NIH Public Access; Everything You Need To Know

Rosenzweig, Merle

http://hdl.handle.net/2027.42/167194

Downloaded from Deep Blue, University of Michigan’s institutional repository
EVERYTHING YOU NEED TO KNOW
About the policy

• Mandated in April, 7 2008.
  https://publicaccess.nih.gov/policy.htm

• Publications reporting research funded by NIH grants made freely available in PubMed Central (PMC) no later than twelve months after the final, published version appears in print and or online.

• PubMed Central (PMC), the online, open access, digital library of the National Institutes of Health’s National Library of Medicine.

• NIH will delay processing of an award or a Progress Report (RPR) if compliance if not met.
What does the Policy apply to?

• **Does not** apply to:
  - Articles reporting on research funded by agencies other than NIH.
  - Review articles, books, book chapters, meeting abstracts, or dissertations.
• Does apply to all peer-reviewed* journal articles reporting on research funded by NIH grant(s).

*Articles reviewed by experts before it is published.
Four methods of submitting publications to PubMed Central

• Method A, submission is automatic.
• Method B, submission is by request.
• Method C, submission is done manually.
• Method D, submission is assisted.
Method A

- Journal deposits *final published* article into PubMed Central *without grantee author, or delegate involvement*.
- The article is made available no later than 12 months after publication.
- List of these journals

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](https://publicaccess.nih.gov/select_deposit_publishers.htm).
Method C

- Grantee, author, or delegate deposits final, peer-reviewed manuscript into PubMed Central via the NIH Manuscript Submission System (NIHMS).

- If other submission methods do not apply, this is the method that must be followed for compliance.
Method D

- Publishers have volunteered to deposit a final, peer-reviewed when they determine that it falls under the NIH Public Access Policy.

- Grantees are responsible for ensuring that the manuscript is deposited upon acceptance for publication.

- The person assigned as a reviewer of the deposit must complete all remaining in order for the submission to be in compliance.

- A list of these publishers can be found at https://publicaccess.nih.gov/Method D Publisher.
Depositing into 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 cannot & can be deposited

• **Cannot:**
  > Final .PDF version of the published article.
  > Page/galley proofs.
  > Both of the above versions fall under copyright.

• **Can:**
  > The final, peer-reviewed manuscript.
  > All the figures, tables, and supplemental materials.
  > Both of the above versions fall under copyright.
Mini-review

AXIN1 and AXIN2 variants in gastrointestinal cancers

Serina M. Mazzoni 1, Eric R. Fearon 2,3,4,*
1 Department of Human Genetics, University of Michigan Medical School, 109 Zina Pitcher Place, Ann Arbor, MI 48109-2200, USA
2 Department of Internal Medicine, University of Michigan Medical School, 109 Zina Pitcher Place, Ann Arbor, MI 48109-2200, USA
3 Department of Pathology, University of Michigan Medical School, 109 Zina Pitcher Place, Ann Arbor, MI 48109-2200, USA

A R T I C L E  I N F O
Article history:
Received 10 July 2014
Received in revised form 8 September 2014
Accepted 10 September 2014
Keywords:
Wnt signaling
β-catenin
Colon cancer
Hepatocellular carcinoma
Gastric cancer

A B S T R A C T
Mutations in the APC (adenomatous polyposis coli) gene, which encodes a multi-functional protein with a well-defined role in the canonical Wnt pathway, underlie familial adenomatous polyposis, a rare, inherited form of colorectal cancer (CRC) and contribute to the majority of sporadic CRCs. However, not all sporadic and familial CRCs can be explained by mutations in APC or other genes with well-established roles in CRC. The AXIN1 and AXIN2 proteins function in the canonical Wnt pathway, and AXIN1/2 alterations have been proposed as key defects in some cancers. Here, we review AXIN1 and AXIN2 sequence alterations reported in gastrointestinal cancers, with the goal of vetting the evidence that some of the variants may have key functional roles in cancer development.

© 2014 Published by Elsevier Ireland Ltd.

Introduction
Somatic mutations in genes functioning in the canonical, or β-catenin-dependent, Wnt pathway are found in approximately 90% of colorectal cancers (CRCs) [11]. These mutations contribute to CRC development by stabilizing the “free” signaling pool of β-catenin via disruption of the “β-catenin destruction complex”, which includes the APC (adenomatous polyposis coli) [2–4], AXIN1 [5–7], AXIN2 [8,9], and GSK3β [10,11]. The most common destruction complex defects in CRC are loss of function mutations in the APC tumor suppressor gene, although a subset of CRCs have C7N818 mutations encoding a mutant β-catenin protein that is likely resistant to regulation by the destruction complex [12,13]. While APC is the most frequently mutated Wnt pathway tumor suppressor gene, both germline and somatic mutations in the AXIN1 or AXIN2 genes have been identified in a subset of CRCs and in several other cancer types. Since the first reports of AXIN1/2 mutations in cancer, other studies have been completed and AXIN1/2 sequence polymorphisms in the general population have been better defined. The purpose of this review is to offer a comprehensive update of the reported AXIN1/2 sequence alterations in cancer and in the time of some prior publications, germline sequence variation in control populations has been described in more detail [14]. In-depth evaluation of previously reported and recently reported AXIN1/2 mutations with reference to consistently annotated AXIN1/2 amino acid sequences and the current list of known polymorphisms will lead to a better understanding of which AXIN1/2 sequence variants may confer functional consequences for cancer development. While this review specifically addresses AXIN1/2 mutations in gastrointestinal (GI) cancers, a comprehensive table of AXIN1/2 sequence alterations reported in non-GI cancers is shown in Appendix: Supplementary Table S1.

The Wnt/β-catenin pathway
The canonical Wnt pathway regulates cell fate during development and cellular homeostasis in adult tissues, and Wnt pathway dysregulation is seen in many cancer types (reviewed in Anastas and Moon) [15]. The canonical Wnt pathway transmits extracellular Wnt signals to the nucleus via effects on β-catenin levels and localization [16]. In the absence of an activating Wnt ligand, a protein complex assembles to phosphorylate β-catenin at multiple residues in its amino-terminal domain [12,13,17,18]. The phosphorylated β-catenin is then recognized by a ubiquitin ligation protein complex and subsequently targeted for degradation by the proteasome [19]. The APC, AXIN1, and AXIN2 proteins are thought to function in the assembly of a β-catenin destruction complex. When an activating Wnt ligand is present, the destruction complex is inhibited and the free, signaling pool of β-catenin can translocate to the nucleus, where β-catenin binds to TCF/LEF transcription factors to modulate the expression of target genes [16,20–22].
Depositing Checklist:

• Name of the journal manuscript will be published in.
• Manuscript title.
• Grant number(s).
• All manuscript files—text, figures, tables, supplemental material and data if that applies.
• The embargo* period begins when the article is officially published and ends up to 12 months later.

* 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.
When can deposit be made?

• Once the journal acknowledges the manuscript is accepted for publication.
• Remember 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.
Depositing into the NIH Manuscript Submission System (NIHMS) involves multiple steps.

1. Deposit Files
   - Anyone can submit; however, an author or PI should serve as the Reviewer. Reviewers are notified of submissions via email.

2. NIHMS Conversion
   - NIHMS converts complete deposits to PMC-ready documents and notifies the Reviewer via email when they are available.

3. Initial Approval
   - The Reviewer associates funding and approves the material for processing.

4. Final Approval
   - Reviewer requests corrections to or approves PMC-ready documents for inclusion in PMC.

5. PMCID Assigned
   - A PMCID is assigned when Final Approval is complete and the manuscript is matched to a PubMed record.

6. Available in PMC
   - Manuscript is made available in PMC following the publisher-required embargo period (if applicable).

This image indicates at what point the deposited manuscript is within NIHMS.
Deep Dive into Method C

• Deposit of the final, peer-reviewed manuscript into PubMed Central is done via the National Institutes Manuscript Submission System (NIHMS).

• Can be done by the grantee, the author of the publication, or an individual acting as a proxy acting assigned to make the deposit.
Depositing into NIHMS
Login to NIHMS

- [https://www.nihms.nih.gov/login/?next=/submission/](https://www.nihms.nih.gov/login/?next=/submission/)
- Use the credentials that apply to you.
Once logged in you will be able to begin the process of submitting a manuscript by clicking on *Submit New Manuscript*. 

<table>
<thead>
<tr>
<th>Needs Your Attention</th>
<th>NIHMSID</th>
<th>Title</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>In Process</td>
<td>0</td>
<td></td>
<td>No manuscripts found</td>
</tr>
<tr>
<td>Available to Claim</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Awaiting Citation Data</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under Embargo</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Available in PMC</td>
<td>0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The first step is to enter the title of the manuscript and the journal publishing it.
The next step is to assign the NIH grant that funded the research reported.

Enter the grant number if you have it or the grantee who was awarded it.

The window will open with all the grant information that will be assigned to the deposit. Check the box and click the Add(1)
Upload file window will appear with instructions on what needs to be uploaded:

- The manuscript—as a word doc, reach text format (rtf), or convert either into a PDF.
- All files that make up the publication:
  - Figures
  - Tables
  - Video
  - Supplemental material
Uploading each file in one of two ways:

1. Click on *Browse on your computer* to navigate to the file to upload it or,
2. Drag and drop the file in the designated place.
Each of the files must be labeled appropriately:
Manuscript
Figure 1, Figure 2, etc.
Table 1, Figure 2, etc.
Video 2, Video 2, etc.
Supplementary Material 1, Supplementary Material 2, etc.
After all the files are loaded and labeled, check **By checking this box I certify**... and click **Next**.
On the next screen:

• Enter the name of who will Review and approve the deposit and set the *Release Delay (Embargo)*.

“The *embargo* is the time period, in months, that the publisher retains exclusive rights to distribute the article. The full text of an article will not be made available in PMC, even if the PMC-ready documents have been approved by the Reviewer, until after the embargo has ended. Assignment of a PMCID is not dependent on the embargo.”

The reviewer should be either the author of the work or the P.I. Whose grant has been assigned to the deposit.
On the next screen:

- Enter the name of who will Review and approve the deposit and
- Set the Release Delay (Embargo).
- Remember “The embargo is the time period, in months, that the publisher retains exclusive rights to distribute the article. The full text of an article will not be made available in PMC, even if the PMC-ready documents have been approved by the Reviewer, until after the embargo has ended. Assignment of a PMCID is not dependent on the embargo.”
- The reviewer should be either the author of the work or the P.I. whose grant has been assigned to the deposit.
After all aspects of the deposit are complete, a Submission Statement appears. Clicking on Agree moves the deposit onto the next step in compliance.

**Submission Statement**

**Manuscript Title:**

**Journal Title:**

**Funding:**

**Files:** 1 manuscript, 4 figures

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 **6 months** 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 website; 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 the National Institutes of Health.
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—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/.
Tracking compliance in My Bibliography
What is My Bibliography in My NCBI?

• An application to be used by NIH Grantees for managing publications or products that need to comply with the NIH Public Access Policy.
• Accessed by signing into National Center of Biotechnology Information (NCBI).
• If you do not have a My NCBI account, you can register for one and it is “free”.
• The publications and/or products entered into My Bibliography will show compliance status and the NIH Grant(s) that supports it.
• My Bibliography must be linked to the Grantees eRA Commons.
• This linking enables the Grantee and/or their delegate, when preparing a grant application, grant renewal, or a Research Performance Progress Report (RPPR) to have access to the publications to be cited.
Registering for a My NCBI account

• Click on Sign in to NCBI in the upper right corner of the screen.
• You have options to sign in or register for an account.
Important Changes to NCBI Accounts Coming in 2021

https://ncbiinsights.ncbi.nlm.nih.gov/2021/01/05/important-changes-ncbi-accounts-2021/
My Bibliography and 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.
Assigning 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.
From myncbi@ncbi.nlm.nih.gov

Subject [MyNCBI] Delegation request from merlez

To:...

Dear merlez,

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

The My NCBI user: merlez 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 merlez. 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=mN3O45s54c17id36delegate0f=

If you believe you have received this message in error, you may simply ignore it or contact the requestor 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

Delegation acceptance confirmed

You have accepted the connection with merlez.

Back to My NCBI Home Page
My Bibliography Version 3.0

• Released in 2019 and is a redesigned interface
• Displaying options at the top of the page to manage citations, add citations, search citations, sort citations.
• Also, there is a unique URL allowing for the sharing of the citations in the Bibliography or making it private.
The numbers on the banner at the top of the window indicate the number of citations in the Bibliography and their compliance status. Clicking on each will sort those citations according to the compliance status.
Publications in My Bibliography are color coded to indicate compliance.
Green indicates compliant and have a PubMed Central article ID (PCID).

Those coded in green are NIHPAP compliant and have a PubMed Central article ID (PMCID).


Click on 5 Awards allows you to see the NIH grant(s) associate with the publication.
Publications color-coded in red are either non-compliant or not defined.

Non-compliant articles may have award(s) associated to them by clicking on Add Award, but the manuscripts have not been submitted to the NIH Manuscript Submission (NIHMS) system. By clicking Edit Status the compliance process can be started.

Not defined publications do not have awards associated with them and need to be identified as supported by NIH grants by clicking Edit Status to confirm that they are partly or wholly supported by NIH grants and funding information can be added by clicking the Add award.
Publications in blue that have recently been submitted to NIHMS are considered in process and display the color coded in blue and display the NIHMS ID number.

Another blue color-coding option would be that the journal deposits the final, published version of the publication and the tag is PMC Journal-In-Process.
Publications not funded by NIH grants or were accepted for publication prior to April 7, 2008 are color-coded in gray and marked Not Applicable-Exempted.

eRA Commons is a set of web tools that are used for the administrative activities of NIH Grants.
Public Access Policy & eRA Commons

- If you cite a paper that falls under the Policy in an NIH grant application or progress report (Research Performance Progress Report RPPR), even if you are not an author, you must include a PMCID.
- Progress reports (RRRR) document grantee accomplishments and compliance with terms of an NIH award.
- RPPRs can be done by the Grantee, a delegate assigned by the Grantee, or a signing official who has “institutional authority to legally bind the institution in grants administration matter.
- The “institutional authority” is the Office of Research and Special Projects (ORSP).
Research Performance Progress Report RPPR

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 aka publications

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

- If Yes is selected three tables will open.
### The tables

#### Publications not previously reported which are associated with the grant

<table>
<thead>
<tr>
<th>Associate with this RPPR</th>
<th>NIH Public Access Compliance</th>
<th>Citation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete</td>
<td>Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity</td>
<td></td>
</tr>
</tbody>
</table>

#### Publications not yet associated with award

<table>
<thead>
<tr>
<th>Associate with this RPPR</th>
<th>NIH Public Access Compliance</th>
<th>Citation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete</td>
<td>Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity</td>
<td></td>
</tr>
</tbody>
</table>

#### Publications on prior RPPRS

<table>
<thead>
<tr>
<th>NIH Public Access Compliance</th>
<th>Citation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete</td>
<td>Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity</td>
</tr>
</tbody>
</table>
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 a non-compliance notification.
- “NIH can accept anything other than compliance with the policy only in the rarest of circumstances, such as a death of the sole author.”
- “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
Access the NIH Public Access Policy canvas tool for an in depth understanding of everything covered in the workshop.

https://umich.instructure.com/courses/257336