An Unprecedented Year

2020 was a year unlike any other in the history of the NIH Clinical Center. The emergence and spread of the SARS-CoV-2 (Covid-19) pandemic had a tremendous impact on every aspect of the operations of the hospital.

In March, the hospital reduced its patient population to only those patients too sick to be discharged or for whom discharge would negatively impact their treatment. And like the rest of the NIH, the Clinical Center reduced its staff footprint, allowing non-medical staff and researchers to work from home. At the same time, the hospital implemented new screening procedures for patients and staff based on guidance from the Centers for Disease Control and Prevention. For the first time, the Clinical Center had to limit the number of visitors allowed onsite.

At the end of May, the Clinical Center used a strict set of criteria to begin to phasing-in employees to work physically within the hospital and slowly increase the patient census, roughly doubling the number of inpatient and outpatient visits from its strict limits in March. These measures are still in place and will last throughout 2021.

“The safety of our patients and staff cannot be jeopardized,” said Dr. Jim Gilman, CEO of the Clinical Center, during a Town Hall meeting for hospital staff on May 6, 2020. “We can never forget we’re doing this in the middle of a pandemic.”
The NIH Clinical Center is the research hospital on the National Institutes of Health (NIH) campus in Bethesda, Md., where NIH scientists and volunteer patients partner to create medical innovations.

Some of the Clinical Center’s numerous successes include pioneering the cure of cancerous solid tumors with chemotherapy; the use of nitroglycerin to treat heart attacks; identifying a genetic component in schizophrenia; conducting the first successful replacement of a mitral valve to treat heart disease; and creating blood tests to identify both Acquired Immune Deficiency Syndrome (AIDS) and hepatitis.

These and other research advances originating from the Clinical Center are now standard practice in medical treatment throughout the world. The rapid translation of scientific observations and laboratory discoveries into new approaches for diagnosing, treating and preventing disease have improved and saved countless lives.

Patients at the Clinical Center consent to participate in research studies, also called protocols, and are treated without charge. Patients who have medical conditions being studied by NIH Institutes or Centers and who meet the specific inclusion criteria can enroll in research studies at the hospital. About 1,600 clinical research studies are underway at the Clinical Center, including those focused on cancer, infectious diseases, blood disorders, heart disease, lung disease, alcoholism and drug abuse. The Clinical Center has been a leader in “bench-to-bedside” medicine. Its specialized hospital design places patient care units in close proximity to research laboratories, facilitating interaction and collaboration among clinical researchers. The Clinical Center also offers world-class training in clinical research for physicians, nurses, medical students, dentists and other members of the medical research community. This environment, offering access to the most advanced techniques, equipment and ideas, attracts a global network of top scientists.

The hospital has 200 inpatient beds, 11 operating rooms, 93 day hospital stations, critical care services and research labs, an ambulatory care research facility for outpatient visits, two onsite pharmacies, a blood bank and a complex array of imaging and diagnostic services. The Clinical Center’s infrastructure allows for isolation capabilities for infection control while patients participate in clinical research studies.

Over half a million patients from all 50 states, and many countries around the world, have participated in clinical research at the Clinical Center. Full details are available on page 4.
NIH Clinical Center Patient Data

Home States of All Active Clinical Center Patients - 2020

Patient Demographics

Distribution of Clinical Center Patients by Self-Identified Race

<table>
<thead>
<tr>
<th>Race</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>64%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>18%</td>
</tr>
<tr>
<td>Asian</td>
<td>7%</td>
</tr>
<tr>
<td>Not Reported</td>
<td>7%</td>
</tr>
<tr>
<td>Multiple</td>
<td>4%</td>
</tr>
<tr>
<td>American Indian/Alaskan</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Hawaiian/Pacific Islander</td>
<td>&lt;1%</td>
</tr>
</tbody>
</table>

Age Distribution of Clinical Center Patients

- under 18 years: 10%
- 19 - 40 years: 26%
- 41 - 60 years: 33%
- over 60 years: 30%

Gender Breakdown of Clinical Center Patients

- female: 49%
- male: 51%
- Not Reported: <1%

Demographic information is based on 15,485 patients seen in the Clinical Center in the 2020 fiscal year.
Key Facts and Figures

2020 Workforce Distribution

The Clinical Center has a workforce of 1,964 permanent federal employees.

- **44%** Nursing and patient care/support services – 872
- **38%** Clinical and imaging sciences departments – 746
- **12%** Operations – 226
- **6%** Administration – 120

All workforce figures from October 1, 2020.

---

2020 Budget by Major Category

Clinical Center Budgets by Major Category for Fiscal Year 2020 ($564.7 Million)

<table>
<thead>
<tr>
<th>Category</th>
<th>Percent</th>
<th>FY20 Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries &amp; Benefits</td>
<td>50.7%</td>
<td>286,115,671</td>
</tr>
<tr>
<td>Medications</td>
<td>11.3%</td>
<td>63,852,728</td>
</tr>
<tr>
<td>Contracts-Labor</td>
<td>7.9%</td>
<td>44,638,092</td>
</tr>
<tr>
<td>Assessments</td>
<td>6.8%</td>
<td>38,495,005</td>
</tr>
<tr>
<td>All Other</td>
<td>1.7%</td>
<td>9,441,643</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>564,760,000</strong></td>
</tr>
</tbody>
</table>

Note: Non labor contracts include travel, maintenance agreements, training and other similar expenses. The All Other category includes travel, maintenance agreements and training.

All budget figures from October 1, 2020.

---

Patient Activity 2018–2020

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2019</th>
<th>2020*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions</td>
<td>4,531</td>
<td>4,694</td>
<td>3,120</td>
</tr>
<tr>
<td>New patients</td>
<td>9,755</td>
<td>9,157</td>
<td>5,390</td>
</tr>
<tr>
<td>Inpatient days</td>
<td>41,579</td>
<td>42,541</td>
<td>31,728</td>
</tr>
<tr>
<td>Average length of stay (days)</td>
<td>8.9</td>
<td>9.3</td>
<td>10.6</td>
</tr>
<tr>
<td>Outpatient visits</td>
<td>95,220</td>
<td>96,860</td>
<td>62,499</td>
</tr>
</tbody>
</table>

*To ensure safe hospital operations, patient admissions were reduced effective March 2020 due to the SARS-CoV-2 (Covid-19) pandemic.

---

The NIH Clinical Center had **41,622** queries about clinical trials in the 2020 fiscal year.

Participate in research - Contact 1.800.411.1222 or visit clinicalcenter.nih.gov/recruit/
Clinical Research Activity 2016–2020

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Onsite Protocols</td>
<td>1,636</td>
<td>1,631</td>
<td>1,585</td>
<td>1,534</td>
<td>1,535</td>
</tr>
<tr>
<td>New Onsite Protocols</td>
<td>136</td>
<td>141</td>
<td>141</td>
<td>125</td>
<td>158</td>
</tr>
<tr>
<td>Principal Investigators</td>
<td>495</td>
<td>506</td>
<td>518</td>
<td>508</td>
<td>496</td>
</tr>
</tbody>
</table>

NIH Clinical Center Telehealth Appointments

Total Appointments Completed: 10,923

Clinical Trial Phases

Phase 1 (toxicity)
299 studies (37%)
Tests a new medication or treatment for the first time in a small group of people (20–80) to evaluate its safety, determine a safe dosage range and identify side effects.

Phase 2 (activity)
473 studies (57%)
Medication or treatment is given to a larger group of people (100–300) to see if it is effective and further evaluate its safety.

Phase 3 (efficacy)
41 studies (5%)
Medication or treatment is given to large groups of people (3,000 or more) to confirm its effectiveness, monitor side effects, compare it with commonly used treatments and collect information to ensure it is used safely.

Phase 4 (safety)
11 studies (1%)
Conducted after the drug or treatment has been marketed to collect information about the effect of the medication or treatment in various populations and to determine any side effects from long-term use.
Established in 2016, the National Institutes of Health (NIH) Clinical Center Research Hospital Board provides advice and recommendations to the NIH Director on the NIH Clinical Center’s policies and procedures regarding hospital operations, safety, quality and regulatory compliance.

Using leading institutions in health care and research as benchmarks, the Board will provide advice in the following areas:

- Risk areas that need to be addressed by hospital and agency leadership
- Implementation of policies and strategic plans
- Requirements for hospital leadership
- Performance of the CEO including evaluation based on operating plans and quality metrics

The duties of the Board are solely advisory and shall extend only to the submission of advice and recommendations to the NIH Director and CEO of the NIH Clinical Center, which will be non-binding to the NIH.

More information: ccrhb.od.nih.gov/charter.html
Mission Statement
We provide hope through pioneering clinical research to improve human health.

Guiding Principles
- Individual and collective passion for high reliability in the safe delivery of patient-centric care in a clinical research environment.
- Excellence in clinical scientific discovery and application
- Compassion for our patients, their families and one another
- Diversity and inclusion for both people and ideas
- Innovation in both preventing and solving problems
- Accountability for optimal use of all resources
- Commitment to professional growth and development

National Institutes of Health Institutes and Centers

NIH Clinical Center (CC)
National Cancer Institute (NCI)
National Eye Institute (NEI)
National Heart, Lung, and Blood Institute (NHLBI)
National Human Genome Research Institute (NHGRI)
National Institute on Aging (NIA)
National Institute on Alcohol Abuse and Alcoholism (NIAAA)
National Institute of Allergy and Infectious Diseases (NIAID)
National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)
National Institute of Biomedical Imaging and Bioengineering (NIBIB)
Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)
National Institute on Deafness and Other Communication Disorders (NIDCD)
National Institute of Dental and Craniofacial Research (NIDCR)
National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)
National Institute on Drug Abuse (NIDA)
National Institute of Environmental Health Sciences (NIEHS)
National Institute of General Medical Sciences (NIGMS)
National Institute of Mental Health (NIMH)
National Institute on Minority Health and Health Disparities (NIMHD)
National Institute of Neurological Disorders and Stroke (NINDS)
National Institute of Nursing Research (NINR)
National Library of Medicine (NLM)
Center for Information Technology (CIT)
Center for Scientific Review (CSR)
John E. Fogarty International Center for Advanced Study in the Health Sciences (FIC)
National Center for Complementary and Integrative Health (NCCIH)
National Center for Advancing Translational Sciences (NCATS)