

The Research Notebook

A Publication of the Office of Research

VOLUME 8 ISSUE 2

APRIL 2013

Inside this issue:

<i>Office of Research Update</i>	1
<i>Injectable Meloxicam Update</i>	2
<i>GSMK Advance Digest</i>	3
<i>Now Hear This . . . No, I Mean Really</i>	3
<i>Research Funding Support</i>	3
<i>Vevo Ultrasound Micro-imaging Available</i>	4
<i>ACAP FAQs</i>	4
<i>REDCap Database for Research Data</i>	5
<i>Input Needed to Improve Animal Protocol System</i>	5
<i>Biomedical Informatics Honored</i>	5
<i>NIH Grant Proposal and Animal Protocol Congruence</i>	6
<i>Grant Proposal Consultant Services</i>	6
<i>Proposal Development FAQ</i>	6
<i>IRB Review of Registries, Repositories, and Databases</i>	7
<i>NIH Senior/Key Personnel Questions</i>	8
<i>Research.gov Replaces FastLane</i>	8
<i>PAMS Notices FAQ</i>	8
<i>Revisiting the Relationship Between NIH Paylines and Success Rates</i>	9
<i>Office of Research Contact List</i>	11

Dear Colleagues,

Research collaborations can make it easier to stay on the cutting edge of a field, produce high impact publications, and create more competitive grant proposals. But, starting and maintaining successful collaborations takes thought and planning. I can think of a number of scenarios as to how research collaborations are initiated. First, a compelling idea or hypothesis may arise from informal discussions at conferences and seminars, and researchers agree to address the issues through collaboration. The idea is the seed that initiates this type of collaboration. An offshoot of this approach is when constructing a multicomponent grant such as a PO1; it becomes clear that a more inclusive approach involving other investigators might better withstand peer review. Another trigger for collaborations is when a scientist feels some aspect of his/her work would benefit from additional expertise with a new approach. This takes more effort to start, but a big part of initiating such cooperative efforts is to be open to and looking for opportunities wherever science is discussed, especially through identification of the "right person" with the "right techniques" through review of the literature and acquaintances at conferences, study section, hallways, seminars, and UTHSC or national committees. Of course, there are many more scenarios leading to collaboration. In each case, a "win-win" scenario must be developed that allows a compelling answer to the question, "What is in it for me?" for each investigator.

A number of tools exist to help identify the "right" researcher(s) with which to collaborate. PubMed (<http://www.ncbi.nlm.nih.gov/pubmed>) identifies who is publishing in the area. Another tool I found fascinating to try out is GoPubMed (<http://www.gopubmed.org/web/gopubmed/>) which identifies leaders in a field. In GoPubMed insert your favorite topic in the "Find" box on the homepage and, once you have those results click on "Statistics" to see a summary description of topic, top authors, institutions, journals, and in vogue years for that topic. NIH RePorter (<http://projectreporter.nih.gov/reporter.cfm>) allows you to identify NIH supported research and investigators; both past and present support (see "Fiscal Year" box). To see the multiple directions your field is going, pull up your own funding history, and hit "Similar Projects" on the resulting table to retrieve grants of other PIs in your area. All of these websites can have "Memphis" as one of the keywords in the search if you are interested in identifying a



Dr. Polly Hofmann

(Continued on page 2)

Research Update (cont.)

local collaborator.

The tools listed above can help identify productive leaders in a field. It does not identify who is open to collaborations and whether she/he is easy to work with. This is where your existing scientific network can help. For example, does your Chair, senior faculty in your department, postdoctoral fellows you trained with, people you have published with, or your PhD or MD advisor know any of the potential collaborators you have identified? What have they heard about the individual? Can they connect you in email or at a conference? This will increase the odds of your working with people you respect AND like, and avoid your having to do a "cold-call." Should a cold-call or introducing yourself at a conference be necessary, remember to do your homework so that you can explain your idea in a way your proposed collaborator will understand and see what they might gain. After first contact and a tentative agreement to explore collaboration, it is a good idea for the first meeting in which details are discussed to be face-to-face. Further, I advocate working on a small project at first, and not a 12-figure publication nor multi-PI grant proposal. Small projects allow you to road test if you should work together on larger projects. Also, remember many collaborations start by PIs using a shared graduate student or posdoc to do the project.

