer***
 - Environmental and/or occupational risk factors should be relevant to activities specific to the military, such as deployments that may lead to exposures to potential carcinogens (ionizing radiation, chemicals, infectious agents, etc.). For more information on military-related exposures and risk factors for cancer, applicants should refer to Exposure-Related

¹ The definition of adolescents and young adults is derived from the National Cancer Institute (<https://www.cancer.gov/types/aya>). Research should be targeted toward pediatric (ages 0–14 years), adolescents (ages 15–24 years), and/or young adults (ages 25–39 years).

Health Concerns at <https://www.publichealth.va.gov/exposures/health-concerns.asp> or to the PRCRP website (<https://cdmrp.health.mil/prcrp/default>).

- ***Mission Readiness and Gaps in Cancer Research***

- Gaps in cancer prevention, early detection/diagnosis, prognosis, and/or treatment that may impact mission readiness and the health and well-being of military members, Veterans, their beneficiaries, and the general public.
- Gaps in quality of life and/or survivorship that may impact mission readiness and the health and well-being of military members, Veterans, their beneficiaries, and the general public.

Mission readiness under the FY24 PRCRP Military Health Focus Areas refers to the impact of cancer on the Service Member. Decreasing the impact of cancer on active-duty Service Members and/or their Families protects the overall military missions. Some examples of relevant research to decrease the impact on mission readiness may include, but are not limited to:

- Studies on the improvement in survival while minimizing late effects that would allow an active-duty Service Member to return to full duty;
- Treatments to minimize a cancer patient's (either a Service Member's or their Family member's) time in the hospital, thus maximizing the time the Service Member is on duty;
- Effective ways to minimize cancer relapse for Service Members or their Families; and
- Research into improvements in cancer detection that would lead to earlier diagnosis, thus allowing for improved treatment of the Service Member and early return to duty.

For more information on military health and cancer:

- PRCRP Vision Video (https://cdmrp.health.mil/pubs/video/prc/prcrp_vision_video)
- PRCRP (<https://cdmrp.health.mil/prcrp/default>)
- Military Health System (MHS) (<https://www.health.mil>)
- U.S. Department of Veterans Affairs (VA) (<https://www.va.gov/>)

Investigators are strongly encouraged to collaborate, integrate, and/or align their research projects with Department of Defense (DOD) and/or VA research laboratories and programs (Refer to [Appendix 2](#)).

II.A.3. FY24 PRCRP Overarching Challenges

The PRCRP developed the Overarching Challenges as a strategy to address multiple issues in cancer research over the spectrum of different cancer topics. These Overarching Challenges are critical gaps in cancer research, care, and/or patient outcomes that, if addressed, will advance mission readiness of U.S. military members affected by cancer and improve quality of life by

decreasing the burden of cancer on Service Members, their Families, Veterans, and the American public. Simply identifying an Overarching Challenge is not sufficient. Applications must address at least one of the following Overarching Challenges in a way that can lead to or make a breakthrough and have a major impact. ***The FY24 PRCRP Overarching Challenges for the Patient Well-Being and Survivorship Award are classified in two different categories. The applicant must address at least one of the eight FY24 PRCRP Overarching Challenges and not just select a category.***

- **Patient Well-Being and Survivorship**

- Study methods to address survivorship issues, including quality of life, wellness, mental health, psychological impact of recurrence, reproductive/sexual health, and/or disability.
- Reduce short- and long-term treatment toxicities, including neurocognitive and physical effects.
- Investigate ways to bridge gaps between treatment and survivorship, including alternative medicine, nutrition and lifestyle factors, and supportive care.
- Understand and address the immediate and enduring burdens on caregivers, families, and communities.

- **Disparity**

- Improve prevention strategies, diagnosis, treatment, and outcomes for patients in underserved or under recognized populations.
- Study methods to improve accessibility to care and address survivorship.
- Advance health equity and reduce disparities in cancer care, including telehealth.
- Develop strategies to understand barriers to and improve communication amongst provider, patient, and care network.

II.B. Award Information

The PWSA supports innovative research studies to advance research in preservation of function (physical ability), quality of life, symptom management, resilience, relief from neurocognitive deficits, and support for psychosocial issues related to cancer diagnosis, treatment, and survivorship. Studies must address one or more of these critical issues in at least one of the [FY24 PRCRP Topic Areas](#).

The overall intention of the PWSA is to fill gaps in the understanding of survivorship, including investigations into the psychological health and well-being of those affected by cancer (e.g., patients, family members). This may include investigations into studies that improve mental health and/or cancer-related outcomes in defined populations. Studies also may assess the relationship(s) between behavioral and social functioning in relation to cancer initiation, progression, detection, treatment, and rehabilitation. Applications may propose studies that

examine preservation of function, quality-of-life, well-being, decision-making, and/or cognitive function, development and testing of educational interventions, and symptom management (e.g., toxicity of treatment, palliative/supportive care, psychological distress and anxiety) throughout treatment and beyond. Applications may target development of evidence-based practices, behavioral health science and patient well-being interventions and surveillance, and identification of psychosocial patient outcomes. ***Basic laboratory studies are not appropriate for the PWSA and may be withdrawn.***

The critical components of this award mechanism are:

- **Impact:** The PWSA is intended to support research that demonstrates the potential to have a major impact on patient well-being, outcomes, and health, including diagnosis, treatment, and after treatment. The proposed study must demonstrate how the research will transform outcomes related to at least one of the [FY24 PRCRP Topic Areas](#). Research should challenge paradigms with respect to impact on patient care and outcomes. Proposed projects may include translational or clinical research, including ***pilot*** clinical trials. Impactful research will accelerate the movement of promising ideas into clinical applications and advance quality of life and survivorship.
- **Study Design:** Applications should clearly articulate the chosen design of the study. Studies entailing retrospective or prospective recruitment should define the type of architecture of the study (e.g., interventional, descriptive, correlational, field experimental, meta-analyses). Study populations should be clearly defined. The rationale should support the chosen study design with statistical evaluation to back the design. Questionnaires should be described in sufficient detail to justify interpretation of potential results. ***Studies utilizing animal models are not supported by this funding opportunity and may be withdrawn.***
- **Preliminary Data:** The PWSA will require preliminary data for all studies that propose the active (prospective) recruitment of human subjects for ***pilot*** clinical trials. Studies not proposing active recruitment of human subjects are not required to present preliminary data but should be supported by sound reasoning and relevant literature.
- **Patient Advocate Participation:** Applications to the PWSA funding opportunity are required to include patient advocates. ***The research team must include at least one cancer patient advocate who will be integral throughout the planning and implementation of the research project. The patient advocate should be active in a cancer advocacy organization, have a high level of knowledge of current cancer issues, and be a representative from the [FY24 PRCRP Topic Area\(s\)](#) that is being studied.*** The patient advocate will be a person living with cancer; a person previously diagnosed with/treated for cancer but who now has no evidence of disease; or a family member or caretaker of someone with cancer. The patient advocate should be involved in the development of the research question, project design, oversight, and evaluation, as well as other significant aspects of the proposed project. Interactions with other team members should be well integrated and ongoing, not limited to attending seminars and semi-annual meetings. The role of the patient advocate should be focused on providing objective input on the research and its potential impact for individuals with or at risk for cancer.

PIs are encouraged to integrate and/or align their research projects with DoD and/or VA research laboratories and programs. Collaboration with the DoD and/or VA is also encouraged. A list of websites that may be useful in identifying additional information about ongoing DoD and VA areas of research interest or potential opportunities for collaboration can be found in [Appendix 2, DOD and VA Websites](#).

Applications from investigators within the military services and applications involving multidisciplinary collaborations among academia, industry, the military services, the VA, and other federal government agencies are highly encouraged. These relationships can leverage knowledge, infrastructure, and access to unique clinical populations that the collaborators bring to the research effort, ultimately advancing research that is of significance to Service Members, Veterans, and/or their Families. If the proposed research relies on access to unique resources or databases, the application must describe the access at the time of submission and include a plan for maintaining access as needed throughout the proposed research.

