



# The American Physiological Society

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Martin Frank

May 22, 2014

Raymond A Isidro Vega  
Ponce School of Medicine and Health Sciences  
PO Box 7004  
Ponce, PR 00732-7004

Dear Mr. Isidro Vega:

It is my pleasure to inform you that upon the recommendation of the Porter Physiology Development and Minority Affairs Committee you have been awarded a Porter Physiology Development Fellowship for the 2014-2015 academic year.

The term of the fellowship is one year. The stipend of \$28,300.00 will be disbursed in 12 monthly installments between September 1, 2014 and August 31, 2015. Your award will come from the APS Business Office and will be paid directly to your academic institution.

Enclosed are the Condition of Award, Institution Information Sheet, and direct deposit authorization form for your fellowship. Please read them carefully to ensure that you understand all guidelines, requirements, and conditions pertaining to your fellowship. Please complete and return the forms by August 1, 2014 to the APS Education Office via fax at (301) 634-7098 or email to Allison Hood, [ahood@the-aps.org](mailto:ahood@the-aps.org).

In May 2015, the Porter Committee will require a 2-page Progress Report from you, as well as a letter describing your progress in your overall program of study from your advisor. You will receive a reminder as the deadline approaches. We look forward to hearing from you.

Sincerely,

Marsha Lakes Matyas, Ph.D.  
Director of Education Programs

Margarita Currás-Collazo, Ph.D.  
Porter Committee Chair

Brooke Bruthers  
Senior Program Manager, Diversity Programs

CC: Caroline B. Appleyard, Ph.D., Advisor  
Encl.: Condition of Award, Institution Information Sheet

**The American Physiological Society**  
**Porter Physiology Development and Minority Affairs Committee**  
**William Townsend Porter Pre-doctoral Fellowship Award**  
**Condition of Award**

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You must understand that the Society is awarding this financial assistance in reliance upon your assurance that you will adhere to the following conditions. PLEASE CHECK EACH BOX TO INDICATE THAT YOU HAVE READ AND UNDERSTAND THE CONDITIONS.

- I. You understand that the Fellowship does not create any relationship as employer and employee and that you will not receive nor will you be eligible for any benefit provided by the American Physiological Society (APS) to its employees. You and your institution will be solely responsible for complying with all laws, including income tax laws, applicable in connection with payments made by APS.
- II. As a condition precedent to your receipt of this award, you agree that this stipend may only be supplemented by other sources of funding (if any) by your Institution (e.g., stipend supplements, tuition, fees, etc.). Supplementation by your institution is allowable and encouraged contingent upon the following:
- a. The supplementation does not require any additional obligation from the Fellow.
  - b. The amount of allowable supplementation, if any, is determined by the institution according to its formally established policies governing stipend support. These policies must be consistently applied to all individuals in a similar status regardless of the source of funds.
  - c. The Porter Committee receives notification from the Director of Graduate Studies or other appropriate individual at the Fellow's graduate institution that conditions 1 and 2 are met and that the total amount of stipend awarded to the Porter Fellow from all sources does not exceed that amount typically awarded to other graduate students at the same level of training.
- III. You agree to respond to periodic surveys by the APS to track your career path and success. You understand that the APS will use your personal information (including your Social Security number) to find your current address, if an email address cannot be obtained.
- IV. You understand that your active participation in the American Physiological Society is a required part of the Fellowship. This includes:
- a. Maintaining an active student or regular membership in the Society;
  - b. Submitting abstracts to APS meetings (Experimental Biology (EB) or APS conferences) as appropriate;
  - c. Applying for the APS Minority Travel Fellowship Awards, if needed, to attend those meetings;
  - d. Signing up for and reading the APS Minority Physiologists Listserv messages;
  - e. Submitting a biographical survey and photo for the Porter Program web site;
  - f. Completing program entry, exit, and follow-up surveys;
  - g. Submitting an article to an APS Journal, if appropriate.
- V. You understand that your active participation in professional development is a required part of the Fellowship. Each year of the Fellowship, you will:
- a. Complete a professional development workshop or course. This can be an APS Professional Skills Training (live workshop or online course) or other equivalent professional development training;
  - b. Participate in at least one mentoring or outreach opportunity (e.g., mentoring a junior travel fellow at EB, serving as a lunch host at the high school student workshop at EB, participating in Physiology Understanding (PhUn) Week through your home institution, or other outreach or mentoring activity); and

c. Complete 3-4 online professional development activities with your fellow Porter awardees.