To help perpetuate a healthy relationship, ground rules should be established early in a collaboration. A Nature news feature (452; 682-684, 2008) set out 10 reasonable questions to discuss with your collaborator(s) at the start. These are: "What do we expect to get out this? Who is going to do what and by when? Who will have access to our data? Who will give public presentations, and how much data will they reveal? How will we assign authorship? How will we decide when to publish? Who owns the intellectual property? Will we share our reagents with other labs? What happens if one of us leaves the project? What happens if one of us wants to form a separate, but related, collaboration with another lab?" Answers on the front end will help avoid later conflict.

A final thought on collaboration concerns how it relates to the tenure track. In academic health centers, the criteria for award of tenure has in the past stressed independence. Collaborations can work for tenure-track faculty as long as the individual can show a body of work for which they are known at the time of tenure consideration, and that there was significant support from extramural grants as a multi-PI / Co-PI. It is also critical to consult with your Chair and keep him/her informed on the level and importance of your contributions to the collaboration.

I encourage us to discuss collaborative strategies as I am sure there is much to be learned from each other's experiences. Further, colleagues can help identify and connect us with opportunities.

Polly A Hofmann, PhD
Senior Associate Vice Chancellor of Research

Injectable Meloxicam Update

Previously the only source for injectable meloxicam (5mg/mL) was Metacam®. This formulation is indefinitely on manufacture back order due to production delays. All the suppliers' available inventory has been depleted since September 2012. There is no projected date of return to market at this time.

A new meloxicam formulation is now being carried by suppliers from a European company under the trademark Loxicom® (5mg/mL solution for injection). This product is available for order through the LACU for \$96.32 per 10mL vial. A medical grade alternative source for injectable meloxicam is now available through People's Custom Rx compounding pharmacy. The pharmacy was recently accredited for meeting or exceeding national quality standards and is located here in Memphis. Orders for 10mL vials (5mg/mL) can be placed through the LACU for \$28.75. <http://www.peoplescustomrx.com/>.

As a reminder, it is in the best interest of Principle Investigators to write protocols for new submissions and amendments with multiple analgesic options to avoid source problems and delays to research. Please consult with the LACU/DCM veterinary staff for appropriate analgesic options and dosing requirements at (901) 448-5656.

Advance Digest Spotlights Research in Cancer, Obesity, Heart Disease

Research that is improving healthcare is spotlighted in the Winter, 2013, issue of *Advance* research digest, a publication of the UT Graduate School of Medicine, Knoxville. Readers can learn about research being conducted by Matthew Mancini, M.D., Greg Mancini, M.D., and Hollie Raynor, Ph.D., that is breaking through barriers to success after weight-loss surgery.

Irfan Asif, M.D., is finding ways that will help prevent sudden cardiac death in athletes, and Jonathan Wall, Ph.D., and his team are making an international impact in imaging amyloid.

These and other remarkable examples of medical research at the Graduate School of Medicine are featured in the Winter, 2013, issue of *Advance*. Read *Advance* at <http://gsm.utmc.edu/research/main.cfm> or in hard copy. To request copies, contact the office of Continuing Education and Professional Development, 865-305-9190 or AdvanceDigest@utmck.edu.

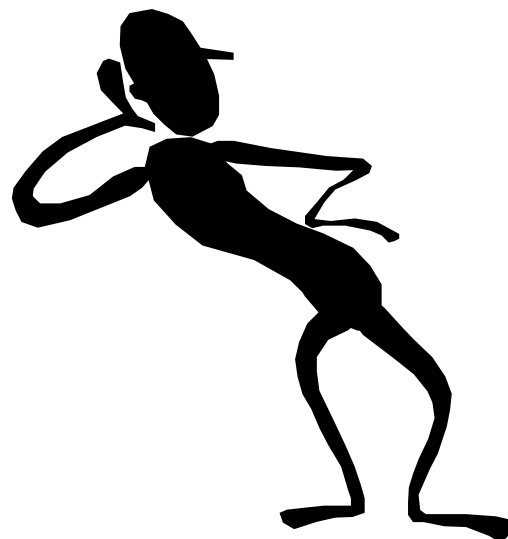


Now Hear This . . . No, I Mean Really

We want to know what you think, what you honestly think about the processes associated with protocol submission to the IACUC and the IBC, as well as oversight of animal activities and laboratory safety related to recombinant DNA and biohazards. We'd like you to tell us in one of several ways. By hearing your concerns, we can act to refine and change some things, and explain those things that are necessary to be adherent to regulations.

