



## Specific Aims

- Limit to 2-3 Aims.
- As much as possible try to avoid total dependence of one Aim on the other; so that if Aim 1 cannot be achieved, then Aim's 2 and so on will automatically falter.
- Tie Aims to the hypothesis. Aims should not be a list of tasks.

## Significance

- Does the proposed study address a significant *maternal or child health* problem? Address incidence, morbidity, mortality and/or financial burden.

## Innovation

- Address how the proposed work can change the course of research, clinical practice/outcome
- Address the novelty - improvements, advantages, refinements that set apart the proposed work from the prior efforts.
- If research proposed is incremental, the applicant should communicate the significance of the problem, the improvement, rigor of evaluation, and whether there are any entirely new concepts proposed. Does the work advance knowledge that can be critically important for future research?

## Approach

- **Prelim Data:** The presence of preliminary data suggests that investigators can demonstrate the feasibility of the proposed work. Preliminary data are helpful but not required. The data from this proposed project can also serve as preliminary data for larger future proposals.
- **Statistical Analysis**
  - State specific metrics/methods used to collect, analyze and interpret your data (e.g. Log-rank test will be used to demonstrate survival differences)
  - Include a discussion on sample size calculation
  - Where relevant, address sex as a biological variable
- **Timeline:** The performance period is 12-18 months for Pilot and Clinician Educator grants . The performance period for postdoctoral support and Clinical (MD) Trainee support grants is up to two years. Allocate the budget and study timeline to match this.

## Feasibility

- **Patient population:** Identify where patients will be recruited and enrolled
  - Will the goal sample size population be reached based on current clinic patterns