

2018-04-18

NIH PUBLIC ACCESS Policy WORKSHOP April

Rosenzweig, Merle

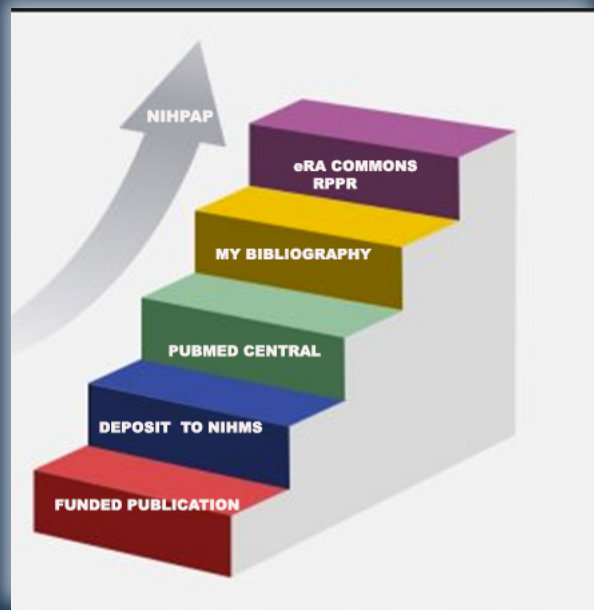
<https://hdl.handle.net/2027.42/143151>

<http://creativecommons.org/licenses/by-nc-nd/4.0/>

Downloaded from Deep Blue, University of Michigan's institutional repository



Everything you need to know



ALL ABOUT THE POLICY

- National Institutes of Health (NIH) passed its Public Access Policy on April 7, 2008.
- The statement can be found @ <https://publicaccess.nih.gov/policy.htm>.
- *The NIH will delay processing of an award or a Progress Report (RPPR) if publications arising from a grant are not in compliance with the NIH Public Access Policy.*
- *Purpose of the Policy*

PURPOSE OF THE POLICY

- Provides free online access to full-text peer-reviewed journal articles arising from taxpayer-funded research.
- The National Institutes of Health (NIH) asks every scientist who receives an NIH research grant, and who publishes the results in a peer-reviewed journal, to deposit a digital copy of the article in PubMed Central (PMC), the online digital library maintained by the NIH.
- PMC will then provide free online access to its copy some time after the article is published in a journal, the length of the delay to be determined at the time the deposit is made.

DOES THE POLICY APPLY TO THE PUBLICATION?

- The publication is not a peer-reviewed journal article reporting research funded by an NIH Grant=**NO**.
- The publication is a review article, book, book chapter, meeting abstract, dissertation=**NO**.
- The publication is a peer-reviewed journal article and the research reported was funding by an NIH Grant=**YES**.

ADDRESSING COPYRIGHT

- Review the journal's Instructions to Authors for any specific information or instructions related to the NIH Public Access Policy.
- Make sure the copyright agreement allows posting into PubMed Central. *Remember, you do not need the final publisher/journal article for posting.
- If the instructions to authors or the copyright does not allow, a note can be added to the copyright agreement.
- **Sample language:**

SAMPLE LANGUAGE

“Journal acknowledges that Author retains the right to provide a copy of the final peer-reviewed manuscript to the NIH upon acceptance for Journal publication, for public archiving in PubMed Central as soon as possible but no later than 12 months after publication by Journal.”

NIHMS

- Stands for National Institutes of Health Manuscript Submission System.
- A system developed to facilitate the submission of peer-reviewed manuscripts for inclusion in PubMed Central (PMC) in support of the NIH Public Access Policy.
- What is PubMed Central?



A free digital repository that archives publicly accessible full-text scholarly articles that have been published within the biomedical and life sciences journal literature.

SUBMITTING TO NIHMS

- There are **4 methods** of submitting the manuscript of the publication that falls under the NIH Public Access Policy.
- The method used will be determined by:
 - >the journal that the publication will/is in,
 - >the publishing agreement.

METHOD A

- Journal deposits final published article into PubMed Central without grantee, author, or delegate involvement.
- The article is made publically available no later than 12 months after publication.
- A list of these journals can be found at https://publicaccess.nih.gov/submit_process_journals.htm.

METHOD B

- Grantee, author, or delegate asks publisher to deposit **specific** final published article in PubMed Central.
- The publisher will request an “open access” **fee** to do the deposit.
- Arrangements must be made to ensure that the article is made publically available no later than 12 months after publication.
- A list of these publishers can be found at https://publicaccess.nih.gov/select_deposit_publishers.htm

METHOD C

- If the other methods do not apply, this is the method that **must** be followed for compliance.
- Grantee, author, or delegate deposits final, peer-reviewed manuscript into PubMed Central via the NIH Manuscript Submission System (NIHMS).

NIH MANUSCRIPT SUBMISSION SYSTEM (NIHMS)

- The NIH Grantee/Principle Investigator (PI) is responsible for compliance and moving the manuscript through the tasks involved in all the steps.
- However, some of the steps can be assigned to a delegate—author of the manuscript or administration staff.

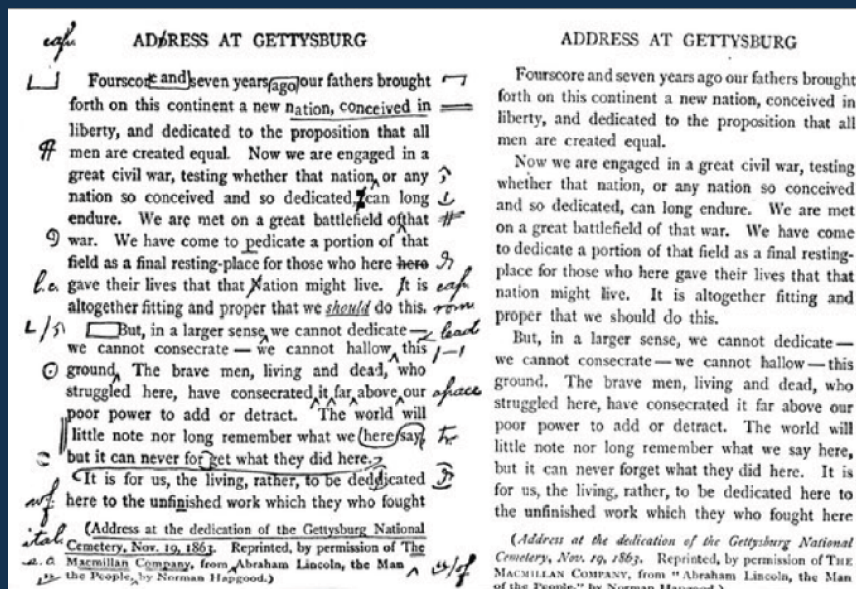
WHAT CAN & CANNOT BE DEPOSITED

- Can:
 - >The final, peer-reviewed manuscript.
 - >All the figures, tables, and supplemental materials.
- Cannot:
 - >Final .PDF version of the published article.
 - >Page/galley proofs.
 - >Both of the above versions fall under copyright.

Final .PDF

The screenshot shows the top portion of a ScienceDirect article page. At the top, there is a navigation bar with a 'Download PDF' button (highlighted with a red rectangle), an 'Export' button, a 'More options...' dropdown, and a search bar labeled 'Search ScienceDirect'. Below this, the journal title 'Cancer Letters' is displayed, along with the publication date 'Available online 16 September 2014' and a note 'In Press, Corrected Proof — Note to users'. The article title 'AXIN1 and AXIN2 variants in gastrointestinal cancers' is prominently displayed, followed by the authors 'Serina M. Mazzoni^a, Eric R. Fearon^{a, b, c, *}'. A 'Show more' link is visible. The DOI '10.1016/j.canlet.2014.09.018' and a 'Get rights and content' link are also present. A 'Highlights' section at the bottom lists five bullet points: 'The AXIN1 and AXIN2 proteins are viewed as tumor suppressors in the Wnt pathway.', 'We assessed AXIN1/2 sequence variants in gastrointestinal cancers.', 'AXIN1 may be a tumor suppressor gene in hepatocellular carcinoma.', 'Germline AXIN2 mutations are linked to a colorectal cancer predisposition syndrome.', and 'The role of AXIN1/2 mutations in other cancers remains to be established.'

