

**NATIONAL DEAFNESS AND OTHER COMMUNICATION DISORDERS
ADVISORY COUNCIL**

January 23, 2004

**National Institutes of Health
Bethesda, Maryland**

MINUTES

The National Deafness and Other Communication Disorders Advisory Council convened on January 23, 2004 in Conference Room 6, National Institutes of Health (NIH), Bethesda, MD. Dr. James F. Battey, Jr., Director, National Institute on Deafness and Other Communication Disorders (NIDCD), served as Chairperson. In accordance with Public Law 92-463, the meeting was:

Open: January 23, 2004: 8:30 a.m. to 11:30 a.m., for the review and discussion of program development needs and policy; and

Closed: January 23, 2004: 12:30 p.m. to 2:30 p.m. for review of individual grant applications.

Council members in attendance:¹

Dr. Barry W. Ache
Dr. Noma Anderson
Dr. Gary K. Beauchamp
Dr. Patricia D. Cayne
Dr. Richard A. Chole
Dr. Beverly S. Emanuel
Ms. Susan M. Greco
Dr. Ray D. Kent
Dr. David J. Lim

Ms. Heather McCallum
Dr. Richard T. Miyamoto
Dr. Nicolas Linares-Orama
Dr. John J. Ngai
Dr. Adrian A. Perachio
Dr. Donata Oertel
Dr. Brenda M. Ryals
Dr. Ingo R. Titze

Council members not attending:

Dr. John P. Madison

¹For the record, it is noted that members absent themselves from the meeting when the Council is discussing applications (a) from their respective institutions or (b) in which a real or apparent conflict of interest might occur. This procedure applies only to individual discussion of an application and not to "en bloc" actions.

Ex-Officio Members in Attendance:

Dr. Lucille B. Beck

Ex-Officio Members Not Participating:

Dr. John R. Franks
Dr. Michael E. Hoffer

The Council roster is found as Appendix 1.

Various members of the public, as well as NIDCD staff and other NIH staff, were in attendance during the open session of the Council meeting. A complete list of those present for all or part of the meeting is found in Appendix 2.

I. Call To Order and Opening RemarksDr. James F. Battey, Jr.

The meeting was called to order by Dr. Battey, Director, NIDCD, who thanked Council members for their service and advice to the Institute. Dr. John Madison had a scheduling conflict which prevented him from attending today's meeting.

Dr. Battey extended the Institute's congratulations to Dr. Richard Miyamoto, who was elected to the Institute of Medicine of the National Academies in October 2003. Members are elected through a highly selective process that recognizes those who have made major contributions to the advancement of the medical sciences, health care, and public health. Election is considered one of the highest honors in the fields of medicine and health.

Dr. Battey also expressed his gratitude to Jeannie Combs for her efforts in supplying information to Council through the Advisory Council Web Site.

II. Council ProceduresDr. Craig A. Jordan

Procedural Matters

Dr. Jordan discussed important procedural matters, including requirements imposed by the Government in the Sunshine Act and the Federal Advisory Committee Act. The necessity of members avoiding conflict of interest, or the appearance thereof, was stressed, as was the need to maintain confidentiality concerning the proceedings and materials related to the closed portion of the meeting. Dr. Jordan announced that the Council meeting would be open to the public during the morning session, but would be closed for consideration of grant applications during the afternoon.

Consideration of Minutes of the Meeting of September 5, 2003

Dr. Battey called members' attention to the minutes of the September 5, 2003 meeting of the Advisory Council. The minutes were approved as written.

Confirmation of Dates for Future Council Meetings

Dates for the Council meetings through September 2005 have been established. A list of these meetings was distributed to the Council members. Dr. Battey announced that the January 2005 meeting, previously scheduled for January 21, will need to be rescheduled. **[Executive Secretary note:** *Since the January 2005 meeting was originally scheduled during Inauguration week, it has been rescheduled for Friday, January 28, 2005.*

The next meeting of Council is scheduled for Friday, May 21, 2004 on the NIH campus, Bethesda, Maryland.

