**Department of Pediatrics-UMMC**

**Intradepartmental Discovery Opportunity Grant (IDOG)**

Return complete application form via e-mail to [PedsDiscoveryCouncil@umc.edu](mailto:PedsDiscoveryCouncil@umc.edu)

**Date:** Click here to enter a date.

**Department of Pediatric Applicant Information**

* Applicant Name: Click here to enter text.
* Degree: Click here to enter text.
* Title: Click here to enter text.
* UMMC Employee Number: Click here to enter text.
* Telephone Number: Click here to enter text.
* E-mail Address: Click here to enter text.
* Applicant type

Fellow Resident

**Project Information**

* Project Title: Click here to enter text.
* Project Type

Basic Science Clinical (Human) Population Quality Improvement

* Proposed project start: Click here to enter a date. end: Click here to enter a date.
* Total funds Requested: Click here to enter text.

**CO-PRINCIPAL INVESTIGATORS ONLY:**

Interdepartmental Co-Principal Investigators (Appendix C). PhD students, residents and fellows that are not part of the School of Medicine Department of Pediatrics are allowed to apply as an IDOG principal investigator under the following conditions:

1. A fellow or resident in the Department of Pediatrics is a Co-Principal Investigator
2. A Department of Pediatric faculty mentor is identified in the application.
3. A Co-Principal Investigator plan (½ to 1 page) must be submitted that outlines division of responsibilities, planned research meetings, data storage and monitoring, and each Co-PI’s study related tasks. See Appendix C.

**RESEARCH PLAN:**

1. **ABSTRACT (350 words):** Provide a brief statement of the problem your study will address, primary study objective, your proposed patient population, sample size, and study methods.
2. **RESEARCH STRATGEY – 4 to 6 pages. Include the following topics**
3. **Significance (1 page):** Describe the problem your study will address. Primary objective of project. Discuss why the questions addressed in your study are important. What gap in the literature will your project fill? How significant is the proposed research in terms of addressing a pressing need or an important gap in current knowledge?

Include a conceptual model or figure when available.

Final paragraph should be: What are the long-term implications of this research? How will this study will help inform future research? Are there possible future funding plans for this research?

1. **Specific Aims:** Include 2-3 Aims and specific hypotheses under each aim. See Appendix A for additional guidance.
2. **Mentors and Research Training (½ page):** If applicable include both Clinical and Basic Science Mentor. Describe past research experience of the applicant (trainee). List and describe the research expertise of mentors and key research team members (e.g., co-investigator, biostatistician). All trainees should identify a Primary Mentor and statistical support. Describe the research training plan for the project (e.g., frequency of mentorship meetings, frequency of research team meetings, research trainings, classes, etc.).

1. **Innovation (½ page):** Discuss why the proposed studies are novel. How does the application challenge and seek to shift current research or clinical practice? Are novel theories, methodologies, measurements/instruments, or interventions used? Is the current application refining or improving existing theories, approaches, methodologies, or interventions?
2. **Approach (2-4 pages):** Discuss the research strategy, methodology, and statistical analyses to be used in the project. Discuss potential problems, and alternative strategies. See below for example subsections.

**Preliminary Data**

[Include previous research or preliminary studies of the trainee or mentor that support the current study and/or demonstrates feasibility of study methods, recruitment, etc.]

**Participants/Animal Sample/Tissue Sample**

[Include information on available patient population/animal model/or tissue samples. Where will patients be recruited from or animals/tissue obtained from? How many patients are seen at UMMC in a year, week, and/or month?]

*Inclusion Criteria:*

*Exclusion Criteria:*

**Procedures**

*Recruitment.* [How will participants be made aware of your study and recruited? Who will recruit participants, obtain informed consent, and explain study procedures?]

*Study Procedures.*

*Participant Compensation.*

*Medical tests [Vital signs, Blood draws, other procedures. Include description of each test, reliability, and what populations it has been used in.]:*

*Questionnaires [Demographic forms, surveys, qualitative interviews. Include description of each test, reliability, and what populations it has been used in.]:*

*Medical chart review.*

*Animal/Experimental procedures.*

*Isolation of cells.*

*Staining and acquisition.*

*Cell data outcomes.*

**Statistical Analyses**

[Who will help conduct statistical analyses? Name the biostatistician on the project.]

Sample size calculations: [Either (a) pilot data sample size calculations based on available patient population and study timeline or (b) power analyses to ensure large enough sample size to answer study question(s).]

Aim 1: Statistical analyses to test hypothesis 1.

Aim 2: Statistical analyses to test hypothesis 2.

Aim 3: Statistical analyses to test hypothesis 3.