A congressionally mandated Metastatic Cancer Task Force was formed with the purpose of identifying ways to help accelerate clinical and translational research aimed at extending the lives of advanced state and recurrent patients. As a member of the Metastatic Cancer Task Force, CDMRP encourages applicants to review the recommendations (<https://health.mil/Reference-Center/Congressional-Testimonies/2018/05/03/Metastatic-Cancer-Research>) and submit research ideas to address these recommendations provided they are within the limitations of this funding opportunity and fit within the FY24 PRCRP priorities.

CDMRP encourages research on health areas and conditions that affect women uniquely, disproportionately, or differently from men, including studies analyzing sex as a biological variable. Such research should relate anticipated project findings to improvements in women's health outcomes and/or advancing knowledge for women's health.

Innovative research involving nuclear medicine and related techniques to support early diagnosis, more effective treatment, and improved health outcomes of active duty Service Members and their Families is encouraged. Such research could improve diagnostic and targeted treatment capabilities through noninvasive techniques and may drive the development of precision imaging and advanced targeted therapies.

Pilot clinical trials, small-scale investigations to test feasibility of methods or provide preliminary evidence for larger-scale clinical trials, are allowed.

A clinical trial is defined in the Code of Federal Regulations, Title 45, Part 46.102 (45 CFR 46.102) as a research study in which one or more human subjects are prospectively assigned to one or more interventions (which may include a placebo or another control) to evaluate the effects of the interventions on biomedical or behavioral health-related outcomes.

Studies that do not seek to measure safety, effectiveness, and/or efficacy outcome(s) of an intervention are not considered clinical trials.

For the purposes of this funding opportunity, research that meets the definition of a clinical trial is distinct from clinical research. Clinical research encompasses research with human

data, human specimens, and/or interaction with human subjects. Clinical research is observational in nature and includes:

- (1) Research conducted with human subjects and/or material of human origin such as data, specimens, and cognitive phenomena for which an investigator (or co-investigator) does **not** seek to assess the safety, effectiveness, and/or efficacy outcomes of an intervention. Research meeting this definition may include but is not limited to: (a) mechanisms of human disease, (b) diagnostic or detection studies (e.g., biomarker or imaging), (c) health disparity studies, and (d) development of new technologies.
- (2) Epidemiologic and behavioral studies that do **not** seek to assess the safety, effectiveness, and/or efficacy outcomes of an intervention.
- (3) Outcomes research and health services research that do not fit under the definition of clinical trial.

Excluded from the definition of clinical research are in vitro studies that utilize human data or specimens that cannot be linked to a living individual and meet the requirements for exemption under [§46.104\(d\)\(4\) of the Common Rule](#).

The funding instrument for awards made under the program announcement will be grants (31 USC 6304).

The anticipated direct costs budgeted for the entire period of performance for an FY24 PRCRP PWSA Award should not exceed **\$1.0M**. Refer to [Section II.D.5, Funding Restrictions](#), for detailed funding information.

Awards supported with FY24 funds will be made no later than September 30, 2025.

The CDMRP expects to allot approximately \$9.6M to fund approximately six Patient Well-Being and Survivorship Award applications. Funding of applications received is contingent upon the availability of federal funds for this program, the number of applications received, the quality and merit of the applications as evaluated by peer and programmatic review, and the requirements of the government. Funds to be obligated on any award resulting from this funding opportunity will be available for use for a limited time period based on the fiscal year of the funds. It is anticipated that awards made from this FY24 funding opportunity will be funded with FY24 funds, which will expire for use on September 30, 2030.

II.C. Eligibility Information

II.C.1. Eligible Applicants

II.C.1.a. Organization: Extramural and Intramural organizations are eligible to apply, including foreign or domestic organizations, for-profit and non-profit organizations, and public entities.

Extramural Organization: An eligible non-DOD organization. Examples of extramural organizations include academic institutions, biotechnology companies, foundations, federal government organizations other than the DOD (i.e., intragovernmental organizations), and research institutes.

Intramural DOD Organization: Refers specifically to DOD organizations including DOD laboratories, DOD military treatment facilities, and/or DOD activities embedded within a civilian medical center.

Awards are made to eligible *organizations*, not to individuals. Refer to the General Application Instructions, Appendix 1, for additional recipient qualification requirements.

II.C.1.b. Principal Investigator

To be named as the Principal Investigator (PI) on an application, the PI must have a faculty level appointment or the equivalent.

An eligible PI, regardless of ethnicity, nationality, or citizenship status, must be employed by or affiliated with an eligible organization.

II.C.2. Cost Sharing

Cost sharing/matching is not an eligibility requirement.

II.C.3. Other

Organizations must be able to access **.gov** and **.mil** websites to fulfill the financial and technical deliverable requirements of the award and submit invoices for payment.

Refer to [Section II.H.2, Administrative Actions](#), for a list of administrative actions that may be taken if a pre-application or full application does not meet the administrative, eligibility, or ethical requirements defined in this program announcement.

II.D. Application and Submission Information

II.D.1. Location of Application Package

Submission is a two-step process requiring both a *pre-application* submitted via the Electronic Biomedical Research Application Portal (eBRAP.org) and a *full application* (eBRAP.org or Grants.gov). Depending on the type of submission (i.e., extramural vs. intramural), certain aspects of the submission process will differ.

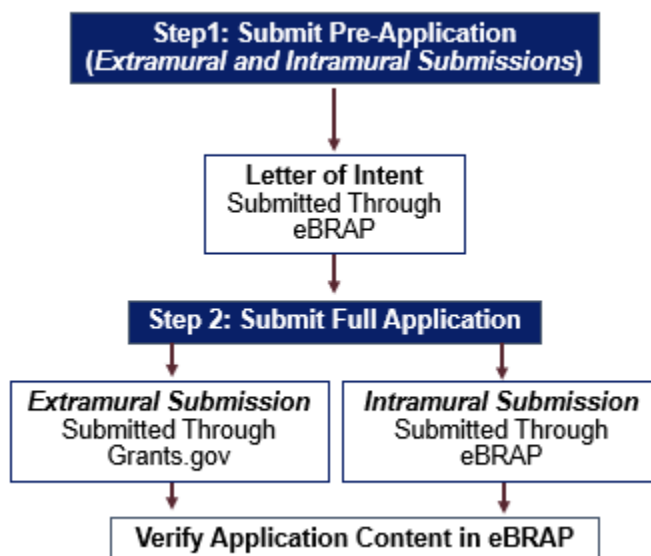
The CDMRP uses two portal systems to accept pre- and full application submissions.

eBRAP (<https://ebrap.org>) is a secure web-based system that allows PIs and/or organizational representatives from both extra- and intramural organizations to receive communications from the CDMRP and submit their pre-applications. Additionally, eBRAP allows extramural applicants to view and verify full applications submitted to Grants.gov and allows intramural

DOD applicants to submit and verify full applications following their pre-application submission.

Grants.gov (<https://grants.gov>) is a federal system that must be used by funding agencies to announce extramural grant applications. Full applications for CDMRP funding opportunities can only be submitted to Grants.gov after submission of a pre-application through eBRAP.

Application Submission Workflow



Extramural Submission: An application submitted by an [extramural organization](#) for an extramural or intramural PI working within an extramural or intramural organization. For example, a research foundation submitting an application for a DOD employee working within a DOD organization would be considered an extramural submission and should follow instructions specific to extramural submissions. Download application package components for HT942524PRCRPPWSA from Grants.gov (<https://grants.gov>). Full applications from extramural organizations **must** be submitted through Grants.gov.

Intramural Submission: An application submitted by an [intramural DOD organization](#) for an investigator employed by that organization. Intramural DOD organizations may submit full applications to either eBRAP or Grants.gov. Download application package components for HT942524PRCRPPWSA from the anticipated submission portal eBRAP (<https://ebrap.org>) or Grants.gov.

The submission process should be started early to avoid missing deadlines. Regardless of submission type or portal used, all pre- and full application components must be submitted by the deadlines stipulated on the first page of this program announcement. There are no grace periods for deadlines; failure to meet submission deadlines will result in application rejection. ***The USAMRAA cannot make allowances/exceptions for submission problems encountered by the applicant organization using system-to-system interfaces with Grants.gov.***

II.D.2. Content and Form of the Application Submission

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

Unnecessary duplication of funding, or accepting funding from more than one source for the same research, is prohibited. See CDMRP's full position on research duplication at <https://cdmrp.health.mil/funding/researchDup>.

