Exhibit R-2, RDT&E Budget Item Justification: PB 2016 Army

R-1 Program Element (Number/Name)

Date: February 2015

Appropriation/Budget Activity 2040: Research, Development, Test & Evaluation, Army I BA 2: Applied

PE 0602787A I Medical Technology

Research

COST (\$ in Millions)	Prior Years	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	FY 2017	FY 2018	FY 2019	FY 2020	Cost To Complete	Total Cost
Total Program Element	-	81.386	76.044	76.853	-	76.853	77.111	82.334	82.912	84.549	-	
869: Warfighter Health Prot & Perf Stnds	-	34.032	31.594	30.043	-	30.043	27.052	29.771	29.988	30.580	-	
870: Dod Med Def Ag Inf Dis	-	18.732	17.741	19.245	-	19.245	20.650	22.323	22.791	23.237	-	
874: Cbt Casualty Care Tech	-	17.761	15.855	17.005	-	17.005	17.416	19.089	18.929	19.306	-	
FH2: Force Health Protection - Applied Research	-	6.128	6.058	5.278	-	5.278	6.626	5.688	5.688	5.801	-	
VB4: System Biology And Network Science Technology	-	4.733	4.796	5.282	-	5.282	5.367	5.463	5.516	5.625	-	

A. Mission Description and Budget Item Justification

This program element (PE) supports application of knowledge gained through basic research to refine drugs, vaccines, medical devices, diagnostics, medical practices/ procedures, and other preventive measures essential to the protection and sustainment of Warfighter health. Research is conducted in five principal areas: Combat Casualty Care; Military Operational Medicine; Military Relevant Infectious Diseases Clinical and Rehabilitative Medicine; and Systems Biology/Network Sciences. Research is funded in six projects.

Project 869 refines knowledge and technologies on screening tools and preventive measures for post-traumatic stress disorder and mild traumatic brain injuries, physiological monitors, and interventions to protect Warfighter's from injuries resulting from operational stress, and exposure to hazardous environments and materials. Also conducts research on medically valid testing devices (i.e. the test mannequins that are true to the human form and physiologically and anatomically accurate) and predictive models used for the refinement of Warfighter protective equipment. This project is being coordinated with the Defense Health Program.

Project 870 designs and refines medical diagnostic assays/tests, drugs, and vaccines for protection from and treatment of naturally occurring diseases, wound infections of military importance, as identified by worldwide medical surveillance and military threat analysis. This project is being coordinated with the Defense Health Program.

Project 874 identifies and evaluates drugs, biologics (products derived from living organisms), medical devices, and diagnostics for field trauma care systems, resuscitation, life support, and post-evacuation restorative and rehabilitative care. Focus is identifying more effective critical care technologies and protocols to treat severe bleeding, traumatic brain injury and other blast related injuries, and treatments for ocular (eye) injury and visual system dysfunction. Additional focus areas are laboratory and animal studies of regenerating skin, muscle, nerves, and bone tissue for the care and treatment of combat trauma casualties. This project is being coordinated with the Defense Health Program.

Project FH2 conducts applied research focused on sustainment of a healthy Warfighters throughout the entire deployment life cycle.

Exhibit R-2, RDT&E Budget Item Justification: PB 2016 Army

Appropriation/Budget Activity

R-1 Program Element (Number/Name)

2040: Research, Development, Test & Evaluation, Army I BA 2: Applied Research

PE 0602787A I Medical Technology

Project VB4 includes applied research in systems biology of military-relevant diseases such as Post Traumatic Stress Disorder (PTSD), coagulopathy (blood clotting disorders), suicide, and chronic pain. Another focus is environmental exposure toxicology (study of the biology of harm from toxic substances in the environment). The goals are to understand mechanisms (processes and pathways), develop molecular and physiological markers (biological molecules as indicators of the body's functions such as immune response) for future diagnostic systems, and identify therapeutic interventions supporting early decisions for therapeutic strategies. The core capability is a data system that integrates iterative (successively building upon data and results) biological tests, computer simulations, and animal studies, providing powerful analyses in support of research across United States Army Medical Research & Materiel Command. This project is being coordinated with the Defense Health Program.

The cited work is consistent with the Assistant Secretary of Defense, Research and Engineering Science and Technology, focus areas and the Army Modernization Strategy.

All medical applied research is conducted in compliance with U.S. Food and Drug Administration (FDA) or Environmental Protection Agency (EPA) regulations. The FDA requires thorough testing in animals (preclinical testing) to ensure safety and, where possible, effectiveness prior to evaluation in controlled human clinical trials (upon transition to 6.3 Advanced Technology Development). This PE focuses on research and refinement of technologies such as product formulation and purification and laboratory test refinement with the aim of identifying candidate solutions. This work often involves testing in animal models. The EPA also requires thorough testing of products, such as sterilants, disinfectants, repellents, and insecticides to ensure the environment is adequately protected before these products are licensed for use.

Program refinement and execution is externally peer-reviewed and fully coordinated with all Services as well as other agencies through the Joint Technology Coordinating Groups of the Armed Services Biomedical Research Evaluation and Management (ASBREM) Community of Interest (COI). The ASBREM COI, formed under the authority of the Assistant Secretary of Defense for Research and Engineering, serves to facilitate coordination and prevent unnecessary duplication of effort within the Department of Defenses (DoD) biomedical research and refinement community, as well as their associated enabling research areas.

Work funded in this project PE is fully coordinated with efforts undertaken in PE 0603002A and the Defense Health Program.

Work in this PE is performed by the Walter Reed Army Institute of Research (WRAIR), Silver Spring, MD and its overseas laboratories; U.S. Army Medical Research Institute of Infectious Diseases (USAMRIID) and the Armed Forces Institute of Regenerative Medicine (AFIRM), Fort Detrick, MD; U.S. Army Center for Environmental Health Research (USACEHR), Fort Detrick, MD; U.S. Army Research Institute of Environmental Medicine (USARIEM), Natick, MA; the U.S. Army Dental Trauma Research Detachment and the U.S. Army Institute of Surgical Research (USAISR), Joint Base San Antonio-Fort Sam Houston, TX; U.S. Army Aeromedical Research Laboratory (USAARL), Fort Rucker, AL; and the Naval Medical Research Center (NMRC), Silver Spring, MD.

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Appropriation/Budget Activity		R-1 Program El	ement (Number/Name))		
2040: Research, Development, Test & Evaluation, Army I BA	2: Applied	PE 0602787A / /	Medical Technology			
Research						
B. Program Change Summary (\$ in Millions)	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	
Previous President's Budget	93.290	76.068	77.330	-	77.330	
Current President's Budget	81.386	76.044	76.853	-	76.853	
Total Adjustments	-11.904	-0.024	-0.477	-	-0.477	
 Congressional General Reductions 	-	-0.024				
 Congressional Directed Reductions 	-	-				
 Congressional Rescissions 	-	-				
Congressional Adds	-	-				
 Congressional Directed Transfers 	-	-				
 Reprogrammings 	-9.773	-				
SBIR/STTR Transfer	-2.131	-				

Exhibit R-2, RDT&E Budget Item Justification: PB 2016 Army

• Adjustments to Budget Years

-0.477

Date: February 2015

-0.477

Exhibit R-2A, RDT&E Project Justification: PB 2016 Army									Date: February 2015			
Appropriation/Budget Activity 2040 / 2					, , ,				umber/Name) ighter Health Prot & Perf Stnds			
COST (\$ in Millions)	Prior Years	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	FY 2017	FY 2018	FY 2019	FY 2020	Cost To Complete	Total Cost
869: Warfighter Health Prot & Perf Stnds	-	34.032	31.594	30.043	-	30.043	27.052	29.771	29.988	30.580	-	-

A. Mission Description and Budget Item Justification

This project conducts research to prevent and protect Warfighers from training and operational injuries, refine mechanisms for detection of physiological (human physical and biochemical function) and psychological (mental) health problems, evaluate hazards to head, neck, spine, eyes, and ears, set the standards for rapid return-to-duty, and determine new methods to sustain and enhance performance across the operational spectrum. This research provides medical information important to the design and operational use of military systems, and this work forms the basis for behavioral, training, pharmacological (drug actions), and nutritional interventions.