**Study Timeline**

List time frame for IRB application, starting and ending recruitment, conference

submission/presentation, and what journal you will plan to submit your results to.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Example Table X. Project Timeline** | **Year 1** | | | |
|  | Q1 | Q2 | Q3 | Q4 |
| Startup: hiring, IRB, recruitment documents |  |  |  |  |
| Recruitment & data collection (*n =* x) |  | *n =* x | *n =* x | *n =* x |
| Intervention (*n =* x) |  | *n =* x | *n =* x | *n =* x |
| Data analysis |  |  |  |  |
| Poster Submission |  |  |  |  |
| Manuscript preparation |  |  |  |  |

**Budget**

*Personne*l [e.g., Research Assistant]:

*Participant Compensation*:

*Laboratory Costs*:

*Equipment*:

*Software*:

*Travel*[Conference to present results or training travel]:

1. **REFERENCES** (Literature Cited; Page limit as needed)
2. **OTHER FORMS**
3. **NIH biosketch of Applicant/Trainee.** See Appendix B.
4. **Primary Mentor’s NIH biosketch**
5. **Other Key Personnel NIH biosketch**
6. **Letter of Support from the Program Director/Division Chief stating protected time of Trainee and facilities available for research**
7. **UMMC Detailed Budget Excel Spreadsheet (1 year). Follow the link below (must be logged into UMMC Intranet to view):**[**https://intranet.umc.edu/Research/Forms-Templates**](https://intranet.umc.edu/Research/Forms-Templates)
8. **IRB or IACUC research proposal Proof of Submission** should be submitted to [PedsDiscoveryCouncil@umc.edu](mailto:PedsDiscoveryCouncil@umc.edu) no later than **2 weeks after** the submission deadline.
9. **Signatures**

The applicant assures that the information provided in this application is true, complete and accurate; and acknowledges that any fraudulent statement may subject applicant to administrative penalties. The applicant accepts responsibility for the scientific conduct of the project and agrees to provide progress reports as required by a resulting award. Those signing below assure they will abide by the rules and regulation of the IDOG program at the University of Mississippi Medical Center.

|  |  |  |  |
| --- | --- | --- | --- |
| **Role** | **Name** | **Signature** | **E-mail** |
| Applicant |  |  |  |
| Co-Principal Investigator (if applicable) |  |  |  |
| Primary Mentor |  |  |  |
| Secondary  Mentor |  |  |  |
| Program Director |  |  |  |
| Division Chief |  |  |  |

**APPENDIX A**

**Specific Aims**

After you have decided the area of research to pursue, start thinking about your planned experiments by first drafting objectives, known in NIH lingo as Specific Aims.

Be sure you can complete your Aims within the grant timeframe.

Your project should tackle important research within your niche: it must be able to move your field forward. Beware of concepts that can’t be strongly supported with your own preliminary data or published data from other laboratories.

Thinking high level, ask yourself what objectives you could reasonably achieve within the timeframe of a grant. Start broadly with an emphasis on significance, and then focus on generating experiments with clear endpoints reviewers can readily assess.

While you could design a project around two to four Specific Aims, many people create three. Limiting your application to a few Specific Aims keeps you clear of the very common mistake of being overly ambitious. It's much better to think small and propose less than to do the opposite.

**See the National Institute of Allergy & Infections Disease Website for Sample Grants & Aims**: <https://www.niaid.nih.gov/grants-contracts/sample-applications>



**APPENDIX B**

OMB No. 0925-0001 and 0925-0002 (Rev. 03/2020 Approved Through 02/28/2023)

BIOGRAPHICAL SKETCH

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

NAME:

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

POSITION TITLE:

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

| INSTITUTION AND LOCATION | DEGREE  (if applicable) | Completion Date  MM/YYYY | FIELD OF STUDY |
| --- | --- | --- | --- |
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**A. Personal Statement**

**B. Positions and Honors**

**C. Contributions to Science**

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

**APPENDIX C**

**CO-PRINCIPAL INVESTIGATOR PLAN**

**Department of Pediatrics Applicant Information**

* Applicant Name: Click here to enter text.
* Degree: Click here to enter text.
* Title: Click here to enter text.
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* Telephone Number: Click here to enter text.
* E-mail Address: Click here to enter text.

**Co-Principal Investigator Applicant Information**

* Co-Principal Investigator Name: Click here to enter text.
* Degree: Click here to enter text.
* Title: Click here to enter text.
* School: Click here to enter text.
* Department: Click here to enter text.
* Division: Click here to enter text.
* UMMC Employee Number: Click here to enter text.
* Telephone Number: Click here to enter text.
* E-mail Address: Click here to enter text.

**Co-Principal Investigator Plan** **(½ to 1 page):**

Division of study tasks and responsibilities:

Joint research meeting schedule:

Data storage and monitoring: