Exhibit R-2, RDT&E Budget Item Justification: PB 2015 Defense Advanced Research Projects Agency

Appropriation/Budget Activity R-1 Program E

0400: Research, Development, Test & Evaluation, Defense-Wide I BA 2:

Applied Research

R-1 Program Element (Number/Name)

PE 0602115E I BIOMEDICAL TECHNOLOGY

Date: March 2014

COST (\$ in Millions)	Prior Years	FY 2013	FY 2014	FY 2015 Base	FY 2015 OCO <sup>#</sup>	FY 2015 Total	FY 2016	FY 2017	FY 2018	FY 2019	Cost To Complete	Total Cost
Total Program Element	-	98.097	114.790	112.242	-	112.242	100.603	113.059	117.160	120.594	-	-
BT-01: BIOMEDICAL TECHNOLOGY	-	98.097	114.790	112.242	-	112.242	100.603	113.059	117.160	120.594	-	-

<sup>&</sup>lt;sup>#</sup> The FY 2015 OCO Request will be submitted at a later date.

#### A. Mission Description and Budget Item Justification

This Program Element is budgeted in the applied research budget activity because it focuses on medical related technology, information, processes, materials, systems, and devices encompassing a broad spectrum of DoD challenges. Bio-warfare defense includes the capability to predict and deflect evolution of natural and engineered emerging pathogen threats, and therapeutics that increase survivability within days of receipt of an unknown pathogen. Continued understanding of infection biomarkers will lead to development of detection devices that can be self-administered and provide a faster ability to diagnose and prevent widespread infection in-theater. Other battlefield technologies include a soldier-portable hemostatic wound treatment system, capability to manufacture field-relevant pharmaceuticals in theater, and a rapid after-action review of field events as a diagnostic tool for improving the delivery of medical care and medical personnel protection. Improved medical imaging will be approached through new physical properties of cellular metabolic activities. New neural interface technologies will reliably extract information from the nervous system to enable control of the best robotic prosthetic-limb technology. To allow medical practitioners the capability to visualize and comprehend the complex relationships across patient data in the electronic medical record systems, technologies will be developed to assimilate and analyze large amounts of data and provide tools to make better-informed decisions for patient care. In the area of medical training, new simulation-based tools will rapidly teach increased competency in an open and scalable architecture to be used by all levels of medical personnel for basic and advanced training. Advanced information-based techniques will be developed to supplement warfighter healthcare and the diagnosis of post-traumatic stress disorder (PTSD) and mild traumatic brain injury (mTBI). This project will also pursue applied research efforts for dialysis-like therapeutics.

B. Program Change Summary (\$ in Millions)	FY 2013	FY 2014	FY 2015 Base	FY 2015 OCO	FY 2015 Total
Previous President's Budget	110.900	114.790	123.742	-	123.742
Current President's Budget	98.097	114.790	112.242	-	112.242
Total Adjustments	-12.803	-	-11.500	-	-11.500
Congressional General Reductions	-0.140	-			
<ul> <li>Congressional Directed Reductions</li> </ul>	-14.288	-			
<ul> <li>Congressional Rescissions</li> </ul>	-	-			
<ul> <li>Congressional Adds</li> </ul>	-	-			
<ul> <li>Congressional Directed Transfers</li> </ul>	-	-			
Reprogrammings	4.343	-			
SBIR/STTR Transfer	-2.718	-			
TotalOtherAdjustments	-	-	-11.500	-	-11.500

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#### **Change Summary Explanation**

FY 2013: Decrease reflects Congressional reductions for Sections 3001 & 3004, sequestration adjustments, and the SBIR/STTR transfer offset by reprogrammings.

FY 2015: Decrease reflects the end of the Revolutionizing Prosthetics program.