- VI. You agree to submit the required progress reports and final reports by the due dates and understand that failure to do so may result in termination of the Fellowship.
- VII. You agree to cite the Fellowship funding on posters and/or papers as “William Townsend Porter Pre-doctoral Fellowship from the American Physiological Society”.
- VIII. You agree to notify the APS Education Office of any **significant** changes to your **original** research proposal, i.e. change in research project, institution or sponsor/research advisor within four (4) weeks. Changes of this nature must be approved by the Porter Physiology Development and Minority Affairs Committee. If this occurs during your fellowship year, please contact Brooke Bruthers, APS Senior Program Manager, Diversity Programs ([bbruthers@the-aps.org](mailto:bbruthers@the-aps.org)) as soon as possible.
- IX. You agree to submit to the jurisdiction of the Circuit Court for Montgomery County, Maryland, to enable the Society to enforce this condition precedent, if necessary.
- X. You confirm that you are working towards your degree at a U.S. Institution.
- XI. You understand that fellowship payments will be deposited into your U.S. Institution’s banking account and will be disbursed to you from your institution.

Please acknowledge your understanding and acceptance of these conditions precedent by providing your signature below. Upon receipt of your acknowledgement and your Institution’s acceptance of the award, the Society will issue the award to your Institution.

**I agree to adhere to the condition precedent set forth above.**

Raymond A. Isidro Vega 5/22/14  
Signature Date

Raymond A. Isidro Vega  
Name (please print)

Daytime Telephone: (787) 432-8020 Email: tonyisidro@me.com

Mailing Address:

1342 Calle Don Quijote  
Costa Caribe Resort  
Ponce, PR 00716

**The American Physiological Society  
Porter Physiology Development and Minority Affairs Committee  
William Townsend Porter Pre-doctoral Fellowship Award  
Institution Condition of Award and Checklist**

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This information sheet must be completed, signed, and returned to the American Physiological Society (APS) via email, fax, or mail no later than **August 1, 2014**. If you have questions, please contact Brooke Bruthers, APS Senior Program Manager, Diversity Programs, [bbruthers@the-aps.org](mailto:bbruthers@the-aps.org); 301-634-7226.

The student listed below has been selected to receive an APS Porter Physiology Development Fellowship:

**Raymond Isidro Vega**

Ponce School of Medicine and Health Sciences  
Fellowship Year: September 2014 – August 2015

The Fellow's Condition of Award form is attached.

**Tenure**

Fellowships are awarded for one year (September-August), with the possibility of a second year of funding if trainee progress is rated by the Committee to be good and the Fellow submits an application for 2<sup>nd</sup> year funding by the submission deadline. Second year Porter Fellows are not eligible for a third year of funding.

**Condition of Award**

Awards will be made to the Fellow's institution. Fellows must be enrolled full-time in a program at a U.S. institution leading to the Ph.D. in the physiological sciences for the entire duration of the fellowship. While many departments require a reasonable quantity of teaching or similar activities as part of the fellow's graduate training and development, the primary purpose of this fellowship is the scholarly development of the trainee. Institutions are expected to supplement Porter stipends to match that of comparable level fellows according to seniority (see Stipends below).

**Stipends**

Annual stipends under the Porter Physiology Development Fellowship Program are \$28,300. Payment of the stipend is made directly to the Fellow's institution. There is no dependency allowance. No tuition or fees will be paid by the Porter Fellowship on behalf of the student since the Porter Committee believes that graduate scholarships and other educational allowances are available at most institutions. In addition, funds for research support will be the responsibility of the training institution. A Fellow may not accept private employment or another similar fellowship stipend simultaneously. Specifically, this stipend may only be supplemented by other sources of funding (if any) by the Fellow's institution (e.g., stipend supplements, tuition, fees, etc.).

