



U.S. GOVERNMENT PRINTING OFFICE
OFFICE OF INSPECTOR GENERAL

**AUDIT REPORT
REPORT NUMBER 14-02**

**Commercial Printing and Dissemination of
Government Information at the
National Institutes of Health**

November 29, 2013

Date

November 29, 2013

To

Chief of Staff
Superintendent of Documents

From

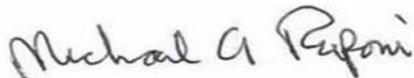
Inspector General

Subject

Final Report—Commercial Printing and Dissemination of Government Information at the National Institutes of Health
Report Number 14-02

Enclosed please find the subject final report. Please refer to the “Results in Brief” for the overall audit results. Our evaluation of your response has been incorporated into the body of the report and the response is included in its entirety at Appendix C. We consider management’s comments responsive to all of the recommendations. The recommendations are resolved and will remain open pending our verification of the completion of the agreed upon actions.

We appreciate the courtesies extended to the audit staff during our review. If you have any questions or comments about this report, please do not hesitate to contact Mr. Jeffrey C. Womack, Assistant Inspector General for Audits and Inspections at (202) 512-2009 or me at (202) 512-0039.



MICHAEL A. RAPONI
Inspector General

Enclosure

cc:

Public Printer
Deputy Public Printer
General Counsel
Acting Managing Director, Customer Services

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Office of Inspector General

Report Number 14-02

November 29, 2013

Commercial Printing and Dissemination of Government Information at the National Institutes of Health

Introduction

The Office of Inspector General (OIG) conducted a performance audit in response to a complaint alleging printing of multiple products by the National Library of Medicine (NLM), part of the National Institutes of Health (NIH), which did not adhere to public printing and document retention requirements as title 44 of the United States Code requires. We expanded our audit to incorporate printing activities at NIH.

Federal law requires that, with limited exceptions, Federal printing be performed by or through the Government Printing Office (GPO). And once published, some agency information dissemination products must be submitted to the Federal Depository Library Program (FDLP), which is a program within GPO designated to preserve Government documents and make them available to the public. GPO catalogs and indexes each of the products and, at the close of each regular session of Congress, publishes a comprehensive index of public information products.

Within GPO, Customer Services is responsible for the Print Procurement Program. GPO generally provides printing services to Federal agencies through an acquisition program that relies on the commercial sector by passing contractor costs on to its Government customers. The Superintendent of Documents (SOD) is responsible for acquisition, classification, dissemination, and bibliographic control of tangible and electronic Government publications.

GPO receives funding through two appropriations: (1) the Congressional Printing and Binding Appropriation, which is used for in-house printing of congressional activities, and (2) the Salaries and Expenses Appropriation, which is used for certain SOD activities. In addition to those appropriations, GPO has a business-oriented revolving fund, which is used to fund procured printing, document sales, and other operations. In part, the revolving fund is supported by the 7-percent service charge levied on agency customers of GPO-procured printing services. In fiscal year (FY) 2012, GPO purchased approximately \$331 million from private sector vendors nationwide for agency customers. In FY 2012, the Salaries and Expenses Appropriation totaled approximately \$42 million.

NIH comprises 27 Institutes and Centers, each with a specific research agenda, often focusing on particular diseases or body systems. During FY 2012, NIH reported to Congress it paid approximately \$2.7 million to commercial vendors for print services related to 500 print jobs. Public Law 100-607, section 405 (42 U.S.C § 284) provides that each director of a national research institute may publish, or arrange for publication of, information with respect to the purpose of the Institute.

The objective of our audit was to assess GPO's monitoring of key aspects of public printing and document retention requirements as prescribed in title 44 of the United States Code as it relates to NIH.

To accomplish our audit objective, GPO policies and procedures were reviewed as of September 2013. To understand and describe printing authorities, we reviewed title 44 of the United States Code and the 1990 Joint Committee on Printing (JCP) Regulations, and various laws relevant to printing waivers. We interviewed key management officials responsible for the print procurement program and FDLP. We obtained, reviewed, and analyzed cost data and estimates for products printed outside of GPO's purview. We reviewed waivers and statutory exemptions and analyzed their application to print procurement work associated with our audit objective. We also reviewed records from the Office of Finance and Administration, Customer Services, and FDLP. We collaborated with the U.S. Department of Health and Human Services (HHS) OIG in order to obtain relevant print related documents pertaining to the NIH.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence that will provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. See Appendix A for the details of audit objective, scope, methodology, and criteria.