III. Report of the Director, NIDCD Dr. Battey

Budget Considerations:

Dr. Battey announced that the FY2004 NIH Budget has finally been approved, and that current budget planning is based on the FY2004 Conference allowance. Dr. Battey described how the \$272.5 million available for new and competing research project grants was allocated for FY2004. From this total, \$9.1 million is reserved for Small Business Innovation Research grants, \$1.2 million for administrative supplements, \$196.1 million for commitments to noncompeting grants, \$0.75 million for carryover commitments from prior Council meetings, and \$10.4 million for program requirements in FY2004. Twenty percent of the remaining \$57.4 million is designated for High Program Priority (HPP). When apportioned for the three Council meetings in FY 2004, \$3.8 million is available for HPP applications at the January meeting. The budget has \$15.3 million available for the initial payline at this meeting, which should allow funding of all applications up to the 24.0 percentile, plus additional HPP applications. A copy of the slides Dr. Battey used for his budget presentation is included in these minutes as Appendix 3.

IV. Report of the Director, Division of Extramural Activities..... Dr. Jordan

Dr. Jordan presented the report of the Director of the Division of Extramural Activities.

Dr. Jordan announced that Dr. Melissa Stick has accepted the position of Chief of NIDCD's Scientific Review Branch (SRB). He also reported that Dr. Da-Yu Wu, from the University of Southern California, has been recruited to fill the position of Scientific Review Administrator and is expected to join the SRB in March.

Endorsement of Council Operating Procedures

Dr. Jordan called Council's attention to a copy of the Council Operating Procedures which had been provided to each member prior to the meeting. The Council Operating Procedures state those actions which Council empowers staff to take without specific prior Council approval. It is the NIDCD's procedure to review the Council Operating Procedures annually at the January meeting of Council. There are no recommended changes to the document this year, so this version is identical to the version approved last January. The document was endorsed unanimously for the current year, and is included in these minutes as Appendix 4.

Funding actions that have been processed under the authorities contained in the Council Operating Procedures are detailed at each Council meeting in the Interim Actions report. This is just one of the reports that are provided to Council members in preparation for each Council meeting. Two additional reports that Dr. Jordan highlighted to the Council members are the "NIDCD Fiscal Year Implementation Plan" (prepared by the Division of Scientific Programs) and the "NIDCD Competing Grants Awarded" (which documents grants funded over the past approximately four months)." Representative examples were displayed from each report and discussed in terms of content, Council-requested modifications, reporting periods, and their potential utility to Council members.

V. Report of the Director, Division of Scientific Programs..... Dr. Judith Cooper

Dr. Judith Cooper presented the report of the Director of the Division of Scientific Programs (DSP). Dr. Cooper opened her presentation by briefly discussing the Implementation Plan, a copy of which was recently posted on the Council web site. The Implementation Plan tracks initiatives developed by DSP staff, and Dr. Cooper highlighted a number of these activities during the remainder of her presentation. These include:

- *Towards Universal Characterization of Speech Production in Speakers with Cleft Palate.* Dr. Lana Shekim is coordinating this workshop, which will be held in Washington, D.C. from April 30 to May 2. The purpose of the workshop is to address the need for a universal reporting system of speech characteristics of cleft palate speakers. The Institute hopes to develop a consensus on this issue, identify the next steps that should be taken, and possibly develop an NIDCD initiative.
- *Translational Research Discussion Group.* The purpose of this discussion group is to address translational research related to hearing and balance, identify barriers and possible future activities. Amy Donahue is the coordinator of this discussion group. It will be held in Bethesda on April 27 and 28, and will involve basic and clinical scientists within and outside the hearing and balance/vestibular venues. This will be the first of several activities related to this research, which will hopefully lead to an NIDCD initiative.
- *Electrical Stimulation of the Vestibular Nerve.* Dr. Roger Miller is coordinating this workshop, which will be held June 3-4 in Washington, D.C. Participants will include basic and clinical scientists in the areas of neurophysiology, neural prosthesis development, and vestibular disorders. The workshop's focus will be to identify needs

and opportunities in development of technology for electrical stimulation of the vestibular nerve. Participants will discuss steps needed to possibly develop an NIDCD initiative on the “Application of Electrical Stimulation of the Vestibular Nerve.”