Including classified research data within the application and/or proposing research that may produce classified outcomes, or outcomes deemed sensitive to national security concerns, may result in application withdrawal. Refer to the General Application Instructions, Appendix 7, Section B.

FY24 PRCRP Programmatic Panel members should not be involved in any pre-application or full application. For questions related to panel members and pre-applications or applications, refer to [Section II.H.2.c, Withdrawal](#), or contact the eBRAP Help Desk at help@eBRAP.org or 301-682-5507.

II.D.2.a. Step 1: Pre-Application Submission

All pre-application components must be submitted by the PI through eBRAP (<https://eBRAP.org/>).

During the pre-application process, eBRAP assigns each submission a unique log number. This unique log number is required during the full application submission process. The eBRAP log number, application title, and all information for the PI, Business Official(s), performing organization, and contracting organization must be consistent throughout the entire pre-application and full application submission process. Inconsistencies may delay application processing and limit or negate the ability to view, modify, and verify the application in eBRAP. If any changes need to be made, the applicant should contact the eBRAP Help Desk at help@eBRAP.org or 301-682-5507 prior to the application submission deadline.

When starting the pre-application, applicants will be asked to select a "Mechanism Option". Please be sure to select the correct option appropriate to your pre-application:

Application Includes:	Select Option:
No Pilot Clinical Trial	No Option
Pilot Clinical Trial	Clinical Trial Option

II.D.2.a.i. Pre-Application Components

Pre-application submissions must include the following components (refer to the General Application Instructions, Section III.B, for detailed instructions regarding pre-application submission):

- **Letter of Intent (LOI) (one-page limit):** Provide a brief description of the research to be conducted. Include the [FY24 PRCRP Topic Area](#) under which the application will be submitted.

LOIs are used for program planning purposes only (e.g., reviewer recruitment) and will not be reviewed during either the peer or programmatic review. ***An invitation to submit a full application is NOT provided after LOI submission. Applicants are encouraged to develop pre-application and full application components concurrently and submit a full application AFTER successful submission of the pre-application.***

II.D.2.b. Step 2: Full Application Submission

II.D.2.b.i. Full Application Submission Type

Extramural Submissions: Full applications from extramural organizations ***must*** be submitted through Grants.gov Workspace. Full applications from extramural organizations, including non-DOD federal organizations, received through eBRAP will be withdrawn. Refer to the General Application Instructions, Section IV, for considerations and detailed instructions regarding extramural full application submission.

Intramural Submissions: Intramural DOD organizations may submit full applications through either eBRAP or Grants.gov. There is no preference from the CDMRP for which submission portal is utilized; submission through one portal or the other does not provide the application any advantage during the review process. Intramural DOD organizations that choose to submit through Grants.gov should follow Extramural Submission instructions. Intramural DOD organizations that are unable to submit through Grants.gov should submit through eBRAP. For the remainder of this program announcement, it will be assumed intramural DOD submissions will proceed through eBRAP. Refer to the General Application Instructions, Section V, for considerations and detailed instructions regarding intramural DOD full application submission.

II.D.2.b.ii. Full Application Submission Components

Each application submission must include the completed full application package for this program announcement. See [Section II.H.3](#) of this program announcement for a checklist of the required application components.

- SF424 Research & Related Application for Federal Assistance Form (*Extramural Submissions Only*):** Refer to the General Application Instructions, Section IV.B, for detailed information.

(b) Attachments:

Each attachment to the full application components must be uploaded as an individual file in the format specified and in accordance with the formatting guidelines listed in the General Application Instructions, Appendix 2.

- **Attachment 1: Project Narrative (15-page limit): Upload as “ProjectNarrative.pdf”.** The page limit of the Project Narrative applies to text and non-

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

Describe the proposed project in detail using the outline below. ***Applications proposing a pilot clinical trial must include preliminary data.***

- **Background:** Present the scientific rationale behind the proposed research with relevant literature citations, sound rationale, and/or preliminary data (if applicable) in support of the idea. Describe the need or gap in understanding of quality of life, and/or survivorship including how the proposed research may have a major impact on patient well-being, outcomes, and health. State the [FY24 PRCRP Overarching Challenge](#) under Patient Well-Being and Survivorship or Disparity to be studied.
- **Hypothesis or Objective:** State the hypothesis to be tested or the objective to be reached relevant to at least one of the [FY24 PRCRP Topic Areas](#) and at least one of the [FY24 PRCRP Military Health Focus Areas](#).
- **Specific Aims:** State the specific aims of the study.
- **Research Strategy and Feasibility:** Describe the study design, methods, and analyses in sufficient detail for evaluation including availability of resources (if applicable) and how it will interrogate at least one of the [FY24 PRCRP Overarching Challenges](#) under Patient Well-Being and Survivorship and/or Disparity. Studies entailing retrospective or prospective recruitment should define the type of study (e.g., interventional, descriptive, correlational, field experimental, meta-analyses). Study populations should be defined. Address potential problem areas and potential pitfalls, and present alternative methods and approaches. If using psychometric measures, describe their reliability and validity. If using a biorepository, patient medical files, or meta-analysis is proposed, describe the data to be collected and the process or methodology to collect the samples (i.e., for biorepositories – the standardization of procedures for collection). Describe how data will be reported and how it will be assured that the documentation will support a regulatory filing with the Food and Drug Administration (FDA), if applicable. If human subjects or human anatomical samples will be used, include a plan for the recruitment of subjects or the acquisition of samples and document the experience of the PI and/or key collaborators in recruiting human subjects for similar projects. ***Applications proposing a pilot clinical trial must include preliminary data.***

If funds for a [clinical trial](#) are requested, details regarding the Clinical Trial Strategy must be outlined in [Attachment 8, Clinical Strategy Statement](#). Only those proposed studies measuring safety, effectiveness, and/or efficacy of an intervention are considered clinical trials and should submit a Clinical Trial Strategy. Refer to the definition of a clinical trial in [Section II.B., Award Information](#).

Use of DOD or VA Resources: If the proposed research involves access to active-duty military and/or VA patient populations and/or DOD or VA resources or databases, describe the access at the time of submission and include a plan for maintaining access as needed throughout the proposed research. Refer to the General Application Instructions, Appendix 4, for additional considerations.

- **Attachment 2: Supporting Documentation: Combine and upload as a single file named “Support.pdf”.** Start each document on a new page. The Supporting Documentation attachment should not include additional information such as figures, tables, graphs, photographs, diagrams, chemical structures, or drawings. These items should be included in the Project Narrative.

There are no page limits for any of these components unless otherwise noted. Include only those components described below; inclusion of items not requested or viewed as an extension of the Project Narrative will result in the removal of those items or may result in administrative withdrawal of the application.

- **References Cited:** List the references cited (including URLs, if available) in the Project Narrative using a standard reference format.
- **List of Abbreviations, Acronyms, and Symbols:** Provide a list of abbreviations, acronyms, and symbols.
- **Facilities, Existing Equipment, and Other Resources:** Describe the facilities and equipment available for performance of the proposed project and any additional facilities or equipment proposed for acquisition at no cost to the award. Indicate whether government-furnished facilities or equipment are proposed for use. If so, reference should be made to the original or present government award under which the facilities or equipment items are now accountable. There is no form for this information.
- **Publications and/or Patents:** Include a list of relevant publication URLs and/or patent abstracts. If articles are not publicly available, then copies of up to five published manuscripts may be included in Attachment 2. Extra items will not be reviewed.
- **Letters of Organizational Support:** Provide a letter (or letters, if applicable) signed by the Department Chair or appropriate organization official, confirming the laboratory space, equipment, and other resources available for the project. Letters of support not requested in the program announcement, such as those from members of Congress, do not impact application review or funding decisions.
- **Letters of Collaboration (if applicable):** Provide a signed letter from each collaborating individual and/or organization demonstrating that the PI has the support and resources necessary for the proposed work. If an investigator at an intramural DOD organization is named as a collaborator on a full application submitted through an extramural organization, the application must include a letter from the

collaborator's Commander or Commanding Officer at the intramural DOD organization authorizing the collaborator's involvement.

