

North Carolina Association of Nurse Anesthetist Research Grant Applicant Instructions

Introduction

The following guidelines are to assist individuals who seek funding and endorsement for their proposed research.

Application

Deadline for application: April 30th

Applications must be typewritten

Application should be mailed to:

NCANA Central Office
Chairman Education & Research Committee
North Carolina Association of Nurse Anesthetist
605 Poole Drive
Garner, NC 27529

Application form must include the following*:

1. The nature of the research topic and how it affects anesthesia
2. Abstract (not to exceed 100 words)
3. Hypothesis (be specific)
4. Review of the literature
5. Budget and time frame for completion of study

* These items are addressed with the enclosed forms.

Researchers must also agree to present their paper at either the NCANA Annual State Meeting or an NCANA District meeting in a timely manner, without further compensation (see budget guidelines).

The applicant will be notified as soon as possible after the summer NCANA Board of Directors Meeting.

ANY QUESTIONS SHOULD BE ADDRESSED TO:
Charlene Barbour at the NCANA Central Office (919) 779-7881

Funding

Funds for research support vary from year to year. Because of limited resources, fund disbursement will follow a competitive review process. The amount of the grant will be determined by the Finance committee and approved by the NCANA Board of Directors. The amount available for grants will be determined for the upcoming fiscal year, and announced at the annual meeting. Institutional Review Board (IRB) approval must be obtained before funds are released. Funds will be dispersed to the program department or other institutional account. Receipts must be available for review should an audit of the program occur.

Review Process

A blinded review of the proposal is conducted by the members of the Research & Education Committee using the standard evaluation form. The form is returned to the Chairperson(s) of the committee for compilation and scoring. The committee will discuss the scores, summary and other factors, and decide which proposals to recommend for funding for the future year. The awards will be presented at the NCANA Annual Meeting.

NCANA Research Grant Applicant Information

Complete this application form to apply for NCANA Research Funding. Return this form with all other required application materials to:

Chairman Education and Research Committee
North Carolina Association of Nurse Anesthetists
605 Poole Drive
Garner, NC 27529

Application Deadline Date: April 30, 2006.
Applications which are not typed will not be considered!

Date of Application _____

Name:

AANA#: _____ Social Security #: _____

Current Position: _____

Facility/Business Name: _____

Address: _____

City, State, Zip: + _____

Work Phone #: _____ Fax #: _____

Home Address: _____

City, State, Zip: _____

Home Phone #: _____ Fax #: _____

Signature

Date

NCANA RESEARCH GRANT PROPOSAL

- A. Title
- B. Principal Applicant
- C. Co-Applicant(s)
- D. Objective: [A brief statement of the purpose.]
- E. Methods: [A brief statement of methods to be used to achieve objective.]
- F. Summary of Findings From Literature Review: [Copy this verbatim except where indicated.] "Literature search(es) was/were conducted of ... (list) ... databases. Keywords used were... [list]. This effort does/does not duplicate a completed research project(s)." If it does duplicate a previous effort, justify the duplication.
- G. Timelines: [Illustrate a time-line, including the estimated protocol completion and abstract/manuscript submission dates.]
- H. Budget: [List and justify individual items. Examples of acceptable items are listed under each category. Also include all receipts for expenses incurred. Equipment such as computers will not be funded.]

1. Equipment: Total _____
computer software, radioimmunoassay tests or other types of laboratory tests or related small equipment. Investigators are encouraged to obtain donations for equipment since Foundation grants are generally small grants. Computers, including laptops, notebooks or video camera equipment are not acceptable items for inclusion in the budget.

2. Supplies: Total _____
paper supplies; photocopying; postage and mailing for surveys; telephone survey costs; laboratory animals (justify number and cost per animal), etc.

3. Contracted Research Support Total _____
graduate research assistant or other research assistant costs may be considered; statistical support (must be itemized as an hourly rate with estimated total hours.)

4. Travel and Presentation Costs Total _____
travel to a specific scientific meeting for presentation of the research, slide or poster preparation. (Reviewers may recommend approval of this item pending documentation of acceptance of the poster or paper at a scientific meeting.)

TOTAL BUDGET _____

Signature of Applicant

Typed Name of Applicant

Grant Summary Format

Summary will be written in this format and be no longer than ten (10) pages excluding any Appendices.

- I. Title
- II. Introduction (or background)
- III. Statement of Purpose (or hypothesis)
- IV. Relevance to Nurse Anesthesia
- V. Materials and Methods
 - A. Research design and protocol (include sample size and justification).
 - B. Data Collection plan and procedures.
 - C. Data analysis plan and procedures.
- VI. List of References
- VII. Appendices
Examples of Appendices might be...
 - A. Human or animal use approval sheet or institutional waiver. (Proposals may be considered if human or animal subject approval is pending. Funds will not be released until approval is received.)
 - B. A copy of the instructions from a commercial radioimmunoassay kit.
 - C. A copy of the research instrument (for surveys, questionnaires, etc. or data collection tool).