- Autism Language and Communication Research Workshop: This workshop will identify research and training priorities and explore overlapping interests and collaborative possibilities. Dr. Cooper is serving as Coordinator of the workshop, which will include clinician scientists in child language, specific language impairment, and autism. It will be held February 6 in Atlanta, Georgia. Future steps will be outlined, with the goal of co-sponsoring an initiative with the National Alliance for Autism Research.

VI. Council Member Presentation.....Dr. Adrian Perachio

Council member presentations involve a synopsis of their research, interests, and/or other efforts related to the broad interests of the communities served by NIDCD. These presentations serve to familiarize staff and other members of Council with each member’s research/expertise, in order to facilitate stronger interactions among Council members and staff members.

Dr. Adrian Perachio accepted an invitation to speak to Council about his studies of the vestibular system. Following is an abstract of his presentation:

Studies of the Vestibular System

The vestibular system is a set of mechanisms, including the vestibular labyrinth of the inner ear, and the vestibular sensory nerve and its connections to neurons in the brainstem and cerebellar cortex, that contribute to the perception of spatial orientation. Diseases or injuries that affect the vestibular labyrinth result in both acute and chronic dysfunctions of balance, equilibrium and gaze control during head movements. The research efforts in my laboratory have focused on questions of the relationship between structure and function in the system, signal processing by neurons in the central vestibular system that receive converging inputs from two or more of the vestibular sensory organs and of the role of vision in recovery of vestibular function following injury to the labyrinth.

Early experiments studied the anatomical connections of the individual vestibular sensory organs with areas of the brainstem and cerebellum that relay specific types of vestibular signals. We also examined the connections from the brainstem that feedback to the sensory organs as part of the vestibular efferent system. Our results reveal a highly specific pattern of innervation that indicates efferent input from separate sets of brainstem neurons is directed toward functionally distinct areas of the sensory apparatus. Using a virus vector that is transported across synaptic connections, we were also able to visualize the neuronal system that provides input to the efferent cells themselves. Those results indicate a complex network which includes what appears to be a closed loop connection from the sensory nerve to the efferent cells back to the sensory organs.

Neurophysiological experiments were used to examine how individual cells of the sensory nerve or in the vestibular brainstem encode vestibular signals. Responses to motion, that

specifically activated separate parts of the sensory apparatus, were recorded from single neurons. In addition, the cells were tested for their sensitivity to eye motion or to visual motion. Unlike sensory neurons, central vestibular neurons exhibited sensitivity to both translation and rotation and encoded differing properties of the stimulus depending on the type and direction of movement. Thus, for example, translational motion fore-and-aft might elicit a response that encoded head acceleration, whereas side-to-side motion would result in a response that was related to the rate of change of head acceleration. Both signals are important in order to control reflex eye movements that are needed to stabilize vision during such movements.

Later studies focused on the interactions between the visual and vestibular system which both influence spatial orientation through control of compensatory eye movements to stabilize images on the retina. Patients who suffer permanent loss of function in either vestibular inner ear become severely disoriented, are unable to maintain either balance or clear vision and their ability to walk is impaired; however, they are able to compensate for the deficits via functional reorganization in the brain, including recovery of the vestibulo-ocular reflexes (VOR). Neurons in midbrain sites relay visual motion information to the vestibular brainstem and cerebellum. We investigated the effects of lesions in the nucleus of the optic tract (in addition to unilateral ablation of the vestibular sensory apparatus) and found that the additional interruption of visual motion inputs resulted in permanent impairment of the VOR. These findings suggest that patients who undergo vestibular compensation would benefit from visual motion stimulation as part of therapy for neural recovery. The initial recovery process results in activation of a family of genes within neurons in the vestibular nuclei. Those genes appear to be expressed under conditions that stimulate other forms of vestibular adaptation. Our current research is designed to investigate how manipulation of gene expression might affect vestibular adaptation. The long term goal is to determine if control of gene expression can result in more rapid and sustained recovery of vestibular function.