- **Intellectual Property:** Information can be found in the 2 CFR 200.315, "Intangible Property."
- **Intellectual and Material Property Plan (*if applicable*):** Provide a plan for resolving intellectual and material property issues among participating organizations.
- **Commercialization Strategy (*if applicable*):** Describe the commercialization plan. The plan should include intellectual property, market size, financial analysis, strengths and weaknesses, barriers to the market, competitors, and management team. Discuss the significance of this development effort, when it can be anticipated, and the potential commercial use for the technology being developed.
- **DOD Data Management Plan (two-page limit is recommended):** Describe the data management plan in accordance with Section 3.c, Enclosure 3, [DoD Instructions 3200.12](#). ***Do not duplicate the Data and Research Resources Sharing Plan.*** Refer to General Application Instructions, Section IV.B, Attachments Form, Attachment: Supporting Documentation, for detailed information regarding Data Management Plan content.
- **Data and Research Resources Sharing Plan:** Describe the type of data or research resource to be made publicly available as a result of the proposed work. Describe how data and resources generated during the performance of the project will be shared with the research community. Include the name of the repository(ies) where scientific data and resources arising from the project will be archived, if applicable. If a public repository will not be used for data or resource sharing, provide justification. Provide a milestone plan for data/results dissemination including when data and resources will be made available to other users, including dissemination activities with a particular focus on feeding back the data to affected communities and/or research participants. Refer to CDMRP's Policy on Data & Resource Sharing located on the eBRAP "Funding Opportunities & Forms" web page <https://ebrap.org/eBRAP/public/Program.htm> for more information about CDMRP's expectations for making data and research resources publicly available.
- **Use of DOD Resources (*if applicable*):** Provide a letter of support signed by the lowest-ranking person with approval authority confirming access to active-duty military populations and/or DOD resources or databases.
- **Use of VA Resources (*if applicable*):** Provide a letter of support signed by the VA Facility Director(s) or individual designated by the VA Facility Director(s), such as the Associate Chief of Staff for Research and Development (ACOS/R&D) or Clinical Service Chief, confirming access to VA patients, resources, and/or VA research space. If the VA-affiliated non-profit corporation is not identified as the applicant

organization for administering the funds, include a letter from the VA ACOS/R&D confirming this arrangement and identifying the institution that will administer the funds associated with the proposed research.

- **Inclusion Enrollment Plan (only required if clinical research and/or a clinical trial is proposed):** Provide an anticipated enrollment table(s) for the inclusion of women and minorities using the Public Health Service (PHS) Inclusion Enrollment Report, a three-page fillable PDF form, that can be downloaded from eBRAP at <https://ebrap.org/eBRAP/public/Program.htm>. The enrollment table(s) should be appropriate to the objectives of the study with the proposed enrollment distributed on the basis of sex/gender, race, and ethnicity. Studies utilizing human biospecimens or datasets that cannot be linked to a specific individual, gender, ethnicity, or race (typically classified as exempt from IRB review) are exempt from this requirement.
- **Attachment 3: Technical Abstract (one-page limit): Upload as “TechAbs.pdf”.** The technical abstract is used by all reviewers. *Abstracts of all funded research projects will be posted publicly.* Use only characters available on a standard QWERTY keyboard. Spell out all Greek letters, other non-English letters, and symbols. Graphics are not allowed.

Technical abstracts should be written using the outline below. Clarity and completeness within the space limits are highly important.

- **Background:** State the [FY24 PRCRP Topic Area\(s\)](#) to be addressed by the proposed research. Present the ideas and reasoning behind the proposed work.
- **Objective/Hypothesis:** State the objective to be reached/hypothesis to be tested. Describe the overall research goals.
- **Specific Aims:** State the specific aims of the study.
- **Study Design:** Briefly describe the study design and methodology.
- **Relevance to Intent:** Describe how the research is relevant to the intent of the Patient Well-Being and Survivorship Award.
- **Impact:** Briefly describe how the proposed project will have an impact on at least one of the [FY24 PRCRP Topic Areas](#). State the [FY24 PRCRP Overarching Challenge\(s\)](#) to be studied and state how the research will make an impact.
- **Relevance to Military Health:** Identify the [FY24 PRCRP Military Health Focus Area\(s\)](#) to be studied. Briefly describe how the proposed research is relevant to active-duty Service Members, Veterans, and other military beneficiaries.
- **Attachment 4: Lay Abstract (one-page limit): Upload as “LayAbs.pdf”.** The lay abstract is used by all reviewers, and addresses issues of particular interest to the affected community. *Abstracts of all funded research projects will be posted publicly.* Use only characters available on a standard QWERTY keyboard. Spell out all Greek letters, other

non-English letters, and symbols. Graphics are not allowed. ***Do not duplicate the technical abstract.***

Lay abstracts should address the points outlined below ***in a manner that will be readily understood by readers without a background in science or medicine.*** Avoid overuse of scientific jargon, acronyms, and abbreviations.

- State the [FY24 PRCRP Topic Area\(s\)](#) to be addressed by the research project.
 - Describe the scientific objective and rationale for the proposed project in a manner that will be ***readily understood by readers without a background in science or medicine.*** Describe how the research is relevant to the intent of the Patient Well-Being and Survivorship Award.
 - What types of patients will the research help and how will it help them? What are the potential clinical applications, benefits, and risks? Describe the likely contributions of this study to advancing the field of behavioral health science and patient well-being in the context of cancer research and/or patient care.
 - State the [FY24 PRCRP Overarching Challenge\(s\)](#) to be studied and state how the research will make an impact.
 - Describe how the proposed research is relevant to active-duty Service Members, Veterans, and other military beneficiaries.
- **Attachment 5: Statement of Work (three-page limit): Upload as “SOW.pdf”.** Refer to the eBRAP “Funding Opportunities & Forms” web page (<https://ebrap.org/eBRAP/public/Program.htm>) for the suggested SOW format and recommended strategies for assembling the SOW.

For the Patient Well-Being and Survivorship Award, refer to either the “Example: Assembling a Clinical Research and/or Clinical Trial Statement of Work” or “Example: Assembling a Generic Statement of Work”, whichever example is most appropriate for the proposed effort, for guidance on preparing the SOW. Use the “Suggested SOW Format” to develop the SOW for the proposed research. Submit as a PDF.

- **Attachment 6: Impact Statement (one-page limit): Upload as “Impact.pdf”.** Describe, in layman’s terms, the aspects of the proposed research that may lead to a potential major impact on patient well-being, outcomes and health. Articulate how the research will accelerate promising findings toward clinical applicability. Describe the methods to leverage results to maximize impact on near-term patient outcomes. Describe the applicability of the [FY24 PRCRP Overarching Challenge\(s\)](#) under Patient Well-Being and Survivorship and/or Disparity to be studied and how the research will decrease the burden of cancer on patients and/or caregivers, and increase patient well-being, outcomes and health. ***The Impact Statement should be written in plain language for laypersons.***
- **Attachment 7: Patient Advocate Involvement Statement (two-page limit): Upload as “Advocate.pdf”.** The Patient Advocate Involvement Statement should be written by

the PI. *Provide the name of at least one patient advocate and their affiliation to one of the [FY24 PRCRP Topic Areas](#) and cancer advocacy organization(s).* State how the patient advocate represents the proposed cancer being studied (e.g., brain cancer) from the FY24 PRCRP Topic Areas. Describe the integral roles that the patient advocate will play in the planning, design, implementation, and evaluation of the research. Describe how the patient advocate's knowledge of current cancer issues in one of the FY24 PRCRP Topic Areas and how their background will contribute to the project.