Randy Nelson is the UTHSC Institutional Official for Animal Care and Use and the Responsible Official when UTHSC communicates with the NIH Office of Biotechnology (OBA). As such, he represents the institution and the investigators while maintaining a certain separation from both the IACUC and IBC.

Your thoughts and concerns may be directed to Randy through several channels. He can be reached in the Office of Research Compliance (ORC). His direct telephone number is 448-3533. He is the sole reader of the email account at compliance@uthsc.edu. Finally, you may wish to talk to him in the ORC located at 910 Madison, Suite 650. He wants to know your concerns and suggestions and wants to improve the coordination and cooperation between investigators and UTHSC as we all strive to balance good animal welfare with laboratory safety and good science.



Funding Support for Research

Bridge Funding: Applications can be submitted to the Office of Research for committee review and approval. Note the next deadline for bridge fund requests is April 15. More information can be found at: http://www.uthsc.edu/research/research_resources/bridge_funding/

Grant Pilot Support: Modest support to pay for sample analysis or purchase of specific reagents/needs to complete specific pilot studies for extramural, federal grant proposals is available. Please contact Dr. Polly Hofmann for more information at phofmann@uthsc.edu

Vevo 2100 Ultrasound Micro-imaging Available



The Vevo 2100 is the latest in high-resolution ultrasound from VisualSonics. The micro-imaging system is comprised of two parts; the machine itself and the software which allows for data analysis on a PC computer of your choice. The machine allows for non-invasive *in vivo* visualization of various anatomical structures and hemodynamic functions. All areas of research at UTHSC have the potential to benefit from the utilization of such a system for demonstrating phenotypic differences among various strains of animals, comparing experimental/control groups, and expanding current studies.

Specifications include a 30 micron resolution and frame rates up to 1000 fps. It uses the first linear array ultrasound transducers capable of imaging in the 25-75MHz range, which allows for multiple focal depths and improved image quality compared to standard clinical machines. The transducer rail system includes an adjustable heated platform with intergraded capabilities of measuring/recording EKG, respiratory rate, and rectal temperature of the anesthetized animal. The system includes a motor assembly that can be used to generate 3D volumes from serial 2D slices. There are preloaded measurement packages for cardio, vascular, and abdomen which significantly decrease analysis time. Data is exportable to Microsoft Excel® for improved record keeping and incorporation into statistic programs.

The Vevo 2100 is available for use through the Department of Comparative Medicine/Laboratory Animal Care Unit located in the Coleman building. There is no cost associated with initial training. Fees for use are: \$40/hr for the machine; \$40/day for Isoflurane anesthesia; plus veterinary/technician time if needed. Current and past works have included cardiac phenotyping, tumor experiments with 3D remodeling, reproductive studies with fetal aging in mice and rats, and even neonatal cardiopulmonary analysis in baboons. Please see the attached links or contact Dr. Scott Jackson (jjacks23@uthsc.edu, 448-5656) for further information. <http://www.visualsonics.com/ultrasound> or http://www.uthsc.edu/research/research_resources/LACU/RodentMicro.php

ACAP FAQs

Is it permissible to reuse a cage card if the basic information on one card is still accurate for the other cage?

No, with the ACAP system, the bar coded number on the cage card uniquely identifies each cage based on the approved protocol, species, and strain and directly accounts for the number of animals allocated to that protocol. Reusing an old card could become a compliance issue as the information on the cage card would not accurately reflect the contents of the cage and may not properly count the animals transferred to that cage.

How is an animal order cancelled? Orders can be cancelled in ACAP until LACU begins processing the submitted order. Thereafter, it is necessary to contact the LACU administrative office by calling 448-5656 and then following up with an email to LACU@uthsc.edu.

How do we separate and/or wean out animals?

