

September 2023

DASH Quarterly eUpdate

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DASH Updates

NEW Feature: DASH is Now Able to Support Multiple Releases for One Study

NICHD DASH is now able to ingest additional submissions of datasets and associated documentation for an existing study archived in DASH. These subsequent submissions will be displayed as releases for the study. Multiple releases can be submitted over time. Releases will be indicated on the study overview pages for users to pivot between the latest submitted data and older datasets.

How to? To submit a new release of an existing study, a new Study Submission must be initiated. Within the submission process, there will be the option to notate the release of an existing DASH study. The option to indicate varying timelines of enrollment or data collection periods is available.

What is a release? A release is a new, standalone dataset and associated documentation for a previously-released study dataset and associated documentation. A new release for study data is most often generated as a result of significant new data collection activities for a longitudinal cohort study. Other minor updates can still be processed by contacting DASHCurator@nih.gov.

Studies Available in DASH

There are 215 studies archived in DASH covering 56 research topics including Pregnancy, Infant Care and Health, Infant Mortality, Pharmacology, Pediatric Injury, Child Health, and Traumatic Brain Injury.

Recently Released Studies

- [PregSource: Crowdsourcing to Understand Pregnancy \(PregSource\)](#)

Study Description: The objective of PregSource: Crowdsourcing to Understand Pregnancy (PregSource) was: to better understand the range of physical and emotional experiences and alterations in behavior that women have during pregnancy and after giving birth, the impact of these experiences on women's lives, and the perinatal challenges encountered by special sub-populations of women. PregSource used a longitudinal, crowd-sourcing, citizen science approach, asking pregnant women regularly and directly about their pregnancies. Participants entered information throughout gestation and the early infancy of their babies into online surveys and trackers via a website and/or mobile application ("app"). Participants could also complete online trackers for data on mood, activity level, sleep, morning sickness, and weight gain. A separate tracker was available for collecting information about any medications, vitamins, and other supplements taken during your pregnancy or the post-partum period. PregSource was designed as a data collection effort, with the dataset intended to be made available to the scientific community for multiple analyses of interest. The PregSource dataset includes multiple potential outcome measures, including, but not limited to: Primary Outcomes Gestational age at delivery Newborn birth weight Maternal gestational weight gain Pregnancy complications Possible Secondary Outcomes Patterns of nausea and vomiting in pregnancy Exercise levels in pregnancy Maternal mood Medication use in pregnancy.

Release Date: September 5, 2023

- [Pharmacokinetics of Anti-epileptic Drugs in Obese Children - Oxcarbazepine \(BCA AED01 - Oxcarbazepine\)](#)

Study Description: This was a multi-center, prospective, open-label, pharmacokinetic (PK) and safety study of anti-epileptic drugs in obese children age 2 to less than 18 years of age who received drugs per standard of care (SOC), as prescribed by a treating clinician. Participants were enrolled under multiple drugs of interest, including oxcarbazepine. Simulations from the PK models revealed that the currently recommended dosing regimen of oxcarbazepine produced equivalent steady state exposure of its active metabolite between children with and without obesity from 2 to 20 years of age. Therefore, the current population PK analysis confirms the applicability of the currently recommended dosing regimen of oxcarbazepine in children with obesity. No adverse events were reported in the oxcarbazepine participants, and no safety concerns were identified in this SOC study.

Release Date: August 30, 2023

- [Eating, Sleeping, Consoling for Neonatal Opioid Withdrawal \(ESC-NOW\): a Function-Based Assessment and Management Approach \(ESC-NOW\)](#)

Study Description: ESC-NOW was a cluster-randomized, controlled trial conducted at 26 U.S. hospitals, which enrolled 1305 infants with neonatal opioid withdrawal syndrome (NOWS). At a randomly assigned time, participants transitioned from usual care based on the Finnegan Neonatal Abstinence Scoring Tool (FNAST) to the Eat, Sleep, Console (ESC) approach. The primary outcome was the time from birth until medical readiness for discharge as defined by the trial. The Eat, Sleep, Console care approach significantly decreased the number of days until infants born with NOWS were medically ready for discharge, without increasing specified adverse outcomes.

Release Date: August 10, 2023

- [ATN 141 - MyChoices Mobile-Based Application to Increase Uptake of HIV Testing, Detection of New HIV Infections, and Linkage to Care and Prevention Services By Young Men who have Sex with Men \(MyChoices\)](#)

Study Description: Based on extensive formative, community-engaged research and subsequent theater testing and an open technical pilot, we developed a theory-driven mobile app—MyChoices—to increase HIV testing and PrEP uptake among young men who have sex with men (YMSM), ages 15-24. In a pilot randomized controlled trial (RCT), YMSM at risk for HIV acquisition in the US (n=60) were randomized 2:1 to receive MyChoices or standard of care (SOC). Data from 3-month and 6-month post-baseline assessments demonstrate that the app was highly acceptable (System Usability Score;

mean=75.8, SD=10.7) and feasible (94% used the MyChoices app at least once; mean=15.3 sessions, SD=9.8). While not powered to assess efficacy, those in the MyChoices arm had 22% higher prevalence of HIV testing over follow-up compared to those in the SOC arm (NS). There was no difference in PrEP uptake.

Release Date: July 18, 2023

- [We Prevent: A Dyadic Approach to HIV Prevention and Care Among Young Male Couples \(ATN 157\)](#)

Study Description: This project sought to develop and refine a developmentally-appropriate relationship skills session as an addition to current HIV Counseling, Testing, and Referrals (CTR) and Couples HIV Testing and Counseling (CHTC) for young gay, bisexual, and other men who have sex with men. This project involved three phases to develop and pilot test the intervention, including developing the intervention content, pilot testing the intervention, and conducting a pilot randomized controlled trial (RCT) to examine the feasibility, acceptability, and efficacy of the We Prevent intervention (CTR and/or CHTC + a relationship skills component) to CTR alone, both delivered via telemedicine. Participants were recruited online. In the pilot RCT, there were significant differences in condomless sex with outside partners among those in the We Prevent intervention condition compared to the CRT alone control condition; however, there were no differences in other sexual behaviors, sexual agreements, HIV testing, intimate partner violence (IPV), or communication between the conditions across the 9-month follow-ups.

Release Date: July 14, 2023

- [Antibiotic Safety in Infants with Complicated Intra-Abdominal Infections - Metronidazole \(BPCA ABS01-Metronidazole\)](#)

Study Description: NICHD-2013-ABS01 was a prospective, open-label, partially randomized, multicenter trial. The primary objective of this study was to evaluate the safety of drug regimens consisting of ampicillin, metronidazole, clindamycin, piperacillin-tazobactam, and gentamycin in assigned or standard of care groups of infants with complicated intra-abdominal infections. Secondary objectives included evaluations of efficacy and population pharmacokinetics (PK). Results demonstrate that metronidazole therapy at the protocol-specified doses was safe for premature infants with complicated intra-abdominal infections (Group 1) and late preterm/term infants (Group 4). Therapeutic success was achieved in 81% and 96% of participants in Groups 1 and 4, respectively. Only one AE in each group was attributable to study drug. None of the outcomes of special interest were attributable to metronidazole. Collected PK data validated the protocol-specified dosing regimen.

Release Date: July 12, 2023

- [Pharmacokinetics and Safety of Commonly Used Drugs in Lactating Women and Breastfed Infants - Oxycodone \(BPCA BMS01 - Oxycodone\)](#)

Study Description: This master protocol included multiple drugs of interest (DOIs) being studied. The primary objective of this study was to evaluate the pharmacokinetics of commonly used drugs in the blood and breastmilk of lactating women and in the blood of breastfed infants. The secondary objective was to describe the safety profile of commonly used drugs in infants exposed to drugs in breastmilk. This clinical study report presents data for the DOI oxycodone. Oxycodone plasma and breastmilk samples were collected from lactating women and their infants (≤ 180 days of age) enrolled in this study. The concentrations of oxycodone and each of its metabolites in maternal plasma and breastmilk were summarized by 3-hour time windows over 24 hours. Results indicate that oxycodone and its metabolites are concentrated in human breastmilk. Based on the concentration and safety data, oxycodone administered to breastfeeding mothers at doses < 60 mg/day is unlikely to result in clinically relevant exposures of adverse outcomes in breastmilk fed infants.

Release Date: July 12, 2023

- [Moderate-Intensity Exercise Versus High-Intensity Interval Training to Recover Walking Post-Stroke \(HIT-Stroke Trial\)](#)

Study Description: The objective of the HIT-Stroke Trial was to determine the optimal training intensity and the minimum training duration needed to maximize immediate improvements in walking capacity in chronic stroke. A single-blind, phase II, 3-site randomized controlled trial was conducted. Fifty-five persons > 6 months post stroke were randomized to either moderate-intensity aerobic training (MAT) or

high-intensity interval training (HIT); each involving 45 minutes of walking exercise, 3x/week for up to 36 total sessions over approximately 12 weeks. Clinical measures of walking function, aerobic fitness, daily walking activity and quality of life were assessed by blinded raters at baseline (PRE) and after 4, 8 and 12 weeks of training. The 6-minute walk test (6MWT) was the primary outcome measure. Groups had similar 6MWT changes after 4 weeks, but HIT elicited greater gains than MAT after 8 weeks and 12 weeks of training. Within the HIT group, 6MWT outcomes continued to improve after each 4 week training block. HIT also showed greater improvements than MAT on some secondary measures of gait speed and fatigue.

Release Date: June 26, 2023

Recently Updated Study

- [Next Generation Health Study \(NEXT\)](#)

Study Description: The goal of the NEXT Generation Health Study was to examine trajectories of adolescent health and health behaviors through the transition from high school to emerging adulthood. Data was collected annually for seven years (2010 – 2017) from a national probability sample of adolescents. The cohort was tracked from 10th grade through four years post-high-school, permitting a unique opportunity to examine predictors of changes in health behaviors and mental health during significant family, education, and/or career transitions. Self-report of health status, health behaviors, and health attitudes were collected via annual in-school (Wave 1) and online surveys (Wave 2 through Wave 7). Anthropometric measurements (height, weight, waist circumference) were gathered on all participants during the first three assessments. Additional biomarker and anthropometric data (Waves 1-4) were obtained on a small subsample of participants.

Updates: The Next Generation Health Study (NEXT) has replaced four documents and has provided three additional documents associated with Wave 7 data.

Release Date: December 14, 2017

Update Date: July 19, 2023

Studies Offering Biospecimens in DASH

Over 350,000 biospecimens and 51 sample types from nine studies are available for request through DASH. These collections span research topics including HIV/AIDS, Infant and Child Health, Women's Health, Pregnancy, Preterm Labor and Birth, and Breastfeeding. Additional biospecimen collections will also be added in the future. To explore available samples in DASH, select the **Study Name** in the following list of studies offering biospecimens:

- [National Children's Study \(NCS\) biospecimens and environmental samples:](#)
- [Genomic and Proteomic Network for Preterm Birth Research Expression Profiling Study \(GPN-PBR EP\) biospecimens](#)
- [Genomic and Proteomic Network for Preterm Birth Research GWAS Case Control Study \(GPN-PBR CC\) biospecimens](#)
- [Genomic and Proteomic Network for Preterm Birth Research Longitudinal Cohort Study \(GPN-PBR LS\) biospecimens](#)
- [Prospective Study of Perinatal Transmission of HIV Infection and Developmental Outcome of Children Infected with HIV: Mothers and Infants Cohort Study \(MICS\) biospecimens](#)
- [A Prospective, Observational Study of HIV-Infected Pregnant Women and HIV-Exposed, Uninfected Children at Clinical Sites in Latin American Countries \(NISDI LILAC\) biospecimens](#)
- [A Prospective, Observational Study of HIV-Infected Pregnant Women and Their Infants at Clinical Sites in Latin American and Caribbean Countries \(NISDI Perinatal\) biospecimens](#)
- [A Prospective, Observational Study of HIV-Exposed and HIV-Infected Children at Clinical Sites in Latin American and Caribbean Countries \(NISDI Pediatric\) biospecimens](#)
- [NISDI Pediatric Latin American Countries Epidemiological Study: A Prospective, Observational Study of HIV-infected Children at Clinical Sites in Latin American Countries \(NISDI PLACES\) biospecimens](#)

Additional Specimens Available: The Reproductive Medicine Network (RMN) has serum, semen and/or DNA biospecimens available for request. If you are interested in obtaining biospecimens from these studies, please refer to the RMN Biospecimen Sharing Policy under the list of Descriptive Documents on the study pages:

- [Pregnancy in Polycystic Ovary Syndrome II: A 25 Week Double-Blind Randomized Trial of Clomiphene Citrate and Letrozole for the Treatment of Infertility in Women with Polycystic Ovary Syndrome \(PPCOS II\)](#) - serum
- [Assessment of Multiple Intrauterine Gestations from Ovarian Stimulation \(AMIGOS\)](#) - serum, semen, and DNA
- [Males, Antioxidants, and Infertility Trial \(MOXI\)](#) - serum, semen, and DNA

Publications Resulting from Data Reuse

Since the launch of DASH in August 2015, there have been 98 peer-reviewed publications resulting from DASH data reuse, with an average time of 1.6 years to publish. We encourage you to look through these publications on the [Publications from DASH Data Reuse](#) page.

Recent Publications:

- [Disparities by race/ethnicity in unplanned cesarean birth among healthy nulliparas: a secondary analysis of the nuMoM2b dataset](#)
Authors: Nicole S. Carlson, Madelyn S. Carlson, Elise N. Erickson, Melinda Higgins, Abby J. Britt, Alexis Dunn Amore
Publication Date: May 12, 2023
DASH Study: [The Impact of Grade Retention: A Developmental Approach \(Project Achieve\)](#)
- [Identification of postpartum symptom subgroups and associated long-term maternal depressive symptoms and well-being](#)
Authors: Jihye Kim Scroggins, Karin Reuter-Rice, Debra Brandon, Qing Yang
Publication Date: August 24, 2023
DASH Study: [The Impact of Grade Retention: A Developmental Approach \(Project Achieve\)](#)
- [Achievement trajectories in academically at-risk students as a function of perceived classroom goal structure and socioeconomic backgrounds](#)
Authors: Michaela Quintero, Zhe Wang
Publication Date: May 26, 2023
DASH Study: [The Impact of Grade Retention: A Developmental Approach \(Project Achieve\)](#)
- [Socioeconomic status and school adjustment trajectories across childhood: The mediating role of parental involvement](#)
Authors: Yunhee Kim, Tianyu Li, Hyoun Kim, Wonjung Oh, Zhe Wang
Publication Date: June 1, 2023
DASH Study: [The Impact of Grade Retention: A Developmental Approach \(Project Achieve\)](#)
- [The longitudinal association among student externalizing behavior problems, teacher-student relationships, and classroom engagement](#)
Authors: Leslie Hasty, Michaela Quintero, Tianyu Li, Seowon Song, Zhe Wang
Publication Date: August 1, 2023
DASH Study: [The Impact of Grade Retention: A Developmental Approach \(Project Achieve\)](#)
- [Moderate and increased physical activity is not detrimental to live birth rate among women with unexplained infertility and obesity](#)
Authors: Wendy S. Vitek, Fangbai Sun, Eden Cardozo, Kathleen M. Hoeger, Karl R. Hansen, Nanette Santoro, Heping Zhang, Richard S. Legro
Publication Date: June 23, 2023
DASH Study: [Improving Reproductive Fitness Through Pretreatment With Lifestyle Modification in Obese Women With Unexplained Infertility \(FIT-PLEASE\)](#)
- [Five-year surgical outcomes of transvaginal apical approaches in women with advanced pelvic organ prolapse](#)

Authors: Isuzu Meyer, Christina T. Blanchard, Jeff M. Szychowski, Holly E. Richter

Publication Date: April 11, 2023

DASH Study: [Extended Operations and Pelvic Muscle Training in the Management of Apical Support Loss \(E-OPTIMAL\)](#)

- [Characteristics Associated With Postoperative Catheterization at Discharge in Women Undergoing Colpocleisis](#)

Authors: Kelsey Lipking, Isuzu Meyer, David T. Redden, Holly E. Richter

Publication Date: January 1, 2023

DASH Study: [Pelvic Symptoms and Patient Satisfaction After Colpocleisis \(Colpocleisis Trial\)](#)

DASH Data/Biospecimen Use Acknowledgments

As a reminder, NICHD requires all investigators who access research data and biospecimens from NICHD DASH to acknowledge the contributing investigator(s) who conducted the original study, the funding organization(s) that supported the original study, and NICHD DASH in all resulting oral or written presentations, disclosures, or publications of the analyses. Specific guidance for acknowledgement text is provided during the data and/or biospecimen request process.

Implementing the NIH Policy for Data Management & Sharing

DASH and the Data Management and Sharing Policy

DASH is a key resource for many NICHD extramural and intramural researchers to comply with the new [NIH Data Management and Sharing \(DMS\) Policy](#) (DMS Policy), which went into effect on January 25, 2023. The final DMS Policy strongly encourages the use of established repositories such as DASH for sharing scientific data. DASH adheres to the desired characteristics for data sharing repositories described in [Supplemental Information to the NIH Policy for Data Management and Sharing: Selecting a Repository for Data Resulting from NIH-Supported Research](#), including support for free and easy access, access controls for human participant data, curation and quality assurance, and security and integrity. DASH creates Digital Object Identifiers (DOIs) as unique persistent identifiers for tracking and citing all datasets shared through DASH.

Plan to Submit Your Data to DASH

All researchers funded by or seeking funding from NICHD for clinical research can share clinical data in DASH. Researchers seeking funding from another NIH Institute or Center in a research area relevant to the NICHD mission may also be able to share data through DASH. You may Contact SupportDASH@mail.nih.gov with a request to obtain a Letter of Approval for sharing your study data in DASH.

The new DASH [Submission Resources](#) page contains information to guide researchers developing Data Management and Sharing Plans as part of their grant applications or intramural clinical protocols. Researchers planning to use DASH should include DASH submission-specific milestones and timelines in their DMS Plan and should consider those milestones when developing a DMS budget. Costs associated with biospecimen sharing should not be included in DMS budgets. DMS Plan milestones include:

- Researchers who plan to share data through DASH are required to submit an [Institutional Certification](#) to verify that study data are appropriate for sharing in DASH, **within the first year of grant award**.
- **By the second year of grant award**, investigators should submit a draft DASH Codebook, which is a templated data dictionary that captures information about datasets, variables, and coded values for all data submitted for a given study.
- As soon as the **data collection protocol is complete**, researchers should submit the final DASH Codebook to DASH.
- Investigators will share **data associated with a publication** through DASH no later than the first date of electronic publication and will share all study data by the end of the award performance period. Plan to submit data to DASH 4-6 months prior to expected publication release date for a given dataset.

All researchers funded by or seeking funding from NICHD for clinical research can share clinical data in DASH and do not need a Letter of Approval to include data sharing in DASH in their Data Management and Sharing Plan.

NICHD Office of Data Science and Sharing (ODSS) Web Resources

The NICHD Office of Data Science and Sharing (ODSS) is a trusted informational resource for NICHD staff and researchers on all NIH data sharing policies. The [NICHD ODSS website](#) contains a Data Management and Sharing (DMS) Policy Resources section for the NICHD researchers developing and implementing their DMS Plans, including [Tips for Writing a DMS Plan](#), Example DMS Plans, the [NICHD Data Repository Finder](#) to help researchers find data repositories where they can share data, and links to data standards, data repository, and informed consent informational resources.

NIH Resources and Guidance for the DMS Policy

NIH continues to update their [Scientific Data Sharing](#) site resource. At this site, you and your investigators can stay up to date on public-facing NIH data sharing policy-related statements, FAQs, resources (including the DMS Plan format page), news, and events, and look for training opportunities.

OER announced that instructions and processes for extramural researchers to budget DMS costs will change on October 5, 2023. See: [NIH Application Instruction Updates – Data Management and Sharing \(DMS\) Costs \(NOT-OD-23-161\)](#)

Additionally, researchers can use the following NIH-wide resources to identify data repositories for sharing their data:

- **NIH Repositories for Sharing Scientific Data:** <https://sharing.nih.gov/data-management-and-sharing-policy/sharing-scientific-data/repositories-for-sharing-scientific-data>
- **Genomic Data Repositories:** <https://sharing.nih.gov/genomic-data-sharing-policy/submitting-genomic-data/where-to-submit-genomic-data>
- **National Library of Medicine repository resources:**
 - <https://www.nlm.nih.gov/finder>
 - https://www.nlm.nih.gov/NIHbmic/domain_specific_repositories.html

Webinars and Trainings on Implementing the NIH Data Management and Sharing Policy

NIH is hosting several webinars to provide information and training on implementing the DMS Policy.

- **Data Sharing Presentations from 2023 NIH Grants Conference Available**

The 2022-2023 conference season is over, but the opportunity to learn from it isn't. Explore the recordings, slide sets, and transcripts. If you have questions, check out the [FAQs](#) and other resources on the [NIH Grants & Funding](#) site.

Genomic Data Sharing, Other Sharing Policies, and Open Q&A: [Video](#), [PowerPoint](#), [Transcript](#)

The NIH Final Policy for Data Management and Sharing is in Effect: Planning for Success!: [Video](#), [PowerPoint](#), [Transcript](#)
- **[Federal Demonstration Partnership \(FDP\) NIH Data Management & Sharing \(DMS\) Pilot](#)**

Test and provide feedback on the [Federal Demonstration Partnership \(FDP\) NIH DMS Pilot!](#) Use the Alpha or Beta DMS Plan templates to develop and submit your DMS Plan and [provide feedback](#) on the templates' effectiveness and usability. The Alpha template guides the user through a structured, modular approach to limit the need for free text entry, while the Bravo template provides detailed prompts for each type of data and options for more free text entry. Templates are available on FDP website or through the [DMPTool](#).

NIH Data Sharing and Reuse Seminar Series

The NIH Office of Data Science Strategy hosted a seminar series to highlight exemplars of data sharing and reuse. The monthly series highlighted researchers who took existing data and found clever ways to reuse the data or generate new findings. A different NIH institute or center (IC) also shares its data science activities each month. Recordings of past seminars are available on the [Seminar Web page](#).

The next seminar will be held on Seminar on Friday, October 13, 2023 where Dr. Zhiyong Lu, Ph.D. will present "AI in Medicine: Improving Access to Literature Data for Knowledge Discovery". [Webinar Registration](#).

NICHD Funding Opportunities and Notices

All active Funding Opportunity Announcements issued by NICHD can be found on the [NICHD Grants and Contracts](#) page. To learn more about a funding opportunity, select the **Name of the Funding Opportunity** in the following list:

- PAR-22-261 [Archiving and Documenting Child Health and Human Development Data Sets \(R03 Clinical Trial Not Allowed\)](#)
- PAR-21-229 [Screening and Functional Validation of Human Birth Defects Genomic Variants \(R01 Clinical Trial Not Allowed\)](#)
- PAR-23-037 [Multisite Clinical Research: Leveraging Network Infrastructure to Advance Research for Women, Children, Pregnant and Lactating Individuals, and Persons with Disabilities \(U01 Clinical Trial Optional\)](#)
- PAR-23-075 [Small Research Grants for Analyses of Gabriella Miller Kids First Pediatric Research Data \(R03 Clinical Trial Not Allowed\)](#)

NICHD – Relevant Funding Opportunities and Notices

Additional active Funding Opportunity Announcements relevant to NICHD are included below. To learn more about a funding opportunity, select the **Name of the Funding Opportunity** in the following list:

- NOT-OD-23-165 [Notice of NIH Participation in the National Science Foundation Solicitation NSF 23-614: Smart Health and Biomedical Research in the Era of Artificial Intelligence and Advanced Data Science](#)
- NOT-NS-24-009 [Notice of Intent to Publish a Funding Opportunity Announcement for BRAIN Initiative Connectivity across Scales Data Coordinating Center \(BRAIN CONNECTS DCC\) \(U24 Clinical Trial Not Allowed\)](#)
- NOT-OD-23-166 [Notice of Special Interest in Research on Family Support and Rejection in the Health and Well-Being of SGM Populations](#)
- PAR-23-237 [Enhancement and Management of Established Biomedical Data Repositories and Knowledgebases \(U24 Clinical Trial Not Allowed\)](#)
- PAR-23-289 [Diagnostic Centers of Excellence for the Undiagnosed Diseases Network \(U01 – Clinical Trial Not Allowed\)](#)
- RFA-MH-24-190 [BRAIN Initiative: Research on the Ethical Implications of Advancements in Neurotechnology and Brain Science \(R01 Clinical Trial Optional\)](#)
- RFA-NS-24-023 [HEAL INITIATIVE: Development and validation of remote or patient wearable device derived objective biosignatures or functional assessments to monitor pain for use as endpoints in clinical trials \(UG3/UH3 - Clinical Trial Optional\)](#)
- NOT-OD-23-040 [Notice of Special Interest \(NOSI\): Advance Data Science Approaches Through Secondary Data Analysis to Reveal Scientific Insights of COVID-19 Testing Technologies \(R21\)](#)

- [NOT-OD-23-123 Notice of Special Interest \(NOSI\): Administrative Supplements to Enhance Institutional Data Science Capacity](#)
- [PAR-23-132 NIDCR Small Research Grants for Analyses of Existing Genomics Data \(R03 Clinical Trial Not Allowed\)](#)
- [PAR-23-133 NIDCR Research Grants for Analyses of Existing Genomics Data \(R01 Clinical Trial Not Allowed\)](#)
- [RFA-DA-24-027 Education Activities for Responsible Analyses of Complex, Large-Scale Data \(R25-Clinical Trial Not Allowed\)](#)
- [PAR-23-089 Data Harmonization, Curation and Secondary Analysis of Existing Clinical Datasets \(R61/R33 Clinical Trial Not Allowed\)](#)
- [NOT-OD-23-068 Notice of Special Interest \(NOSI\): Revision Applications to add a Curation and Informatics Component to existing Animal and Biological Material Resource Centers \(P40\) \(Clinical Trials Not Allowed\)](#)
- [NOT-LM-23-001 Notice of Special Interest \(NOSI\): Computational and Statistical Methods to Enhance Discovery from Health Data](#)
- [PAR-22-261 Archiving and Documenting Child Health and Human Development Data Sets \(R03 Clinical Trial Not Allowed\)](#)
- [NOT-CA-23-026 Notice to Correct and Clarify Eligibility Requirements in PAR-21-306, NCI Research Specialist \(Clinical Scientist\) Award \(R50 Clinical Trial Not Allowed\)](#)
- [NOT-GM-23-015 Notice of Special Interest \(NOSI\): Optimization of Data Storage and Utilization for the Sequence Read Archive \(SRA\)](#)

Previous issues of the DASH Quarterly eUpdate are available on the [NICHD ODSS Website](#) in the NICHD Data and Specimen Hub (DASH) section.

Questions? Please contact the DASH Administrator at SupportDASH@mail.nih.gov.

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of Child Health and Human Development