C. Accomplishments/Planned Programs (\$ in Millions)	FY 2013	FY 2014	FY 2015
Title: Autonomous Diagnostics to Enable Prevention and Therapeutics (ADEPT)	12.175	28.852	23.550
<b>Description:</b> The overarching goal of the Autonomous Diagnostics to Enable Prevention and Therapeutics (ADEPT) program is to increase our ability to rapidly respond to a disease or threat and improve individual readiness and total force health protection by providing centralized laboratory capabilities at non-tertiary care settings. ADEPT will focus on the development of Ribonucleic Acid (RNA)-based vaccines, potentially eliminating the time and labor required for traditional manufacture of a vaccine while at the same time improving efficacy. Additionally, ADEPT will develop methods to transiently deliver nucleic acids for vaccines and therapeutics, and kinetically control the timing and levels of gene expression so that these drugs will be safe and effective for use in healthy subjects. ADEPT will also focus on advanced development of key elements for simple-to-operate diagnostic devices. A companion basic research effort is budgeted in PE 0601117E, Project MED-01.			
<ul> <li>FY 2013 Accomplishments:</li> <li>Demonstrated increased humoral and cellular responses with RNA-based vaccines as compared to benchmark vaccines in vivo.</li> <li>Demonstrated increased efficacy of RNA-based vaccines in vivo in small and large animal models.</li> <li>Developed device components (sample preparation and detection components) to enable diagnostic device capabilities in low-resourced settings.</li> <li>Developed device components (fluidic delivery and multiplex assay module) to enable diagnostic device capabilities designed for the remote clinic.</li> </ul>			
<ul> <li>FY 2014 Plans:</li> <li>Demonstrate ability to manipulate the type of immune response induced by RNA-based vaccines.</li> <li>Demonstrate ability to target delivery of RNA-based vaccines to specific cell types.</li> <li>Develop novel methodologies to deliver nucleic acid constructs encoding one or hundreds of antibodies identified from immunized or convalescent patients.</li> <li>Demonstrate delivery of nucleic acids that transiently produce multiple antibodies.</li> <li>Perform quantitative comparison of room temperature assay methods appropriate for integration in devices for low-resourced settings.</li> <li>Demonstrate initial component integration and define performance metrics for advanced diagnostic device prototypes suitable for operations in remote clinic and low-resourced settings.</li> </ul>			
FY 2015 Plans:			

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Appropriation/Budget Activity 0400: Research, Development, Test & Evaluation, Defense-Wide I BA 2: Applied Research	R-1 Program Element (Number/Name) PE 0602115E I BIOMEDICAL TECHNOLOGY	·		
C. Accomplishments/Planned Programs (\$ in Millions)		FY 2013	FY 2014	FY 2015
<ul> <li>Demonstrate ability to control the time duration of the therapeutic responseresponses.</li> <li>Investigate targeted delivery of nucleic acid constructs to specific cell type. Demonstrate feasibility for controlling pharmacokinetics and immunity moderoader immune response.</li> <li>Develop designs for RNA-based vaccines to enable transition to human controlling pharmacokinetics and immunity moderoader immune response.</li> <li>Develop designs for RNA-based vaccines to enable transition to human controlling pharmacokinetics and immunity moderoader immune response.</li> <li>Develop designs for initial diagnostic device prototypes, based on highest produce first-generation, integrated diagnostic prototypes designed for response quantitative performance of first-generation, integrated diagnostic required for performance improvements.</li> </ul>	dulation components to enable a more potent and linical trials.  performing components. mote clinic and low-resourced settings.			
Title: Tactical Biomedical Technologies		13.188	13.321	12.000
<b>Description:</b> The Tactical Biomedical Technologies thrust will develop new the battlefield. Uncontrolled blood loss is the leading cause of preventable control of hemorrhage is the most effective strategy for treating combat case than surgical intervention, can effectively treat intracavitary bleeding. A focu based agent(s) and delivery mechanism capable of hemostasis and wound abdominal space, regardless of wound geometry or location within that space techniques and equipment to use laser energy to treat intracranial hemorrhage environment. Finally, in order to address logistical delays associated with deproviders the ability to manufacture and produce small molecule drugs and	death for soldiers on the battlefield. While immediate ualties and saving lives, currently no method, other us in this thrust is the co-development of a materials-control for non-compressible hemorrhage in the ce. This thrust will also investigate non-invasive age through the skull and tissues in a pre-surgical elivering necessary therapeutics to the battlefield, response capability to enable far-forward medical			
<ul> <li>FY 2013 Accomplishments:</li> <li>Demonstrated a combined hemostasis agent and delivery mechanism that does not interfere with standards of care.</li> <li>Assessed manufacturing costs and processes required for pilot-scale processes at laboratory scale, synthesized in continuous flow the following Active Ph. Diazepam, Lidocaine, Fluoxetine, Ibuprofen, Atropine, and Doxycycline.</li> <li>Demonstrated continuous flow synthesis of Diphenhydramine, Diazepam, manufacturing platform.</li> <li>Designed and tested drug product crystallization and formulation for Diphen integrated manufacturing platform.</li> </ul>	duction of a Wound Stasis System. narmaceutical Ingredients (APIs): Diphenhydramine, Lidocaine, and Fluoxetine using an integrated			