Supplementation by the institution is allowable and encouraged contingent upon the following:

- a. The supplementation does not require any additional obligation from the Fellow.
- b. The amount of allowable supplementation, if any, is determined by the institution according to its formally established policies governing stipend support. These policies must be consistently applied to all individuals in a similar status regardless of the source of funds.
- c. The Porter Committee receives notification from the Director of Graduate Studies or other appropriate individual at the Fellow's graduate institution that conditions 1 and 2 are met and that the total amount of stipend awarded to the Porter Fellow from all sources does not exceed that amount typically awarded to other graduate students at the same level of training.

**Cost Share/Matching Data**

Please indicate if your student will receive additional funding from the institution or other sources:

Description:	
College or Dept. Matching	___ Yes ___ No
Amount:	\$

\* The Institution qualifies as a tax exempt entity. (Check one)

Yes     No

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**INSTITUTIONAL REVIEW CHECKLIST**

All individuals responsible for the design and conduct of proposed research involving human research participants have completed (or shall have completed prior to the start of the project) the University’s required educational program on the protection human research participants. (Check one.)

Yes     No     Not applicable

Does the Fellow’s project involve...?	Yes	No	If yes, provide this information
Human Research Participants or Human Tissue IRB Exemption		X	IRB approval date: Date Fellow completed related training:
Vertebrate Animals	X		IACUC approval date: Date Fellow completed related training:
Recombinant DNA, Microorganisms, Biological Toxins or Human Gene Transfer		X	IBC or other approval date: Date Fellow completed related training:
Radioactive Materials		X	IBC or other approval date: Date Fellow completed related training:
Legend Drugs/Controlled Substances License #		X	IBC or other approval date: Date Fellow completed related training:

By signing this form, the Institution certifies that the Fellow is eligible to apply for funds, that the activity is appropriate and fits within the academic mission of the department, and that the conditions of the award will be met by the Institution.

By signing below, the Mentor certifies (1) that the information submitted within the application is true, complete and accurate to the best of the Mentor’s knowledge; (2) that any false, fictitious, or fraudulent statements or claims may subject the Fellow and Mentor(s) to criminal, civil, or administrative penalties; (3) that the Mentor(s) will provide appropriate training, adequate facilities, and supervision for the Fellow; and (4) that the Fellow and Mentor have reviewed the Porter Fellowship Condition of Award and will abide by them.

Signatures	Name (print)	Signature	Date
Mentor/Advisor (required)	Caroline B. Appleyard		
Department Chair (required)	Leon Ferder		
Research Admin Signature (required)	Kenira Thompson		
Center Director Signature (optional)			
Dean Signature (optional)	Olga Rodriguez de Arzola		



## *Ponce School of Medicine & Health Sciences*

P.O. Box 7004, Ponce, PR 00732-7004

Deanship of Research

Tel: (787) 840-2575 Ext. 2258

Fax: (787)841-1040

[kthompson@psm.edu](mailto:kthompson@psm.edu)

April 23, 2013

Dr. Caroline Appleyard  
Department of Physiology  
Ponce School of Medicine & Health Sciences  
Ponce PR 00732

Dear Dr. Appleyard:

The Research Advisory Committee has met to evaluate proposals submitted to the Seed Money for Translational Research available through the Office of Research. The goal of this initiative is to increase the number of productive clinical/ translational research projects at PSMHS, and to help produce pilot data that can be used to submit grant proposals.

Your proposal entitled "**Vitamin D levels and colonic expression of VDR in inflammatory bowel disease**" has been recommended for funding in the amount of **\$5,000**. We congratulate you on submitting an excellent proposal and look forward to the outcomes of this endeavor. You will be required to submit a progress report in six months and following completion of the proposed project. Please remember to acknowledge PSMHS Office of Research on any presentations or papers that result from these efforts.