- **Attachment 8: Clinical Strategy Statement, if applicable (no page limit): Upload as “Clinical.pdf”.** *If funds for a clinical trial are requested, this attachment is required.*
 - Describe the rationale for the proposed clinical trial. Provide a description of the intervention and the endpoints to be measured. Describe the type of clinical trial to be performed (e.g., prospective, randomized, controlled) and outline the proposed methodology in sufficient detail to show a clear course of action. Describe potential challenges and alternative strategies where appropriate.
 - 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 would be supported with funds from this award.
 - Provide detailed plans for initiating the clinical study within the first year, including FDA Investigational New Drug/Investigational Device Exemption application submission plans within 60 days of the award, if applicable. Describe how data will be reported and how it will be assured that the documentation will support a regulatory filing with the FDA, if applicable.
 - Indicate the access to the study population, recruitment plans, and inclusion/exclusion criteria. Describe the strategy for the inclusion of women and minorities appropriate to the objectives of the study, including a description of the composition of the proposed study population in terms of sex/gender, racial, and ethnic group, and an accompanying rationale for the selection of subjects. Provide an anticipated enrollment table(s) with the proposed enrollment distributed on the basis of sex/gender, race, and ethnicity using the PHS Inclusion Enrollment Report, which is a three-page fillable PDF form, that can be downloaded from eBRAP at <https://ebrap.org/eBRAP/public/Program.htm>. Use the form to describe plans for the valid analysis of group differences on the basis of sex/gender, race, and/or ethnicity as appropriate for the scientific goals of the study.
- **Attachment 9: Statistical Analysis Plan (no page limit): Upload as “StatsData.pdf”.** *Required for all applications.* Describe the statistical model and data analysis plan with respect to the study objectives. Ensure sufficient information is provided to allow thorough evaluation of all statistical calculations during review of the application. If an existing dataset is to be used, describe the dataset and how it supports the aims of the project. If applicable, specify the approximate number of human subjects to be enrolled and state the inclusion and exclusion criteria for the subjects with sound rationale for the

criteria. Include a power analysis to demonstrate that the sample size is appropriate to meet the objectives of the study and all proposed correlative studies. If a subpopulation of a recruited sample population will be used for analysis, complete a statistical analysis to ensure appropriate power can be achieved within the subpopulation study. Describe the type of analyses and identify the variables to be used; include covariates and how the data will be adjusted to account for covariates, if applicable. Stratification of data (if applicable) should be described and justified. Explain data capture, verification, disposition, if applicable. Describe how data will be evaluated for reproducibility and adjusted for confounding variables. Articulate how large datasets will be evaluated, if applicable.

- **Attachment 10: Questionnaires and Other Data Collection Instruments, if applicable (no page limit): Upload as “Question.pdf”.** The Questionnaires and Other Data Collection Instruments attachment should include a copy of the most recent version of 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. Describe how and when the instrument(s) will be administered. Describe how the instrument(s) will be adapted to the subject population, if applicable.
- **Attachment 11: Relevance to Military Health Statement (one-page limit): Upload as “MilHealth.pdf”.** *The Relevance to Military Health Statement will be evaluated by the FY23 PRCRP Programmatic Panel during programmatic review only.*
 - State the [FY24 PRCRP Military Health Focus Area\(s\)](#) to be addressed in the study.
 - Based on published literature of the impact of cancer on military populations, articulate the relevance of the research proposed and show how it will decrease the burden of cancer on Service Members, their Families, and Veterans.
 - Identify the environmental and/or occupational exposure risk factors associated with the [FY24 PRCRP Topic Area\(s\)](#) to be studied and their short- and long-term impact on the basic health, welfare, and/or psychosocial wellness of active-duty Service Members, Veterans, and other military beneficiaries.

or

 - Identify how the proposed research will support mission readiness through filling a gap in cancer prevention, early detection/diagnosis, prognosis, treatment, quality of life and/or survivorship that may have a profound impact on the health and well-being of Service Members, their Families, Veterans or other beneficiaries.
 - Articulate how the proposed research will advance the knowledge and understanding of cancer, patient care, and/or treatment options in the MHS for the benefit of active-duty Service Members, Veterans, and other military beneficiaries.
 - Describe the anticipated short-term and/or long-term outcomes of the proposed research and their potential impact on the basic health, welfare, and/or psychosocial wellness of active-duty Service Members, Veterans, and other military beneficiaries.

- **Attachment 12: Representations (*Extramural Submissions Only*): Upload as “RequiredReps.pdf”.** All extramural applicants must complete and submit the Required Representations template available on eBRAP (<https://ebrap.org/eBRAP/public/Program.htm>). For more information, see the General Application Instructions, Appendix 8, Section B, Representations.
 - **Attachment 13: Suggested Intragovernmental/Intramural Budget Form (*if applicable*): Upload as “IGBudget.pdf”.** If an [intramural DOD organization](#) will be a collaborator in performance of the project, complete a separate budget using the “Suggested Intragovernmental/Intramural Budget Form”, available for download on the eBRAP “Funding Opportunities & Forms” web page (<https://ebrap.org/eBRAP/public/Program.htm>). The budget should cover the entire period of performance for each intramural DOD site and include a budget justification as instructed. The **total** costs per year for each subaward (direct and indirect costs) should be included on the Grants.gov Research & Related Budget Form under subaward costs. Refer to the General Application Instructions, Section V.A.(e), for additional information and considerations.
- (c) **Research & Related Personal Data:** For extramural submissions, refer to the General Application Instructions, Section IV.B.(c), and for intramural submissions, refer to the General Application Instructions, Section V.A.(c), for detailed instructions.
- (d) **Research & Related Senior/Key Person Profile (Expanded):** For extramural submissions, refer to the General Application Instructions, Section IV.B.(d), and for intramural submissions, refer to the General Application Instructions, Section V.A.(d), for detailed instructions.
- **PI Biographical Sketch (five-page limit):** Upload as “Biosketch_LastName.pdf”.
 - **PI Previous/Current/Pending Support (no page limit):** Upload as “Support_LastName.pdf”.
 - **Key Personnel Biographical Sketches (five-page limit each):** Upload as “Biosketch_LastName.pdf”.
 - **Key Personnel Previous/Current/Pending Support (no page limit):** Upload as “Support_LastName.pdf”.
- (e) **Research & Related Budget:** For extramural submissions, refer to the General Application Instructions, Section IV.B.(e), and for intramural submissions, refer to the General Application Instructions, Section V.A.(e), for detailed instructions.
- **Budget Justification (no page limit):** For extramural submissions, refer to the General Application Instructions, Section IV.B.(e), Section L, for instructions. For intramural submissions, refer to General Application Instructions, Section V.A.(e), Budget Justification Instructions.

(f) Project/Performance Site Location(s) Form: For extramural submissions, refer to the General Application Instructions, Section IV.B.(f), and for intramural submissions, refer to the General Application Instructions, Section V.A.(f), for detailed instructions.

(g) Research & Related Subaward Budget Attachment(s) Form (if applicable, Extramural Submissions Only): Refer to the General Application Instructions, Section IV.B.(g), for detailed instructions.

- **Extramural Subaward:** Complete the Research & Related Subaward Budget Form and upload through Grants.gov.
- **Intramural DOD Subaward:** Complete a separate “[Suggested Intragovernmental/Intramural Budget Form](#)” for each intramural DOD subaward and upload as a single document titled **IGBudget.pdf** to Grants.gov as Attachment 13.

II.D.2.c. Applicant Verification of Full Application Submission in eBRAP

Independent of submission type, once the full application is submitted it is transmitted to and processed in eBRAP. At this stage, the PI and organizational representatives will receive an email from eBRAP instructing them to log into eBRAP to review, modify, and verify the full application submission. Verification is strongly recommended but not required. eBRAP will validate full application files against the specific program announcement requirements, and discrepancies will be noted in the “Full Application Files” tab in eBRAP. However, eBRAP does not confirm the accuracy of file content. It is the applicant’s responsibility to review all application components and ensure proper ordering as specified in the program announcement. ***The Project Narrative and Research & Related Budget Form cannot be changed after the application submission deadline. If either the Project Narrative or the budget fails eBRAP validation or needs to be modified, an updated full application package must be submitted prior to the full application submission deadline.*** Other application components, including subaward budget(s) and subaward budget justification(s), may be changed until the end of the application verification period indicated in [Section I, Overview of the Funding Opportunity](#). The full application cannot be modified once the application verification period ends.

II.D.3. Unique Entity Identifier (UEI) and System for Award Management (SAM)

The applicant organization must be registered as an entity in SAM (<https://www.sam.gov/content/home>) and receive confirmation of an “Active” status before submitting an application through Grants.gov. Organizations must include the UEI generated by SAM in applications to this funding opportunity.

II.D.4. Submission Dates and Times

The pre-application and application submission process should be started early to avoid missing deadlines. There are no grace periods. Failure to meet either of these deadlines will result in submission rejection.