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C. Accomplishments/Planned Programs (\$ in Millions)		FY 2013	FY 2014	FY 2015
- Developed breadboard prototype device for treatment of intracranial hemo tissues and demonstrated novel optical coupling technique to minimize perip				
<ul> <li>FY 2014 Plans:</li> <li>At laboratory scale, demonstrate continuous flow synthesis of the following Rufinamide, Etomidate, Triclabendazole, and Neostigmine.</li> <li>Engage the FDA for input on Process Analytical Technologies (PAT) and of Diphenhydramine, Diazepam, Lidocaine, Fluoxetine, Ibuprofen, Atropine, and</li> <li>Perform in vivo demonstration of transcranial photocoagulation of intracrar</li> <li>Perform in vivo demonstration of photo-induced vasospasm in intracranial</li> <li>Design and develop upstream and downstream components of miniaturize therapeutics using cell-free and cell-based protein translation systems, include processes.</li> </ul>	current Good Manufacturing Process (cGMP) for d Doxycycline. nial vessels in porcine model. vessels in porcine model. ed end-to-end manufacturing platform for protein			
<ul> <li>FY 2015 Plans:</li> <li>Develop novel continuous flow crystallizer, miniaturized reactors, and cher a compact end-to-end manufacturing platform for the following APIs: Dipher Ibuprofen, Atropine, Doxycycline, Salbutamol, Ciprofloxacin, Azithromycin, R. Neostigmine.</li> <li>Demonstrate continuous flow synthesis, crystallization, and formulation for Triclabendazole, and Neostigmine, in an integrated manufacturing platform.</li> <li>Engage the FDA for input on PAT and cGMP for Ciprofloxacin, Azithromyc Neostigmine.</li> <li>Develop novel cell-free protein synthesis techniques using miniaturized bic.</li> <li>Demonstrate end-to-end manufacturing of two protein therapeutics in a minexpression and purification processes.</li> <li>Engage the FDA for input on PAT and cGMP for protein therapeutics.</li> <li>Design end-to-end manufacturing process in a miniaturized and integrated.</li> <li>Test prototype device during in vivo pre-clinical studies for treatment of intrand tissues, and engage with the FDA on design and execution of these studies.</li> </ul>	Anhydramine, Diazepam, Lidocaine, Fluoxetine, Rufinamide, Etomidate, Triclabendazole, and Ciprofloxacin, Azithromycin, Rufinamide, Etomidate, Sin, Rufinamide, Etomidate, Triclabendazole, and Dreactors and microfluidics technologies. Iniaturized platform, including the integration of protein a platform for an additional four protein therapeutics. Tracranial hemorrhage using laser energy through skull			
Title: Military Medical Imaging	·	4.216	8.000	6.000
<b>Description:</b> The Military Medical Imaging thrust will develop medical imagin operations. The emergence of advanced medical imaging includes newly remetabolic pathways, or physiological function in order to produce an image of	cognized physical properties of biological tissue,			