Page/Galley Proofs



**BEFORE BEGINNING DEPOSITING
MAKE SURE YOU HAVE:**

- Name of the journal that the manuscript will be published in.
- Title of the manuscript.
- Grant number(s).
- All the manuscript files—text, figures, tables, supplemental material and data if that applies.
- Embargo¹ period².

¹The time period, in months, that the publisher retains rights to distribution of the article. Upon submission to PubMed Central and until the embargo period passes, PubMed Central will provide a brief record of the manuscript.

² <http://www.sherpa.ac.uk/romeo/index.php>



WHEN CAN DEPOSIT BE DONE?

- You can deposit once the journal acknowledges the manuscript is accepted for publication and the embargo should be 12 months post publication.
- Depositing retrospectively, a year or more after publication, you can set the embargo less than 12 months.

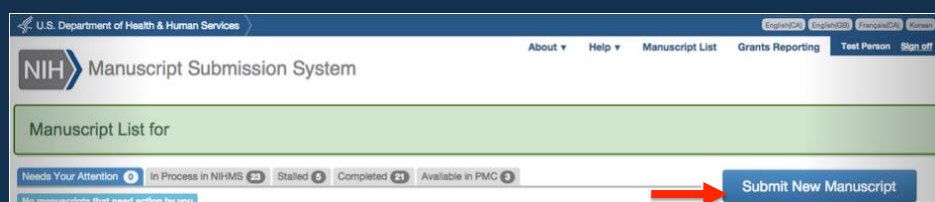
STEPS FOR DEPOSITING INTO NIH MANUSCRIPT SUBMISSION SYSTEM (NIHMS)

LOGIN TO NIHMS

- <https://www.nihms.nih.gov/db/sub.cgi>
- Use the credentials that apply to you.



CLICK ON “SUBMIT NEW MANUSCRIPT”



NEW MANUSCRIPT SUBMISSION

- On the first line you will enter the title of the manuscript.
- On the second line the name of the journal.
- After that information is entered click on “Add Funding”.

New manuscript submission

1. Title Information 2. Add Funding 3. Upload Files 4. Check Files 5. Set Reviewer & Embargo

Provide citation information using one of the options below.

Option 1. Enter the manuscript and journal titles

Manuscript Title *

Journal Title *

Option 2. Search for citation in PubMed

Option 3. Find citation in My NCBI Bibliography

ADDING FUNDING

- You can search for a grantee by entering a first and last name and clicking on the search button to get a list of that individuals NIH grants or, if you have the grant number you can enter it.
- Clicking on “Search” will pull up a list of grants or the specific grant depending on how you have searched.


New-onset diabetes mellitus in kidney transplant recipients discharged on steroid-free immunosuppression.
Journal: [Transplantation](#)

1. Title Information **2. Add Funding** 3. Upload Files 4. Check Files 5. Set Reviewer & Embargo

Enter project support information

Search by:

AND/OR



Search Results:

Grantee/PI	Select	Grant/Project ID	Title
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SELECTING THE GRANT

- Select the grant(s) that you wish to designate for the deposit.
- Click on “Upload Files”.

New-onset diabetes mellitus in kidney transplant recipients discharged on steroid-free immunosuppression.
Journal: [Transplantation](#)

1. Title Information 2. Add Funding 3. Upload Files 4. Check Files 5. Set Reviewer & Embargo

Enter project support information

Search by:

AND/OR

Search Results:

Grantee/PI	Select	Grant/Project ID	Title
<input checked="" type="radio"/> Akinlolu O. Ojo	<input checked="" type="checkbox"/>	K24 DK062234	Renal and Cardiovascular Events in Patients with C
	<input type="checkbox"/>	R01 DK062642	Physician Peer Minority Organ Donation Education M
	<input type="checkbox"/>	R01 DK092475	A Clinical Trial to Prevent New Onset Diabetes Af

UPLOAD FILES WINDOW

New-onset diabetes mellitus in kidney transplant recipients discharged on steroid-free immunosuppression.
Journal: [Transplantation](#)

1. Title Information

2. Add Funding

3. Upload Files

4. Check Files

5. Set Reviewer & Embargo

Please upload all files associated with your manuscript, including supplemental files, and move to the next step.

Type	Label	File	Size	Date	Remove
Manuscript *		<input type="button" value="Browse..."/> No file selected.			<input type="button" value="X"/>
Figure	<input type="text"/>	<input type="button" value="Browse..."/> No file selected.			<input type="button" value="X"/>
Table	<input type="text"/>	<input type="button" value="Browse..."/> No file selected.			<input type="button" value="X"/>
Supplemental	<input type="text"/>	<input type="button" value="Browse..."/> No file selected.			<input type="button" value="X"/>

Add another [Manuscript](#), [Figure](#), [Table](#), [Supplemental](#)

Save & Exit


Cancel Submission

◀ Add Funding

Check Files ▶

MANUSCRIPT

- Click on “Browse” and find the file.


Manuscript *		Browse...	No file selected.
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- The file can be a word document (.doc or .docx), a rich text format (.rtf), or in any other format (.txt).

FIGURE

- Upload **all** the figures.
- Depending on the number of figures you need to upload you can click on the “+Figure” at the bottom of the window to get the lines necessary.
- Label each line accordingly—figure 1, figure 2, and so on.


Figure	<input type="text"/>	Browse...	No file selected.
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 **Figure,**

TABLE

- Upload **all** the tables.
- Depending on the number of tables you need to upload you can click on the “+Table” at the bottom of the window to get the lines necessary.
- Label each line accordingly—table 1, table 2, and so on.


Table	<input type="text"/>	<input type="button" value="Browse..."/> No file selected.
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 **Table**

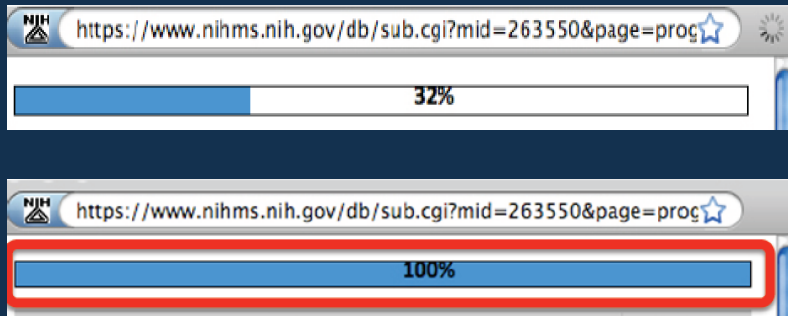
SUPPLEMENTAL

- Upload **all** the supplemental material, if there is any.
- Depending on the number of supplemental materials you need to upload you can click on the “+Supplemental” at the bottom of the window to get the lines necessary.
- Label each line accordingly—supplemental 1, supplemental 2, and so on.

Supplemental	<input type="text"/>	<input type="button" value="Browse..."/> No file selected.
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 **Supplemental**

CREATING .PDF OF THE DEPOSITED FILES



CHECK FILES

- When you have uploaded all the files click on “Check Files”.
- On this window you will see all the files that have been loaded and the appropriate labeling for each.
- It is here that you can make any corrections or additions necessary.
- Click on “Check Files” again.


