

Amendment #1 to RFP-NIHAI2008044
Inner City Asthma Consortium

This amendment provides questions submitted by potential applicants/offerors and the responses provided by NIAID. The responses are offered for information only and do not modify or become part of this solicitation. This Amendment will be updated as needed to add further questions and their related responses. All potential offerors are advised to refer back to this Amendment # 1 for additional Questions & Answers.

Amendment to Solicitation No.:	NIH-AI2008044
Amendment No.:	1 (1 st posting)
Issue Date:	November 18, 2008
Effective Date:	November 18, 2008
Proposal Due Date:	January 23, 2009, at 5:00 P.M. local time
Issued By:	David T. Lisle Contracting Officer NIH/NIAID Office of Acquisitions 6700 B Rockledge Drive Room 3112 Bethesda, Maryland 20892-7612
Point of Contact:	Brandon de White, Contract Specialist whitebra@niaid.nih.gov
Name and Address of Offeror:	To All Potential Offerors

The above numbered solicitation is amended as set forth below. The hour and date specified for receipt of proposals **HAS NOT** been extended. Offerors must acknowledge receipt of this amendment. Failure to receive your acknowledgement of this amendment may result in the rejection of your offer.

Please note the change of Point of Contact above, from Contract Specialist Robert W. Kolpos, to Brandon de White, Contract Specialist.

Question 1: When we select the eight clinical study sites, do we need to assume that the four existing URECA sites are four of these eight for the new ICAC initiatives? Or, can we move forward with eight new sites?

Response to Question 1: The four existing URECA sites do not count toward the eight clinical study sites if they only participate in the URECA study. Those participating in a non-URECA study must be counted as a clinical study site.

Question 2: Can we assume that the amount of FTE's/dollars to complete URECA is not included in the 67.8 FTE's per year?

Response to Question 2: The estimate of effort provided in the RFP is for completion of all contract requirements.

Question 3: There are four sites that are part of URECA. Are these sites considered clinical study sites?

Response to Question 3: Please refer to question 1.

Question 4: In the design and execution of the new longitudinal birth cohort will the site or sites doing this work be considered a clinical study site?

Response to Question 4: Any site(s) involved in a new longitudinal birth cohort will be considered a clinical study site.

Question 5: In the design and execution of mechanistic sites (point 6, page 4, attachment 3), do these sites need to be part of a clinical study or can they be an independent site?

Response to Question 5: No, the two mechanistic sites are not clinical study sites; they are independent sites and will not conduct the clinical aspects of the mechanistic studies.

Question 6: In the conduct of the cross-sectional phenotyping studies, do these sites need to be part of the clinical study site or can they be an independent site?

Response to Question 6: The cross-sectional phenotyping studies will be done only at the clinical study sites.

Question 7: In establishing the two basic science sites, can animal studies be a component of studies conducted along with the required human studies?

Response to Question 7: Animal studies will not be a component of the basic science sites.

Question 8: Please explain the request for a “name and official responsible for all information security.” I am not sure who this person should be or can the individual be part of the Data Coordinating Center?

Response to Question 8: The selection of the official responsible for information security is at the discretion of the offeror.