VII. Council Member Presentation Dr. John Ngai

The next presentation was made by Dr. John Ngai, who discussed his research which is centered around the mouse olfactory system.

Analysis of Gene Expression in the Developing Mouse Olfactory System Using Functional Genomics Approaches

The human brain comprises billions of neurons connected in an intricate and highly ordered network of synaptic circuitry. Of great interest for both basic and medical science are the genetic programs underlying the development of the central nervous system. This process involves the specification of different cell types, cell migration and axon extension, synaptic targeting and synapse formation, and plasticity. To identify the programs and also the molecules underlying these events, we are employing DNA microarray technologies (or "gene chips") to measure global patterns of gene expression, using the mouse olfactory system as a model. DNA microarrays can be used to monitor simultaneously the expression of tens of thousands of genes at a time. The ability to perform such analyses en

masse allows us to characterize biological and pathological processes at unprecedented levels of detail. Through the use of statistical methods to analyze large gene expression datasets, we can reconstruct complex temporal and spatial patterns of gene expression. These studies lay the foundation for a better understanding of the genes and molecules responsible for both normal and abnormal neuronal development. Ultimately we hope to use this approach to identify molecular targets and pathways suitable for therapeutic intervention in various human diseases.

VIII. Scientific Presentation..... Dr. James E. Schwob

Dr. Battey welcomed and introduced Dr. James E. Schwob, Professor and Chair of Anatomy and Cellular Biology, at Tufts University School of Medicine in Boston, Massachusetts. Dr. Schwob discussed his research in a presentation entitled, "Therapeutic Potential of Olfactory Stem Cells".

Following is an abstract of his presentation:

One of the most profound therapeutic challenges of the 21st century is the need to repair and/or replace damaged organs, which will best be accomplished via the regulated activation and differentiation of either tissue or embryonic stem cells. The advantages of tissue stem cells include the potential for autologous transplantation and the ethical issues attached to the use of ES cells. The olfactory system is an easily accessible source of tissue stem cells that may be broadly potent as progenitors, since the epithelium retains the capacity to reconstitute itself, extend newly generated axons to the olfactory bulb, and restore function throughout adulthood. A variety of experimental approaches, most powerfully transplantation of cell types purified via cell sorting, indicate that globose basal cells (GBCs), among the various kinds of epithelial cells, are nearly, if not equally, potent with the cells of the early embryonic olfactory placode. Thus, GBCs give rise to all of the constituent cell types of the olfactory epithelium, including neurons that mature to the point of projecting axons into the CNS and expressing odorant receptors. Thus, GBCs may be capable of restoring neurogenesis in patients suffering from olfactory dysfunction due to stem cell depletion as a consequence of aging or injury. In addition, they may be capable of making the specialized glia of the olfactory nerve, called ensheathing cells. Ensheathing cells, or a mix of ensheathing cells and other cell types, have been used successfully in lower mammals in fostering behavioral recovery after spinal cord injury. Moreover, clinical trials using ensheathing cells harvested from the olfactory mucosa are apparently underway. The capacity to purify, expand, and differentiate olfactory stem cells in a controlled manner is an emerging strategy that may be broadly applicable to the repair of nervous system damage occasioned by disease processes or traumatic injury.

IX. Update: NIH Roadmap..... Dr. Battey

The NIH Roadmap is an innovative approach to accelerate fundamental discovery and translation of that knowledge into effective prevention strategies and new treatments. The strategic initiatives to be funded under the NIH Roadmap will address critical roadblocks and knowledge gaps that currently constrain rapid progress in biomedical research. They will synergize the work of many NIH Institutes and Centers, and collectively represent a unique effort that no single institute, center or other entity can do, but are the responsibility of the NIH as a whole.