New-onset diabetes mellitus in kidney transplant recipients discharged on steroid-free immunosuppression.
Journal: [Transplantation](#)

1. Title Information 2. Add Funding 3. Upload Files 4. Check Files 5. Set Reviewer & Embargo

Please upload all files associated with your manuscript, including supplemental files, and move to the next step.

Type	Label	File	Size	Date	Remove
Manuscript *		<input type="button" value="Browse..."/> New-Onset Diabetes Mellitus .docx			<input type="button" value="X"/>
Figure	<input type="button" value="Figure 1 The cum"/>	<input type="button" value="Browse..."/> Figure 1.png			<input type="button" value="X"/>
Table	<input type="button" value="Table 1 Descriptiv"/>	<input type="button" value="Browse..."/> Table 1.png			<input type="button" value="X"/>
Supplemental	<input type="text"/>	<input type="button" value="Browse..."/> No file selected.			<input type="button" value="X"/>
Figure	<input type="button" value="Figure 2 Factors r"/>	<input type="button" value="Browse..."/> Figure 2.jpg			<input type="button" value="X"/>
Table	<input type="button" value="Table 2 Factors a"/>	<input type="button" value="Browse..."/> Table 2.jpg			<input type="button" value="X"/>
Table	<input type="button" value="Table 3 Discharge"/>	<input type="button" value="Browse..."/> Table 3.jpg			<input type="button" value="X"/>

Add another [Manuscript](#), [Figure](#), [Table](#), [Supplemental](#)



REVIEWER AND EMBARGO

- Verify that the correct person will be reviewing and approving the deposit.
- Select the embargo period from the drop-down options.
- Click on “Send to Reviewer”.

New-onset diabetes mellitus in kidney transplant recipients discharged on steroid-free immunosuppression.
Journal: [Transplantation](#) NIHMSID 840202 [Provide citation](#)

1. Title Information 2. Add Funding 3. Upload Files 4. Check Files 5. Set Reviewer & Embargo

Set Reviewer

Select	Reviewer
<input type="radio"/>	Me (Merle Rosenzweig)
<input checked="" type="radio"/>	Akintolu O. Ojo
<input type="radio"/>	First Name <input type="text"/> Last Name <input type="text"/> Email <input type="text"/>

Set Embargo
The embargo will be set by the designated Reviewer.

Save & Exit Cancel Submission

Set Embargo
Release in PMC

Check Files Send to Reviewer

New-onset diabetes mellitus in kidney transplant recipients discharged on steroid-free immunosuppression.
Journal: [Transplantation](#) NIHMSID 840202 [Provide citation](#)

1. Title Information 2. Add Funding 3. Upload Files 4. Check Files 5. Set Reviewer & Embargo

Please open and review the PDF Receipt to confirm that you have provided all the materials that make up your manuscript and that are referenced in the text, including any placeholders for supplemental files (if applicable).

You must review the PDF receipt file to advance to the next step.

PDF Receipt [2016-12-31 11:35:48, 1,418.3 KB]

Open

Please return to Upload Files if any files are missing.

Save & Exit Cancel Submission

Upload Files Set Reviewer & Embargo

This window loads the formatted .pdf and you **must** open the .pdf before you move to the next window which is the “Submission Statement” that requires you to click on “Agree”.

Manuscript Information

Journal name: Transplantation
 NIHMS ID: NIHMS4584202
 Manuscript Title: New-onset diabetes mellitus in kidney transplant recipients discharged on steroid-free immunosuppression.

Submitter:

Manuscript Files

Type	Fig/Tables	Filename	Size	Uploaded
manuscript		New-Onset Diabetes Mellitus.docx	2754	2016-12-31 11:34:54
figure	Figure 1: The cumulative incidence rates of new-onset diabetes after transplant (NODAT) per 1000 patient years at 6 months and at 1, 2, and 3 years, by use of steroids at discharge	Figure 1.jpg	740	2016-12-31 11:34:55
figure	Figure 2: Factors associated with the probability of developing NODAT within 3 years of discharge from the transplant hospitalization (N=25,837)	Figure 2.jpg	7313	2016-12-31 11:34:56
table	Table 1: Descriptive statistics for selected recipient, donor and transplant characteristics by the inclusion of steroids in the discharge maintenance immunosuppression regimen	Table 1.jpg	385	2016-12-31 11:34:56
table	Table 2: Factors associated with the probability of developing NODAT within 3 years of discharge from the transplant hospitalization (N=25,837)	Table 2.jpg	1307	2016-12-31 11:34:57
table	Table 3: Discharge maintenance immunosuppression regimens other than	Table 3.jpg	1256	2016-12-31 11:34:58

New-Onset Diabetes Mellitus in Kidney Transplant Recipients Discharged on Steroid-Free Immunosuppression

Luan, Fu L.^{1,2}; SteCik, Diane E.²; Ojo, Alimou O.^{1,2}

Author Information

¹ Division of Nephrology, Department of Internal Medicine, University of Michigan, Ann Arbor, MI.

² Scientific Registry of Transplant Recipients, Arbor Research Collaborative for Health, Ann Arbor, MI. This work was supported by the Scientific Registry for Transplant Recipients grant 234-2005-37000C, Health Resources and Services Administration, U.S. Department of Health and Human Services (D.E.S.) and by NIH grant K24 DK062234 (A.O.O.).

A.O.O. received grant support from Pfizer, US, for a separate investigator-initiated research project and received consulting fees and speaking honoraria from Pfizer, Genzyme, Roche, and Novartis.

Presented at the American Transplant Congress, 2009, Boston, MA.

³ Address correspondence to: Fu Luan, M.D., University of Michigan Health System, 3014 Taubman Center, Box 0364, 1500 East Medical Center Drive, Ann Arbor, MI 48109-0364. E-mail: fluan@med.umich.edu

F.L.L. participated in study design and manuscript preparation; D.E.S. participated in data collection, statistical analyses, and manuscript preparation; and A.O.O. participated in the study design and manuscript preparation.

Received 22 April 2010; Revision requested 18

May 2010; Accepted 26 October 2010.

Abstract

Background. New-onset diabetes after transplant (NODAT) is a serious complication after kidney transplantation. We studied the relationship between steroid-free maintenance regimens and NODAT in a national cohort of adult kidney transplant patients.

Methods. A total of 25,837 previously nondiabetic kidney transplant patients, engrafted between January 1, 2004, and December 31, 2006, were included in the study. Logistic regression analysis was used to compare the risk of developing NODAT within 3 years after transplant for patients discharged with and without steroid-containing maintenance immunosuppression regimens. The eDect of transplant program-level practice regarding steroid-free regimens on the risk of NODAT was studied as well.

Results. The cumulative incidence of NODAT within 3 years of transplant was 16.2% overall; 17.7% with maintenance steroids and 12.3% without ($P<0.001$). Patients discharged with steroids had 42% greater odds of developing NODAT compared with

Review of NIHMS submission statement

Submission Statement

Manuscript Title: New-onset diabetes mellitus in kidney transplant recipients discharged on steroid-free immunosuppression.

Accepted for Publication In: Transplantation

I am an author of this manuscript, and I am providing it to the National Institutes of Health (NIH) to make publicly available in PubMed Central immediately after its official date of publication in the journal.

I confirm that:

Publication and Copyright Agreements — In any agreements that I have made with the journal, I have retained the right to deposit this version of the manuscript with PMC, so that it may be appropriately tagged and made available to the public on the PMC web site; or, I otherwise am legally authorized to deposit this manuscript for the purposes described.

Confidentiality — The manuscript may contain confidential information that must not be publicly disclosed prior to publication of the paper in the named journal.

Peer Review — The version I am depositing has been peer reviewed and accepted for publication and includes all modifications resulting from the peer review process.