In ACAP, under LACU requests, click the *Cage Card/Wean/Separation Request* link, then complete the request form. Two items on the form are important to understand. (1) The buttons to answer the question, *Who will perform Separation?*, i.e *PI* or *LACU* also determines who will print the cage cards for the new cages associated with this request. (2) The buttons to answer the question, *Are these animals being weaned?*, i.e *Yes* or *No*, will, in the case of a *Yes*, require the additional input of the quantity of newly-weaned animals. (NOTE – If there are no active cages currently on the protocol, the “Cage Card/Wean/Separation Request” link will be disabled.)

What is the process for importing animals from another institution?

The specific steps can be found on the LACU web page under Rodent Import/Export. See http://www.uthsc.edu/research/research_resources/LACU/. When completing the process in ACAP, submit an order request as if you are ordering from a vendor; however, choose *Other-import to UT* as the vendor.

Cost Effective Clinical Databasing Now Available at UTHSC: REDCap System is Live

The UTHSC Office of Biomedical Informatics and the Biomedical Informatics Core of the Le Bonheur Children's Foundation Research Institute (CFRI) are pleased to announce that the Research Electronic Data Capture (REDCap) system is now live for UT Faculty at UTHSC. REDCap augments the BMI/BMIC portfolio by providing a cost-effective and user-friendly database system for small to mid-sized research projects in pre-funding stages of development. REDCap is specifically designed to be maintained by user groups. Its simple and intuitive interface allows faculty and staff to develop and maintain their own complex data management tools.

Faculty in the Department of Pediatrics wishing to learn more should contact Dr. Tee Viangteeravat (tviangte@uthsc.edu) Technical Director of the CFRI-BMIC. All other UT faculty should contact the Office of Biomedical Informatics (BMI@uthsc.edu). A minimal fee-for-service provides users with space for up to 10 research projects and guarantees onsite training and technical support. Depending on the popularity of this service, the BMI may charge a small yearly fee to cover database space, training and technical support.

Input Needed to Improve Animal Use Protocol

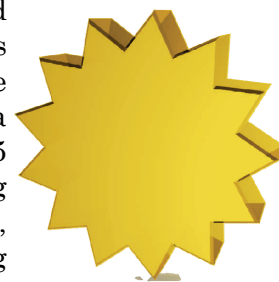
The new ACAP protocol submission and review system has now been in use for several months. Although its basic functionality is reasonably well established, the need for further refinement is appreciated. A number of modifications are in progress to address the problems that have been recognized to this point. However, input is sought from all users to identify those aspects of the process that would most benefit from improvement. Suggestions to clarify instructions and eliminate ambiguities would be particularly appreciated. Send recommendations to: compliance@uthsc.edu



UTHSC Office of Biomedical Informatics Named as Laureate of Computerworld Honors Program

Established in 1988, and celebrating its 25th Anniversary, The Computerworld Honors Program brings together individuals, organizations and institutions around the world whose visionary applications of information technology promote positive social, economic and educational change. "Technology continues to play a pivotal role in transforming how business and society functions. For the past 25 years the Computerworld Honors Program has had the privilege of celebrating innovative IT achievements," said John Amato, vice president & publisher, Computerworld. "Computerworld is honored to recognize the outstanding accomplishments of the 2013 class of Laureates and to share their work. These projects demonstrate how IT can advance organizations' ability to compete, innovate, communicate and prosper."

The BMI was nominated by colleagues in UTHSC Information Technology Services. "This is a great honor and a real surprise," Said Dr. Ian Brooks, Director of the BMI. "This Award recognizes all the hard work everyone at UTHSC has put into developing our clinical data management systems and collaborations over the last few years. It really shows the level of commitment from our colleagues in ITS, the Office of Research, and the dedication of our faculty colleagues and collaborators to create a powerful set of systems to address key healthcare questions in Memphis."



NIH Grant Proposal Congruence with Animal Protocols

As a reminder, in order to receive Public Health Service (PHS) funds, UTHSC must verify congruence between animal activities proposed in grant applications and IACUC-approved protocols. PHS and the National Institutes of Health (NIH) have specific policy statements concerning IACUC review and approval of animal work specified in a grant before that work is begun.

When submitting a grant proposal to the NIH, it is the responsibility of the investigator to verify that all work proposed in the grant has been approved by the necessary committees/boards (i.e. IACUC, IRB, and IBC). If all of the work has not been approved by the necessary committees/boards, it should be indicated on the grant application and in PAMS that approval from these committees/boards is “pending.” To indicate to the NIH otherwise would constitute fraud.

