Independent Medical Education Grant
Request for Proposals [RFP #103]
From Current Gaps to Future Insights: Understanding the Unmet Need in Non-Actionable Genomic Alteration (nAGA) Non-Small Cell Lung Cancer (NSCLC)
Daiichi Sankyo, Inc.
Medical Proficiency Acceleration Center (MPAC)
Date RFP Issued: September 24, 2026

Daiichi Sankyo believes education is a source to accelerating best, personalized evidence into clinical practice for the best interest of patient care. Our commitment is to make grant funding available for independent, fair, balanced, and scientifically accurate medical education initiatives that receive no influence from our organization in submission, design, or implementation. Grant conduct is required to comply with all expected regulatory requirements.

We are pleased to issue this RFP as a result of a collaboration between the US Office of Grants and Education, MPAC team and the Medical Research & Strategy Team US Medical Affairs in order to provide education to a US HCP audience aligned to the following specified educational parameters below.

I. Eligibility

Eligible Applicants

- Medical education companies
- Healthcare professional organizations/societies
- Non-profit organizations

Geographic Scope

US programs that reach HCPs primarily in the US region (≥ 51%).

II. Requirements

Area of Interest/Identified Gap

The treatment landscape for metastatic non-small cell lung cancer without actionable genomic alterations (nAGA mNSCLC) has evolved substantially with the incorporation of immune checkpoint inhibitor (IO)-based treatment approaches and other therapeutic advances. These therapies have improved outcomes for many patients and expanded treatment options across the advanced disease setting. [1–4]

Despite these advances, variability in treatment response, durability of benefit, and long-term outcomes continue to be observed across patient populations. Differences in clinical outcomes have been reported according to factors such as disease burden, CNS involvement, performance status, PD-L1 expression, and other disease characteristics. The role of biomarkers in characterizing patient populations remains an area of ongoing investigation. [5–8]

Clinical trial and real-world studies have also contributed to a growing understanding of treatment outcomes in routine clinical practice. These analyses have described variability in treatment continuity, disease progression, and receipt of subsequent therapy following progression, providing additional perspective on outcomes observed outside of controlled clinical trial settings. [9–11]

As evidence continues to evolve, opportunities remain to improve understanding of factors associated with variability in outcomes across the treatment continuum, including how patient characteristics, disease features, and treatment patterns may influence clinical trajectories. Additional understanding is also needed regarding the interpretation and application of clinical trial and real-world evidence across diverse patient populations. [1–11]

We are seeking proposals that address the following educational gaps:

- Examine variability in treatment durability, disease progression, and long-term outcomes observed in advanced nAGA NSCLC.
- Recognize how patient and disease characteristics, including CNS involvement, disease burden, performance status, PD-L1 expression, and other prognostic factors, may influence clinical outcomes.
- Identify the current and evolving biomarker landscape in advanced nAGA NSCLC, including PD-L1 expression and other biomarkers under evaluation.
- Assess differences in clinical trajectories and treatment patterns observed in routine clinical practice, including treatment continuity, treatment attrition, and receipt of subsequent therapy following disease progression.
- Interpret clinical trial and real-world evidence describing outcomes across patient populations and disease characteristics.

Audience
Medical oncologists, pathologists, and advanced practice providers

Monetary Range of Support
DSI will consider grants **not to exceed $300,000**. DSI will consider multi-supported programs. All proposals should also be submitted to our collaboration partner, AstraZeneca.

Recommended Learning Format
Digital or virtual education formats are preferred. Innovative, scalable approaches are encouraged.

Key Dates

- RFP release date: 9/24/2026
- Grant application due date: **10/16/2026**
- Anticipated grant notification date: ~11/16/2026
- Anticipated program start date (estimated): **Q1 Calendar Year 2027**

Submission Details
The following must be provided within each grant application:

i. Educational Needs Assessment (with references)
ii. Letter of Request
iii. Learning Objectives
iv. Program Outline/Agenda
v. Educational outcomes plan and methodology
vi. Full Proposal

How to Submit

1. All applications may be submitted via the funding request portal at: Grant Submission Site: https://daiichisankyo.us/corporate-giving-and-support
2. After accessing this link, please select "Apply for Funding" and "Continue".
3. In the drop-down option, select "Independent Medical Education".
4. **Please include the RFP reference number noted in the header of this RFP [RFP #103] within the title of your grant application to expedite review**.

III. General Questions

Inquiries Related to this RFP
Logistical questions regarding grant submissions can be submitted to oge-cme_us@daiichisankyo.com and will be channeled to the appropriate therapeutic area Grant manager. As always, we thank you for your contributions to continued education, professional development, and the ultimate elevation of best, personalized care for patients.

IV. Closing Information

All submissions will be reviewed in compliance to our Standard Operating Procedures and Policies, impartially without any preset grant decision(s) made at the release of this packet. Daiichi Sankyo does not support the costs incurred during the preparation of any grant.

Daiichi Sankyo adheres to the commercial support standards established by the Accreditation Council for Continuing Medical Education (ACCME®). The company also complies with the principles established by the Office of Inspector General (OIG) Compliance Guidance for Pharmaceutical Manufacturers and Pharmaceutical Research and Manufacturers of America (PhRMA) Code on Interactions with Medical Professionals. Additionally, https://daiichisankyo.us/corporate-giving-and-support provides information on criterion for submission, our process, and some Frequently Asked Questions.

References

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2. Siegel RL, et al. Cancer Statistics, 2026. CA Cancer J Clin. 2026:e70043
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4. Peters S, et al. Advanced NSCLC: evolving treatment landscape and future directions. J Thorac Oncol. 2024;20:76-93
5. Hendriks LE, et al. Management of brain metastases in NSCLC. Ann Oncol. 2023;34:951-966
6. Frost N, et al. Clinically challenging populations in NSCLC. Am Soc Clin Oncol Educ Book. 2024;44:e432524
7. Bazhenova L, et al. Clinical factors influencing outcomes in advanced NSCLC. J Clin Oncol. 2026;44:e101-e112
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9. Peters S. Real-world evidence in advanced NSCLC: opportunities and challenges. ESMO Open. 2026;11:1-11
10. Goldschmidt JH, et al. Real-world treatment patterns and outcomes in advanced NSCLC. Drugs. 2024;11:425-439
11. Kehl KL, et al. Treatment sequencing and outcomes among patients with advanced NSCLC in routine clinical practice. JAMA Netw Open. 2021;45:e2111113

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