All submission dates and times are indicated in [Section I, Overview of the Funding Opportunity](#).

II.D.5. Funding Restrictions

The maximum period of performance is **4** years.

The application's direct costs budgeted for the entire period of performance should not exceed **\$1.0M**. If indirect cost rates have been negotiated, indirect costs are to be budgeted in accordance with the organization's negotiated rate. Collaborating organizations should budget associated indirect costs in accordance with each organization's negotiated rate.

All direct and indirect costs of any subaward or contract must be included in the direct costs of the primary award.

The applicant may request the entire maximum funding amount for a project that may have a period of performance less than the maximum **4** years.

For this award mechanism, direct costs:

May be requested for (not all-inclusive):

- Travel in support of multi-institutional collaborations.
- Costs for one investigator to travel to one scientific/technical meeting per year. The intent of travel to scientific/technical FY24 PRCRP Patient Well-Being and Survivorship Award.

Must not be requested for:

- Clinical trial costs beyond pilot studies.
- Animal research.

II.D.6. Other Submission Requirements

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

II.E. Application Review Information

II.E.1. Criteria

II.E.1.a. Peer Review

To determine technical merit, all applications will be individually evaluated according to the following **scored criteria**, which are of equal importance:

- **Research Strategy and Feasibility**
 - Whether the stated hypothesis or the objective is relevant to at least one of the [FY24 PRCRP Topic Areas](#).

- To what degree the study design, proposed methods, and analyses are appropriate to test the hypothesis and/or reach the final objective.
- How well the hypothesis, objectives, and design align with one of the [FY24 PRCRP Overarching Challenges](#) under Patient Well-Being and Survivorship and/or Disparity.
- If applicable, for retrospective or prospective recruitment studies, whether the application defines the type of study (e.g., interventional, descriptive, correlational, field experimental, meta-analyses).
- If applicable, whether study populations are defined.
- To what degree the application addresses potential problem areas and potential pitfalls and presents alternative methods and approaches.
- To what extent the proposed study is a high-reward concept of survivorship.
- If applicable, how well the application describes the reliability and validity of psychometric measures.
- If a biorepository, accumulation of patient medical files, or meta-analysis is proposed, to what degree the description of the data to be collected, as well as the process or the methodology to collect the samples, will support the planned evaluation of the study (e.g., for biorepositories, standardization of procedures for collection).
- If applicable, how well the application describes how data will be reported and how it will fulfill a regulatory documentation for the FDA.
- If applicable, how well the research plan documents the recruitment of human subjects or acquisition of human anatomical samples.
- If applicable: Whether the application describes the strategy for the inclusion of women and minorities that is appropriate for the objectives of the study, including a description of the composition of the proposed study population in terms of sex/gender, racial, and ethnic group and an accompanying rationale for the selection of subjects. If women and minorities are excluded, to what extent the application provided a justification.
- Whether an anticipated enrollment table(s) with the proposed enrollment distributed on the basis of sex/gender, race, and ethnicity is included.
- **Impact**
 - Whether the behavioral health aspects of the proposed research are clearly articulated and demonstrate a potential to lead to a major impact on patient well-being, outcomes, and health.
 - To what degree the research will accelerate promising findings toward clinical applicability and leverage results to maximize impact on near-term patient outcomes.

- To what extent the impact of the proposed research on one or more of the [FY24 PRCRP Overarching Challenges](#) will lead to a decrease of the burden of cancer on patients and/or caregivers.
- **Patient Advocate Involvement**
 - Whether at least one patient advocate from one of the [FY24 PRCRP Topic Areas](#) is named along with their organization(s).
 - To what extent the patient advocate will play an integral role in the planning, design, implementation, and evaluation of the research.
 - Whether the patient advocate's knowledge of current cancer issues in one of the FY24 PRCRP Topic Areas and their background will contribute to the project
- **Clinical Strategy (*if a pilot clinical trial is proposed*)**
 - How well the clinical trial portion of the application is designed with appropriate study variables, controls, endpoints, and data analysis plan.
 - How well the application demonstrates access to the study population, and ability to achieve recruitment goals.
 - Whether an anticipated enrollment table(s) with the proposed enrollment distributed on the basis of sex/gender, race, and ethnicity is included.
- **Questionnaires and/or Other Data Collection Instruments**
 - Whether the application includes a copy of the most recent version of questionnaires, data collection forms, rating scales, interview guides, or other instruments.
 - For each instrument, to what extent the application describes how the information collected is related to the objectives of the study.
 - Whether the application describes how and when the instrument(s) will be administered.
 - If applicable, whether the application describes how the instrument(s) will be adapted to the subject population.
- **Statistical Analysis and Data Management**
 - To what extent the statistical methodology and plan supports the stated hypothesis or objective.
 - If applicable, how well the described dataset supports the aims of the project.
 - If applicable, whether the inclusion and exclusion criteria for the subjects is sound and rationale for the criteria.

- How well the application describes the power analysis and whether it determined population numbers. If applicable, how well the application justified why a power analysis is not essential to the statistical evaluation.
- Whether the application stated whether the analyses will be univariate, bivariate, or multivariate.
- How well the variables are described and any covariates identified (if applicable). How well the application accounted for covariates and whether the adjustment is justified (if applicable).
- If applicable, how well the stratification of data is described and whether it is justified.
- How well the data capture and management are described and justified to include all methods for data collection (e.g., identifiers, confidentiality).
- To what extent the data management plans support the generation, analyses, standardization and storage of data.
- To what extent the data have been evaluated for reproducibility and adjusted for confounding variables.
- Whether there is a plan to evaluate large datasets, if applicable.
- Whether the application describes plans to confirm to the 1996 Health Insurance Portability and Accountability Act, if applicable.

In addition, the following criteria will also contribute to the overall evaluation of the application, but will not be individually scored and are therefore termed **unscored criteria**:

- **Personnel**

- How appropriate the levels of effort are for successful conduct of the proposed work.
- Based on the biographical sketches, whether the research team's backgrounds are appropriate to study the specified [FY24 PRCRP Topic Area\(s\)](#), with respect to the team's ability to perform the proposed work.

- **Budget**

- Whether the budget is appropriate for the proposed research.
- To what degree the quality and extent of institutional support are appropriate.
- If applicable, to what degree the intellectual and material property plan is appropriate.

- **Environment**

- To what extent the scientific environment is appropriate for the proposed research project.
- How well the research requirements are supported by the availability of and accessibility to facilities and resources.
- To what extent the quality and level of institutional support are appropriate for the proposed research project.
- **Application Presentation**
 - To what extent the writing, clarity, and presentation of the application components influence the review.

II.E.1.b. Programmatic Review

To make funding recommendations and select the application(s) that, individually or collectively, will best achieve the program objectives, the following criteria are used by programmatic reviewers:

- Ratings and evaluations of the peer reviewers
- Relevance to the priorities of the Defense Health Program and FY24 PRCRP, as evidenced by the following:
 - Adherence to the intent of the funding opportunity
 - Program portfolio balance and composition
 - Programmatic relevance to the [FY24 PRCRP Military Health Focus Areas](#)
 - Programmatic relevance to the [FY24 PRCRP Overarching Challenges](#) under Patient Well-Being and Survivorship, and/or Disparity
 - Relative impact on patient well-being, outcomes, and health

II.E.2. Application Review and Selection Process

All applications are evaluated by scientists, clinicians, and consumers in a two-tier review process. The first tier is **peer review**, the evaluation of applications against established criteria to determine technical merit, where each application is assessed for its own merit, independent of other applications. The second tier is **programmatic review**, a comparison-based process in which applications with high scientific and technical merit are further evaluated for programmatic relevance. Final recommendations for funding are made to the Commanding General, USAMRDC. *The highest-scoring applications from the first tier of review are not automatically recommended for funding. Funding recommendations depend on various factors as described in [Section II.E.1.b, Programmatic Review](#).* Additional information about

the two-tier process used by the CDMRP can be found at <https://cdmrp.health.mil/about/2tierRevProcess>.

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

II.E.3. Integrity and Performance Information

Prior to making an assistance agreement award where the federal share is expected to exceed the simplified acquisition threshold, as defined in 2 CFR 200.1, over the period of performance, the federal awarding agency is required to review and consider any information about the applicant that is available in SAM.

