makes clear the point that a department should not be allowed to get into the position of investigating itself.

With respect to the scope of an investigation of misconduct, the AAMC takes the broad view: "... consideration should be given to the review of all (emphasis added) research with which the individual is involved," it says, adding that if a person is found guilty, institutions and sponsoring agencies with which he had been associated in the past should also be informed "if there is reason to believe that the validity of previous research might be questionable."

If the person is exonerated, "formal efforts should be undertaken to restore

fully the reputation of the researcher and others under investigation," the statement says. Committee members acknowledge that this would be difficult to accomplish altogether.

The AAMC guidelines encompass concern for the protection of persons who bring allegations "in good faith,"—junior faculty or technicians, for instance, might fear job loss or salary reduction if there is no institutional policy on their behalf—but the report does not go as far in this direction as some committee members would have liked. One of the panel members argued, for example, that accusers be granted permanent anonymity, as are whistle-blowers in certain large corporations that

have established ombudsman's offices to which employees can report misconduct. But the idea that one has a right to know one's accuser prevailed.

In a section dealing with establishing fair procedures, the report notes that the accused must have an "adequate opportunity to explain and defend his actions, including, when appropriate, confronting those persons who presented evidence of fraud." Anticipating a legal challenge in cases in which a person is found guilty, the AAMC notes, "If action adverse to a faculty member is taken . . . and such action is later challenged in court, the court ordinarily will look to see if fair procedures have been followed. . . ."

The report advises universities to con-

NIH Grapples with Misconduct

The National Institutes of Health (NIH) held a symposium for its staff on 25 June to discuss the question of cheating in research. The aim, according to William Raub, organizer of the program and head of extramural research, was to answer questions, exchange ideas, and report on progress toward the development of a unified NIH policy on misconduct, which is scheduled to emerge in finished form at the end of the summer.

At the start of the session, Raub outlined questions that today confront NIH staffers: What to do about allegations? What data is to be gathered? To whom to report problems, and under what circumstances? What sanctions should be considered? "These questions," he said, "until a few months ago were largely unanswered, much less addressed."

He also noted some of the prickly questions that face NIH officials. One incident recently concerned whether the results of an investigation should be shared with members of a study section, the group of scientists who decide whether a research proposal has merit and is worthy of federal funding. The initial NIH impulse had been to separate ethical questions from those of technical ability. In this case, however, "the view that eventually prevailed was that the offense was inextricably caught up with the qualification of the person to do science, and could not be separated from areas of technical judgment." All such decisions, he noted, are currently made on a case by case basis.

One NIH staffer said a question had arisen in a study section about whether a coprincipal investigator was falsifying data. "The work was just too good to be true," he remarked. He asked Raub whether higher NIH officials should be informed in such a case, and what should be done about the investigator's other grant applications. Raub replied, "When in doubt, report it," if only to clarify the problem. Rather than outright fabrication, said Raub, this particular case might just represent the "overzealous interpretation of data."

Another staffer opined that questions of data falsification confront members of study sections on at least one occasion almost every time they meet (which is about three times a year). Still another questioner wondered about the legal liability of study section members on matters of libel and slander. The NIH general counsel replied that members, even though not direct federal employees, were working for the government and that the comments they made in the course of their work were usually privileged. And if there was any problem, he reassured his questioner, a study section member would be represented by the Department of Justice.

Discussion turned to protecting the rights of the accused. Whenever evidence of a problem comes to light, said Raub, the accused is informed. However, he noted that NIH administrators are still learning the fine points of the procedure. He recounted the story of how a lawyer, representing a scientist recently investigated, called with several complaints about the handling of his client's case. NIH had mailed him a copy of the completed report, but failed to mention if it contained all the charges or whether NIH would consider a rebuttal. "I assured him those were all the charges and that, of course, we would consider a rebuttal. That's why we sent it along. We went through this process for about a half hour, and when I put down the phone I realized that the sensitivities of all of us, starting with myself, need to go an awful lot higher to make it clear that people not only accused but also under investigation have the full range of their rights.'

Within the next month, according to Raub, a draft document on the new NIH policy will start making the rounds. By the end of the summer, it will be a set of finished reports that will offer guidance not only to NIH staffers but also to client universities and institutions. "We need to inform them of their obligations," said Raub, such as when to inform a federal patron of suspected fakery.

The problem of misconduct, according to Raub, is small when the total number of NIH awards are taken into consideration, "yet the capacity for doing violence to public confidence in NIH and the scientific community is such that the topic has become a first order concern."

-William J. Broad