A final critical aspect of completing your research is making sure your publications properly acknowledge the grants that supported them and are made available to the public if even partial support comes from the federal government. This is important not only because it's the right thing to do, but also because proper citation and submission impacts further funding. According to the CWRU Health Sciences Library, approximately 25 percent of University investigators are not compliant with the NIH regulations to cite all sources of support and make publications publicly available. This may be due to a lack of knowledge of what publications need to be cited or the citation process. The CTSC wants to make it easier for you to comply with the NIH regulations and set yourself up for future success!

Investigators must submit all peer-reviewed articles that report work that was funded, even partially, from: an NIH grant or cooperative agreement, an NIH contract, or the NIH Intramural Program. Planning ahead can make the process easier; decide which version of your paper you will be submitting for public access, and who will be responsible for submitting it. The best way for an investigator to make sure they are compliant with the NIH regulations is to go through the submission process at the time the manuscript is accepted.

Also remember:

- **What to submit:** final, peer-reviewed manuscripts
- **When to submit:** upon acceptance for publication
- **When to make public:** no later than 12 months after the official date of publication
- **Where to make public:** National Library of Medicine's PubMed Central

Kathleen Blazar, Assistant Director at the Cleveland Health Sciences Library, is able to provide citation assistance to investigators from all CTSC institutions. This includes step by step assistance on submitting papers, locating your PMCID and more. Her services are sure to expedite the process, make it easier and more efficient. Blazar recommends notifying the publisher about the citation before articles are published, as they can often provide assistance as well. For assistance or more information contact Kathleen at (216)368-1361 or Kathleen.Blazar@case.edu.

Investigators can check their individual compliance through their eRA Commons account. For an in depth explanation of the process click here.

**As a reminder, the CTSC must receive acknowledgement on relevant publications.**

Please include the following text:

"This publication was made possible by the Clinical and Translational Science Collaborative of Cleveland, UL1TR000439 from the National Center for Advancing Translational Sciences (NCATS) component of the National Institutes of Health and NIH roadmap for Medical Research. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the NIH."

We look forward to seeing all of your papers receive the adulation they deserve!

Pamela B. Davis, M.D., PhD.

Richard Rudick, M.D.

**Staff Spotlight: Joyce Dearborn to Retire**

After 34 years, the CTSC and its partner institutions bid farewell to Joyce Dearborn, Administrative Director of NIH Road-map aimed at "re-engineering the clinical research enterprise."

Qualified candidates

- Hold an M.D., Ph.D., D.D.S., Pharm.D., Psy.D. or an equivalent degree
- Have demonstrated a keen interest in clinical research
- Need an appointment in one of the Departments in the University or medical centers
- Are U.S. citizens or have permanent resident status

Applications are encouraged from physicians, nurses, dentists, social and behavioral scientists, engineers, biostatisticians, epidemiologists, bioethicists and other professionals with expertise relevant to clinical research.

Successful applicants will receive a comprehensive package including:

- CWRU appointment
- Salary and benefits commensurate with their qualifications supporting 75% effort (surgeons may commit 50%)
- Research stipend
- Tuition benefits for an innovative didactic program leading to a degree in clinical investigation (half of which will come from a Departmental cost-share)
- Travel funds
- Access to a multidisciplinary pool of highly accomplished mentors who will guide their research projects

Please visit our website for more information

For questions or assistance, please contact Beth Spyke, MPA at spykeb@ccf.org or 216-444-2702.
the William T. Dahms, MD Clinical Research Unit for University Hospitals and the Clinical and Translational Science Collaborative at Case Western Reserve University.

The Clinical Research Unit at University Hospitals Case Medical Center is one of the country’s oldest NIH funded Clinical Research Units and this year celebrates its 50th year of consecutive funding. Dearborn joined the center in 1978 when it was termed a "Clinical Research Center", then General Clinical Research Center (GCRC) in the 1980’s, until it was finally renamed a Clinical Research Unit as part the CTSC.

"Our goal was throughout its history, and still is, to provide a controlled but welcoming environment for the research participant and provide the investigator with accurate data," Dearborn said.

Originally a small, 5 patient room facility in 1962, the unit added ambulatory research and combined pediatric and adult services in the late 70s. Joyce was part of the team that initiated the transformation from staff nurses to specially trained clinical research nurses. Equipped with key research training, the UH CRU (Clinical Research Center as it was known then) became one of the first local units where nurses were allowed to place IVs.

While working hard to maintain funding throughout the 80s and 90s, under Dearborn’s direction as a GCRC, the CRU added another ambulatory care site and new research services that included psychometry and informatics. In a precursor to our now common multi-institutional collaborations, in 1993 Dearborn oversaw the GCRC facilities at both MetroHealth and University Hospitals as the two sites combined funding under a single NIH grant and created centralized services for nutrition and research lab analyses for investigators at both MetroHealth and UH.