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C. Accomplishments/Planned Programs (\$ in Millions)		FY 2013	FY 2014	FY 2015
this thrust is the capability for new, portable spectroscopic techniques that ca analysis of traumatic brain injury) that is superior to that provided by an MRI. scientists seek to better understand anatomical, functional, and cellular-level invasive to minimally invasive detection of microscopic and functional alterati early stages of injury. The advanced development of these tools will provide performance and care.	This need is ever increasing as researchers and interactions. Finally, this thrust will allow safe, nonons within tissues and organs of a living organism at			
FY 2013 Accomplishments:  - Measured the Quantum Orbital Resonance Spectroscopy (QORS) effect us date.  - Tested competing theoretical models for the physical basis of the QORS effective achieved under varying field strength, orbital angular momentum (OAM) characteristics.	ffect, and quantified the degree of hyperpolarization			
<ul> <li>FY 2014 Plans:</li> <li>Design and fabricate blazed, stacked, diffractive x-ray optics for integration</li> <li>Design and test imaging and validation protocols for pre-clinical imaging pr</li> <li>Develop electrophysiological methods for simultaneous recording of multip</li> <li>Identify candidate approaches for real-time analysis and monitoring of brain</li> </ul>	ototype. le levels of abstraction in cortical/subcortical targets.			
<ul> <li>FY 2015 Plans:</li> <li>Investigate advanced imaging technologies, such as three-photon fluorescent spatiotemporal resolution of deep brain regions.</li> <li>Demonstrate proof of concept for achieving single neuron spatiotemporal reneurons in the cortex.</li> <li>Investigate new indicators and effectors for single neuron spatiotemporal or</li> </ul>	esolution for recording spiking activity from 10^5			
Title: Dialysis-Like Therapeutics		9.000	20.000	20.000
<b>Description:</b> Sepsis, a bacterial infection of the blood stream, is a significant soldiers. The goal of this program is to develop a portable device capable of volume on clinically relevant time scales. Reaching this goal is expected to r biologic fluids, complex fluid manipulation, separation of components from th of providing predictive control over the closed loop process. The envisioned patients each year by effectively treating sepsis and associated complication medical countermeasure against various chemical and biological (chem-bio) toxins.	controlling relevant components in the blood require significant advances in sensing in complex ese fluids, and mathematical descriptions capable device would save the lives of thousands of military s. Additionally, the device may be effective as a			

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C. Accomplishments/Planned Programs (\$ in Millions)		FY 2013	FY 2014	FY 2015
Applied research under this program further develops and applies existing continuous accomplete blood purification system for use in the treatment of separation and demonstration of non-fouling, continuous sensors for complex microfluidic structures that do not require the use of anticoagulation; application require pathogen specific molecular labels or binding chemistries; and responsible to the control of	osis. Included in this effort will be development, ex biological fluids; implementation of high-flow tion of intrinsic separation technologies that do efinement of predictive modeling and control			
<ul> <li>FY 2013 Accomplishments:</li> <li>Developed a systems integration plan, conducted a user needs assessme incorporating component separation technologies.</li> <li>Developed appropriate animal models, confirmed regulatory plan, and initintegrated device.</li> </ul>				
<ul> <li>FY 2014 Plans:</li> <li>Integrate biocompatible high-flow fluid manipulation and intrinsic separatio treatment of sepsis.</li> <li>Use feedback from initial animal model testing to inform the development of efficacy studies in a large-animal sepsis model.</li> <li>Proceed with regulatory approval process and initiate plan for investigation.</li> </ul>	of an integrated device for additional safety and			
FY 2015 Plans:  - Manufacture a prototype device that integrates label-free separation techn thrombogenic coatings for testing.  - Evaluate the efficacy of the label-free separation technologies in a small-a.  - Refine the prototype device design based on animal testing results to infor device.  - Perform safety and efficacy studies in a large-animal sepsis model.	ologies, high-flow fluidic architectures, and non-nimal model.			
- Initiate regulatory approval submission package with safety and efficacy da	ata.			
Title: Warrior Web		12.150	12.000	8.992
<b>Description:</b> Musculoskeletal injury and fatigue to the warfighter caused by immediate mission readiness, but also can have a deleterious effect on the way with the warfighter caused by immediate mission readiness, but also can have a deleterious effect on the warfighter caused by immediate mission readiness.	warfighter throughout his/her life. The Warrior			