Funding — The manuscript is the result of research supported, in whole or in part, by direct costs funded by NIH.

Change Release Date

Disagree

Agree

NIH Manuscript Submission System

Thank you for the submission.

NIHMSID

Manuscript Title: New-onset diabetes mellitus in kidney transplant recipients discharged on steroid-free immunosuppression.

Journal: NIHMSID

Transplantation: S40202

Release Delay: none

Reviewer: -

WHAT'S NEXT?

Step 3
NIHMS staff reviews the approved files for completeness, and complete submissions are converted to archival XML. The PMC-ready documents (Web and PDF versions) are checked to ensure they accurately reflect the submitted files. Processing time for this step is usually 2-3 weeks but may vary depending on the volume of submissions at a given time. An e-mail notification is sent to the Reviewer when the record is available for final review.

Step 4
The Reviewer reviews the PMC-ready documents (Web and PDF versions) and either requests corrections or approves them for inclusion in PMC. Final Approval is required to complete manuscript processing in NIHMS.

Step 5
A PMCID is assigned when the manuscript is matched to a PubMed record with complete citation information. For details, see When will a PMCID be assigned to my manuscript?

Here you can see “What’s Next?” showing the final steps of compliance.

COMPLIANCE BY THE NUMBERS

Identifier	Description	NIHPAP Compliance Status	Example
PMCID	Pubmed Central unique identifier	Complies	PMC2901972
NIHMSID	NIH Manuscript Submission system unique identifier	Temporary compliance	NIHMSID30238
PMC Journal - In Process	Publisher deposited publication submitted to NIHMS but not yet having received an identifier	Temporary compliance	PMC Journal - In Process
PMID	Medline/PubMed unique identifier	Does NOT comply	PMID:12748199

Compliance by the Numbers

- **PMCID/PMC** is the number assigned to show that the publication is in full compliance with the Policy—PMCID:185221 or PMC185221.
- **NIHMSID** is a temporary compliance number that is only valid to show compliance for three months post publication. Beyond that time, it cannot be used to show compliance with the NIH Public Access Policy—NIHMSID: NIHMSID30238.
- **PMC Journal – In Process** signifies that the Publisher deposited, into NIHMS, the final, print version of the publication but the deposit has not received a PMC identifier. A list of these journals can be found at https://publicaccess.nih.gov/submit_process_journals.htm.
- **PMID** (PubMed Identification number) is a unique identifier number assigned to every record in PubMed and is at the end of each—PMID:12748199. This number is in no way related to the NIH Public Access Policy and cannot be used to show compliance.
- If you have a PMID and want to see if there is a PMCID/NIHMSID, you can use the “PMCID Converter” <https://www.ncbi.nlm.nih.gov/pmc/pmctopmid/>.

MY BIBLIOGRAPHY IN MY NCBI

- NIH Grantees and/or their delegate must use My Bibliography in My NCBI to keep track of publications that fall under the Public Access Policy.
- If you do not have a My NCBI account you can register for one and it is “free”.

REGISTER FOR A MY NCBI ACCOUNT

- Go to PubMed.gov --www.pubmed.gov
- Click on “My NCBI Sign In” in the upper right corner of the screen.
- Click on “My NCBI Sign In” in the upper right corner of the screen.
- Click on “Register for an NCBI account” at the bottom of the Sign in to NCBI window.
- Fill in all the required information and click on “Create account”.

The screenshot shows the NCBI website's sign-in interface. At the top, a blue navigation bar contains the NCBI logo, 'Resources', 'How To', and a 'Sign in to NCBI' link with a red arrow pointing to it. The main content area is a white box titled 'Sign in to NCBI'. It features a 'Sign in with' section with buttons for Google, NIH, and Commons. Below this is a link for 'See more 3rd party sign in options'. A horizontal line with 'OR' in the center separates this from the 'Sign in directly to NCBI' section. This section includes input fields for 'NCBI Username' and 'Password', a checked 'Keep me signed in' checkbox, and a 'Sign in' button. At the bottom of the sign-in box, there are two links: 'Forgot NCBI username or password?' and 'Register for an NCBI account', with a red arrow pointing to the latter.

Register for an NCBI Account Skip registration by using a 3rd party sign in option

* required information Arizona State University

Select a username and password

Username: *

Password: *

Repeat password: *

Contact information


E-mail: *

In case you forget your password

Please provide a question and answer that you can use to unlock your account:

Question:

Answer:

Please type the following characters: * 

MY BIBLIOGRAPHY & eRA COMMONS

- eRA Commons is a set of web tools used for the administrative activities of NIH Grants.
- My Bibliography must be linked to the Grantees eRA Commons.
- The Publication entered into My Bibliography will show compliance status and the NIH Grant(s) that supports it.
- This linking enables the Grantee and/or the delegate, when preparing a grant application, grant renewal, or a Research Performance Progress Report (RPPR) to have access to the publications to be cited.

LINKING MY BIBLIOGRAPHY TO eRA COMMONS

1. Log into My NCBI.
2. Click on your login name at top right of the window to get to your account settings.
3. Click on the "Change" button for "Linked Account".
4. You can scroll to the list "Login Account Options" and click on "NIH & eRA Commons" or search for NIH which should show "NIH & eRA Commons", click on it.
5. You can only link to one account. If you have linked to another account click on "Change" and follow steps in #4.
6. Check you're My Bibliography and if there is the eRA logo at the top the linking was successful.

The screenshot shows the My NCBI account settings page. At the top, the user's name 'Name' is displayed next to 'My NCBI' and 'Sign Out'. Below this, the 'Linked accounts' section features a 'Change' button. A search bar for account names is present, with 'NIH' entered. The search results show a list of accounts, including 'NIH & eRA Commons'. The footer of the page displays 'My NCBI » GRANTEE@era commons's My Bibliography' and the eRA logo.

ASSIGN A DELEGATE TO MANAGE MY BIBLIOGRAPHY

1. The person the Grantee wants to make a delegate should have a My NCBI account.
2. The Grantee signs into their My NCBI account.
3. Clicks on the username at the top-right of the screen to access Account Settings.
4. Scroll down to Delegates.
5. Click on “Add a Delegate” & add the email address of the person to be added as a delegate.
6. Click “OK”.
7. Message sent to Delegate.
8. Delegate clicks on the link.
9. Delegation accepted.

→ **Name** My NCBI Sign Out

NCBI Account Settings ←

Delegates

You can add delegates to help you manage your bibliography and/or SciENcv profiles.

[Add a Delegate](#) →

Add a delegate

Enter your delegate's email address:

Name@umich.edu ✓

→ **OK** Cancel

What'll happen:

- Your delegate will receive an e-mail notifying them of access.
- Your delegate will click a link in the e-mail to activate access.
- If your delegate does not have a My NCBI account, they will be invited to register.

From myncbi@ncbi.nlm.nih.gov
Subject: [MyNCBI] Delegation request from meriez
To: [redacted] ★

Dear [redacted],

My NCBI is a free user account system that can be used to store data (such as PubMed citations), searches, and web site preferences for the NCBI web site.

The My NCBI user: meriez has granted you permission to manage his/her bibliography. You will be able to add and remove citations to the bibliography and perform other functions as if you were meriez. To accept this responsibility, click the link below to log in to or register for My NCBI.

→ [https://www.ncbi.nlm.nih.gov/account/delegation/?token=CNJC0Ys54c17d3&delegateOf=\[redacted\]](https://www.ncbi.nlm.nih.gov/account/delegation/?token=CNJC0Ys54c17d3&delegateOf=[redacted])

If you believe you have received this message in error, you may simply ignore it or contact the requestor [redacted] for clarification. Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. You may send questions, problems, and comments to info@ncbi.nlm.nih.gov.

Thank you,
The My NCBI Team

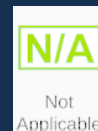
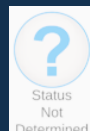
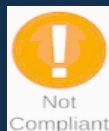
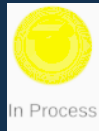
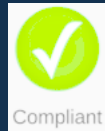
Delegate for [redacted]

Delegation acceptance confirmed


You have accepted the connection with [redacted].
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PUBLIC ACCESS COMPLIANCE STATUS

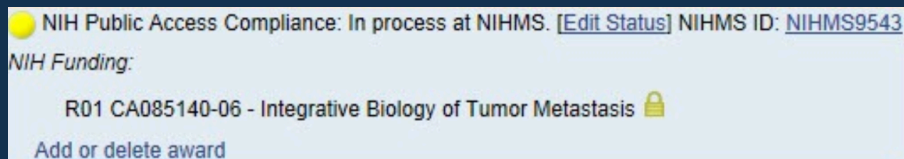
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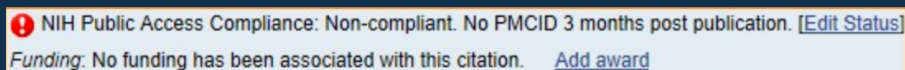
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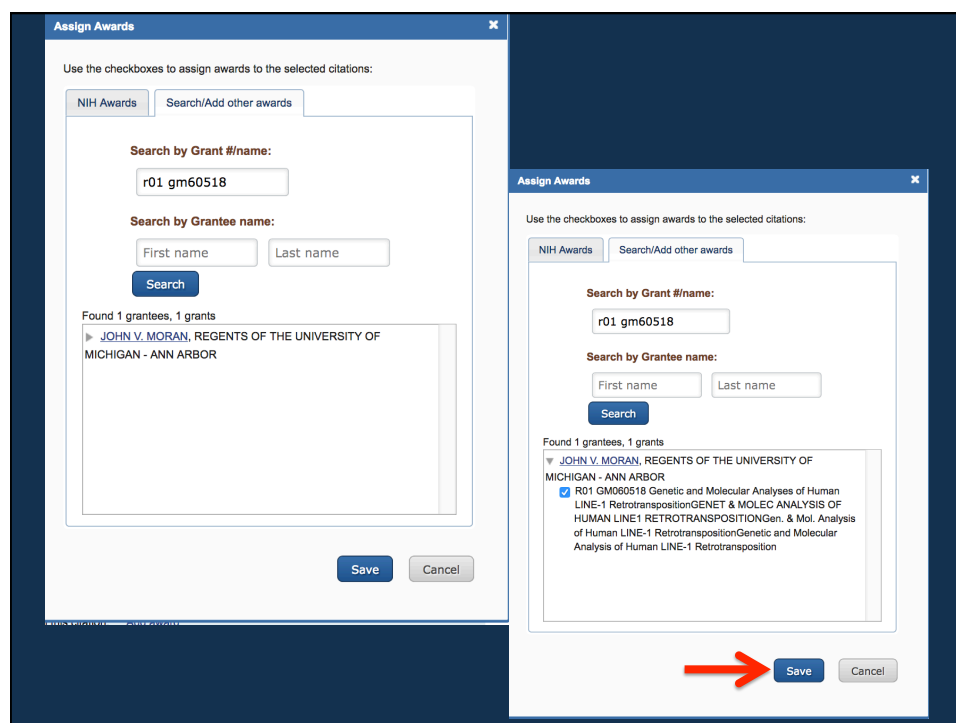
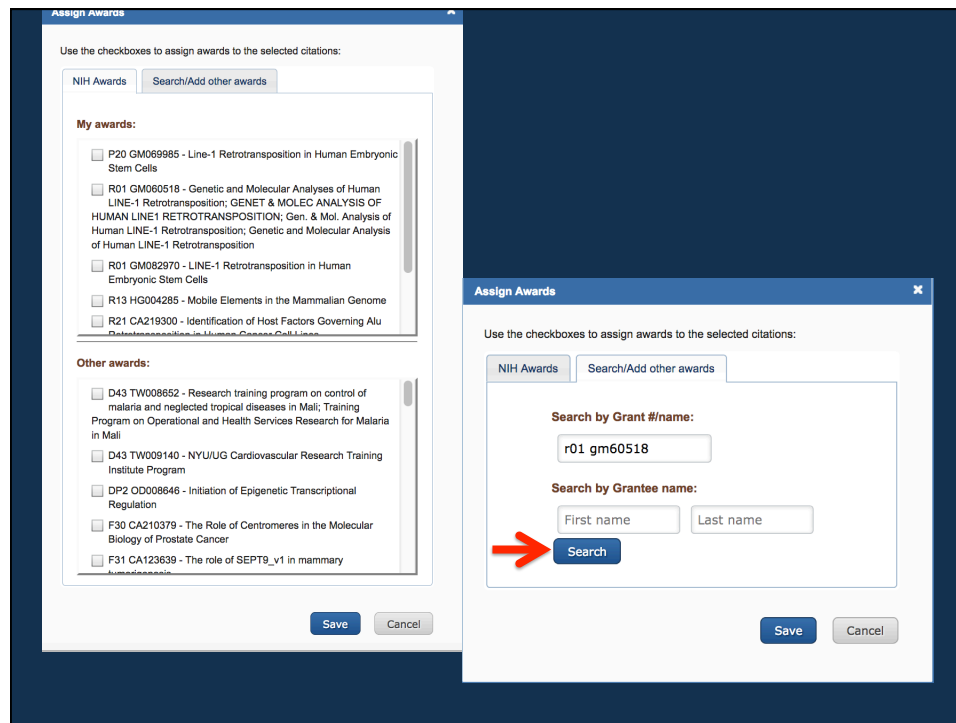
31: ☐ Athanikar JN, Badge RM, Moran JV. [A YY1-binding site is required for accurate human LINE-1 transcription initiation](#). Nucleic Acids Res. 2004 Jul 22;32(13):3846-55. Print 2004. PubMed PMID: 15272086; PubMed Central PMCID: PMC506791.

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NIH Funding:

R01 GM060518 - Genetic and Molecular Analyses of Human LINE-1 Retrotransposition; GENET & MOLEC ANALYSIS OF HUMAN LINE1 RETROTRANSPOSITION; Gen. & Mol. Analysis of Human LINE-1 Retrotransposition; Genetic and Molecular Analysis of Human LINE-1 Retrotransposition

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31: ☐ Athanikar JN, Badge RM, Moran JV. [A YY1-binding site is required for accurate human LINE-1 transcription initiation](#). Nucleic Acids Res. 2004 Jul 22;32(13):3846-55. Print 2004. PubMed PMID: 15272086; PubMed Central PMCID: PMC506791.

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NIH Funding:

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The screenshot shows the PubMed search results page. At the top, the NCBI logo and navigation links are visible. The search bar contains the query "WILLIAMS JA [author] AND MICHIGAN". Below the search bar, there are links for "Create RSS", "Create alert", and "Advanced". The left sidebar contains filters for "Article types", "Text availability", "Publication dates", and "Species". The main content area displays the search results, including the number of items (158) and a list of articles. The first article is "Modeling a scientific career: an essential component of the mentorship process. An interview with John A. Williams, Professor of Molecular and Integrative Physiology, University Of Michigan, Ann Arbor, Mich., USA by Martín E. Fernández-Zapico." The second article is "The obstetrics and gynecology clerkship: building a better model from past experience." The third article is "The nobel pancreas: a historical perspective." The fourth article is "Proteomics as a systems approach to pancreatitis." Each article entry includes the author(s), title, journal, year, volume, issue, pages, and PMID.