An applicant organization may review SAM and submit comments on any information currently available about the organization that a federal awarding agency previously entered. The federal awarding agency will consider any comments by the applicant, in addition to other information in the designated integrity and performance system, in making a judgment about the applicant's integrity, business ethics, and record of performance under federal awards when determining a recipient's qualification prior to award, according to the qualification standards of the Department of Defense Grant and Agreement Regulations (DoDGARs), Section 22.415.

II.F. Federal Award Administration Information

II.F.1. Federal Award Notices

Each applicant organization and PI will receive email notification when the funding recommendations are posted to eBRAP. At this time, each PI will receive a peer review summary statement on the strengths and weaknesses of the application and an information paper describing the funding recommendation and review process for the PRCRP award mechanisms. The information papers and a list of organizations and PIs recommended for funding are also posted on the program's page within the CDMRP website.

If an application is recommended for funding, after the email notification is posted to eBRAP, a government representative will contact the person authorized to negotiate on behalf of the recipient organization.

Only an appointed USAMRAA Grants Officer may obligate the government to the expenditure of funds to an extramural organization. No commitment on the part of the government should be inferred from discussions with any other individual. ***The award document signed by the Grants Officer is the official authorizing document (i.e., assistance agreement).***

Intra-DOD obligations of funding will be made according to the terms of a negotiated Inter-Agency Agreement and managed by a CDMRP Science Officer.

Funding obligated to ***intragovernmental and intramural DOD organizations*** will be sent through the Military Interdepartmental Purchase Request (MIPR), Funding Authorization Document (FAD), or Direct Charge Work Breakdown Structure processes. Transfer of funds is contingent upon appropriate safety and administrative approvals. Intragovernmental and intramural DOD investigators and collaborators must coordinate receipt and commitment of funds through their respective Resource Manager/Task Area Manager/Comptroller or equivalent Business Official.

An organization may, at its own risk and without the government's prior approval, incur obligations and expenditures to cover costs up to 90 days before the beginning date of the initial budget period of a new award. For extramural submissions, refer to the General Application Instructions, Section IV.B.(e), Pre-Award Costs section, and for intramural submissions, refer to the General Application Instructions, Section V.A.(e), Pre-Award Costs section, for additional information about pre-award costs.

If there are technical reporting requirement delinquencies for any existing CDMRP awards at the applicant organization, no new awards will be issued to the applicant organization until all delinquent reports have been submitted.

II.F.2. PI Changes and Award Transfers

Unless otherwise restricted, changes in PI or organization will be allowed on a case-by-case basis, provided the intent of the award mechanism is met.

The organizational transfer of an award supporting a clinical trial is strongly discouraged and, in most cases, will not be allowed. Approval of a transfer request will be on a case-by-case basis at the discretion of the Grants Officer.

An organizational transfer of an award will not be allowed in the last year of the (original) period of performance or any extension thereof.

Refer to the General Application Instructions, Appendix 7, Section F, for general information on organization or PI changes.

II.F.3. Administrative and National Policy Requirements

Applicable requirements in the DoDGARs found in 32 CFR, Chapter I, Subchapter C, and 2 CFR, Chapter XI, apply to grants and cooperative agreements resulting from this program announcement.

Refer to the General Application Instructions, Appendix 7, for general information regarding administrative requirements.

Refer to the General Application Instructions, Appendix 8, for general information regarding national policy requirements.

Refer to full text of the latest [DoD R&D Terms and Conditions](#) and the [USAMRAA Research Terms and Conditions: Addendum to the DoD R&D Terms and Conditions](#) for further information.

Applications recommended for funding that involve animals, human data, human specimens, human subjects, or human cadavers must be reviewed for compliance with federal and DOD animal and/or human subjects protection requirements and approved by the USAMRDC Office of Human and Animal Research Oversight, prior to implementation. This administrative review requirement is in addition to the local Institutional Animal Care and Use Committee (IACUC), Institutional Review Board (IRB), or Ethics Committee review. Refer to the General Application Instructions, Appendix 6, for additional information.

Funded trials are required to post a copy of the IRB-approved informed consent form used to enroll subjects on a publicly available federal website in accordance with federal requirements described in 32 CFR 219. Funded studies are required to register the study in the National Institutes of Health clinical trial registry, www.clinicaltrials.gov, prior to initiation of the study. Refer to the General Application Instructions, Appendix 6, Section F, for further details.

II.F.4. Reporting

Annual technical progress reports as well as a final technical progress report will be required. Annual and final technical reports must be prepared in accordance with the Research Performance Progress Report.

The Award Terms and Conditions will specify whether additional and/or more frequent reporting is required.

Award Expiration Transition Plan: An Award Expiration Transition Plan must be submitted with the final progress report. Use the one-page template “Award Expiration Transition Plan,” available on the eBRAP “Funding Opportunities & Forms” web page (<https://ebrap.org/eBRAP/public/Program.htm>) under the “Progress Report Formats” section. The Award Expiration Transition Plan must outline whether and how the research supported by this award will progress and must include source(s) of funding, either known or pending.

PHS Inclusion Enrollment Reporting: (*only required for [clinical research studies and pilot clinical trials](#)*): Enrollment reporting on the basis of sex/gender, race, and/or ethnicity will be required with each annual and final progress report. The PHS Inclusion Enrollment Report is available on the “Funding Opportunities & Forms” web page (<https://ebrap.org/eBRAP/public/Program.htm>) in eBRAP.

Awards resulting from this program announcement may entail additional reporting requirements related to recipient integrity and performance matters. Recipient organizations that have federal

contract, grant, and cooperative agreement awards with a cumulative total value greater than \$10M are required to provide information to SAM about certain civil, criminal, and administrative proceedings that reached final disposition within the most recent 5-year period and that were connected with performance of a federal award. These recipients are required to disclose, semiannually, information about criminal, civil, and administrative proceedings as specified in the applicable Representations (see General Application Instructions, Appendix 8, Section B).

II.G. Federal Awarding Agency Contacts

II.G.1. eBRAP Help Desk

Questions regarding program announcement content or submission requirements as well as technical assistance related to pre-application or intramural application submission:

Phone: 301-682-5507

Email: help@eBRAP.org

II.G.2. Grants.gov Contact Center

Questions regarding Grants.gov registration and Workspace:

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

Email: support@grants.gov

II.H. Other Information

II.H.1. Program Announcement and General Application Instructions Versions

Questions related to this program announcement should refer to the program name, the program announcement name, and the program announcement version code 901a. The program announcement numeric version code will match the General Application Instructions version code 901.

II.H.2. Administrative Actions

After receipt of full applications, the following administrative actions may occur.

II.H.2.a. Rejection

The following will result in administrative rejection of the full application:

- Pre-application was not submitted.
- Project Narrative exceeds page limit.

- Project Narrative is missing.
- Budget is missing.

II.H.2.b. Modification

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

II.H.2.c. Withdrawal

The following may result in administrative withdrawal of the full application:

- An FY24 PRCRP Programmatic Panel member is named as being involved in the research proposed or is found to have assisted in the pre-application or application processes including, but not limited to, concept design, application development, budget preparation, and the development of any supporting documentation, including letters of support/recommendation. *A list of the FY24 PRCRP Programmatic Panel members can be found at <https://cdmrp.health.mil/prcrp/panels/panels24>.*
- The application fails to conform to this program announcement description.
- Inclusion of URLs, with the exception of links in References Cited and Publication and/or Patent Abstract sections.
- Applications that include names of personnel from either of the CDMRP peer or programmatic review companies. For FY24, the identities of the peer review contractor and the programmatic review contractor may be found at the CDMRP website (<https://cdmrp.health.mil/about/2tierRevProcess>).
- Personnel from applicant or collaborating organizations are found to have contacted persons involved in the review or approval process to gain protected evaluation information or to influence the evaluation process.
- Applications from extramural organizations, including non-DOD federal agencies, received through eBRAP.
- Applications submitted by a federal government organization (including an intramural DOD organization) may be withdrawn if (a) the organization cannot accept and execute the entirety of the requested budget in current fiscal year (FY24) funds and/or (b) the federal government organization cannot coordinate the use of contractual, assistance, or other appropriate agreements to provide funds to collaborators.
- Application includes research data that are classified and/or proposes research that may produce classified outcomes, or outcomes deemed sensitive to national security concerns.