Three broad initiatives will be stimulated with these funds: 1) New Pathways to Discovery, which includes a comprehensive understanding of building blocks of the body's cells and tissues and how complex biological systems operate; structural biology; molecular libraries and imaging; nanotechnology; bioinformatics and computational biology; 2) Research Teams of the Future, including interdisciplinary research, high-risk research, and public-private partnerships; and 3) Re-engineering the Clinical Research Enterprise. Through these efforts, NIH will create some of the infrastructure, resources and technologies needed for 21st century biomedical science.

X. Potential Agenda Topics (Open Discussion) Dr. Battey

Although Dr. Battey had planned to engage Council in an open discussion of topics they may wish to discuss at a future meeting, time constraints required that this discussion be deferred until a future meeting of Council.

CLOSED SESSION

XI. Council Consideration of Pending Applications

The Council gave special attention to applications from foreign institutions and to applications involving issues related to protection of human subjects, animal welfare, biohazards and/or women/minority/children representation in study populations as identified by the initial review groups. The Council individually discussed applications being considered for High Program Priority, from New Investigators, and whenever additional discussion was required.

A. Research Project Grant Awards

1. Consideration of Applications: On the Council's agenda was a total of 105 investigator-initiated research grant applications; 100 applications had primary assignment to NIDCD, in the amount of \$26.7 million first-year direct costs. It is anticipated that, of the applications competing at this Council,

NIDCD will be able to award grants to applications scoring up to the 24.0 percentile.

B. Special Programs Actions

1. Mentored Clinical Scientist Development Award (K08): The Council recommended support for four applications.
2. Mentored Patient-Oriented Research Career Development Award (K23): The Council recommended support for one application.
3. Academic Research Enhancement Awards (AREA) (R15): The Council recommended support for one application.
4. Small Grants (R03): The Council recommended support for fourteen applications.
5. Small Business Technology Transfer (STTR): The Council recommended support for one Phase I (R41) application.
6. Small Business Innovation Research Awards (SBIR): The Council recommended support for four Phase I (R43) applications and three Phase II (R44) applications.
7. Auditory/Perceptual Processing by Infants With Hearing Loss (DC-02-004): The Council recommended support for two R01 and one R21 applications.
8. Role of Neuroimaging in Aphasia Rehabilitation (DC-03-003): The Council recommended support for one R01 application.
9. Identification and Classification of Childhood Speech-Sound Acquisition Disorders (DC-03-004): The Council recommended support for one R21 application.
10. Neurotechnology Research, Development and Enhancement (PA-02-003): The Council recommended support for one R21 application.
11. Exploratory/Developmental Bioengineering Research Grants (R21) (PA-03-058): The Council recommended support for one application.
12. NIDCD Investigator-Initiated Clinical Trials (PA02-157): The Council recommended support for one R01 application.
13. Exploratory/Developmental Research Grant Award (PA-03-107): The Council recommended support for ten R21 applications.

C. Training Programs

1. Institutional National Research Service Awards (T32): The Council recommended support for six applications.

XII. Adjournment: The meeting was adjourned at 2:30 p.m. on January 23, 2004.

XIII. Certification of Minutes

We certify that, to the best of our knowledge, the foregoing minutes and attachments are accurate and correct.²

Craig A. Jordan, Ph.D.
Executive Secretary
National Deafness and Other Communication
Disorders Advisory Council

James F. Battey, Jr., M.D., Ph.D.
Chairman
National Deafness and Other Communication
Disorders Advisory Council

Director
National Institute on Deafness and
Other Communication Disorders

Jeannie Combs
Council Assistant

² These minutes will be formally considered by the Council at its next meeting; corrections or notations will be incorporated in the minutes of that meeting.

APPENDICES

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APPENDIX 1

Roster

National Deafness and Other Communication Disorders Advisory Council

Chairperson

James F. Battey, Jr., M.D., Ph.D., Director
National Institute on Deafness and Other Communication Disorders
Bethesda, Maryland 20892

ACHE, Barry W., Ph.D. 2007 Professor Whitney Laboratory University of Florida Brain Institute Center for Smell and Taste Gainesville, FL 32610	Professor Department of Communicative Disorders University of Wisconsin; Waisman Center Madison, WI 53705
ANDERSON, Noma B., Ph.D. 2006 Director and Professor School of Health Florida International University Miami, FL 33199	LIM, David J., M.D. 2005 Executive Vice President, Research Head, Dept of Cell and Molecular Biology House Ear Institute Los Angeles, California 90057
BEAUCHAMP, Gary K., Ph.D. 2005 Director and President Monell Chemical Senses Center Philadelphia, PA 19104	LINARES-ORAMA, Nicolas, Ph.D. 2004 Professor of Language Pathology Director, Filius Institute University of Puerto Rico San Juan, PR 00936-4984
CAYNE, Patricia D., Ph.D. 2006 Educational Neuropsychologist (Retired) Private Practice New York, NY 10022	MADISON, John P., Ed.D. 2004 Associate Professor (Retired) Department of English National Technical Institute for the Deaf Elmira, NY 14905
CHOLE, Richard A., M.D., Ph.D. 2005 Lindburg Professor and Head Department of Otolaryngology Washington University School of Medicine St. Louis, MO 63110	McCALLUM, Heather 2005 President Heather-Leigh Whitestone, Inc. Atlanta, GA 30339
EMANUEL, Beverly S., Ph.D. 2004 Professor Department of Pediatrics Abramson Research Center, Rm. 1002 Children's Hospital of Philadelphia Philadelphia, PA 19104	MIYAMOTO, Richard T., M.D. 2006 Professor & Chairman Department of Otolaryngology-HNS School of Medicine Indiana University Indianapolis, IN 46202
GRECO, Susan M. 2006 Executive Director Deafness Research Foundation Washington, DC 20036	
KENT, Raymond D., Ph.D. 2006	

NGAI, John J., Ph.D. 2007
Professor of Neurobiology
Department of Molecular & Cell Biology
Helen Wills Neuroscience Institute
University of California, Berkeley
Berkeley, CA 94720

OERTEL, Donata, Ph.D. 2007
Professor
Department of Physiology
University of Wisconsin
Madison, WI 53706

PERACHIO, Adrian A., Ph.D. 2006
Professor & Vice President for Research
Department of Otolaryngology
University of Texas Medical Branch
Galveston, TX 77555

RYALS, Brenda M., Ph.D. 2007
Professor
Department of Communication Sciences
and Disorders
James Madison University
Harrisonburg, VA 22807

TITZE, Ingo R., Ph.D. 2004
Distinguished Professor
Department of Speech Pathology
and Audiology
University of Iowa
Hawkins Drive
Iowa City, IA 52242

EX-OFFICIO MEMBERS:

BECK, Lucille B., Ph.D.
Director, Audiology & Speech
Pathology Service
Department of Veterans Affairs
Washington, D.C. 20422

FRANKS, John R., Ph.D.
Chief, Bioacoustics and
Occupational
Vibration Section
Physical Agent Effects Branch
Division of Biomedical and Behavioral Science
National Inst for Occupational Safety & Health
Cincinnati, OH 45226
HOFFER, Michael E., M.D.

Co-Director
Department of Defense Spatial Orientation
Center
Department of Otolaryngology
Naval Medical Center
San Diego, CA 92134

THOMPSON, The Honorable
Tommy G.
Secretary
Department of Health and
Human Services, Room 615F
Hubert H. Humphrey Building
Washington, D.C. 20201

ZERHOUNI, Elias Adam, M.D.
Director
National Institutes of Health
Bethesda, MD 20892

EXECUTIVE SECRETARY

JORDAN, Craig A., Ph.D.
Chief, Scientific Review Branch
Director, Division of Extramural
Activities, NIDCD
Bethesda, MD 20892

Appendix 2

ATTENDANCE LIST

Other than Council members, attendees at the January 23, 2003 Council meeting included:

NIDCD Staff:

Office of the Director

Luecke, Donald H., M.D., Deputy Director

Office of Health Communication and Public Liaison

Allen, Marin, Chief

Office of Administration

Kerr, W. David, Executive Officer

Financial Management Branch

Rotariu, Mark, Budget Officer

Lee, Mimi, Budget Analyst

Wysong, Chad, Budget Analyst

Science Policy and Planning Branch

Wong, Baldwin, Chief

Cole, Laura, Ph.D., Science Policy Analyst

Tawakkul, Mobin, Emerging Leader Intern

Montney, Lisa, Emerging Leader Program

Division of Extramural Activities

Jordan, Craig A., Ph.D., Director

Holmes, Debbie, Secretary

Kemmerle, Donna, Program Specialist

Stephenson, Nanette, Program Assistant

Grants Management Branch

Stone, Sara, Chief

Dabney, Sherry, Grants Management Officer

DaSilva, Maria, Program Assistant

Doan, Hoai, Grants Management Specialist

Hamilton, Gail, Grants Management Specialist

McNamara, Castilla, Grants Management Specialist

Ranney, Meigs, Grants Management Officer

Scientific Review Branch

Stick, Melissa J., Ph.D., M.P.H., Chief
Azadegan, Ali, D.V.M., Ph.D., Scientific Review Administrator
Oaks, Stanley C., Ph.D., Scientific Review Administrator
Singh, Sheo, Ph.D., Scientific Review Administrator

Division of Scientific Programs

Cooper, Judith, Ph.D., Director

Voice, Speech, Language, Smell and Taste Branch

Cooper, Judith, Ph.D., Program Director, Language Program
Davis, Barry, Ph.D., Program Director, Smell and Taste Program
Shekim, Lana, Ph.D., Program Director, Voice and Speech Program
Sklare, Daniel A., Ph.D., Program Director, Research Training and
Development Program

Hearing and Balance/Vestibular Branch

Donahue, Amy, Ph.D., Chief; and Program Director, Hearing
Freeman, Nancy, Ph.D., Program Director, Hearing
Luethke, Lynn, Ph.D., Program Director, Hearing
Miller, Roger, Ph.D., Program Director, Hearing
Platt, Christopher, Ph.D., Program Director, Balance/Vestibular
Watson, Bracie, Ph.D., Program Director, Hearing

Clinical Trials, Epidemiology and Biostatistics Branch

Gulya, Julie, M.D., Chief; and Program Director, Clinical Trials
Hoffman, Howard, Program Director for Epidemiology & Biostatistics
Chiu, May, Program Analyst

Division of Intramural Research

Wenthold, Robert, Ph.D., Director

Center for Scientific Review, NIH

Kimm, Joseph, Ph.D., Health Scientist Administrator
Melchior, Christine, Chief, IFCN
Ni, Weijia, Scientific Review Administrator

Others

Chappell, Jodi, Director of Health Care Policy, American Academy of Audiology
Olster, Deborah, Senior Advisor, Office of Behavioral & Social Sciences Research
OD, NIH
Slade, Elizabeth, Interpreter, Sign Language Associates
Welzel, Alissa, Interpreter, Sign Language Associates
Schwob, James, Professor and Chair, Department of Anatomy and Cellular Biology,
Tufts University School of Medicine, Boston, Massachusetts