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C. Accomplishments/Planned Programs (\$ in Millions)		FY 2013	FY 2014	FY 2015
into current soldier systems. Because this sub-system will be compliant and sustained by warfighters while allowing them to maintain performance. Succ of component technologies in areas such as regenerative kinetic energy hard performance, system, and component modeling; novel materials and dynamic and power distribution/energy storage. The final system is planned to weigh of external power. Allowing the warfighter to perform missions with reduced readiness, soldier survivability, mission performance, and the long-term health	ress in this program will require the integration vesting to offset power/energy demands; human ic stiffness; actuation; controls and human interface; no more than 9kg and require no more than 100W risk of injuries will have immediate effects on mission			
FY 2013 Accomplishments:  - Completed injury assessment and component technology integration into completed initial verification and validation of component technologies in new conducted preliminary reviews of individual component technologies (e.g., integrated to meet Warrior Web performance requirements.	nilitary environments.			
<ul> <li>FY 2014 Plans:</li> <li>Leverage open source biomechanical model to iterate design.</li> <li>Complete development of component technologies based on results of pregovernment testing.</li> <li>Initiate design of full Warrior Web system.</li> </ul>	eliminary component technology reviews and			
<ul> <li>FY 2015 Plans:</li> <li>Conduct preliminary review of full Warrior Web designs and refine approached.</li> <li>Finalize open source biomechanical models to be leveraged for the Warrior</li> <li>Mature full design of Warrior Web system and continue parallel technology</li> <li>Initiate verification and validation of prototype Warrior Web system via sold</li> </ul>	r Web system evaluation.			
Title: Pathogen Defeat		13.221	14.617	4.000
<b>Description:</b> Pathogens are well known for the high rate of mutation that end or secondary immune responses. The Pathogen Defeat thrust area will prove Pathogen Defeat focuses not on the threats that are already known but rather future mutations, allowing pre-emptive preparation of vaccine and therapy contains the secondary immune responses.	ide capabilities to predict and deflect future threats. er on the threats of newly emerging pathogens and			
FY 2013 Accomplishments:  - Developed a platform to reproducibly demonstrate the evolutionary pathwa  - Validated algorithms' abilities to predict viral evolution in the presence of or				

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On: Research, Development, Test & Evaluation, Defense-Wide I BA 2:  PE 0602115E I BIOMEDICAL TECHNOLOGY  Accomplishments/Planned Programs (\$ in Millions)  Predicted location(s) and nature of genetic mutation(s) responsible for antiviral failure in a cell culture model.  Predicted number of viral generations necessary for the acquisition of antiviral resistance in a cell culture model.	Y 2013	FY 2014	FY 2015
Predicted location(s) and nature of genetic mutation(s) responsible for antiviral failure in a cell culture model.  Predicted number of viral generations necessary for the acquisition of antiviral resistance in a cell culture model.	Y 2013	FY 2014	FY 2015
Predicted number of viral generations necessary for the acquisition of antiviral resistance in a cell culture model.			
Predict location of genetic mutation(s) responsible for failure of a monoclonal antibody to neutralize a virus.  Demonstrate that the in vitro bioreactor can be used to predict alteration in cell tropism.  Validate viral evolution platforms and predictive platforms with a live fire test.  Transition predictive algorithms and in vitro evolution platforms to the Center for Disease Control (CDC) and other interested vernment agencies to increase preparedness for seasonal influenza as well as other emerging pathogens.  Transition predictive algorithms and in vitro evolution platforms to the pharmaceutical industry for prediction of emergence of ag-resistant strains of commercially relevant viruses.  Focus on host species jumping, through development of predictive algorithms for receptor usage and entry.  Develop a hand-held device for rapid identification of microbial organisms, including development of diagnostic panels to be agrated into a modular, single-use microfluidics card.			
7 2015 Plans:  Test predictive capabilities of algorithms using real-world samples of viral isolates.  Field test hand-held device for transition to forward-deployed troops for diagnostic purposes.			
le: Restoration of Brain Function Following Trauma	-	8.000	9.700
escription: The Restoration of Brain Function Following Trauma program will exploit recent advances in the understanding and odeling of brain activity and organization to develop approaches to treat traumatic brain injury (TBI). Critical to success will be ability to detect and quantify functional and/or structural changes that occur in the human brain during the formation of distinct we memories, and to correlate those changes with subsequent recall of those memories during performance of behavioral tasks, is program will also develop neural interface hardware for monitoring and modulating neural activity responsible for successful emory formation in a human clinical population. The ultimate goal is identification of efficacious therapeutics or other therapies at can bypass and/or recover the neural functions underlying memory, which are often disrupted as a consequence of TBI. is program is leveraging research conducted under the Human Assisted Neural Devices effort in Program Element 0601117E, object MED-01.			
7 2014 Plans: dentify neural codes underlying optimal memory formation.  Optimize electrodes for chronic, indwelling recording and stimulation.			
7 2015 Plans:			

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C. Accomplishments/Planned Programs (\$ in Millions)		FY 2013	FY 2014	FY 2015
<ul> <li>Identify commonalities of neural codes underlying memory formation.</li> <li>Identify distinctions between neural codes underlying different classes of r</li> <li>Identify expert memory codes for the formation of memory associations be actions).</li> <li>Develop portable computational device with integrated computational mode.</li> <li>Demonstrate task-specific improvement/restoration of memory performance.</li> </ul>	etween pairs of elements (e.g., objects, locations, del of human memory formation.			
Title: Neuro-Adaptive Technology		-	-	21.000
<b>Description:</b> Building upon technologies developed under the Military Medic Neuro-Adaptive Technology program will explore and develop advanced technology activity. One shortcoming of today's brain functional mapping technologata that links neural function to human activity and behavior. Understanding underlying mechanisms that link brain and behavior is a critical step in proving personnel suffering from a variety of brain disorders. Efforts under this program involved in Post-Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (how to best ameliorate these disorders. The objective for this program is to discriminate the relationship between human behavioral expression and neudevices. These tools will allow for an improved understanding of how the braceific, dynamic neuro-therapies for treating neuropsychiatric and neurolog of interest under this thrust include devices for real-time detection of brain acquisition of brain activity and behavior, and statistical models that correlations.	chnologies for real-time detection and monitoring of ologies is the inability to obtain real-time correlation and the structure-function relationship as well as the ding real-time, closed-loop therapies for military gram will specifically examine the networks of neurons (TBI), depression, and anxiety as well as determine develop new hardware and modeling tools to better gral function and to provide relief through novel rain regulates behavior and will enable new, disorder-gical disorders in military personnel. Technologies ctivity during operational tasks, time synchronized			
<ul> <li>FY 2015 Plans:</li> <li>Develop tests that activate key brain subnetworks for each functional domentum of the properties of the p</li></ul>	of multimodal brain activity across time/space. g behavior to support the neurophysiology of new record, and stimulate data. on for recording neural activity.			
Title: Prosthetic Hand Proprioception & Touch Interfaces (HaPTIx)			_	7.000

