

AO Spine North America Young Investigators Research Grant Application

Applications which do not conform completely to the web site application format or which ignore or fail to comply with any part of the guidelines may be returned to the applicant and will not be considered unless re-submitted by the deadline.

Part 1: General information

Type of Application 1 year 2 year (*need to resubmit for 2nd year grant*)

Project Title (*do not exceed 100 characters incl. spaces*)

Type of Proposal

Amount requested in USD \$ _____ Starting Date (mm/dd/yyyy) _____

Matching Funds Yes No Applying For

Main applicant

First name: _____ Last name: _____

Date of Birth(mm/dd/yyyy) _____ Academic Degree: _____

Institution: _____

Address: _____

City: _____ State/Province: _____

Postal Code: _____ Country: _____

Phone Number: (____) _____ E-mail address: _____

Check if subscribing member of AO Spine North America (**Mandatory**)

Co-applicants

First name: _____ Last name: _____

Date of Birth(mm/dd/yyyy) _____ Academic Degree: _____

Institution: _____

Check if subscribing member of AO Spine North America (**Preferred**)

Part 2: Details of proposals

1. Abstract

(<500 characters including spaces)

2. What is your research question?

(<500 characters including spaces)

3. What are your specific research objectives?

(<1500 characters, including spaces)

4. Why is this an important research question to answer?

(<1500 characters, including spaces)

5. Describe the methodology for your research proposal
(*<5000 characters, including spaces*)

6. Why take the approach described in your methodology to answer the research question? (*<1500 characters, including spaces*)

7. Why is this significant?
(*<500 characters including spaces*)

8. How feasible is it that this will be completed in 1 year?
(*<1500 characters, including spaces*)

Part 4: Finances

Budget for entire proposed project period

Personnel

(Salaries applied to project including fringe benefits and social security)
Salaries for the applicants (main applicant and co-applicants) will not normally be approved. If the project is only possible with some funding for the applicants, it must be clearly shown that the funding requested is essential, project specific and well documented.

Written and signed confirmation is required with the application that no alternative source of income (including salary, stipend or grant) is available.

Reasons for funding main applicant and/or co-applicants:

Last Name, First name	Academic qualification	Project Year 1	Project Year 2	Project Year 3	Total
Total costs for personnel					

Materials <i>(devices, equipment, extensions to existing equipment, etc.)</i>	Project Year 1	Project Year 2	Project Year 3	Total
Total costs for materials				

Supplies <i>(itemize below)</i>	Project Year 1	Project Year 2	Project Year 3	Total

Total costs for supplies				

Maintenance, rental of equipment <i>(itemize below)</i>	Project Year 1	Project Year 2	Project Year 3	Total
Total costs for maintenance, rental of equipment				

Field expenses, travel conventions <i>(itemize below)</i>	Project Year 1	Project Year 2	Project Year 3	Total
Total costs for travel expenses, travel conventions				

Total budget for entire proposed project period <i>(Amount requested in USD (not to exceed \$20,000))</i>	
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How did you hear about the AO Spine North America Young Investigators Research Grant?

Intern Email Colloquies Publication Social Media

Other: _____

Part 5: Personal data (PI and co-applicants)

Main Applicant

Principal Investigator/Program Director (Last, First, Middle):

Last name: _____ First name: _____ Middle name: _____

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Page 1.

Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

Name		Position Title		
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)				
Institution and Location	Degree (if applicable)	Year(s)	Field of Study	

A. Positions and Honors. *List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.*

B. Selected peer-reviewed publications (in chronological order). *(Do not include publications submitted or in preparation)*

Co-applicant

Principal Investigator/Program Director (Last, First, Middle):

Last name: _____ First name: _____ Middle name: _____

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Page 1.

Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

Name		Position Title	
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
Institution and Location	Degree <i>(if applicable)</i>	Year(s)	Field of Study

Co-applicant

Principal Investigator/Program Director (Last, First, Middle):

Last name: _____ First name: _____ Middle name: _____

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Page 1.

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Name		Position Title	
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
Institution and Location	Degree <i>(if applicable)</i>	Year(s)	Field of Study

Part 6: Studies involving animals

If the research involves the use of live animals, please complete the information on pages (9 & 10). You may attach a word document to the application if additional space is needed. Failure to include this information in the grant proposal will lead to delays in the review process and may ultimately affect the outcome of the grant review process.

Review of Proposed Use of Animals in Teaching & Research

Award Mechanism: Young Investigator Research Grant Award
Awarding Body: AO Spine North America
Title: [Please insert name of grant, as it appears on the main application]
Applicant: [Please insert name of PI (last name, first name)]

Introduction

The AO Animal Welfare Advisory Group (AO-AWAG) requires additional information from Principal Investigators in order to document compliance with the AO Foundation's written policy on funding the use of live animals in teaching and research ([AO position statement](#)). The information requested below will allow AO-AWAG to make a determination regarding compliance with the Foundation's policies on animal use.

Please answer the following questions:

A. Oversight of the Animal Care Program

1. Name and address of the animal facility where this work is to be conducted

2. Is this animal facility currently accredited by AAALAC International?

- Yes – if so, please provide a PDF copy of the current AAALAC letter of record. Then skip to Section B.
 No

3. Is this animal facility currently accredited by an appropriate national, regional or local regulatory authority?

- Yes - if so, please list the name of the appropriate authority and append a PDF copy of the official approval notice that confirms compliance. Then skip to Section B.
 No

4. If no appropriate documentation is available, has the new 'Animal Care Program Description for Non-AAALAC Approved Facilities' form been submitted with this application?

- Yes
 No – please submit the program description as soon as possible. Failure to do so will mean that the institution is not eligible for funding from the AO Foundation. The form is available online ([Program Description](#)).

B. Proposed Use of Animals

The AO-AWAG is required to make a judgement regarding the suitability of the animal model, the quality of the environment and facilities, and the appropriateness of the procedures that are to be performed on live animals. Please provide answers to the following questions (if easier, you may cut and paste the relevant sections from the main grant proposal, as long as all of the questions below are answered).

1. Animal use – please define:
 - a. Species and strain (where relevant) of animal
 - b. Scientific justification for the choice of this species over others

- c. Number of animals to be used: total/ per group/ per timepoint/ per outcome measure
 - d. Group size (“N”) and how this was determined – was a power analysis conducted?
 - e. Allocation of animals to groups (randomization)
 - f. Blinding procedure
 - g. Justification for the choice of the model
 - h. Justification for the choice of control groups (or lack thereof)
 - i. Has the protocol been through ethical review in the home institution?
2. Animal procedures – please provide specific details regarding:
- a. Anaesthetic and analgesic agents –list the generic drug name, dose (in mg/kg body weight), route (e.g. SC, PO, IM, IV), frequency of administration (e.g. SID, BID, every 8 hours etc.), and total duration of treatment.
 - b. Surgical procedures – please outline the procedure(s) to be used and confirm that surgical procedures will be performed using aseptic technique. If more than one site is to be operated in the same animal (e.g. multiple major survival surgeries), please provide a scientific justification as to why this is necessary.
 - c. Post-operative care – please outline the monitoring plan and frequency of health observations. Will antibiotics be used? Is there a need for nutritional support, fluid therapy or intensive nursing care?
3. Pain management and endpoints– please describe:
- a. The steps taken to reduce and monitor pain/distress (e.g. use of pain scoring schemes – please provide specific details).
 - b. The criteria that will be used to determine if an animal should be removed from study due to expected or unexpected complications (“humane endpoints” or “early removal criteria”).
 - c. Selection and method of euthanasia to be compliant with the host country’s guidelines on euthanasia.

Failure to include this information in the grant proposal will lead to delays in the review process and may ultimately affect the outcome of the grant review process.