The four main areas of study are:

- (1) Environmental Health and Protection
- (2) Physiological Health
- (3) Injury Prevention and Reduction
- (4) Psychological Health and Resilience

Additionally the Warfigher Systems Engineering Architecture task advances medical S&T in the areas of injury prevention and performance sustainment in the context of human interaction with new Soldier systems and provide greater insight into informing new research in development of Warfigher systems and the interactions between Warfighers and the systems they employ.

Promising efforts identified in this project are further matured under PE 0603002A, project MM3.

The cited work is consistent with the Assistant Secretary of Defense, Research and Engineering Science and Technology, focus areas and the Army Modernization Strategy.

Work in this project is performed by the Walter Reed Army Institute of Research (WRAIR), Silver Spring, MD; the U.S. Army Research Institute of Environmental Medicine (USARIEM), Natick, MA; U.S. Institute of Surgical Research (USAISR), Joint Base Sant Antonio-Fort Sam Houston, TX; and the U.S. Army Aeromedical Research Laboratory (USAARL), Fort Rucker, AL.

Efforts in this project support the Soldier Portfolio and the principal areas of Combat Casualty Care and Military Operational Medicine.

B. Accomplishments/Planned Programs (\$ in Millions)	FY 2014	FY 2015	FY 2016
Title: Physiological Health - Nutritional Sustainment and Fatigue Interventions	5.984	3.610	2.617

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army		Date: F	ebruary 2015	5
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	Project (Number/l 869 / Warfighter He		Perf Stnds
B. Accomplishments/Planned Programs (\$ in Millions)		FY 2014	FY 2015	FY 2016
Description: This effort evaluates methods for managing and controlling the operational performance.	ne effects of nutrition and fatigue on Warfighter			
Established the nutritional requirements for optimizing Warfighter re-fueling healthy food choices; nutritional requirements for optimizing bone health; are accelerate cognitive recovery after operational stress. These interventions missions through nutrition. Developed mathematical models and algorithms physiological factors identified in laboratory studies, which allowed resilience effectiveness and post-awakening performance profile of novel sleep-induction which determined the most efficient intervention for sleep induction; develop work strain from non-invasive measures such as heart rate, skin temperature which allowed for the optimization of Warfighter load distribution and energy	and developed dietary support interventions that it is optimize Warfighter recovery from demanding is for prediction of cognitive resilience based on the training to be personally optimized; compared the ters against that of currently available pharmaceutic ped a mathematical method for estimating thermal re, heat flux, without the use of thermometer pills,	e cals,		
FY 2015 Plans: Establish nutrition approaches that promoting resistance to physical, cognit and bone recovery. Develop next generation predictive algorithms that estir sensor systems. Establish sensors and bio-mathematical models capable of musculoskeletal (muscle, bone, tendons, and ligaments) injury. Determine pand biochemical functions), behavioral, and cognitive-affective responses in develop a working operational definition of physiological resilience and algorithms.	tive and environmental stressors and promote must mate overheating for incorporation into wearable of predicting cognitive status and likelihood of risk to patterns of physiological (human mechanical, phys n individuals during exposure to multiple stressors	or iical,		
FY 2016 Plans: Will determine the role of eating rate in energy balance. Will establish the eximmune response during wound healing. Will determine the effectiveness of for the improvement of dietary quality during garrison feeding. Will determine that enhance the ability to predict a Warfighters capacity to recover quickly, to sense and predict physiological responses in individual Warfighters follow operational missions.	of novel feeding platforms (dining facility organization ne relevant predictors, moderators and outcome m both mentally and physically. Will establish a cap	etrics ability		
<i>Title:</i> Environmental Health and Protection - Physiological (human physical Warrior Sustainment in Extreme Environments	al and biochemical functions) Awareness Tools and	1.892	1.337	1.446
Description: This effort evaluates remote monitoring of Soldier physiologic and mitigating/eliminating the effects of heat, cold, altitude, and other environments.		tus		
FY 2014 Accomplishments:				

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army		Date:	February 201	5
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	Project (Number 869 / Warfighter F		Perf Stnds
B. Accomplishments/Planned Programs (\$ in Millions)		FY 2014	FY 2015	FY 2016
Conducted studies to determine whether physiological fatigue in coldinjury, such as trenchfoot and hypothermia, and developed screening freezing cold injury. Continued studies to determine the impact of hy and susceptibility to non-freezing cold injury.	g procedures to identify Warfighters most at risk for non-			
FY 2015 Plans: Identify physiological reflexes that improve hand and finger dexterity to improve dexterity in cold weather operations. Develop decision air protection and load on aerobic performance capabilities in temperate of an organism to keep its body temperature within certain boundaries non-freezing cold injury symptoms including numbness. Identify biom condition, e.g. protein) predictive of individual risk for developing acut	ds for trade-off analyses of the impact of body armor and hot environments. Determine if thermoregulatory (ales) fatigue and altitude exposure increase susceptibility for narkers (biologically derived indicator of a process, event	bility or		
FY 2016 Plans: Will perform laboratory and field studies to refine predictive models of performance at high altitude. Will develop a mobile application for a laid, and automated altitude acclimatization monitor for a rapid ascent of an organism to keep its body temperature within certain boundaries of non-freezing cold injury and hypothermia. Will determine if localized also decrease susceptibility to non-freezing cold injury. Will establish injury in an animal model to inform the development of promising druorgan damage and enhance recovery.	PC-based Altitude Readiness Management System decise to high altitudes. Will determine if thermoregulatory (above) fatigue or high altitude exposures increase susceptibled warming that will improve peripheral blood circulation to the effectiveness of novel pharmaceutical treatments for	lity ity vill heat		
Title: Injury Prevention and Reduction - Neurosensory Injury Preven	tion	8.006	2.489	3.46
Description: The Warrior Injury Assessment Manikin analyzes and on Warfighter neurosensory and spine health. It also can models the stressors on the brain, spine, eyes, and hearing.				
FY 2014 Accomplishments: Developed improved eye protection standards and ophthalmic (pertathe various Warfighter occupations and developed hearing protection Developed novel assessment methods to detect impulse noise exposure to evaluate the effects of blast exposures to ocular tissue.	n strategies for optimized active noise-reduction protection	n.		
FY 2015 Plans: Develop spinal injury criteria and protection assessment methodolog assessing the effectiveness of prevention strategies against hearing		d		

