National Institutes of Health (NIH): National Institutes of Health (NIH)

Data Type

Summarize the types (for example, 256-channel EEG data and fMRI images) and amount (for example, from 50 research participants) of scientific data to be generated and/or used in the research.

Guidance:

Descriptions may include the data modality (e.g., imaging, genomic, mobile, survey), level of aggregation (e.g., individual, aggregated, summarized), and/or the degree of data processing.

Data types expected to be shared under the GDS Policy should be described in this element. Note that the GDS Policy expects certain types of data to be shared that may not be covered by the DMS Policy's definition of "scientific data". For more information on the data types to be shared under the GDS Policy, consult [Data Submission and Release Expectations](#).

Describe which scientific data from the project will be preserved and shared. NIH does not anticipate that researchers will preserve and share all scientific data generated in a study. Researchers should decide which scientific data to preserve and share based on ethical, legal, and technical factors. The plan should provide the reasoning for these decisions.

A brief listing of the metadata, other relevant data, and any associated documentation (e.g., study protocols and data collection instruments) that will be made accessible to facilitate interpretation of the scientific data

Related Tools, Software and/or Code

Indicate whether specialized tools are needed to access or manipulate shared scientific data to support replication or reuse, and name(s) of the needed tool(s) and software. If applicable, specify how needed tools can be accessed.

Standards

Describe what standards, if any, will be applied to the scientific data and associated metadata (i.e., data formats, data dictionaries, data identifiers, definitions, unique identifiers, and other data documentation).

Data Preservation, Access, and Associated Timelines

The name of the repository(ies) where scientific data and metadata arising from the project will be archived.

Guidance:

See [Selecting a Data Repository](#) for information on selecting an appropriate

repository.

How the scientific data will be findable and identifiable, i.e., via a persistent unique identifier or other standard indexing tools.

When the scientific data will be made available to other users and for how long. Identify any differences in timelines for different subsets of scientific data to be shared.

Guidance:

Note that NIH encourages scientific data to be shared as soon as possible, and no later than the time of an associated publication or end of the performance period, whichever comes first. NIH also encourages researchers to make scientific data available for as long as they anticipate it being useful for the larger research community, institutions, and/or the broader public.

Access, Distribution, or Reuse Considerations

Informed consent

Privacy and confidentiality protections consistent with applicable federal, Tribal, state, and local laws, regulations, and policies

Whether access to scientific data derived from humans will be controlled

Any restrictions imposed by federal, Tribal, or state laws, regulations, or policies, or existing or anticipated agreements

Any other considerations that may limit the extent of data sharing. Any potential limitations on subsequent data use should be communicated to the individuals or entities (for example, data repository managers) that will preserve and share the scientific data. The NIH ICO will assess whether an applicant's DMS plan appropriately considers and describes these factors. For more examples, see [Frequently Asked Questions](#) for examples of justifiable reasons for limiting sharing of data.

Oversight of Data Management and Sharing

Indicate how compliance with the DMS Plan will be monitored and managed, the frequency of oversight, and by whom (e.g., title, roles). This element refers to oversight by the funded institution, rather than by NIH. The DMS Policy does not create any expectations about who will be responsible for Plan oversight at the institution.