Funds will be available immediately and we urge you to spend as much as possible prior to June 30<sup>th</sup> 2013 (end of fiscal year). Please submit requisitions electronically (ROC) to "mcruz" for approval and corresponding account number.

**Evaluation criteria:** translational teams composed of a basic scientist and a clinician scientist, budget request up to \$5,000, clear objectives and potential for outcomes (Presentations, papers, grants).

**Comments:** Check whether costs could be lower if serum Vitamin D levels can be covered by insurance, good team, training, high potential for publications.

Cordially,

A handwritten signature in blue ink that reads "Kenira Thompson".

Kenira Thompson, PhD  
Interim Dean for Research



**PONCE SCHOOL OF MEDICINE & HEALTH SCIENCES**  
PO Box 7004, Ponce, PR 00732  
tel. 787-284-2038 - psmrise@psm.edu



June 12, 2013

Raymond A. Isidro Vega  
1342 calle Don Quijote  
Costa Caribe Resort  
Ponce, PR 00716  
[tonyisidro@me.com](mailto:tonyisidro@me.com)

Dear Raymond,

Based on the recommendations of the RISE Internal Advisory Committees and on your performance and adherence to the program criteria, we are pleased to offer you renewed support from the MBRS-RISE Program (NIH-NIGMS #GM082406) for the 2013/2014 academic year.

As an MBRS-RISE scholar, you will receive an annual salary of \$21,000 effective July 1<sup>st</sup>, 2013 through June 30, 2014. This support, which includes tuition, travel allowance and lab supplies, is contingent upon your continued successful compliance with program requirements such as regular meetings with your mentoring team and attendance and participation in all RISE-programmed activities. Travel to a scientific conference will require a presentation.

We encourage you to remain focused on your research, so that you are able to meet the RISE program criteria required of a 4<sup>th</sup> year graduate student. As such, we expect you to provide evidence of submitting an independent fellowship application (NIH or other) by the end of the semester and evidence regarding the status of your manuscript.

On behalf of the RISE program, we wish you every success in your studies and are pleased to have you in the program again. Please feel free to contact me or Ms. Wendy Pacheco if you have any further questions or concerns.


Sincerely,

Caroline B. Appleyard, Ph.D.  
Director, MBRS-RISE Training Program  
Professor, Department of Physiology & Pharmacology




The Puerto Rico Clinical and Translational Research Consortium, National Institutes of Health Grant U54MD007587 to Abreu Y, Medero P and Torres EA.

TUESDAY, JAN 5, 2016 Print Download Reader Text



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### AWARD INFORMATION

**Award Number:** U54MD007587  
**Award Title:** Puerto Rico Clinical and Translational Research Consortium (PRCTRC)  
**OPDIV:** NATIONAL INSTITUTES OF HEALTH (NIH)  
**Organization:** NATIONAL CENTER ON MINORITY HEALTH AND HEALTH DISPARITIES (NIMHD)  
**Award Class:** COOPERATIVE AGREEMENT

[Award Abstract](#)

Showing: 1 - 9 of 9 Award Actions

FY	Recipient	City	State	CFDA	Budget Year of Support	Award Code	Agency	Action Issue Date	Amount This Action
2015	<a href="#">UNIVERSITY OF PUERTO RICO</a>	SAN JUAN	PR	<a href="#">93307</a>	5	000	NIH	04-29-2015	<a href="#">\$ 3,100,000</a>
2015	<a href="#">UNIVERSITY OF PUERTO RICO</a>	SAN JUAN	PR	<a href="#">93307</a>	5	001	NIH	08-05-2015	<a href="#">\$ 0</a>
2015	<a href="#">UNIVERSITY OF PUERTO RICO</a>	SAN JUAN	PR	<a href="#">93307</a>	5	002	NIH	08-20-2015	<a href="#">\$ 0</a>
<b>Fiscal Year 2015 Total:</b>									<b>\$ 3,100,000</b>

U54CA163071 to Appleyard CB



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### AWARD INFORMATION

**Award Number:** U54CA163071  
**Award Title:** Ponce School of Medicine-Moffitt Cancer Center Partnership (1/2)  
**OPDIV:** NATIONAL INSTITUTES OF HEALTH (NIH)  
**Organization:** NATIONAL CANCER INSTITUTE (NCI)  
**Award Class:** COOPERATIVE AGREEMENT

▶ Award Abstract

Showing: 1 - 8 of 8 Award Actions

FY	Recipient	City	State	CFDA	Budget Year of Support	Award Code	Agency	Action Issue Date	Amount This Action
2015	<a href="#">PONCE MEDICAL SCHOOL FOUNDATION INC.</a>	PONCE	PR	<a href="#">93397</a>	4	000	NIH	08-24-2015	<a href="#">\$ 1,378,892</a>
2015	<a href="#">PONCE MEDICAL SCHOOL FOUNDATION INC.</a>	PONCE	PR	<a href="#">93397</a>	4	001	NIH	09-11-2015	<a href="#">\$ 167,722</a>
<b>Fiscal Year 2015 Total:</b>									<b>\$ 1,546,614</b>

FY	Recipient	City	State	CFDA	Budget Year of Support	Award Code	Agency	Action Issue Date	Amount This Action
2014	<a href="#">PONCE MEDICAL SCHOOL FOUNDATION INC.</a>	PONCE	PR	<a href="#">93397</a>	3	000	NIH	08-27-2014	<a href="#">\$ 1,335,809</a>
2014	<a href="#">PONCE MEDICAL SCHOOL FOUNDATION INC.</a>	PONCE	PR	<a href="#">93397</a>	3	001	NIH	08-29-2014	<a href="#">\$ 169,654</a>

The PHSU Molecular and Genomics Core Laboratory, RCMI Grant No. RR003050/MD007579

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## Grants for Grant G12MD007579

### RCMI Program at the Ponce School of Medicine

Since its inception in 1985, the RCMI Program has been instrumental in shifting the institution from a traditional teaching school to a vigorous research center. The institution has experienced a substantial development of its human as well as its physical infrastructure. Along these lines, through auspices of the RCMI Program, the institution has been able to acquire state-of-the-art facilities, equipment, and other resources, required to pursue competitive basic, clinical, and behavioral research. Some of the research areas developed include; Retrovirology, HIV/AIDS, Molecular Biology, Human and Bacterial Genetics, Protein Chemistry and Enzymology, Immunology, Cancer Biology, and Epidemiology. As a direct impact of this development, the institution experienced a substantial improvement in; the number and quality of peer-reviewed manuscripts elicited by the faculty, the number of scientific presentations at competitive forums at the national as well as international levels, and in the number of submitted and funded research and research training initiatives. The RCMI Program, through the period of years 2008-2013, proposes to continue the development of its human and physical infrastructure in order for the institution to reach its major goals and objectives contained in the Institutional Strategic Plan for Research. Particular emphasis will be given to the development of health disparities research in Puerto Rico and the Caribbean Basin, and the development of translational research. The proposed Program consists of four Core activities (Administration, AIDS Research Infrastructure Program, Molecular Biology, and Behavioral) and five Research Pilot Projects. The major goals and objectives of the present competitive continuation application are to: (1) provide administrative support to foster continued progress of RCMI Program activities, (2) implement a formal Faculty Mentoring Program to assist investigators in developing independent and competitive research careers, (3) strengthen faculty recruitment, development, and retention, (4) strengthen the HIV/AIDS Research Infrastructure Program and the Molecular Biology Core, (5) implement and further develop a Behavioral Neurosciences Core, (6) provide the necessary leadership and guidance for the development of five Research Pilot Projects presented by junior faculty, and (7) implement a comprehensive evaluation program to provide continuous assessment of progress achieved by all RCMI Program activities.

Title	Organization	People	Start	End	Total	Subtotal	Current
Rcmi Program At Ponce School Of Medicine: Addressing Health Disparities	Ponce School Of Medicine	Torres, Jose A	2015-04-01	2016-03-31	\$2,211,341		\$2,211,341
Administration Core	Ponce School Of Medicine	Torres, Jose A	2015-04-01	2016-03-31		\$552,836	