

**SECTION ON ONCOLOGY
AMERICAN PHYSICAL THERAPY ASSOCIATION
GUIDELINES FOR CLINICAL RESEARCH GRANTS**

Available to Section on Oncology Members only

Purpose and Deadlines

One clinical research grant award of \$5,000 is available to Section members to assist with a 1-year research study that investigates a question or questions of importance to adult or pediatric oncology physical therapy. The purpose of the award is to provide funding to assist primarily new physical therapists investigators and to encourage research that will add to the body of knowledge related to improvement of oncology physical therapy. This award can be given to support post-professional dissertation research or a clinical researcher who is working with colleagues who have a post-professional degree. Details regarding the specific required contents, format and review procedures of a proposal can be found on the attached sheets.

The due date for submission is May 1, 2010. A call for submission is advertised in the *Section on Oncology Online Newsletter* and in the *Rehabilitation Oncology*, the Section journal. Proposals must be postmarked by the due date to be eligible for review. If the due date falls on a Saturday or Sunday, then proposals must be postmarked by the first working day after the due date. To ensure that the copies of the proposals have been received by the Section on Oncology Research Committee member, an e-mail notification upon receipt will be sent to the primary author on the grant.

Review Procedures

A subcommittee of at least one primary and two secondary reviewers from the Section on Oncology Research Committee will review the proposals. Each reviewer independently reads and evaluates the proposal. Secondary reviewers are blind to the investigator's identity and report their review results to the primary reviewer. The primary reviewer evaluates the study and the investigator's ability based on the attached CVs and submits the subcommittee's report and opinion regarding funding to the Chair. Each investigator receives a copy of the review summary from the Chair with the review committee's recommendations regarding funding.

To apply, send two electronic copies of your proposal, one with identifying information and one without, to Victoria Marchese, PT, PhD marchese@lvc.edu In addition, please send one hard copy of the proposal with identifying information to the address below:

**Victoria Marchese, PT, PhD
Assistant Professor
Department of Physical Therapy
101 North College Avenue
Lebanon Valley College
Annville, PA 17003**

GUIDELINES FOR CLINICAL RESEARCH GRANT APPLICATIONS

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Format for Proposal: Use the American Medical Association's writing and format guidelines. The proposal should include a cover page, the Research Plan (not exceed 10 single-spaced pages, 12 point type), References and Budget justification.

A. Research Plan

1.) Specific Aims: State the purpose of the research describing concisely what the project is intended to accomplish. Include the research question or hypotheses that will be addressed. One page is recommended.

2.) Background and Significance: Summarize background information that directly relates to the purpose of the study, citing previously published work. Indicate how your proposed study is different in design, methods, or subjects from previously published studies. Clearly indicate how the results of your proposed study will contribute to the existing knowledge and the practice of oncology physical therapy. Do not exceed three pages.

3.) Preliminary Studies (if applicable): Summarize the results of pilot studies or previous published or unpublished studies that have been carried out by the principle investigator that directly relate to the proposed study.

4.) Research Design and Methods

a. Subjects (number, age range, gender)

b. Methods (how will this study be carried out, possible limitations)

c. Instrumentations and outcome measurements

d. Data Analysis (describe how each variable will be analyzed)

e. Human Subjects Approval (provide evidence that approval for the proposed study has been granted by the Institutional Review Board of the participating institutions. If approval has not been received at the time proposal is submitted, indicate when a response is expected.

f. Study Time Table

g. Documentation of research proficiency. For example, the completion of an NIH certificate of research:

<http://www.cancer.gov/clinicaltrials/learning/page3>

5.) References

B. Dissemination of Results: Describe how the results of the study will be disseminated. Grant awardees are encouraged to submit abstracts at the APTA Combined Sections Meeting and to *Rehabilitation Oncology*. The principle investigator is required to send a final report to the Chair of the Research Committee, Section on Oncology no later than 18 months after funds are released.

C. Budget Information: This award is to fund projects for 12 months. Funds can be requested only for costs necessary to conduct the study. These include personnel, equipment, supplies and travel of the investigators or subjects associated with data collection. Provide a budget table and budget justification to explain how costs were established, and why the expense is necessary. This award will not pay overhead or indirect costs. Expenses related to project dissemination not allowed.

The grant award will be made directly to the principle investigator unless the principle investigator designates their institution as the payee.

CATEGORY OF EXPENSE	TOTAL COST	AMOUNT REQUESTED
Personnel (names)		
Consultants (names)		
Equipment (itemize)		
Supplies		
Travel		
Other (itemize)		
TOTAL DIRECT COSTS		

**SECTION ON ONCOLOGY, APTA CLINICAL RESEARCH GRANT APPLICATION
COVER PAGE**

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Title of Study Proposal:

Name of Principle Investigator:

APTA Membership Number:

E-mail Address:

Name of Person and Address for Correspondence:

Daytime Telephone Number:

Please attach a copy of the primary investigator's and co-investigator's curriculum vitae.

Name of Co-Investigators and the Role of this co-investigator in the Study (for students, list your committee members as co-investigators).

Is Proposal for a Doctoral dissertation?

Yes

No

*Grant applications that are being requested to support a graduate student's research must have approval of the student's graduate committee prior to grant submission.

Signature of Committee Advisor

If awarded the grant, please identify who the check is to be made payable and an address of where to send the moneys:

Make Check Payable to:

Complete Address:

Social Security Number or Tax ID number: