Liu/Dunn Health Instrument Scoring Package Development

Potential NIH Study Sections of Interest

HEALTHCARE DELIVERY AND METHODOLOGIES IRG (HDM)

1. BIOSTATISTICAL METHODS AND RESEARCH DESIGN STUDY SECTION (BMRD)

The Biostatistical Methods and Research Design (BMRD) Study Section reviews applications that seek to advance statistical and mathematical techniques and technologies applicable to the design and analysis of data from biomedical, behavioral, and social science research. Emphasis is on the promotion of quantitative methods to aid in the design, analysis, and interpretation of clinical, genomic, and population based research studies. This includes analytic software development, novel applications, and secondary data analyses utilizing existing database resources.

Specific areas covered by BMRD:

> High dimensional data methods such as those arising from genomic technologies, proteomics, sequencing, and imaging studies; development and applications of methods for data mining and statistical machine learning; statistical methods for high throughput data; biomarker identification
> Novel analyses of existing datasets: Innovative application of existing or development of new statistical and computational methodologies; application of methods in substantially new areas of application; innovative, non-routine data analysis strategies including combinations of existing methods rather than de novo development of new methods; development and evaluation of novel analytic tools to address new questions within existing data sets
> Research design: development and innovative application of randomized trial designs; sample size determination; design issues for experimental and observational studies; methods to improve study design efficiencies; methods for survey sample design; methods for comparative effectiveness studies
> Data collection and measurement: development and adaption of methods to estimate and improve data precision, reliability, and validity; methods to estimate and adjust for bias, measurement error, confounding, sampling and non-sampling error; psychometric methods
> Data analysis and modeling: development of statistical theory, analytic methods and models, computational tools, and algorithms for the analysis and interpretation of data from clinical studies, randomized trials, observational studies, epidemiological studies, human genetic association studies, environmental studies, complex surveys, large databases, and registries; methods to handle data features and anomalies such as correlation, clustering, and missing data; risk prediction and forecasting methods; causal modeling

2. BIODATA MANAGEMENT AND ANALYSIS STUDY SECTION (BDMA)

The Biodata Management and Analysis (BDMA) study section reviews grant applications concerned with developing technologies for the management and analysis of biological data. This includes the review of bioinformatics and computational biology applications addressing

?? 4. DISSEMINATION AND IMPLEMENTATION RESEARCH IN HEALTH STUDY SECTION (DIRH)

The Dissemination and Implementation Research in Health (DIRH) Study Section reviews applications intending to bridge gaps between public health, clinical research, and everyday practice by building a scientific knowledge base about mechanisms whereby health information, interventions, and scientifically based clinical practices are adopted in public health and healthcare service use in a variety of settings. The focus of the studies reviewed is on the transmission and implementation of knowledge from scientific discovery to transform healthcare delivery, improve health outcomes, and manage acute and chronic illness.

Specific areas covered by DIRH:
   Studies of the organization, adoption, and integration of efforts to implement clinical interventions of demonstrated efficacy into practice for health care providers, patients, organizations, and communities.
   Testing of strategies to translate evidence-based practices into healthcare delivery to improve healthcare processes and outcomes.
   Approaches to identifying, understanding, and overcoming barriers to the adoption of evidence-based interventions that previous efficacy or effectiveness research has shown to be effective.
   Development of outcome measures and methodologies for dissemination and implementation of approaches that accurately assess the success of an approach to move evidence into practice

?? 5. HEALTH SERVICES ORGANIZATION AND DELIVERY STUDY SECTION (HSOD)

The Health Services Organization and Delivery (HSOD) Study Section reviews health services research studies that include multidisciplinary investigations of the predictors, processes and outcomes of health services, including availability, access and acceptability; organization; decision science; delivery, utilization, and quality of care; and costs, cost-effectiveness and financing of health care. Health services include inpatient, outpatient, sub-acute, acute, community-based, rehabilitative and long-term care.

Specific areas covered by HSOD include:
   Community, provider, economic, technological, and management resources and support, including studies of supply and area market behaviors; health care provider characteristics; health insurance, reimbursement, and financing mechanisms; health care management technology and assessment of emerging technology in the delivery of health care; health care delivery system characteristics; access to health care; cost of health care; analysis of claims data.
   Health needs and health services utilization; studies of severity of illness; comorbidity; risk prediction and risk adjustment; psychosocial and economic factors related to health care; and adherence to health care recommendations.
   Healthcare organizations, programs, and delivery of services; including those delivered in non-traditional settings; integrated care delivery systems; disease management and modeling; measures of quality of care and quality of life; characteristics of the organization and patient outcomes; organizational performance and efficiency; cost-benefit analysis; economics of health care and pharmacoeconomics.
   Healthcare quality, effectiveness, and outcomes; clinical practice guidelines; treatment and prevention outcomes; patient and provider satisfaction; health status and outcomes assessment; evidence-based practice; medical decision-making; development of clinical prediction rules.

Moon Hub Meeting
September 24, 2010
Lookout Conference Room; 11am-12pm

1) How do you want to devise the drop-down menu (in Access/Tracker)?
        -Make "Scope" more detailed
        -The additional surgery variables are always coming from an access database. We would like to
put them back in for future usage.

-Change drop down menu? OR, Create a coding table?
        -Coding table: Easier to change. List all options, you can add more later

-Should we do this process in 2 different steps?
        a) Make the table, KEEP SCOPE
        B) change/add scope options
-Carolyn will change all scope to new titles (scope-x, scope-y, etc) and THEN we can get rid of "Scope."
Because if we get rid of it now, it will show errors

Dr. Dunn and Carolyn will need to come up with list
        ➔ Then Zhouwen will make changes
        ➔ Then Carolyn will make necessary conversion/changes
        ➔ Then go to Access, move to database, and get rid of general "Scope"
**Give Carolyn a printout with ID, study number, side, names, surgery date, and blank spaces for her to
fill in.

2) Abstract deadline for AOSSM = November 15th.
        -Award submission deadline is November 1st

SF36?
Failure (Kurt wants to include 6-yr follow-up)?
Sports Outcomes?
 Or what?

**Get papers out that link physical measures to outcomes! **

-Package Name: HRQoL

--Suzette: doing a pre-cleaning, working with Erik to find discrepancies
--Zhouwen: is working on the scoring; He is editing SF60 documentation