The NIH has assured the Office of Research Compliance (ORC) that “pending” approval from necessary committees/boards does not affect the scientific review of the grant proposal.

Specifically for grants with animal studies, the ORC recommends that any investigator who receives a potentially fundable priority score on a grant submission request that ORC compare his/her grant proposal and the associated IACUC-approved protocol(s). In order to verify proposal/protocol congruence, the ORC will need the name of the grant proposal, name of the PI(s), and the corresponding IACUC-approved protocol(s). The ORC can be contacted regarding proposal/protocol congruence at the following email and phone number: mmccool@uthsc.edu 901-448-1264

Also, when major changes in planned animal activities occur during the course of grant funding, please revise existing animal protocols and obtain approval from your program manager. Verification of congruency should also be requested in these situations.

For more information about Proposal-Protocol Congruency, please refer to the ORC website: [Proposal-Protocol Congruence Information](#).



Grant Proposal Consultant Services

Dr. Israel (Izzy) Goldberg of Health Research Associates, Inc., will visit the UTHSC Memphis campus April 11 and 12 for in-depth and specific grant proposal consulting. Dr. Goldberg has been particularly helpful when the Principal Investigator provides their intended response to reviewer critiques of a previously reviewed proposal. He has provided consultation that proved invaluable for the successful awarding of a number of NIH grants to UTHSC faculty. Dr. Goldberg is available to assist faculty with individual grants, as well as training grants and other programmatic funding.

Please contact Ms. Lisa Bronte at lbronte@uthsc.edu to reserve a time.



Proposal Development Question

Q: I need assistance with proofing and editing of my grant proposal. Is this service available?

A: Copy editing services can be arranged for you by the Office of Research. Please contact Jane Poulos jpoulos@uthsc.edu for access to this service.

IRB Review of Registries, Repositories, and Databases

The creation of registries, repositories and databases has proliferated exponentially in recent years. Nevertheless, faculty, staff and students are frequently confused about whether they must submit an IRB application when reviewing such records. Faculty have sometimes submitted record studies for publication, only to find out that journals will not publish their work because they failed to secure prior IRB approval. The following points are intended to clarify your responsibilities.

First, IRB review is necessary when the review of records constitutes “research,” which is defined in the regulations as a “systematic investigation” designed to develop “generalizable knowledge.” A good benchmark for determining whether your activity constitutes “research” as defined here is whether you intend to publish or present the results in a professional setting. If so, you must have IRB approval before your study is undertaken. In addition, if getting consent is not practical, you must request a waiver of informed consent and a waiver of the HIPAA regulation requiring you to secure the specific authorization of subjects prior to reviewing their records for research purposes.

Second, when you initially query a database or record system to determine whether or not a particular study would be valuable or feasible, this activity is not considered “research” under human subjects regulations. However, under the HIPAA privacy rules, review of records for purposes other than patient care, billing, or quality assurance/improvement cannot be undertaken without the specific authorization of the patients or a waiver of this requirement by the IRB. As a result, before querying a database or record system to determine the value or feasibility of a research study, you must have the approval of the IRB for what the HIPAA regulations call “a review preparatory to research.” You must simply confirm in the IRB application that the review is related to and necessary for a possible research study, and that you will not remove data from the facility or system in which it is stored.

Third, the conduct of local quality assurance and quality improvement activities using database and record reviews does not require IRB review of any sort. Even though such activities may be “systematic investigations,” they are not intended to “develop generalizable knowledge” and so are not considered “research” under the IRB regulations. Furthermore, these activities are permitted under HIPAA without any specific authorization on the part of patients. However, if you later determine that the results of a quality assurance/quality improvement project may be worthy of publication or presentation in a professional setting, then the activity becomes “research” and you should secure IRB approval before developing a publication or presentation.

If you have questions regarding the interpretation or application of these rules, you should not hesitate to call the IRB for clarification of your responsibilities. A correct understanding of the rules will assure that you do not try to submit a report for professional publication or presentation without proper IRB approval.