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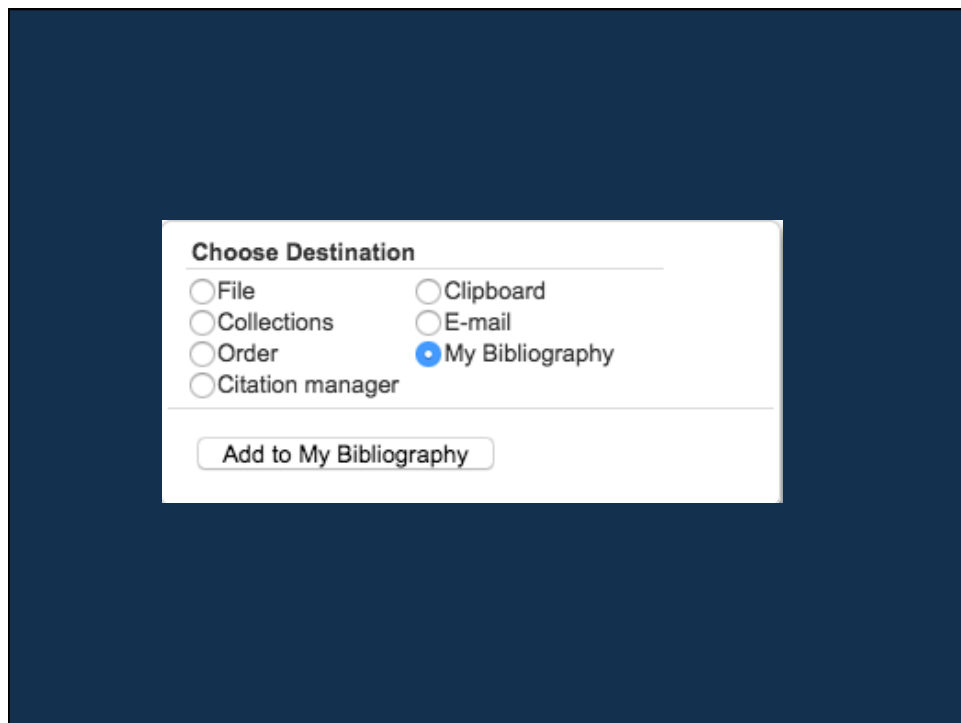
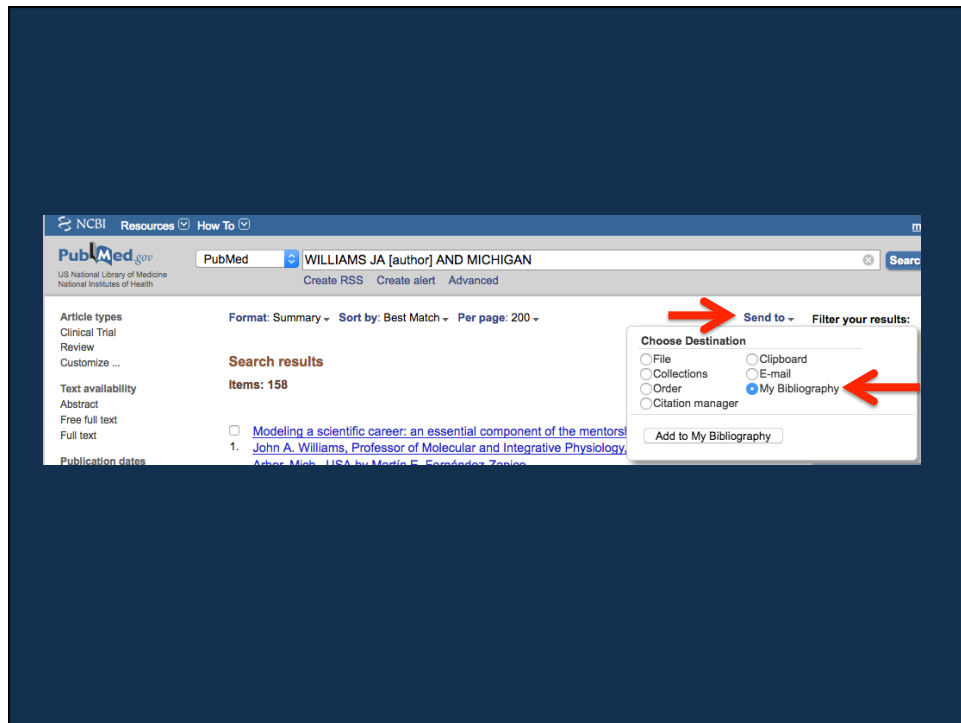
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Items: 158

☐ Modeling a scientific career: an essential component of the mentorship process. An interview with John A. Williams, Professor of Molecular and Integrative Physiology, University Of Michigan, Ann Arbor, Mich., USA by Martín E. Fernández-Zapico.
Williams JA.
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PMID: 15547562
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Williams JA.
Gastroenterology. 2013 Jun;144(6):1166-9. doi: 10.1053/j.gastro.2012.10.056. Review. No abstract available.
PMID: 23622125
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☐ Proteomics as a systems approach to pancreatitis.
Williams JA.
Pancreas. 2013 Aug;42(6):905-11. doi: 10.1097/MPA.0b013e31828fddc3. Review.



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- ☐ [Modeling a scientific career: an essential component of the mentorship process. An interview with](#)
1. [John A. Williams, Professor of Molecular and Integrative Physiology, University Of Michigan, Ann Arbor, Mich., USA by Martín E. Fernández-Zapico.](#)

Williams JA.

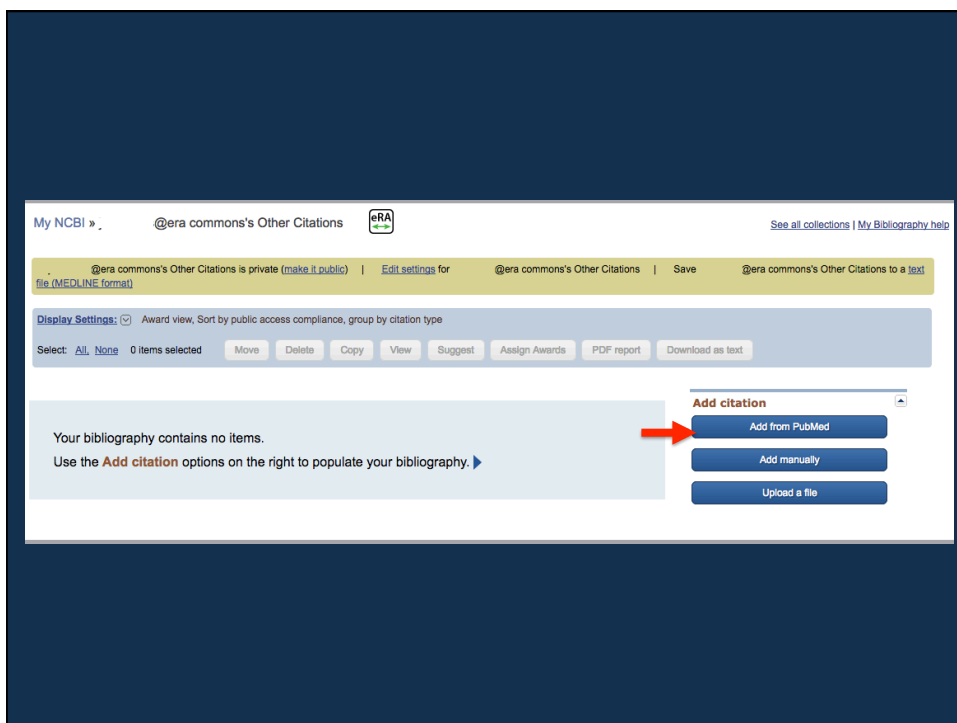
Pancreatology. 2010;10(1):1-3. doi: 10.1159/000231522. Epub 2010 Jan 26.

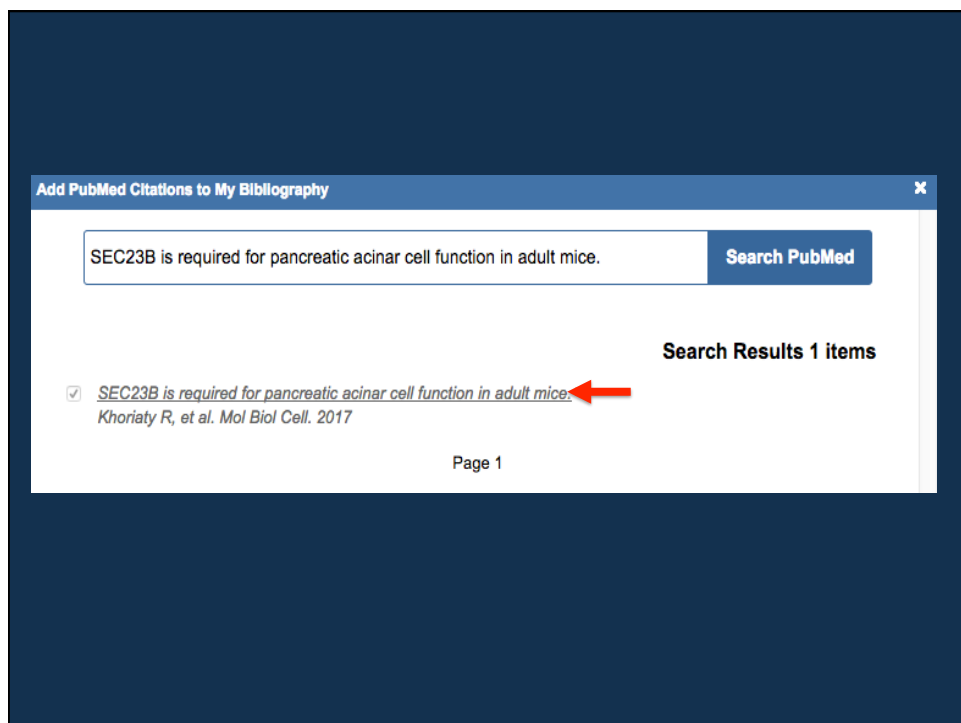
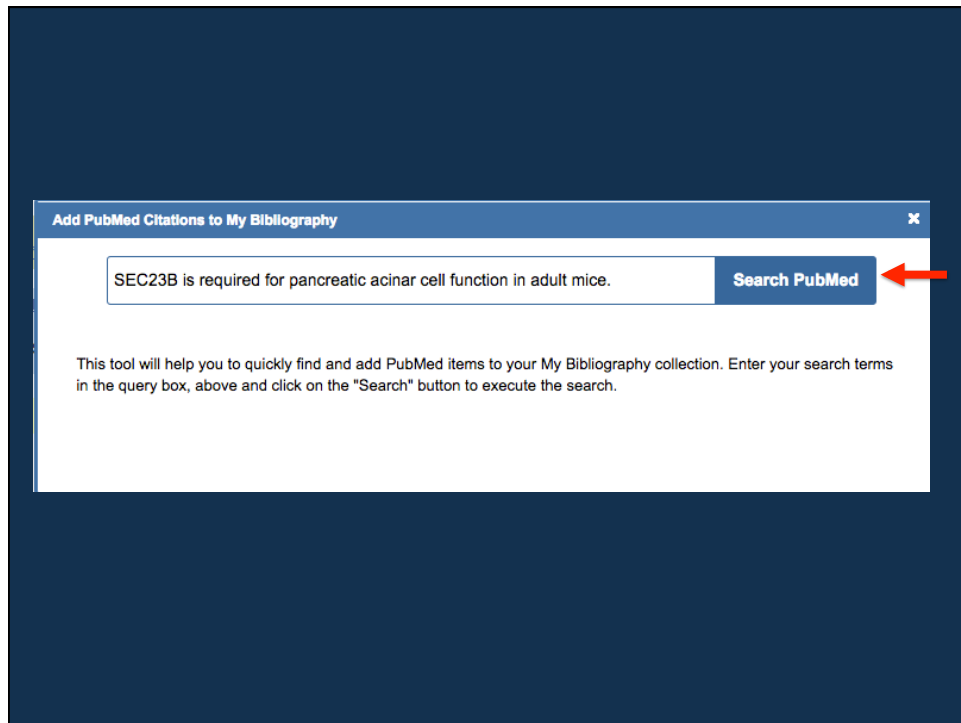
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[Mol Biol Cell](#), 2017 Jul 15;28(15):2146-2154. doi: 10.1091/mbc.E17-01-0001. Epub 2017 May 24.

SEC23B is required for pancreatic acinar cell function in adult mice.

[Khoriaty R](#)¹, [Vogel N](#)², [Hoenerhoff M](#)³, [Sans MD](#)², [Zhu G](#)⁴, [Everett L](#)⁵, [Nelson B](#)², [Durairaj H](#)², [McKnight B](#)⁶, [Zhang B](#)⁷, [Ernst SA](#)⁸, [Ginsburg D](#)^{9,4,10,11}, [Williams JA](#)^{9,2}.

41: ☐ Khoriaty R, Vogel N, Hoenenhoff MJ, Sans MD, Zhu G, Everett L, Nelson B, Durairaj H, McKnight B, Zhang B, Ernst SA, Ginsburg D, Williams JA. *SECC23B is required for pancreatic acinar cell function in adult mice*. Mol Biol Cell. 2017 Jul 15;28(15):2146-2154. doi: 10.1091/mbc.E17-01-0001. Epub 2017 May 24. PubMed PMID: 28539403, PubMed Central PMCID: PMC5509426.

NIH Public Access Compliance: Complete. PMCID

NIH Funding:

P01 HL057348 - Molecular Genetics of Coagulation in the Mouse; TRANSGENIC MODELS FOR THE STUDY OF HEMOSTASIS

R01 HL039693 - Molecular Genetic Studies of Vascular Disease

R35 HL135793 - The Molecular Genetics of Hemostasis

K08 HL128794 - The Evolution of the Mammalian Hemostatic System

Dyserythropoietic Anemia type II

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42: ☐ Burke WM, Williams JA, Fenner DE, Hammoud M, et al. *experience*. Am J Obstet Gynecol. 2004 Nov;191(5 Pt 2):1653-1658. PubMed PMID: 15531111.

NIH Public Access Compliance: Not applicable [E]

Funding: No funding has been associated with this citation.

43: ☐ Duan RD, Zheng CF, Guan KL, Williams JA. *Active site*. Am J Physiol. 1995 Jun;268(6 Pt 1):G1060-G1065. PubMed PMID: 7500000.

NIH Public Access Compliance: Not applicable [E]

Funding: No funding has been associated with this citation.

44: ☐ Tashiro M, Ernst SA, Edwards J, Williams JA. *Hypersecretion of insulin-induced acute pancreatitis in mice*. J Biol Chem. 2004 Nov 3;279(45):46500-46505. PubMed PMID: 15531111.

NIH Public Access Compliance: Not applicable [E]

Funding: No funding has been associated with this citation.

45: ☐ Wagner AC, Schäfer C, Williams JA. *Effects of chronic inflammation on pancreatic islet function*. Biochem Biophys Res Commun. 1992 Dec 30;189(2):1055-1059. PubMed PMID: 1320000.

NIH Public Access Compliance: Not applicable [E]

Funding: No funding has been associated with this citation.

46: ☐ Williams JA. *Intracellular signaling mechanisms in pancreatic acinar cells*. Annu Rev Physiol. 1994;56(4):191-9. Review. PubMed PMID: 8063000.

NIH Public Access Compliance: Not applicable [E]

Funding: No funding has been associated with this citation.

47: ☐ Wagner AC, Williams JA. *Pancreatic zymogen activation*. 1994;55(4):191-9. Review. PubMed PMID: 8063000.

NIH Public Access Compliance: Not applicable [E]

Funding: No funding has been associated with this citation.

48: ☐ Dabrowski A, Grady T, Logsdon CD, Williams JA. *and in vivo*. J Biol Chem. 1996 Mar 8;271(10):566-570. PubMed PMID: 8630000.

NIH Public Access Compliance: Not applicable [E]

Funding: No funding has been associated with this citation.

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Use the checkboxes to assign awards to the selected citations:

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☐ R01 DK041122 - CALCIUM AND PANCREATIC STIMULUS-SECRETION COUPLING: CALCIUM AND PANCREATIC STIMULUS SECRETION COUPLING

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☐ R01 DK059578 - Dietary Regulation of Pancreatic Digestive Enzymes

☒ R37 DK041122 - Calcium and Pancreatic Stimulus-Secretion Coupling

☐ T32 GM008322 - Systems and Integrative Biology Training Grant; SYSTEMS AND INTEGRATIVE BIOLOGY

Other awards:

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☐ DP3 DK094292 - Tissue-Specific Metabolic Reprogramming in Diabetic Complications

☐ F31 AR065931 - Fatty Macrophage Regulation of Atrophy and Inflammation in Rotator Cuff Tears

☐ F31 NS056575 - SH2-B Regulation of Hypothalamic AgRP/NPY Neurons

☐ F32 DK091976 - Role of CD40 in Obesity-Induced Adipose Tissue Inflammation & Insulin Resistance

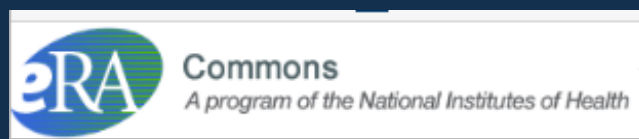
☐ F32 DK093349 - Notch Regulation of Gastric Antral Stem Cells

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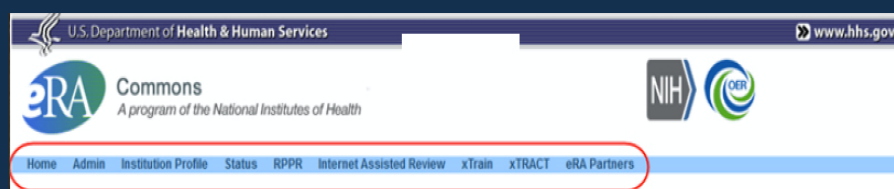
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Logging into Commons and clicking RPPR initiates the progress report and reveals the list of the various parts of the RPPR that must be completed.

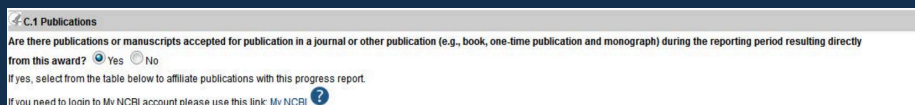


RPPR Section C.1-Products

- In this section all publications reporting research funded by an NIH Grant are reported.
- The publications listed here come from the Grantee's My Bibliography that has been linked to Commons.
- Publications that fall under the NIH Public Access Policy and are non-compliant still must be reported and have 10 days to get into compliance.
- It is advised that getting these non-compliance publications into compliance be done as soon as possible to ensure that the award is renewed in a timely manner.

HOW TO REPORT PRODUCTS/PUBLICATIONS

- If there are no publications to report select No.
- If there are publications to report select Yes.



The screenshot shows the 'C.1 Publications' section of a form. It asks, 'Are there publications or manuscripts accepted for publication in a journal or other publication (e.g., book, one-time publication and monograph) during the reporting period resulting directly from this award?'. There are two radio buttons: 'Yes' (selected) and 'No'. Below this, it says, 'If yes, select from the table below to affiliate publications with this progress report.' At the bottom, it says, 'If you need to login to My NCBI account please use this link: [My NCBI](#)' with a help icon.

- If Yes is selected three tables will open.

THE TABLES

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<input checked="" type="checkbox"/>	Not Applicable Not Peer Reviewed	Smith J, Doe J. Process of Abstracting Simple Notes for Cancer Research. 2011 Jan 31; 123(4): 56-78. PMID: PMC1234567.
<input checked="" type="checkbox"/>	In Progress	Hennessey S, Bilker WB, Leonard CE, Chittams J, Palumbo CM, Karwesh JH, Yang YX, Lautenbach E, Baine WB, Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity measures. J Clin Epidemiol. 2007 Sep; 60(9): 911-8. PMID: 11603907. PMID: PMC2042508.
<input checked="" type="checkbox"/>	Non-Compliant	Merriam NA, Puri ME, Metz DC, Yang YX. Hip fracture risk in patients with a diagnosis of pernicious anaemia. Gastroenterology. 2010 Apr; 138(4): 1330-7. PMID: 20020065. PMID: PMC2954457.

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<input type="checkbox"/>	Not Applicable Not Peer Reviewed	Smith J, Doe J. Process of Abstracting Simple Notes for Cancer Research. 2011 Jan 31; 123(4): 56-78. PMID: PMC1234567.
<input type="checkbox"/>	In Progress	Hennessey S, Bilker WB, Leonard CE, Chittams J, Palumbo CM, Karwesh JH, Yang YX, Lautenbach E, Baine WB, Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity measures. J Clin Epidemiol. 2007 Sep; 60(9): 911-8. PMID: 11603907. PMID: PMC2042508.
<input type="checkbox"/>	Non-Compliant	Merriam NA, Puri ME, Metz DC, Yang YX. Hip fracture risk in patients with a diagnosis of pernicious anaemia. Gastroenterology. 2010 Apr; 138(4): 1330-7. PMID: 20020065. PMID: PMC2954457.

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NIH Public Access Compliance	Citation	
Complete	Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity.	
Not Applicable Not Peer Reviewed	Smith J, Doe J. Process of Abstracting Simple Notes for Cancer Research. 2011 Jan 31; 123(4): 56-78. PMID: PMC1234567.	
In Progress	Hennessey S, Bilker WB, Leonard CE, Chittams J, Palumbo CM, Karwesh JH, Yang YX, Lautenbach E, Baine WB, Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity measures. J Clin Epidemiol. 2007 Sep; 60(9): 911-8. PMID: 11603907. PMID: PMC2042508.	

Publications on prior RPPRS

THE TABLES AND MY BIBLIOGRAPHY

- The tables in the RPPR Products draw information from the Grantees My Bibliography in the My NCBI account.
- The publication data in these tables is dynamic until the progress report is submitted to the agency.
- Any change to the data occurring in PubMed, PubMed Central, the Grantees My Bibliography account, or in the compliance status of a publication, will refresh upon saving the C.1 Products section, or opening the RPPR in another session.
- When the progress report is submitted to the agency, the publication data is frozen in the progress report.

RESPONDING TO NON-COMPLIANCE NOTIFICATIONS

- The grantee must respond to this non-compliance notification.
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- “NIH will not process RPPRs until all papers arising from the award are compliant with the public access policy. That means funding for awards with non-compliant RPPRs could be delayed. The NIH manuscript submission system (NIHMS) is processing papers in about 3 weeks. We encourage you to ensure compliance well before your RPPR is due to avoid delays processing your RPPR and receiving funding.” *Posted on September 27, 2017*

QUESTIONS?