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C. Accomplishments/Planned Programs (\$ in Millions)		FY 2013	FY 2014	FY 2015
<b>Description:</b> Wounded warriors with amputated limbs get limited benefit from because the user interface for controlling the limb is low-performance and unr Reliable Neural-Interface Technology (RE-NET) program, novel interface systissues and are designed to last for the lifetime of the patient. The goal of the (HaPTIx) program is to create the first bi-directional (motor & sensory) peripheradvanced prosthetic limb systems. With a strong focus on transition, the HaP relevant technology in support of wounded warriors suffering from single or materials.	reliable. Through investments in the DARPA tems have been developed that overcome these Prosthetic Hand Proprioception & Touch Interfaces eral nerve implant for controlling and sensing PTIx program will create and transition clinically			
<ul> <li>FY 2015 Plans:</li> <li>Develop and demonstrate advanced algorithms to control prosthetic limbs us intrafasicular electrodes (tfLIFE), Utah Slant Electrode Array (USEA), and oth electrodes.</li> <li>Develop and demonstrate micro-stimulation interface technologies that province system for closed-loop prosthetic control.</li> <li>Conduct clinical trials to restore lost sensation such as touch and proprioce neuropathy or following amputation.</li> <li>Develop and demonstrate micro-surgical techniques to increase targeted m separating fascicles, introducing growth factors, and/or conducting small must.</li> <li>Perform safety and efficacy testing of novel implantable interface technolog electrical sensory stimulation through the peripheral nervous system.</li> <li>Support researchers preparing for Food and Drug Administration (FDA) investibilities.</li> </ul>	er commercially available or newly developed vide reliable signals into the peripheral and/or central ption to patients suffering from various forms of uscle reinnervation (TMR) of residual nerve fibers by cle transfers.  y which capture motor control signals and provide			
<b>Title:</b> Revolutionizing Prosthetics <b>Description:</b> The goal of this thrust is to radically improve the state of the art devices with minimal capabilities to fully integrated and functional limb replace provides only gross motor functions, with very crude approaches to control. Tre-acquire full functionality and return to military service if so desired. The adreplacements will be achieved by an aggressive, milestone-driven program coincluding: medicine, neuroscience, orthopedics, engineering, materials science power, manufacturing, rehabilitation, psychology, and training. The results of combat amputees to return to normal function.	ements. Current prosthetic technology generally his makes it difficult for wounded soldiers to vances required to provide fully functional limb ombining the talents of scientists from diverse areas se, control and information theory, mathematics,	15.790	10.000	-
FY 2013 Accomplishments:				

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	FY 2013	FY 2014	FY 2015
spinal cord injured patients.  ns to support use in human research participants.  ne trials and durability testing remaining, to gain			
ystem.  v. ical control.			
Title: Detection and Computational Analysis of Psychological Signals (DCAPS)		-	
<b>Description:</b> The Detection and Computational Analysis of Psychological Signals (DCAPS) program developed automated information systems that identify group and individual trends indicative of post-traumatic stress disorder (PTSD) and anomaly detection algorithms that identify emerging physical and psychological crises. These tools complement commercial offerings that have not focused on issues specific to the warfighter. DCAPS recognizes that security and privacy are critical to user acceptance and Health Insurance Portability and Accountability Act compliance, and so incorporates strong authentication and other security mechanisms as needed to protect patient data. Furthermore, users will opt-in prior to using the DCAPS tools, ensuring controlled access to personally identifiable information. The program developed partnerships with key DoD organizations working in this area and transition activities are underway with the Veterans Affairs Center for Innovation and the Defense Suicide Prevention Office.			
conduct user trials. ations in coordination with transition partners. Itions based on the results of user trials.			
itle: Unconventional Therapeutics		-	-
to ensure that soldiers are protected against a wide m developed approaches to counter any natural ntermeasures that do not require prior knowledge nd/or viral infectious agents. The integration of ted in reducing the traditional drug development cycle			
	R-1 Program Element (Number/Name) PE 0602115E / BIOMEDICAL TECHNOLOGY  spinal cord injured patients. Inside to support use in human research participants. It ical control.  PS) Ignals (DCAPS) program developed automated st-traumatic stress disorder (PTSD) and anomaly states. These tools complement commercial offerings that last security and privacy are critical to user acceptance incorporates strong authentication and other security in prior to using the DCAPS tools, ensuring controlled erships with key DoD organizations working in this for Innovation and the Defense Suicide Prevention  In conduct user trials. In ations in coordination with transition partners. It is ensure that soldiers are protected against a wide medeveloped approaches to counter any natural intermeasures that do not require prior knowledge and/or viral infectious agents. The integration of	R-1 Program Element (Number/Name) PE 0602115E I BIOMEDICAL TECHNOLOGY  FY 2013  Spinal cord injured patients. as to support use in human research participants. are trials and durability testing remaining, to gain  ystem.  Indical control.  PS)  Ignals (DCAPS) program developed automated st-traumatic stress disorder (PTSD) and anomaly as. These tools complement commercial offerings that hast security and privacy are critical to user acceptance incorporates strong authentication and other security in prior to using the DCAPS tools, ensuring controlled erships with key DoD organizations working in this for Innovation and the Defense Suicide Prevention  a conduct user trials.  ations in coordination with transition partners. Itions based on the results of user trials.  1.107  to ensure that soldiers are protected against a wide and developed approaches to counter any natural intermeasures that do not require prior knowledge and/or viral infectious agents. The integration of	R-1 Program Element (Number/Name) PE 0602115E I BIOMEDICAL TECHNOLOGY    FY 2013   FY 2014