- Submission of the same research project to different funding opportunities within the same program and fiscal year.
- The PI does not meet the eligibility criteria.
- The application proposes basic biological laboratory science only.
- A clinical trial beyond a pilot study is proposed.
- The application does not adhere to congressional language and proposes breast, kidney, lung, pancreatic, prostate, ovarian, rare cancer, or melanoma research.
- The application does not address at least one of the [FY24 PRCRP Topic Areas](#).
- The application does not address at least one of the [FY24 PRCRP Military Health Focus Areas](#).
- The application does not address at least one of the [FY24 PRCRP Overarching Challenges](#).
- A pilot clinical trial is proposed and [Attachment 8, Clinical Strategy Statement](#) is missing.
- The application proposes animal studies.
- The application does not adhere to congressional language and includes primary breast, kidney, lung, pancreatic, prostate, ovarian, or rare cancers (excluding relevant subtypes of the FY24 PRCRP Topic Areas), melanoma, or glioblastoma as part of the research study.

II.H.2.d. Withhold

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

II.H.3. Full Application Submission Checklist

Full Application Components	Uploaded
SF424 Research & Related Application for Federal Assistance (Extramural submissions only)	<input type="checkbox"/>
Summary (Tab 1) and Application Contacts (Tab 2) (Intramural submissions only)	<input type="checkbox"/>
Attachments	
Project Narrative – Attachment 1, upload as “ProjectNarrative.pdf”	<input type="checkbox"/>
Supporting Documentation – Attachment 2, upload as “Support.pdf”	<input type="checkbox"/>
Technical Abstract – Attachment 3, upload as “TechAbs.pdf”	<input type="checkbox"/>
Lay Abstract – Attachment 4, upload as “LayAbs.pdf”	<input type="checkbox"/>
Statement of Work – Attachment 5, upload as “SOW.pdf”	<input type="checkbox"/>
Impact Statement – Attachment 6, upload as “Impact.pdf”	<input type="checkbox"/>
Patient Advocate Involvement Statement – Attachment 7, upload as “Advocate.pdf”	<input type="checkbox"/>
Clinical Strategy Statement – Attachment 8, upload as “Clinical.pdf”	<input type="checkbox"/>
Statistical Analysis Plan – Attachment 9, upload as “StatsData.pdf”	<input type="checkbox"/>
Questionnaires and Other Data Collection Instruments – Attachment 10, upload as “Question.pdf”	<input type="checkbox"/>
Relevance to Military Health Statement – Attachment 11, upload as “MilHealth.pdf”	<input type="checkbox"/>
Representations (Extramural submissions only) – Attachment 12, upload as “RequiredReps.pdf”	<input type="checkbox"/>
Suggested Intragovernmental/Intramural Budget Form (if applicable) – Attachment 13, upload as “IGBudget.pdf”	<input type="checkbox"/>
Research & Related Personal Data	<input type="checkbox"/>
Research & Related Senior/Key Person Profile (Expanded)	<input type="checkbox"/>
Attach PI Biographical Sketch (Biosketch_LastName.pdf)	<input type="checkbox"/>
Attach PI Previous/Current/Pending Support (Support_LastName.pdf)	<input type="checkbox"/>
Attach Biographical Sketch (Biosketch_LastName.pdf) for each senior/key person	<input type="checkbox"/>
Attach Previous/Current/Pending (Support_LastName.pdf) for each senior/key person	<input type="checkbox"/>
Research & Related Budget (Extramural submissions only) Include budget justification	<input type="checkbox"/>
Budget (Intramural submissions only) Include budget justification	<input type="checkbox"/>
Project/Performance Site Location(s) Form	<input type="checkbox"/>
Research & Related Subaward Budget Attachment(s) Form (if applicable)	<input type="checkbox"/>

APPENDIX 1: ACRONYM LIST

ACOS/R&D	Associate Chief of Staff for Research and Development
CDMRP	Congressionally Directed Medical Research Programs
CFR	Code of Federal Regulations
DOD	Department of Defense
DoDGARs	Department of Defense Grant and Agreement Regulations
eBRAP	Electronic Biomedical Research Application Portal
ET	Eastern Time
FAD	Funding Authorization Document
FY	Fiscal Year
IRB	Institutional Review Board
LOI	Letter of Intent
M	Million
MB	Megabytes
MIPR	Military Interdepartmental Purchase Request
PDF	Portable Document Format
PHS	Public Health Service
PI	Principal Investigator
PRCRP	Peer Review Cancer Research Program
SAM	System for Award Management
SOW	Statement of Work
UEI	Unique Entity Identifier
URL	Uniform Resource Locator
USAMRAA	U.S. Army Medical Research Acquisition Activity
USAMRDC	U.S. Army Medical Research and Development Command
USC	United States Code
VA	U.S. Department of Veterans Affairs

APPENDIX 2: DOD AND VA WEBSITES

PIs are encouraged to integrate and/or align their research projects with DOD and/or VA research laboratories and programs. Collaboration with DOD or VA investigators is also encouraged. Below is a list of websites that may be useful in identifying additional information about DOD and VA areas of research interest, ongoing research, or potential opportunities for collaboration.

Air Force Office of Scientific Research

<https://www.afrl.af.mil/AFOSR/>

Air Force Research Laboratory

<https://www.afrl.af.mil/>

Armed Forces Radiobiology Research
Institute

<https://afrii.usuhs.edu/home>

Combat Casualty Care Research Program

<https://cccrp.health.mil/Pages/default.aspx>

Congressionally Directed Medical Research
Programs

<https://cdmrp.health.mil/>

Defense Advanced Research Projects
Agency

<https://www.darpa.mil/>

Defense Health Agency

<https://health.mil/About-MHS/OASDHA/Defense-Health-Agency/>

Defense Suicide Prevention Office

<https://www.dspo.mil/>

Defense Technical Information Center

<https://www.dtic.mil/>

Defense Threat Reduction Agency

<https://www.dtra.mil/>

Military Health System Research Symposium

<https://mhsrs.health.mil/sitepages/home.aspx>

Military Infectious Diseases Research
Program

<https://midrp.health.mil/>

Military Operational Medicine Research
Program

<https://momrp.health.mil/>

Navy Bureau of Medicine and Surgery

<https://www.med.navy.mil/>

Naval Health Research Center

<https://www.med.navy.mil/Naval-Medical-Research-Command/R-D-Commands/Naval-Health-Research-Center/>

Navy and Marine Corps Public Health Center

<https://www.med.navy.mil/Navy-and-Marine-Corps-Force-Health-Protection-Command/>

Naval Medical Research Command

<https://www.med.navy.mil/Naval-Medical-Research-Command/>

Office of Naval Research

<https://www.nre.navy.mil/>

Office of the Under Secretary of Defense for
Acquisition, Technology and Logistics

<https://www.acq.osd.mil/>

Telemedicine and Advanced Technology
Research Center

<https://www.tatrc.org/>

Uniformed Services University of the Health
Sciences

<https://www.usuhs.edu>

U.S. Army Aeromedical Research
Laboratory

<https://usaarl.health.mil/>

U.S. Army Combat Capabilities
Development Command

<https://www.army.mil/devcom>

U.S. Army Institute of Surgical Research
<https://usaisr.health.mil/>

U.S. Army Medical Materiel Development Activity
<https://usammda.health.mil/>

U.S. Army Medical Research and Development Command
<https://mrdc.health.mil/>

U.S. Army Medical Research Institute of Infectious Diseases
<https://usamriid.health.mil/>

U.S. Army Research Institute of Environmental Medicine
<https://usariem.health.mil/>

U.S. Army Research Laboratory
<https://www.arl.army.mil/>

U.S. Army Sharp, Ready and Resilient Directorate
<https://www.armyresilience.army.mil/sharp/index.html>

U.S. Department of Defense Blast Injury Research Program
<https://blastinjuryresearch.health.mil/>

U.S. Department of Veterans Affairs, Office of Research and Development
<https://www.research.va.gov/>

U.S. Naval Research Laboratory
<https://www.nrl.navy.mil/>

Walter Reed Army Institute of Research
<https://wrair.health.mil/>