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army			Date: Fe	ebruary 2015	1
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	Project (I 869 / War		l ame) alth Prot & P	erf Stnds
B. Accomplishments/Planned Programs (\$ in Millions)		F	Y 2014	FY 2015	FY 2016
sense of balance, located in the inner ear) injuries. Develop assessm ballistic, and blast-wave forces, and determine injury prevention criter	, , , , ,	ınt,			
FY 2016 Plans: Will perform crash and blast relevant vertical acceleration experiment spinal injury. Will characterize middle ear function under impulse (suc models. Will validate test criteria, and develop predictive ocular (eye)	lden loud) noise for improvement of current hearing inju				
Title: Injury Prevention and Reduction - Musculoskeletal Injury Preve	ntion		5.058	2.075	3.054
Description: This effort evaluates and assesses the effects of repetit human body; will provide mathematical models to predict the likelihood muscle fatigue; evaluates current standards for return-to-duty; and estrapid return to duty of Warfighters following injury.	od of physical injuries following continuous operations a	nd			
FY 2014 Accomplishments: Developed a quantitative computational model that can predict physic and developed training strategies and/or dietary interventions to impression.	• • • • • • • • • • • • • • • • • • • •	ers			
FY 2015 Plans: Develop mathematical models of functional neuromuscular adaptation inflammatory processes on muscle repair and regeneration. These mealing. Determine the modifiable and non-modifiable risk hazards for	nodels will predict the relative risk of re-injury, and inco	nplete			
FY 2016 Plans: Will utilize mathematical models of neuromuscular processes (centra interventions that promote repair and regeneration following muscle in risk of incomplete healing or subsequent re-injury. Will utilize knowled interventions to prevent and mitigate risks in the training and operation bone, tendons, and ligaments) injuries.	njury and modify the inflammatory response and reduced age of risk factors obtained from basic studies to develo	e the			
Title: Injury Prevention and Reduction - Injury Return-to-Duty (RTD)	Standards:		2.624	3.015	2.636
Description: This effort evaluates current standards for rapid RTD are and test methods with the goal of more rapid and safe RTD of injured	•	ds			
FY 2014 Accomplishments: Compared varying treatment protocols for their ability to positively aff that includes testing vision, hearing, and vestibular (sensory system s		ment			

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army		Date:	February 2015	5
Appropriation/Budget Activity 2040 / 2		Project (Number 869 <i>I Warfighter F</i>		Perf Stnds
B. Accomplishments/Planned Programs (\$ in Millions)		FY 2014	FY 2015	FY 2016
developed models that predict and prevent auditory (process of hearin conservation and guide development of hearing protection equipment				
FY 2015 Plans: Characterize current Warfighter injury trends in training and operations effectiveness, and occupational disability. Determine the effects of phy occupational performance and define minimal pre-RTD performance s brain injury and co-morbid auditory or vision deficits.	sical, auditory, and visual system injury on military	С		
FY 2016 Plans: Will develop standards based on current Warfighter trends of Warfight effectiveness and occupational disability, specific to Military Occupation neurosensory (sensory activity or functions of the nervous system) per Defense Center of Excellence for Psychological health and Traumatic military occupational performance and define minimal standards for W	onal Specialties. Will perform studies to update the rformance return to duty toolkit previously transitioned to Brain Injury. Will determine the effects of physical injury	the		
Title: Psychological Health - Psychological Resilience		8.272	14.493	12.960
Description: This effort refines, validates, and disseminates early inte health problems, including symptoms of post-traumatic stress disorder abuse, post-concussive symptoms, and other health risk behaviors. A sustain psychological resilience throughout the Warfighter's career.	(PTSD), depression, anger problems, anxiety, substan			
FY 2014 Accomplishments: Evaluated and determined optimal interventions for preventing and tre than one concurrent illness) to include medications, psychotherapy an protocols, including internet- based cognitive (mental processes) thera treatment outcomes and to implement more effective, efficient, and ec behavioral health trends through rapid fielding assessment teams which rapid response to Warfighter needs and determined evidence-based retheir units and society; developed and refined evidence-based resilient best practice recommendations to facilitate Warfighters receiving the befactors that contribute to return-to-duty decisions and researched critical psychological injury and instilling confidence in the Warfighter and process.	d medication combinations, and alternative therapy apy. These intervention strategies were used to optimiz onomical treatment regimens; benchmarked emerging ch informed resilience training modifications. This ensu ecommendations for Warfighter reintegration strategies ce training strategies for the deployment cycle; develop est possible training and provider care; and assessed eria and tools to inform return-to-duty decisions following	ed into ed		
FY 2015 Plans: Develop and disseminate validated strategies and early interventions t throughout service member's careers and determine evidence-based i		rk		

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army		Date: F	ebruary 2015							
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	Project (Number/l 869 / Warfighter He	Name) ealth Prot & Perf Stnds							
B. Accomplishments/Planned Programs (\$ in Millions)		FY 2014	FY 2015	FY 2016						
behavioral health problems, risk, and resilience physiological biomarkers of neurocognitive (relating to or involving the central nervous system and wide variety of psychological return-to-duty (RTD) outcomes. Conduct stuneurocognitive tools for psychological RTD decision making. Assess varied deployment-related anxiety. Develop and validate unit-based, post-deploy with active duty Warfighters assessing optimal intervention methods for P between levels of individual biomarkers and PTSD interventions, i.e. supplexposure to surrogate traumatic events and virtual reality, to recreate the	cognitive abilities) test scores associated with a didies that explore the utility of sleep monitors and bus mechanisms and interventions for reducing ment resilience training for Warfighters. Conduct tribally TSD, including medications. Determine the correlations of the current standard of the care with extended	als on								
FY 2016 Plans: Will explore the effectiveness of improved sleep quality and quantity on the to improve a Mindfulness training package to develop recommendations of (CSF2). Will analyze data from previous studies to determine if an alcohow Warfighters. Will perform studies to revise Family resilience training across recommendations for identifying and addressing difficulties with post-comma computer-based tool can help Warfighters deal with occupational stress to include a reduction in anger symptoms. Will perform studies to improve Components. Will begin to evaluate evidence-based behavioral health least toolkit using sleep quality parameters to inform return-to-duty decisions. Warfighter use of DoD provided behavioral health care. Will extend the Symptomic research to identify biomarker differences, based on gender; will biomark occurring or co-morbidities i.e. Mild Traumatic Brain Injury and Major Depispecimen collection, identify alterations in gastrointestinal and immune restudies to determine if a diet formulated with a blend of omega-3 fatty across resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma, in a small resiliency and resiliency against psychological stressors and acute head trauma, in a small resiliency against psychological stressors and acute head trauma.	for Comprehensive Warfighter and Family Fitness I use screening questionnaire can be effectively use as the deployment cycle. Will develop evidence-base that adjustment. Will conduct studies to verify whether and have more positive post-deployment outcomes and validate unit-based resilience training for Research training. Will provide recommendations for provided training. TSD biomarker that is a signal training provided to the provided training provided to the provided training provided training. Will continued to glutamine, Vitamin D3 and zinc provides enhanced.	ed er rve ider ase								
Title: Psychological Health & Resilience - Suicide Prevention		0.994	1.000	0.865						
Pescription: This effort supports methods to identify causative and prevent FY 2014 Accomplishments: Tested the effectiveness of a brief, telephone-based intervention to increase members at high risk of suicide; learned about the type and range of decident chaplains, and leaders to address suicide-related events that occur during	ase behavioral health treatment-seeking among Serv sions made by behavioral healthcare providers,									