Office of Research Administration

NIH Senior/Key Personnel Questions

This article is reprinted from The National Institutes of Health *Extramural Nexus* FAQ pages located at <http://nexus.od.nih.gov/all/author/nih-staff/>

Extramural Nexus

How Does NIH Determine Which Senior/Key Personnel are Named on the Award?

Posted on [January 31, 2013](#)

All PD/PI(s) are named in the Notice of Award. NIH program officials use discretion in identifying in the Notice of Award senior/key personnel other than the PD/PI(s). Generally, these are individuals whom the IC considers critical to the project, i.e., their absence from the project would be expected to impact the approved scope of the project. Change in status of senior/key personnel named in the Notice of Award requires prior written approval from the NIH.

Should a Consultant Be Designated as Senior/Key Personnel in My Grant Application?

Posted on [January 30, 2013](#)

Generally, a consultant is not considered senior/key personnel. However, if the consultant contributes to the scientific development or execution of a project substantively and measurably, he/she should be designated as senior/key personnel and would be included in the Senior/Key Person Profile Component. To learn more about including personnel on grant applications and progress reports, see our many [FAQs on Senior/Key personnel](#).

Research.gov Replacing FastLane

In a *Dear Colleague* letter dated January 10, 2013 (NSF 13-041), NSF announced that beginning March 18, 2013, investigators will be required to submit annual, final and interim project reports through Research.gov. FastLane became unavailable for reporting on February 1, 2013. Recognizing the potential for confusion, NSF is extending overdue dates for reports scheduled to be past due between January 31 and April 30 to allow for the transition to Research.gov. Investigator need to be aware that reports prepared but not submitted in FastLane after February 1 will need to be re-entered in Research.gov. The FastLane Project Reporting System will become unavailable on March 15



PAMS Notices

Q: Why do I receive two notices that my project has been approved?

A: When a project (or document) is approved in PAMS, an e-mail is sent to the PI(s) and to the "owner" of the document (usually the person who enters the information into PAMS). If the PI is also the owner of the document in PAMS, he/she will receive both e-mails.



Office of Research Administration

Revisiting the Relationship Between Paylines and Success Rates

This article is reprinted from the January 11, 2013 blog posting on *Rock Talk*, written by Dr. Sally Rockery, NIH Deputy Directory for Extramural Research. <http://nexus.od.nih.gov/all/2013/01/11/revisiting-the-relationship-between-paylines-and-success-rates/>

I have read or heard much about the dilemma of NIH applicants as they struggle to understand their chances of receiving NIH funding. As budgets flatten and tighten, this discussion has heated up. To declare that NIH success rates have hovered around 20% for the past five years does little to calm the storm of concern when we hear about shrinking percentiles and paylines. So how is it possible to have a success rate of 20% but a payline at the 7th percentile? Let's take a few moments to sort out what these things mean and think about how these numbers are derived and how they can differ.

IMPACT SCORE

It all starts with the impact. This score is assigned by reviewers to indicate the scientific and technical merit of an application. Impact scores range between 1 and 9. A score of "1" indicates an exceptionally strong application and "9" indicates an application with substantial weakness. (I always wondered why at NIH low = good and high = bad but that predates me!) In assigning an impact score, reviewers consider each of five scored criteria: significance, investigator, innovation, approach, and environment, along with other factors like protection of human subjects and vertebrate animal care and welfare. Read more about [scoring](#).

PERCENTILE RANK

The percentile rank is based on a ranking of the impact scores assigned by a peer review committee. The percentile rank is normally calculated by ordering the impact score of a particular application against the impact scores of all applications reviewed in the current and the preceding two review rounds. An application that was ranked in the 5th percentile is considered more meritorious than 95% of the applications reviewed by that committee. This kind of ranking permits comparison across committees that may have different scoring behaviors. It is important to note that not all research project grant applications (RPGs) are percentiled. For example, applications submitted in response to a request for applications (RFA) are usually not percentiled. In the absence of a percentile rank, the impact score is used as a direct indicator of the review committee's assessment. Read more about [percentiles](#).