Results in Brief

While GPO was not provided required information to: (1) realize lower printing costs for NIH and the taxpayer, (2) identify information dissemination products for inclusion into the FDLP, and (3) catalog and index information dissemination products, GPO could strengthen its monitoring of key aspects of its related operations. For example, a review of the annual commercial printing activity reported by NIH compared to GPO cost estimates, FDLP, and cataloging and indexing requirements disclosed:

- NIH paid approximately 40 percent more for commercial printing compared to GPO estimates.
- 208 of 500 (41 percent) of products NIH obtained from sources other than GPO met the criteria for inclusion in FDLP but were not included. While 173

of the 208 products were available via the Internet, 35 (17 percent) were not made available through either FDLP or the Internet.

- GPO did not catalog and index the same 208 products.
- Six instances of commercial printing that were not reported to the JCP.
- An exception statute was incorrectly cited for 7 instances of commercial printing.

We attribute this to the lack of sufficient information sharing between NIH and GPO and the need for sufficient detail in GPO guidance. As a result, NIH and taxpayers could recognize as much as a 40 percent reduction in printing costs, based on our sample. Also, cataloged, indexed, and inclusion of required information dissemination products in FDLP provides more efficient public access to Government information.

Recommendations

We recommend the Superintendent of Documents: (1) ensure all in scope NIH (FY 2012) information dissemination products are included in the FDLP and cataloged and indexed, (2) strengthen LSCM Guidance G400 to provide sufficient detail for identifying and acquiring information dissemination products for inclusion in the FDLP and catalog and index programs, and (3) reiterate to NIH the requirement to provide GPO a monthly listing of publications it issued that were obtained by sources other than GPO.

We also recommend the Acting Managing Director, Customer Services reiterate to NIH requirements that the agency should select its printing and duplicating services based on the best quality, cost, and time of delivery.

Management's Response

GPO management concurred with the recommendations. We consider management's planned action responsive. The recommendations are resolved and will remain open until planned action is complete

Background

The GPO serves as the principle printing organization for Federal agencies. With limited exceptions, Federal law requires that GPO accomplish or contract printing for Congress, the executive branch, and the judiciary—except for the Supreme Court. GPO is also responsible for identifying and including information dissemination products in the FDLP. GPO also must catalog and account for information dissemination products and prepare an accurate comprehensive index of public documents.

Applicable Federal Guidelines

Statutory provisions governing public printing by the government, including production, procurement, dissemination, management, and oversight, are largely concentrated in the initial chapters of title 44 of the United States Code.

The Joint Committee on Printing. Oversight of the GPO printing system is vested principally in JCP, which was statutorily established in 1846. Comprised of senior members of the House Committee on House Administration and the Senate Committee on Rules and Administration, JCP also has oversight responsibilities for public printing operations generally and the distribution of Government publications.

The 1990 JCP Regulations provide that agencies report on their print operations, which state that agencies must report to the committee information about the total cost of printing and an inventory of plant equipment at in-house printing plants. The reports must be submitted semiannually.

The JCP generally oversees compliance by Federal agencies with laws, rules, and regulations designed to minimize printing costs to the American people. In accordance with guidelines, JCP may use any measures it considers necessary to remedy neglect, delay, duplication or waste in the public printing and binding and the distribution of Government publications.

Commercial Printing. 44 U.S.C. §502 authorizes the Public Printer to commercially procure printing under contracts made by him/her with the approval of the JCP. GPO generally provides printing services to Federal agencies through a print procurement program that relies on the commercial sector by passing contractor costs on to its Government customers. Prequalified businesses, small and large, compete for printing jobs that the Agency oversees to ensure that the contractors meet customer requirements for quality. For the service, GPO attaches a 7-percent surcharge for covering GPO expenses.