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Exhibit R-2, RDT&E Budget Item Justification: PB 2015 Defense Advance	ed Research Projects Agency	Date: March 2014		
Appropriation/Budget Activity 0400: Research, Development, Test & Evaluation, Defense-Wide I BA 2: Applied Research	<b>R-1 Program Element (Number/Name)</b> PE 0602115E <i>I BIOMEDICAL TECHNOLOGY</i>	1		
C. Accomplishments/Planned Programs (\$ in Millions)		FY 2013	FY 2014	FY 2015
FY 2013 Accomplishments:  - Continued study to demonstrate 95% survival after exposure to lethal leve - Identified neutralizing antibodies against newly emerging infectious diseas - Identified genes and pathways in mouse and human peripheral blood mon models with the goal of leveraging these targets to treat and prevent inflamn  Title: Reliable Neural-Interface Technology (RE-NET)	es. conuclear cells (PBMCs) that differ in inflammation	10.150	_	
<b>Description:</b> Wounded warriors with amputated limbs do not yet benefit from recent advances in prosthetic-limb technology because the interfaces used to extract limb-control information are low-performance and unreliable. The Reliable Neural-Interface Technology (RE-NET) program developed the technology and systems needed to reliably extract motor-control information at the scale and rate necessary to control state-of-the-art high-performance prosthetic limbs. The RE-NET program also developed and demonstrated a novel interface system that overcame the leading causes of neural interface degradation and failure. Through this focus on reliability, the RE-NET program enabled patient access to clinically relevant technology, improving the lives of wounded warriors suffering from single or multiple limb loss. The effort continues under the HaPTIx program contained in this project.				
FY 2013 Accomplishments:  - Developed and demonstrated advanced decoding algorithms which capture in human amputees to provide simultaneous control of prosthetic limb joints.  - Demonstrated amputee control of lost-limb finger-digits through successful nerve implantation of the Utah Slant Electrode Array (USEA).  - Demonstrated a small implantable RF-powered electronics package capable transmitting electromyography-based motor-control signals, such as those in microTMR.  - Commenced studies in collaboration with Walter Reed Army Medical Centuring clinical-grade DARPA RE-NET-supported peripheral-interface technologenous nerves and muscle tissue.	I decode of motor signals captured from residual ole of amplifying, processing, and wirelessly involved with targeted muscle reinnervation (TMR) and ter through the Uniformed Health Services University			
	Accomplishments/Planned Programs Subtotals	98.097	114.790	112.24
D. Other Program Funding Summary (\$ in Millions)  N/A  Remarks				

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Exhibit R-2, RDT&E Budget Item Justification: PB 2015 Defense Advance	ed Research Projects Agency	Date: March 2014				
Appropriation/Budget Activity 0400: Research, Development, Test & Evaluation, Defense-Wide I BA 2: Applied Research	R-1 Program Element (Number/Name) PE 0602115E I BIOMEDICAL TECHNOLOGY					
E. Acquisition Strategy N/A						
F. Performance Metrics						
Specific programmatic performance metrics are listed above in the program	accomplishments and plans section.					

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