PAYLINE

Many NIH institutes calculate a percentile rank up to which nearly all R01 applications can be funded. For grant applications that do not receive percentile ranks, the payline may be expressed as an impact score. Institutes that choose to publish paylines in advance ([see an example](#)) calculate the payline based on expectations about the availability of funds, application loads, and the average cost of RPGs during the current fiscal year. Other institutes prefer to describe the process for selecting applications for funding ([see an example](#)) and then report on the number of applications funded within different percentile ranges at the end of the fiscal year ([see an example](#)). Because the NIH is currently operating on a continuing resolution and funding levels for the remainder of this fiscal year are uncertain, most of the NIH institutes have offered less detail this year than in the past.

(Continued on page 10)

Office of Research Administration

Revisting the Relationship Between Paylines and Success Rates (cntd.)

(Continued from page 9)

But remember, even when an IC establishes a payline, applications outside of the payline can be paid under justified circumstances if these applications are a high priority for the particular institute or center. When these select-pay/out-of-order/priority pay/high priority relevance selections are made, it may result that other applications within in the payline are not paid because funds are no longer available to support them.

SUCCESS RATES

The success rate calculation is always carried out after the close of the fiscal year, and it is based on the number of applications funded divided by the number of applications reviewed and expressed as a percent. To better reflect the funding of unique research applications, the number of applications is adjusted by removing [revisions](#) and correcting for projects where the [resubmission](#) (A1) is submitted in the same year as the original application (A0). Read more about [success rates](#).

THE ANSWER

Now we are equipped to answer our earlier question. How is it possible to have a success rate of 20% but a payline at the 7th percentile? There are several real-life reasons why paylines (the ones that use percentiles) can be either higher or lower than success rates.

- Applications that are not percentiled are still factored into the success rate calculation. Thus, funding a number of awards that are not assigned percentiles will increase the success rate without changing the payline.
- The success rate for a particular fiscal year is a reflection of the funded applications and can include applications reviewed in the previous fiscal year; whereas, the payline encompasses only applications reviewed in that fiscal year. So awarding applications that were reviewed in the previous year will also increase the success rate.

The average quality of the applications assigned to an institute will also affect its payline. If an institute happens to receive a set of applications with very good (low) percentile scores, its success rate will be higher than its payline, all else being equal. For example, in fiscal year 2011, [the NIGMS R01 success rate](#) was about 24% but the midpoint of the funding curve occurred close to the 19th percentile.

Check out more reports on RPG success rates broken down by [year](#) and [IC](#) at report.nih.gov – if you're interested in other success rates, you can [find them on our RePORT website](#) as well.

Whew, you made it through. The difference between paylines, percentiles and success rates remains a confusing topic because of the compounding factors that rule out a simple linear relationship. You need to consider all the factors when assessing the potential for an individual application to be funded. Your best advisor on this issue, because of the differences in the ICs and programs, is your NIH program official. Give him or her call.

You may read more about the success rates for federal fiscal years 11 and 12 at <http://nexus.od.nih.gov/all/2013/01/02/fy2012-by-the-numbers-success-rates-applications-investigators-and-awards/>

Contact List



<i>Name</i>	<i>Title</i>	<i>Phone</i>
Office of Research		
Polly Hofmann, Ph.D.	Sr. Assoc. Vice Chancellor	448-2464
Jane Poulos	Sr. Business Manager	448-3746
Lisa Bronte	Accounting Assistant	448-7125
Biomedical Informatics		
Ian Brooks, Ph.D.	Director	448-5285
Ying Vuthipadadon, Ph.D.	Associate Director	448-8099
Emin Kescu	Program Manager	448-2517
Mark Sakaue	Biomedical Informaticist	448-1816
Emanuel Villa	Biomedical Informaticist	448-1202
Rae Schell	Admin. Research Asst.	448-5296
Research Support Services		
Helen Parsons	Business Director	448-7101
Jayne Collins McKinnie	Budget Coordinator	448-5652
Junming Yue	Director - Viral Vector	448-2091
Dan Rosson, Ph.D.	Director - Flow Cyt	448-4279
Tiffany Seagroves, Ph.D.	Director - Bio-Imaging	448-5018
Industry Trials Unit		
Mike Christensen, Pharm.D	Assoc. Vice Chancellor	448-7144
Risa Ramsey, Ph.D.	Director	516-2079
Laboratory Animal Care Unit		
Tim Mandrell, D.V.M.	Director	448-5656
David Hamilton, D.V.M.	Asst. Prof-Nash/CRB	448-7311
Scott Jackson, D.V.M.	Instr. -Coleman /Mol. Sci.	448-7134
Joyce Jones	Animal Procurement	448-5453
Sherry Frazier	Facility Spvr / Coleman	448-7308
Barbara Blakely	Spvr - Nash Basement	448-1429
Brad Stevens	Spvr - Nash 1st / MSB	448-5454
Rolanda Peterson	Supv - CRB	448-4965
Dennis Martin	Cage Wash Spvr	448-5452
Molecular Resource Center		
Donald Thomason, Ph.D.	Executive Director	448-7224
William Taylor, Ph.D.	Director	448-6165
Tom Cunningham, Ph.D.	Associate Director	448-6191
Lorne Rose	Sr. Research Specialist	448-8229
Terry Mark-Major	Business Manager	448-2656
Felicia Waller	Specialist	448-8746
Jian Yan	Research Associate	448-2730
Cancer Research Building		
Lawrence Pfeffer, Ph.D.	Director	448-7855
Andrea Briggs	Admin. Specialist	448-4800
Regional Biocontainment Laboratory		
Gerald Byrne, Ph.D.	Director	448-6060
Jennifer Stabenow	Facility Manager	448-6649
Lillian Zalduondo	Supervisor	448-6408