Excluding security and intelligent documents work, GPO procures about 75 percent of printing for Federal agencies from private contractors and does the remaining 25

percent at its own plant facilities. GPO purchases approximately \$331 million annually from private sector vendors nationwide for Agency customers.

Dissemination of Government Information. GPO is responsible for collecting the Government products and disseminating them to the public through a network of approximately 1,200 depository libraries and online via the Federal Digital System (www.fdsys.gov). Title 44 also requires that Federal agencies make their publications available to GPO for cataloging and distribution through the FDLP.¹ GPO's activities include providing public access to official Government documents through GPO's Federal Digital System (FDsys) Web site. GPO's FDsys offers an online catalogue of official Government digital documents. It also aids in the collection and digital preservation of Government publications and provides access to the public.

Executive Branch Printing and Duplication. Under section 501 of Title 44, all executive branch printing is required to go through GPO, except classes of work the Joint Committee on Printing considers urgent or necessary to be done elsewhere, or printing in agency ("field") printing plants, or the procurement of printing by an executive branch agency, if approved by the JCP. The requirement for executive branch agencies is supported by subpart 8.8 of the Federal Acquisition Regulation, which requires executive agencies to have their printing done in accordance with Title 44.

Relevant NIH Public Law. Public Law 100-607, Section 405 (42 U.S.C. §284) provides that each director of a national research institute publish, or arrange for the publication of, information with respect to the purpose of the Institute without regard to section 501 of title 44 of the United States Code.

Prior Key Audits

In a March 1999 HHS report,² the OIG reported that NIH did not always provide copies of printed publications to GPO for distribution to the Federal Depository Libraries (FDLs) or provide single copies to GPO for cataloging and indexing purposes. In addition, NIH did not report its monthly commercial printing activity to GPO.

In a July 2013 report,³ the Government Accountability Office (GAO) reported that Government agencies it surveyed reported operating fewer in-house printing plants than in 1990. Specifically, those surveyed agencies reported operating 64-percent fewer plants than the number listed in the Congress's JCP Government Printing and Binding regulations, updated in 1990 (1990 JCP Regulations). GAO further reported

¹ 44 U.S.C. §1902.

² HHS OIG Report Number A-15-98-80001, "Review of the National Institutes of Health Printing Program," dated March 1999.

³ GAO Report Number GAO-13-636, "Fewer Plants Are in Operation Than in 1990, and Selected Agencies Reported Declining Volumes," dated July 2013.

that the printing practices of agencies have changed, but existing authorities have not been updated.

National Institutes of Health Print Activity for FY 2012

NIH is made up of 27 Institutes and Centers, each with a specific research agenda, often focusing on particular diseases or body systems. During FY 2012, NIH reported it paid approximately \$2.7 million for 500 print services to commercial vendors. The table below summarizes the number of NIH Institutes and Centers printing services paid for in FY 2012.

Table 1: NIH Reported Commercial Printing by Institute for FY 2012

	Institute/Center	Number of Print Services	Cost of Print Service
	NIH Institutes		
1	National Cancer Institute	3	\$1,543
2	National Eye Institute	45	20,869
3	National Heart, Lung, and Blood Institute	2	1,761
4	National Human Genome Research Institute	0	0
5	National Institute on Aging	41	641,025
6	National Institute on Alcohol Abuse and Alcoholism	28	176,568
7	National Institute of Allergy and Infectious Diseases	29	113,084
8	National Institute of Arthritis and Musculoskeletal and Skin Diseases	21	104,076
9	National Institute of Biomedical Imaging and Bioengineering	2	2,110
10	Eunice Kennedy Shriver National Institute of Child Health and Human Development)	28	415,485
11	National Institute on Deafness and Other Communication Disorder)	41	40,582
12	National Institute of Dental and Craniofacial Research	35	186,757
13	National Institute of Diabetes and Digestive and Kidney Diseases	118	348,795
14	National Institute on Drug Abuse	22	335,886
15	National Institute of Environmental Health Sciences	0	0
16	National Institute of General Medical Sciences	13	42,312
17	National Institute of Mental Health	5	8,894
18	National Institute on Minority Health and Health Disparities	0	0
19	National Institute of Neurological Disorders and Stroke	29	106,961
20	National Institute of Nursing Research	3	4,721
21	National Library of Medicine	2	120,400
	NIH Centers		
22	Center for Information Technology	1	620
23	Center for Scientific Review	0	0
24	Fogarty International Center	0	0
25	National Center for Complementary and Alternative Medicine	0	0
26	National Center for Advancing Translational Sciences	0	0
27	NIH Clinical Center	25	21,507
	Other		
28	Office of Research Services	7	13,119
	Total	500	\$2,707,075