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army			Date: F	ebruary 2015		
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology		Number/Name) rfighter Health Prot & Perf Stnds			
B. Accomplishments/Planned Programs (\$ in Millions)		F	Y 2014	FY 2015	FY 2016	
and the lessons learned; assessed how suicide-related events were managuidelines and decision aids for use in deployed settings when suicide-related	•					
FY 2015 Plans: Determine risk and protective factors associated with suicide behavior and management methods for suicide prevention. Deliver interventions to unit combat environment including interventions to manage grief and bereave	leaders and unit members following suicide events	s in a				
FY 2016 Plans: Will continue to advance the study from FY15 efforts to determine whethe Warfighters to seek treatment. Will continue to develop evidence-based g		urage				
Title: Psychological Health & Resilience - Concussion/Mild Traumatic Bra	in Injury (mTBI) Interventions		1.202	1.076	0.876	
Description: This effort refines and evaluates methods to detect and treat of cognitive deficits (decreases in the ability of individuals to acquire known and the senses) in Warfighters during operations.						
FY 2014 Accomplishments: Conducted research to evaluate the utility of magnetoencephalography (Normagnetic fields produced by electrical currents occurring naturally in the binjury, following a post-concussion event; compared two imaging technique for effectively assessing brain injury following a post-concussion event. The Warriors brain injury post-concussion and facilitate appropriate care.	orain), as a tool for differentiating PTSD from the brues (MEG and functional magnetic resonance imag	ain				
FY 2015 Plans: Characterize sleep duration, timing, and continuity on post-concussive synthe relative utility of existing neurocognitive tools for assessment of post-concussion likelihood based on post-exposure symptoms and brain injury	concussive symptoms. Develop algorithms to pred					
FY 2016 Plans: Will conduct studies to inform development of a concussion dosimeter (halgorithm) working prototype to predict the likelihood of concussion based						
Title: Soldier Systems Engineering Architecture			-	2.499	2.120	
Description: This effort will advance medical S&T in the areas of injury p	revention and performance sustainment.					
FY 2015 Plans:						

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PE 0602787A I Medical Technology 869 I Warfighter Health Prot & Perf Stnds							
Appropriation/Budget Activity 2040 / 2	,		,				
B. Accomplishments/Planned Programs (\$ in Millions)			FY 2014	FY 2015	FY 2016		
Warfighter systems. Provide greater insight into informing new research acr	oss the S&T community (medical and non-med s and the systems they employ. Leverages the culoskeletal (muscle, bone, tendons, and ligam	ical) in work nents)					
FY 2016 Plans: Will advance medical research in the areas of injury prevention and performs with new Warfighter systems and provide greater insight into informing new	•						

community (medical and non-medical) in development of optimized Warfighter systems and the interactions between Warfighters and the systems they employ. This effort will leverage research conducted in Physiological Health, Injury Prevention & Reduction, both musculoskeletal and neurosensory, (the sensory activity or functions of the nervous system), sensory activity or functions of the nervous system. Psychological Health and Resilience and Environmental Health and Protection to inform the Warfighter

C. Other Program Funding Summary (\$ in Millions)

Systems Engineering Architecture initiative.

Exhibit R-24 RDT&F Project Justification: PB 2016 Army

N/A

Remarks

D. Acquisition Strategy

N/A

E. Performance Metrics

N/A

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Date: February 2015

34.032

31.594

30.043

Accomplishments/Planned Programs Subtotals

Exhibit R-2A, RDT&E Project Justification: PB 2016 Army								Date: Febr	uary 2015			
Appropriation/Budget Activity 2040 / 2					` ` ` `				Project (Number/Name) 870 <i>I Dod Med Def Ag Inf Dis</i>			
COST (\$ in Millions)	Prior Years	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	FY 2017	FY 2018	FY 2019	FY 2020	Cost To Complete	Total Cost
870: Dod Med Def Ag Inf Dis	-	18.732	17.741	19.245	-	19.245	20.650	22.323	22.791	23.237	-	-

A. Mission Description and Budget Item Justification

This project conducts applied research for medical countermeasures to naturally occurring infectious diseases that pose a significant threat to the operational effectiveness of forces deployed outside the United States. Effective preventive countermeasures (protective/therapeutic drugs and vaccines and insect repellents and traps) protect the Force from disease and sustain operations by avoiding the need for evacuations from the theater of operations. Diseases of military importance are malaria, bacterial diarrhea, and viral diseases (e.g., dengue fever and hantavirus). In addition to countermeasures, this project funds refinement of improved diagnostic tools to facilitate early identification of infectious disease threats in an operational environment, informing Commanders of the need to institute preventive actions and improve medical care. Major goals are to integrate genomics (DNA-based) and proteomics (protein-based) as well as other new biotechnologies into the refinement of new concepts for new vaccine, drug, and diagnostics candidates.

Research conducted in this project focuses on the following five areas:

- (1) Drugs to Prevent/Treat Parasitic (organisms living in or on another organisms) Diseases
- (2) Vaccines for Prevention of Malaria
- (3) Diagnostics and Disease Transmission Control
- (4) Bacterial Disease Threats (diseases caused by bacteria)
- (5) Viral Disease Threats (diseases caused by viruses)

For the refinement of drugs and biological products, studies in the laboratory and in animal models provide a proof-of-concept for these candidate products, including safety, toxicity (degree to which a substance can damage an organism), and effectiveness, and are necessary to provide evidence to the U.S. Food and Drug Administration (FDA) to justify approval for a product to enter into future human subject testing. Additional non-clinical studies are often needed in applied research even after candidate products enter into human testing during advanced technology development, usually at the direction of the FDA, to assess potential safety issues. Drug and vaccine refinement bears high technical risk. Of those candidates identified as promising in initial screens, the vast majority are eliminated after additional safety, toxicity, and/or effectiveness testing. Similarly, vaccine candidates have a high failure rate, because animal testing may not be a good predictor of human response, and therefore candidate technologies/products are often eliminated after going into human trials. Because of this high failure rate, a continuing effort to identify other potential candidates to sustain a working pipeline of countermeasures is critical for replacing those products that fail in testing.

Work is managed by the U.S. Army Medical Research and Materiel Command (USAMRMC) in coordination with the Naval Medical Research Center (NMRC). The Army is responsible for programming and funding all Department of Defense (DoD) naturally occurring infectious disease research requirements, thereby precluding duplication of effort within the Military Departments.

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Promising medical countermeasures identified in this project are further matured under PE 0603002A, project 810.