Appendix 3

NIDCD Director's Report Slides

As Presented By

James F. Battey, Jr., M.D., Ph.D.
Director, NIDCD

NIDCD Advisory Council Meeting

January 23, 2004

National Institute on Deafness and Other Communication Disorders

**January 2004 Council
Budget Mechanism
(Dollars in thousands)**

<i>Budget Mechanism</i>	<u>FY 2003 Actual Obligation</u>		<u>Revised FY 2004 Conference*</u>	
	<i>Number</i>	<i>Amount</i>	<i>Number</i>	<i>Amount</i>
Research Projects				
Noncompeting	640	\$183,384	668	\$196,091
Admin. Supplements	(98)	4,497	(27)	1,200
Competing	244	67,380	232	66,100
Subtotal	<u>884</u>	<u>255,261</u>	<u>900</u>	<u>263,391</u>
SBIR/STTR	<u>43</u>	<u>8,351</u>	<u>46</u>	<u>9,100</u>
Subtotal, RPG's	927	263,612	946	272,491
Research Centers	25	20,895	25	21,000
Other Research	<u>57</u>	<u>8,520</u>	<u>60</u>	<u>8,500</u>
Total Research Grants	1,009	293,027	1,031	301,991
Individual Training	146	5,426	147	5,700
Institutional Training	196	8,140	185	7,900
R & D Contracts	54	17,259	55	19,100
Intramural Research		31,672		32,265
Research Mgmt. & Support		<u>14,806</u>		<u>15,097</u>
TOTAL		\$370,330		\$382,053

* Reflects rescission of \$2,424 thousand.

National Institute on Deafness and Other Communication Disorders

**January 2004 Council
Competing Research Project Grants
(Dollars in thousands)**

Total RPG Funds FY04 Conference Allowance	\$ 272,491	
Less SBIR/STTR Budget	-9,100	
Less Administrative Supplement Budget	-1,200	
Less Noncompeting Estimate	-196,091	
Less FY04 "Carryover" Commitments from prior Council meetings	-75	
Less FY04 Program Requirements	-10,350	
Plus FY 03 Funds utilized for Sept. Council	1,735	
<i>Total</i>	<i>\$ 57,410</i>	
	<u>20% HPP</u>	<u>80% Regular</u>
For FY 2004	\$11,482	\$45,928
Per council meeting	\$3,827	\$15,309

Appendix 5

NIDCD Advisory Council Operating Procedures

(As endorsed by Council January 23, 2004)

The Institute staff may take the following actions without Council review. All actions shall be documented and presented to the Council for its information at the first appropriate opportunity.

1. Approval of New Principal Investigator or Program Director

Give approval of a new principal investigator or program director to continue an active grant at the grantee institution.

2. Replacement of Research Grant for Investigator Who Moves to a New Institution

Make research grant awards equal to the remaining committed support for continuing work under the same principal investigator when that principal investigator moves from one institution to another. This provision will not be automatic, however. Staff may approve less than the remaining committed support and will in all cases carefully document for the file the rationale for the action.

3. Awards for Orderly Termination

Make appropriate awards for orderly termination of competing continuation applications which were not recommended for further consideration, or which received a score too low for payment; this procedure is to be used in those cases where sudden termination of the grant would cause a serious loss of scientific material or impose a hardship to already employed personnel. In such cases, (1) the grant usually should be for a period not to exceed twelve months, (2) careful review should be given to needs for salaries and consumable supplies, (3) usually no funds would be provided for additional equipment or travel, and (4) in the case of training grants, support would be provided for those trainees already in the program.

4. Awards for Interim Period Due to a Deferral

Make awards in an appropriate amount and for an appropriate interim period of time when a recommendation of deferral on a competing continuation application results in a loss of continuity of the active research or training program. Careful review should be given to the needs for personnel and consumable supplies; however, usually no funds would be provided for equipment or travel.

5. Supplemental Support to Existing Research and Training Awards

Provide additional support up to \$100,000 in direct costs per year to carry out the scientific, administrative and fiscal intent of the research or training award. The additional support may be necessary to: a) make NIH-wide supplemental awards for under-represented minorities, individuals reentering science, or individuals with disabilities; b) provide administrative increases; c) cover unanticipated costs; or d) ensure effective operation of the recommended program. Increases greater than \$100,000 will be presented to the NDCD Advisory Council for approval before an award is made.

Institute staff may take the following actions without subsequent reporting to the Council.

1. Continuation of Grant in Temporary Absence of Principal Investigator or Program Director.

Give approval for continuation of grants in the temporary absence of the principal investigator or program director.

2. Extension of Project Period Dates

Take necessary action on extensions of project period end dates without additional funds.

3. Scientific Evaluation Grants

Take final action in awarding supplements to the chairpersons of the NIDCD research and training review committees in an amount necessary to carry out the functions of the committees.