<i>Name</i>	<i>Title</i>	<i>Phone</i>
Research Administration		
Deborah Smith, Ed.D.	Assoc. Vice Chancellor	448-4823
Contracts Unit		
Trent Pitts, J.D.	Associate Director	448-3303
Ruthie Ruston	Specialist	448-3126
Monica Campbell	Specialist	448-5587
Grants Unit		
Ginny Geer	Manager	448-1668
Jackie Easley	Coordinator II	448-4188
Carlisa Smith	Data Control Spec.	448-5532
Research Compliance		
Randall Nelson, Ph.D.	Assoc. Vice Chancellor	448-3533
Martha McCool	Compliance Officer	448-1264
Vicki Baselski, Ph.D.	Infection Control Chair	448-6329
Mark Miller, Ph.D.	IBC Chair	448-6752
vacant	IBC Admin Res Asst	448-2871
Vivian Loveless, Pharm.D.	Radiation Safety Chair	448-6931
Institutional Animal Care and Use		
Mary Frances Braslow	Administrator	448-3904
Thaddeus Nowak, Ph.D.	Chair	448-7384
Trevor Sweatman, Ph.D.	Vice Chair	448-4591
Institutional Review Board		
Terrence Ackerman, Ph.D.	Chair	448-4824
Cameron Barclay	Director	448-4824
Donna Hollaway	Compliance Specialist	448-2933
Kim Prachniak	Sr. Regulatory Spec.	448-5060
Margaret Sularin	Regulatory Specialist	448-4824
Elaine Todd	Regulatory Specialist	448-1343
Donna Stallings	Administrator	448-4824
Holly Herron	Administrator	448-4824
Melanie Saucier	Admin Research Asst.	448-4824
Office of Human Subject Protections		
Amy Hutcherson	C. Officer - Chattanooga	423-778-3899
Vacant	C. Officer - Memphis	448-1869
Vacant	C. Officer - Knoxville	865-305-6192
Electronic Research Administration		
Jeanne Hermann, Ph.D.	Director	448-5043
Lawson Culver	Administrator	448-1183
Tricia Page	Program Manager	448-2753
Steve Wills	Program Manager	448-2389
Additional Research Related Contacts		
University of Tennessee Research Foundation		
Richard Magid, Ph.D.	Vice President	448-1562
Lakita Cavin, J.D., Ph.D.	Staff Attorney	448-7827
Janet Ralbovsky, Ph.D.	Licensing Associate	448-1146
<u>Tinieka Thrailkill</u>	Office Manager	448-7827

The Research Notebook
Jeanne Hermann, Editor
jhermann@uthsc.edu
901-448-5043

The Office of Research provides support for the faculty and staff of the Health Science Center in their efforts to obtain external funding for research and other sponsored projects, while ensuring compliance with UT policy, sponsor policy, and applicable law.

UTHSC Office of Research
910 Madison Avenue, Suite 600
Memphis, TN 38163
Phone: 901-448-7125
Fax: 901-448-7133
E-mail: research@uthsc.edu