Exhibit R-2A, RDT&E Project Justification: PB 2016 Army		Date	February 2015	5
Appropriation/Budget Activity 2040 / 2	Project (Number 870 / Dod Med L	,		
The cited work is consistent with the Assistant Secretary of Defense, Rese Strategy.	arch and Engineering Science and Technology,	focus areas and th	e Army Modern	ization
Work in this project is performed by the Walter Reed Army Institute of Research Institute of Infectious Disease (USAMRIID), Fort Detrick, MD; an laboratories.				
B. Accomplishments/Planned Programs (\$ in Millions)		FY 2014	FY 2015	FY 2016
Title: Drugs to Prevent/Treat Parasitic Diseases		4.38	3.359	5.304
Description: This effort conducts assessments on and improves candidate from other collaborations for prevention and treatment of malaria to counter drugs; conducts assessments in animal models of currently available drugs disease transmitted by sand flies); and selects the most effective and safe clinical testing.	r the continuing spread of drug resistance to curr s for use against cutaneous leishmaniasis (a skir	rent i-based		
FY 2014 Accomplishments: Tested new refined anti-malaria and anti-leishmania candidate drug treatme	ents in animal models for safety and effectivenes	SS		
FY 2015 Plans: Continue to optimize candidate drugs and drug combinations to stay ahead	l of emerging drug resistance in malaria parasite	(s).		
FY 2016 Plans: Will use small animal and non-human primate testing to down-select lead of prevent health problems) drugs based on the Triazine (six-sided ring molect class of compounds. Will evaluate safety and effectiveness of lead curative models of malarias (persons getting sick a second time after drug treatment initial treatment).	cule composed of 3 carbon and 3 nitrogen atoms e drugs (Primaquine and Tafenoquine) in small a	nimal		
Title: Vaccines for Prevention of Malaria		4.12	26 4.829	4.025
Description: This effort conducts studies to investigate new candidate vac candidate(s) for continued refinement. A highly effective vaccine would red would minimize the progression and impact of drug resistance to current/fu	luce or eliminate the use of anti-malarial drugs a			
FY 2014 Accomplishments: Assessed immune responses of candidate antigens (substance, usually a para an antibody that recognizes the antigen) and adjuvant (agent that enhances				

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nibit R-2A, RDT&E Project Justification: PB 2016 Army						
		Date: ⊢e	ebruary 2015			
propriation/Budget Activity 0 / 2 R-1 Program Element (Number/Name) PE 0602787A / Medical Technology		Project (Number/Name) 870 / Dod Med Def Ag Inf Dis				
Accomplishments/Planned Programs (\$ in Millions)		FY 2014	FY 2015	FY 2016		
igen) formulations to optimize immunogenicity (a substances ability to provoke an immune response) and effectivenes mal challenge models.	s in					
2015 Plans: complete the development of a human challenge model for malaria; volunteers vaccinated with a malaria vaccine candid deliberately infected with a malarial parasite through the bite of malaria-infected mosquitoes to assess whether or not adidate vaccine can prevent or delay malaria infection. Test individual novel Plasmodium falciparum (causes severe for laria) antigens and antigen combinations in small animals.	the					
2016 Plans: I assess mechanisms of protective immunity of new malaria protein-based vaccine candidates in small animals. Will evaluate response of human volunteers successfully protected from infection by weakened sporozoite s (infective stage of asite transmitted by mosquitoes), to discriminate protective from non-protective immune responses.						
e: Diagnostics and Disease Transmission Control:		2.005	1.679	1.244		
scription: This effort designs and prototypes new medical diagnostic and surveillance tools for the field, focusing on be a field-deployable diagnostic systems and refines interventions that protect Warfighters from biting insects such as sand named leishmaniasis) and mosquitoes (transmit dengue, Japanese encephalitis, malaria, etc.).						
2014 Accomplishments: orporated the methods and assays for detecting & identifying the vector(s) (organisms that transmit infections) of interest assays for detecting pathogens into the next-generation diagnostic system (NGDS) managed by Joint Program Executive for Chemical Biological Defense. Completed the dengue assay for use on mosquito samples determine if they are organized virus.	utive					
2015 Plans: search and develop pathogen specific assays for selected disease causing pathogens to expand the capability of the fill commercially available Rapid Human Diagnostic Devices (RHDDs). Refine pathogen detection assays and field test veillance devices developed to detect pathogens in medically important arthropods (e.g., ticks, mosquitoes and sandflip vector repellent compounds/formulations for application to personal protection measures i.e. uniform treatment or beautiful protection.	es). Test					
2016 Plans: I develop tests to detect arthropod-borne pathogens for use on field deployable detection platform. Will develop a multiple pathogens at the same time). Will conduct field evaluations for the rapid surveillance ect Chikungunya virus.						
e: Viral Threats Research		3.706	3.744	3.241		

R-1 Program Element (Number/Name)		Date: Fe	ebruary 2015	
P 1 Program Floment (Number/Name)			Bullary 2013	1
PE 0602787A I Medical Technology		Number/N Med Def	l ame) Ag Inf Dis	
	F	Y 2014	FY 2015	FY 2016
gic fever virus, and assesses other non-vaccine				
n selection criteria to identify superior performing vac antavirus and dengue vaccine candidates in human				
exposure. Will improve methods for identification and ed or un-vaccinated and exposure risk factors among ally prevalent. Will assess alternative vaccine (e.g. DN on of a substance into skin and muscle by electric cur DNA vaccine approach, will further develop additional g. Crimean Congo Hemorrhagic Fever) Will continue be used as post-exposure prophylactics (given after	A) rent),			
		4.509	4.130	5.43
•				
	ty and			
	gic fever virus, and assesses other non-vaccine include establishing and maintaining of clinical trial signature include establishing and maintaining of clinical trial signature include establishing and maintaining of clinical trial signature include establishing and protective effectiveness of rrhagic fever viruses of military interest. The engue vaccine candidates in human clinical trials. Assert selection criteria to identify superior performing vaccinature and dengue vaccine candidates in human or measure hantavirus neutralizing antibodies. The engue vaccine hantavirus neutralizing antibodies in human or measure hantavirus neutralizing antibodies. The engue vaccine experimental vaccine recipients. Will expand vaccine exposure. Will improve methods for identification and ed or un-vaccinated and exposure risk factors among ally prevalent. Will assess alternative vaccine (e.g. DN or of a substance into skin and muscle by electric currest into skin and muscle by	didates against hemorrhagic fever viruses, i.e. Dengue gic fever virus, and assesses other non-vaccine include establishing and maintaining of clinical trial sites the immunogenicity and protective effectiveness of rrhagic fever viruses of military interest. engue vaccine candidates in human clinical trials. Assess a selection criteria to identify superior performing vaccine candidates in human and measure hantavirus neutralizing antibodies. enong experimental vaccine recipients. Will expand vaccine exposure. Will improve methods for identification and ed or un-vaccinated and exposure risk factors among ally prevalent. Will assess alternative vaccine (e.g. DNA) on of a substance into skin and muscle by electric current), and DNA vaccine approach, will further develop additional eng. Crimean Congo Hemorrhagic Fever) Will continue be used as post-exposure prophylactics (given after a progression).	the immunogenicity and protective effectiveness of rrhagic fever viruses of military interest. engue vaccine candidates in human clinical trials. Assess in selection criteria to identify superior performing vaccine tantavirus and dengue vaccine candidates in human virus and dengue vaccine candidates in human virus and tengue vaccine recipients. Will expand vaccine exposure. Will improve methods for identification and ed or un-vaccinated and exposure risk factors among ally prevalent. Will assess alternative vaccine (e.g. DNA) on of a substance into skin and muscle by electric current), and the DNA vaccine approach, will further develop additional eg. Crimean Congo Hemorrhagic Fever) Will continue be used as post-exposure prophylactics (given after a progression). 4.509 easures, including vaccine candidates, to prevent diarrhea and infection and scrub typhus (a debilitating mite-borne	didates against hemorrhagic fever viruses, i.e. Dengue gic fever virus, and assesses other non-vaccine include establishing and maintaining of clinical trial sites the immunogenicity and protective effectiveness of rrhagic fever viruses of military interest. engue vaccine candidates in human clinical trials. Assess in selection criteria to identify superior performing vaccine santavirus and dengue vaccine candidates in human of measure hantavirus neutralizing antibodies. song experimental vaccine recipients. Will expand vaccine exposure. Will improve methods for identification and ed or un-vaccinated and exposure risk factors among ally prevalent. Will assess alternative vaccine (e.g. DNA) on of a substance into skin and muscle by electric current), a DNA vaccine approach, will further develop additional end. G. Crimean Congo Hemorrhagic Fever) Will continue be used as post-exposure prophylactics (given after a progression). 4.509 4.130 easures, including vaccine candidates, to prevent diarrhea and infection and scrub typhus (a debilitating mite-borne

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army		Date: February 2015
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	Project (Number/Name) 870 I Dod Med Def Ag Inf Dis
	•	

B. Accomplishments/Planned Programs (\$ in Millions) FY 2014 FY 2015 **FY 2016** Refine and evaluate vaccine candidates for Shigella and enterotoxigenic E. coli. Study clinical grade prototype diarrheal disease vaccine candidates for animal testing. Identify and prepare vaccination field trial sites. Maintain chigger (mite) colony used as the challenge model to evaluate current Scrub typhus vaccine candidates. Identify and characterize mechanisms of antibiotic resistance occurring in scrub typhus infections. FY 2016 Plans: Based on down-selection from FY15vaccine formulations, will refine and evaluate vaccine candidates against each of the three major bacterial causes of diarrhea (Shigella, enterotoxigenic E. coli and Campylobacter). Will study clinical grade (suitable for injection into human volunteers) diarrheal disease vaccine candidates in small animals for safety and effectiveness. Will identify and prepare clinical trial field sites for evaluation of candidate vaccines. Will maintain a chigger colony used as the challenge model to evaluate the effectiveness of Scrub typhus vaccine candidates. Will study the mechanisms of immune protection to scrub typhus. **Accomplishments/Planned Programs Subtotals** 18.732 17.741 19.245

C. Other Program Funding Summary (\$ in Millions)

N/A

Remarks

D. Acquisition Strategy

N/A

E. Performance Metrics

N/A

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army										Date: Febr	uary 2015	
Appropriation/Budget Activity 2040 / 2			, ,				Project (Number/Name) 874 / Cbt Casualty Care Tech					
COST (\$ in Millions)	Prior Years	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	FY 2017	FY 2018	FY 2019	FY 2020	Cost To Complete	Total Cost
874: Cbt Casualty Care Tech	-	17.761	15.855	17.005	-	17.005	17.416	19.089	18.929	19.306	-	-

A. Mission Description and Budget Item Justification

This project refines and assesses concepts, techniques, and materiel that improve survivability and ensure better medical treatment outcomes for Warfighters wounded in combat and other military operations. Combat casualty care research addresses control of severe bleeding, revival and stabilization, predictive indicators and decision aids for life support systems, treatment of burns, and traumatic brain injury (TBI). Clinical and rehabilitative medicine research addresses tissue repair including transplant technologies, orthopedic injuries, eye injuries, genitourinary (reproductive and excretory organs) injury, and face trauma.

Research involves extensive collaboration with multiple academic institutions to refine treatments for combat wounds through Armed Forces Institute of Regenerative Medicine (AFIRM). This project is coordinated with the Military Departments and other government organizations to avoid duplication.

Research conducted in this project focuses on the following five areas:

- (1) Damage Control Resuscitation
- (2) Combat Trauma Therapies
- (3) Combat Critical Care Engineering
- (4) Clinical and Rehabilitative Medicine
- (5) Traumatic Brain Injury

All drugs, biological products, and medical devices are refined in accordance with FDA regulations, which govern testing in animals to assess safety, toxicity, and effectiveness and subsequent human subject clinical trials.

Promising efforts identified in this project are further matured under PE 0603002A, project 840.

The cited work is consistent with the Assistant Secretary of Defense, Research and Engineering Science and Technology, focus areas and the Army Modernization Strategy.

Work on this project is performed by U.S. Army Institute of Surgical Research (USAISR), the U.S. Army Dental Trauma Research Detachment (USADTRD), Joint Base San Antonio-Fort Sam Houston, TX; the Walter Reed Army Institute of Research (WRAIR), Silver Spring, MD; and the AFIRM, Fort Detrick, MD.

Efforts in this project support the Soldier Portfolio and the principal areas of Combat Casualty Care and Clinical and Rehabilitative Medicine.

B. Accomplishments/Planned Programs (\$ in Millions)	FY 2014	FY 2015	FY 2016
Title: Damage Control Resuscitation	3.100	3.675	3.903

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army			Date: F	ebruary 2015	
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology		ct (Number/N Cbt Casualty		
B. Accomplishments/Planned Programs (\$ in Millions)			FY 2014	FY 2015	FY 2016
Description: This effort develops and refines knowledge products studies, and media), materials, and systems for control of internal by preserving, storing, and transporting blood and blood products; and	bleeding; minimizing the effects of traumatic blood loss;				
FY 2014 Accomplishments: Continued validation studies of portable, rapid, point-of-care device resuscitation. Performed studies on blood product storage using te		guide			
FY 2015 Plans: Conduct studies to determine effective means to control bleeding vanimal studies into how plasma (fluid component of blood) in combinduced bleeding, reverse blood clotting problems and minimize infand improve longer term treatment / recovery.	pination with other blood products and/or drugs may stop to	rauma			
FY 2016 Plans: Will start animal studies to explore clinical consequences of long-ted devices. Will perform animal studies leveraging FY15 work, evaluatin stopping life-threatening bleeding while maximizing the potential	iting the effectiveness of drug/blood product / fluid combination				
Title: Combat Trauma Therapies			0.592	1.245	1.395
Description: This effort conducts research to enhance the ability to of damaged tissue for casualties with severe wounds to the face, n		epair			
FY 2014 Accomplishments: Formulated an anti-biofilm (an aggregate of microorganisms in whi wound infections, prevent chronic infections, and hasten wound he					
FY 2015 Plans: Continue development of anti-biofilm gel. Perform studies to deter subsequently preventing tissue destruction and excessive scarring					
FY 2016 Plans: Will establish a quantifiable animal model of acutely (sudden onset biofilm wound gel developed in FY15 along with novel products to excessive scarring. Will start animal wound healing studies using contraction and scarring.	reduce inflammation, preserve normal tissue, and prevent				
Title: Combat Critical Care Engineering			1.779	1.369	1.993

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army		Date: F	ebruary 2015	,
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	Project (Number/N 874 / Cbt Casualty		
B. Accomplishments/Planned Programs (\$ in Millions)		FY 2014	FY 2015	FY 2016
Description: This effort refines diagnostic and therapeutic merocessing systems for resuscitation, stabilization, life support, be applied across the pre-hospital, operational field setting, an	surgical support and preservation of vital organ function that			
FY 2014 Accomplishments: Worked to optimize algorithms to improve fluid resuscitation ar algorithms to guide provision of critical care to casualties at the		t		
FY 2015 Plans: Conduct studies to identify the physiological effects of optimizing strategy. Continue research to optimize algorithms to improve decision support algorithms to guide provision of critical care to	fluid resuscitation, prevent hemorrhagic shock, and to develo	o l		
FY 2016 Plans: Will continue studies from FY15 to identify the physiological efforms resuscitation strategy. Will complete development of first general blood-loss prediction algorithm. Will start retrospective analysis of triage and advanced resuscitation efforts by medics, and fact Committee on Tactical Combat Casualty research requirements.	ration patient monitors using light-based sensors and integrati s of trauma registry data to define doctrine for telehealth direct cilitate clinical practice guideline development supporting the	on of		
Title: Clinical and Rehabilitative Medicine		10.333	7.552	7.52
Description: This effort conducts laboratory and animal studie (e.g. skin and muscle, including the genitalia and abdomen) as injury for the care and treatment of battle-injured casualties.				
FY 2014 Accomplishments: : Down-selected novel drug delivery, diagnostic, tissue repair, a for eye trauma. Refined and developed novel drug delivery, diagned cell-based therapies (including stem cells; primitive cell tissue scaffolds (tissue-engineered grafts) in animal models to Exploited FY13 work evaluated burn and wound- healing bone extremities (arms and legs), craniomaxillofacial (head, neck, face).	agnostic, reconstructive, and regenerative strategies. Utilized as that give rise to more specialized cell types as they develop assess soft and hard tissue (e.g. bone) repair and regeneration and soft tissue repair candidate strategies and strategies to re-	and) and on.		
FY 2015 Plans:				

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army		Date: F	ebruary 2015	
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	Project (Number/ 874 / Cbt Casualty		
B. Accomplishments/Planned Programs (\$ in Millions)		FY 2014	FY 2015	FY 2016
Down-select and further develop drug delivery, diagnostic, tissue repair therapies for eye trauma. Based on FY14 work, evaluate candidate str repair and strategies to repair extremities, craniomaxillofacial, genital, a	ategies for burn and wound-healing bone and soft tis	l l		
FY 2016 Plans: Will down-select and further develop drug delivery, diagnostic, tissue recell therapies for eye trauma. Will evaluate candidate strategies for bur address injury to the extremities, craniomaxillofacial, genital, and abdorusing stem cells to repair or restore skin, testicular, muscle, and bone to studies. Will continue studies in animal models of improved life support failure.	n injury, bone and soft tissue repair, and strategies to minal regions. Studies to determine the applicability o issues will advance to preclinical safety and efficacy	f		
Title: Traumatic Brain Injury		1.957	2.014	2.192
Description: This effort supports refinement of drug (includes mature of and therapeutic (i.e. novel use of stem cells or selective brain cooling) strauma.				
FY 2014 Accomplishments: Developed selective brain cooling and nerve stem cell transplantation a and combat-relevant animal model of repeated mild TBI (mTBI) / concu	•	(TBI)		
FY 2015 Plans: Continue to screen and evaluate drugs and other treatment strategies enhancement, and nutraceuticals (products derived from food sources	•	BI.		
FY 2016 Plans: Will down-select candidate drugs and other treatment strategies for treatment injuries)/TBI animal models to develop potential TBI drug treatment (ability of the nervous system to adapt to injury) to enhance and exploit recovery from TBI.	nents. Will characterize the brain tissue neuroplasticit	- 1		
	Accomplishments/Planned Programs Sub	ototals 17.761	15.855	17.005

C. Other Program Funding Summary (\$ in Millions)

N/A

Remarks

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Ar	rmy	Date: February 2015		
Appropriation/Budget Activity	R-1 Program Element (Number/Name)	Project (Number/Name)		
2040 / 2	PE 0602787A I Medical Technology	874 I Cbt Casualty Care Tech		
D. Acquisition Strategy				
N/A				
E. Performance Metrics				
N/A				
14// (

Exhibit R-2A, RDT&E Project Justification: PB 2016 Army								Date: February 2015				
Appropriation/Budget Activity 2040 / 2				PE 0602787A I Medical Technology				Project (Number/Name) FH2 I Force Health Protection - Applied Research				
COST (\$ in Millions)	Prior Years	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	FY 2017	FY 2018	FY 2019	FY 2020	Cost To Complete	Total Cost
FH2: Force Health Protection - Applied Research	-	6.128	6.058	5.278	-	5.278	6.626	5.688	5.688	5.801	-	-

A. Mission Description and Budget Item Justification

This project conducts research to support applied research directed toward the sustainment of a healthy Warfighters from accession through retirement. This research focuses on enhanced protection of Warfighters against health threats in military operations and training. Stressors that adversely affect individual Warfighter health readiness are identified and studied to refine interventions that will protect Soldiers and improve their health and performance in stressful environments. This is follow-on research that extends and applies findings from over a decade of research on Gulf War Illnesses and other chronic multi-symptom illnesses that have suspected nerve and behavioral alterations caused by environmental contaminants and deployment stressors. Key databases include the Millennium Cohort Study and the Total Army Injury and Health Outcomes Database. These databases allow us to evaluate interactions of psychological stress and other deployment and occupational stressors that affect Warfighter health behaviors.

Force Health Protection applied research is conducted in close coordination with the Department of Veterans Affairs. This project contains no duplication with any effort within the Military Departments and includes direct participation by other Services working on Army projects.

Research conducted in this project focuses on the following three areas:

- (1) Millennium Cohort Research
- (2) Biomarkers of Exposure and Environmental Biomonitoring
- (3) Physiological Response and Blast and Blunt Trauma Models of Thoracic (Chest) and Pulmonary (Lung) Injuries

Promising efforts identified in this project are further matured under PE 0603002A, project FH4.

The cited work is consistent with the Assistant Secretary of Defense, Research and Engineering Science and Technology, focus areas and the Army Modernization Strategy.

Work in this project is performed by the U.S. Army Center for Environmental Health Research (USACEHR), Fort Detrick, MD; the Naval Health Research Center (NHRC), San Diego, CA; and the U.S. Army Research Institute of Environmental Medicine (USARIEM), Natick, MA.

Efforts in this project support the Soldier Portfolio and the principal area of Combat Casualty Care.

B. Accomplishments/Planned Programs (\$ in Millions)	FY 2014	FY 2015	FY 2016
Title: Millennium Cohort Research	4.385	4.585	4.796

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602787A I Medical Technology	Project (Number/N FH2 / Force Health Research FY 2014	,	
chological, physical and spiritual impacts dealth Task area employs prospective signed to address mental health and egenerative disorders, fitness and readines	FH2 I Force Health Research FY 2014	Protection - A	
Health Task area employs prospective signed to address mental health and egenerative disorders, fitness and readines		FY 2015	FY 2016
Health Task area employs prospective signed to address mental health and egenerative disorders, fitness and readines	SS		
s of Service members (including injury and ts, training, and other exposures of concer rough longitudinal assessment. These resu aided providers and leadership in mitigatir	rn ults		
ealth outcome and investigate the impact o	of		
as misuse of alcohol and tobacco use in	lize		
e body's response to toxic chemical	0.698	-	
/ironmental contamination and toxic expos	sure		
 //	long-term functional and physical health or as misuse of alcohol and tobacco use in /A) health services. The body's response to toxic chemical	long-term functional and physical health of as misuse of alcohol and tobacco use in /A) health services.	long-term functional and physical health of as misuse of alcohol and tobacco use in /A) health services. ne body's response to toxic chemical 0.698 -

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army			Date: F	ebruary 2015	,
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	_	ct (Number/N Force Health arch	Applied	
B. Accomplishments/Planned Programs (\$ in Millions)			FY 2014	FY 2015	FY 2016
Applied a risk ranking system to provide a screening-level assessment f nanomaterials (materials smaller than a one tenth of a micrometer in at nanomaterials associated with having the highest initial risk rankings of	least one dimension). These studies identified Army				
Title: Physiological Response and Blast and Blunt Trauma Models of Th	noracic (Chest) and Pulmonary (Lung) Injury		1.045	1.473	0.482
Description: This effort supports modeling and assessment of the combinest and lung system.	bined effects of blast, impact, and ballistic trauma or	the			
FY 2014 Accomplishments: Developed musculoskeletal models for predicting individualized physica following blast or blunt impacts. This research showed the physical dec	•	ıre.			
FY 2015 Plans: Develop models to assess endurance for military relevant tasks includin adaptations to fatigue. Expand biomechanical (application of mechanical incorporate relevant tasks, such as lifting and marksmanship that use the	al principles to living organism) performance modeli				
FY 2016 Plans: Will refine performance models developed in FY15, that assessed endured development to predict musculoskeletal adaptations to fatigue. Will refine to incorporate military relevant tasks, such as lifting and marksmanship to the succession of the succ	e biomechanical performance models developed in	FY15,			
	Accomplishments/Planned Programs Su	btotals	6.128	6.058	5.278

C. Other Program Funding Summary (\$ in Millions)

N/A

Remarks

D. Acquisition Strategy

N/A

E. Performance Metrics

N/A

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army						Date: February 2015						
Appropriation/Budget Activity 2040 / 2				R-1 Program Element (Number/Name) PE 0602787A / Medical Technology				Project (Number/Name) VB4 I System Biology And Network Science Technology				
COST (\$ in Millions)	Prior Years	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	FY 2017	FY 2018	FY 2019	FY 2020	Cost To Complete	Total Cost
VB4: System Biology And Network Science Technology	-	4.733	4.796	5.282	-	5.282	5.367	5.463	5.516	5.625	-	-

A. Mission Description and Budget Item Justification

This projects efforts support applied research. The primary capability of systems biology (field of study that focuses on complex interactions within biological systems, using a holistic approach) is to integration and analysis of complex human and animal study data and development of computational disease models, providing a method to discriminate unique combinations of biological molecules corresponding to clinical conditions, supporting transition of research to clinical applications. This capability applies a systematic integrated approach to trace progression of illnesses and diseases and has already shown that the approach significantly reduces time, funds and effort invested in medical product development and refinement. An application of systems biology is to characterize physiological pathways altered by toxic substances enabling identification of the causative toxic substances as well as to understand the injury mechanisms. The detection/identification of physiological markers of exposure to toxic substances can then be used to support medical countermeasure decisions or development of targeted therapeutic drugs.

These examples of more complex, yet integrated approaches to projects studying biological systems (PTSD project) have been shown to reduce both the time and expense of medical product development for the Army

The cited work is consistent with the Assistant Secretary of Defense, Research and Engineering Science and Technology, focus areas and the Army Modernization Strategy.

Work in this project is performed by the US Army Medical Research and Materiel Command (USAMRMC), Fort Detrick, MD / US Army Center for Environmental Health Research (USACEHR).

Efforts in this project support the Soldier Portfolio and the principal area of Systems Biology/Network Sciences.

B. Accomplishments/Planned Programs (\$ in Millions)	FY 2014	FY 2015	FY 2016
Title: Systems Biology	4.733	4.796	5.282
Description: The core capability for multidisciplinary applied research in systems biology enables integration and analysis of complex data from human and animal studies and development of computational network models, allowing us to differentiate among molecular signatures (unique combinations of biological molecules corresponding to clinical conditions) of disease, and supports transition of research to clinical applications. Conduct applied research to identify and characterize (the substance itself and how it causes harm) toxic substances, e.g. Toxic Industrial Chemicals. The molecular and physiological markers of intoxication are then applied to support diagnostic tools development of medical countermeasures. Current studies are addressing exposures to industrial chemicals, toxicogenomics (study of what genes are involved with responding to a toxic			

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Army			Date: F	ebruary 2015	5		
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	Project (Number/Name) VB4 I System Biology And Netwo Technology			twork Science		
B. Accomplishments/Planned Programs (\$ in Millions)		Γ	FY 2014	FY 2015	FY 2016		
substance and those genes associated with susceptibility to the tomicro-biome, metabolomics of heat injury, and modeling toxicity page	xic substance) of metals, health surveillance with assessnathways.	nent of					
FY 2014 Accomplishments: Continued to adapt novel state-of-the-art approaches to enable us relevance, including the technology of the SysBioCube database, clinical data integration with the massive datasets from multi-omic others) approaches and other physiologic findings. Via computer a exposures to identify physiological responses-specific to the expos PTSD and coagulopathy (abnormal blood clotting) biomarkers for fresults.	(data management and analytic system) to further the aim (interrelated "omic" fields such as proteomics, genomics, analysis evaluated high-content data sets from environment to toxic substances. Screened / down-selected cand	and ital date					
FY 2015 Plans: Design and utilize new tools to solve problems that arise in the coucharacteristics of a condition or event) related to suicide, coagulop computer modeling with high-content global molecular data sets from the further therapeutic studies / Follow the successful pattern of constudy coagulopathy and mechanisms of chronic pain. Develop and advanced development by incorporating newly emerging digital FE environmental exposures using computational platforms to identify panel of biomarkers to evaluate adverse reactions from exposure to a specific organ system. Verify the pathway(s) (through tissues, biomarkers of that effect in the rodent model.	pathy and chronic pain in Warfighters. Evaluate and integroup PTSD clinical studies and utilize PTSD animal models arbining clinical trials with animal models, applying this to denhance capabilities to support transition of research to DA-approved approaches. Evaluate high-content data set be biomarkers altered in physiological pathways and develoge to environmental health hazards with a focus on toxicity many part of the property of the prop	s from o a arkers					
FY 2016 Plans: Will improve and apply tools in the SysBioCube to begin to define likelihood of someone attempting vs. completing suicide), coagulor data from PTSD clinical studies to further define signatures within PTSD diagnostic biomarkers, to improve therapeutic drug effective biomarker in animal models to verify new therapeutic drug targetin commercial off-the-shelf technology, and evaluate it in selected me identification of subgroups of PTSD to aid in informing appropriate	pathy, and chronic pain. Will evaluate and model molecul PTSD sufferers into distinct subgroups. Will further refine eness and support therapeutic drug discovery. Will use PT g. Will construct a Laboratory Developed test for PTSD usedical treatment facilities; will continue to advance tests for	SD sing					

Exhibit R-2A, RDT&E Project Justification: PB 2016 Army		Date:	February 201	5
Appropriation/Budget Activity 2040 / 2	R-1 Program Element (Number/Name) PE 0602787A / Medical Technology	Project (Number/Name) VB4 / System Biology And Network Technology		vork Science
B. Accomplishments/Planned Programs (\$ in Millions)		FY 2014	FY 2015	FY 2016

B. Accomplishments/Planned Programs (\$ in Millions)	FY 2014	FY 2015	FY 2016
the design of tests for future diagnostic capabilities that would permit simultaneous measurement of multiple organ specific biomarkers indicative of exposure to a toxic substance.			
Accomplishments/Planned Programs Subtotals	4.733	4.796	5.282

C. Other Program Funding Summary (\$ in Millions)

N/A

Remarks

D. Acquisition Strategy

N/A

E. Performance Metrics

N/A

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