In 1998, Dearborn led the move from Lakeside to its current location in the Horvitz tower at Rainbow Babies and Children’s Hospital and the unit added internal and external sample processing.

In 2007, the center realized another transformation with the establishment of the Clinical Translational Science Award (CTSA). This brought new challenges and increased collaborations with the CTSC partner institutions. The CRUs implemented community-based clinical research units, study coordinator cores, deployed staff at non-hospital type venues, expanded staff capabilities yet again, and worked hard to make sure CRU processes were applicable across the 3 existing CRU.

**CTSA Tool Shop Webinar July 27th**

FURTHeR- Federated Utah Research and Translational Health Electronic Repository, a tool from the University of Utah, Salt Lake City, UT

Ever wonder how to best search for a clinical cohort? If so, here is a tool for you!

FURTHeR is a clinical cohort search tool used to search across the UU clinical data warehouse and the Utah Population Database for people who satisfy various criteria of the researchers. It uses the i2b2 front end but has a set of terminology servers, metadata servers and federated query tool as the back end systems.

The key benefits for users is in terms of saving time and reducing costs - both for pre-research cohort building and for putting together large datasets for performing CER studies.

Register here

Contact the [CTSA Tool Shop Coordinator](mailto:ctsa.tools@case.edu) with any questions

**Ohio Health Data Symposium**

**Thursday August 30, 2012**

10am -3pm

Wolstein Research Building

Free Registration

Lunch Provided

The Purpose of the symposium is to facilitate introductions between academic, research, clinical and governmental entities in Ohio, present current projects and ideas that utilize Ohio Health Data and foster communication, collaboration and resources across the state.
facilities at University Hospitals Case Medical Center, MetroHealth and Cleveland Clinic.

Throughout the many changes, Dearborn said she is proud to have worked with three exceptional program directors, Drs. Harvey Rodman, E.R. McFadden, and Jackson T. Wright, Jr. and to have had the honor of being a part of landmark studies that changed how medical care was delivered to patients. Among these landmark studies, are the Diabetes Complications and Control Trial directed by Dr. Genuth and Dr. Dahms and the Ibuprofen Treatment for Cystic Fibrosis Patients directed by Dr. Michael Konstan.

"I am most proud of our group's sense of responsibility to the investigator and the participant and being able to expand services without compromising the core value of doing the right thing," Dearborn said.

Currently, Dearborn is busy transitioning her successor, Megan Miller, who began in June. Miller has a BA in Biology from West Virginia University and an MBA in Health Administration from Cleveland State University. She started her career as a research coordinator at the Cleveland Clinic in the Department of Surgery. Most of her career has been spent in senior administrative positions in biotech industries.

Dearborn will leave many friends and memories behind, but her contributions to the ever-evolving world of clinical research, and the processes in which research is conducted, will remain.

New Core Eligible for CTSC Core Pilot Funding

The CASE Mouse Metabolic Phenotyping Center (MMPC) is one of seven MMPCs sponsored by the NIH as a resource to provide services to the community of scientists who use rodents to study diabetes, obesity, diabetic complications, and other metabolic diseases.

*The Metabolic Core designs and conducts all in vivo and ex vivo metabolic experiments on mice and rats, and also provides numerous techniques and measurements.

*The Analytical Core uses mass spectrometry and labeling patterns to calculate metabolic fluxes such as

For questions or to register contact: Mea Patel: mxp363@case.edu

Partners in Education, Evaluation and Research (PEER) Training Program

In an effort to further the CTSC's mission of bringing research from bench to bedside, the CTSC has collaborated with the CTSA Community Engagement Core, Prevention Research Center at CWRU, and various community organizations to create the Partners in Education, Evaluation and Research (PEER) Training Program.

The PEER Training Program is a comprehensive, 18-month program that combines instruction and mentorship to build ties between academic and community researchers and enhance the research capabilities of community organizations.

Fellows are sought from community organizations that have an emphasis on the dissemination of health-related information to the community and must have the ability to further the research capacity of their organization. Each fellow is paired with a mentor from their organization and a CWRU research scientist. During the instruction phase of the program, PEER fellows will explore a number of topics to enhance their research abilities, such as research practices, study designs, and grant writing. Research projects, chosen by the respective organization, will be developed throughout the program.

The PEER program plans to train 15 fellows in the next five years; each will have a unique research project. The program's first five scholars began their fellowship on June 6.
lipid, protein and glucose turnover.

*The Animal Care Core ensures compliance of all guidelines and regulations associated with animal research at CWRU.

Visit the website or contact ctsc-research-concierge@case.edu

The PEER program was featured in an article about the program in the Cleveland Plain Dealer on June 17. Click here to read the full article.

To learn more about the PEER program, visit the PRC website.

Justin White
Clinical and Translational Science Collaborative

If you have a suggestion for a story in the CTSC Newsletter email justin.white@case.edu