Source: NIH Commercial Printing Records

Results and Recommendations

While GPO was not provided required information to: (1) realize lower printing costs for NIH and the taxpayer, (2) identify information dissemination products for inclusion into the FDLP, and (3) catalog and index information dissemination products, GPO could strengthen its monitoring of key aspects of its related operations. For example, a review of the annual commercial printing activity reported by NIH compared to GPO cost estimates, FDLP, and cataloging and indexing requirements disclosed:

- NIH paid approximately 40 percent more for commercial printing compared to GPO estimates.
- 208 of 500 (41 percent) of products NIH obtained from sources other than GPO met the criteria for inclusion in FDLP but were not included. While 173 of the 208 products were available via the Internet, 35 (17 percent) were not made available through either FDLP or the Internet.
- GPO did not catalog and index the same 208 products.
- Six instances of commercial printing that were not reported to the JCP.
- An exception statute was incorrectly cited for 7 instances of commercial printing.

We attribute this to the lack of sufficient information sharing between NIH and GPO and the need for sufficient detail in GPO guidance.

GPO Instruction 825.18A, "Internal Control Program," May 28, 1997, requires that GPO maintain effective systems of accounting and management control. The policy states that internal controls are the organization, policies, and procedures used to reasonably ensure that:

- Intended results are achieved from programs
- resources are used consistent with agency mission
- programs and resources are protected from waste, fraud, and mismanagement
- laws and regulations are followed
- reliable and timely information is obtained, maintained, reported, and used for decision making

The policy further requires internal control documentation such as written policies, organization charts, procedural write-ups, manuals, memoranda, flowcharts, software, and related written materials used to describe the internal control methods and measures, and to serve as a reference for individuals reviewing the internal controls and their functioning.

OMB Circular Number A-123, "Management's Responsibility for Internal Control, December 21, 2004, and appendices, requires that management controls provide reasonable assurance that assets are safeguarded against waste, loss, unauthorized use, and misappropriation. It also requires developing and maintaining control activities that include policies, procedures and mechanisms in place to help ensure that agency objectives are met. As a legislative branch agency, GPO is not required to follow any OMB circulars, including OMB Circular Number A-123. However, the sine the Circular provides a sound basis for internal controls for any organization; GPO has incorporated the major requirements of Circular A-123 in its directives.

The GAO "Standards for Internal Control in the Federal Government," November 1999, describes internal control as a control built into an entity as part of its infrastructure designed to help managers operate the entity and achieve objectives on an ongoing basis. It is a major part of managing an organization and comprises plans, methods, and procedures used for meeting missions, goals, and objectives.

NIH Paid Approximately 40 Percent More Compared to GPO Estimates

In FY 2012, NIH reported paying approximately \$2.7 million for 500 instances of commercial printing services. By comparing prices NIH paid with GPO price estimates for 24 NIH randomly selected products printed by commercial vendors for the same service, we calculated a saving totaling \$56,886, or 39.9 percent, if GPO provided the same service. The amount charged to NIH totaled \$142,622. The amount GPO estimated for the same service totaled \$85,736.

We did not find any evidence that NIH requested cost estimates from GPO. In most instances, NIH cited Public Law 100-607 as the authority for allowing NIH Research Institute Directors to directly procure commercial printing. The justification was noted on many of the NIH Commercial Printing Reports.

The table below depicts our detailed analysis.

Table 2. Sample Analysis of NIH Cost vs. GPO Price Estimate

NIH Institute/Center	Description of Document	Total Number of Copies	NIH Cost	GPO Price Estimate	Difference
Eye Institute	Cust. Srv. Mailer	4,200	\$1,521	\$1,269	\$252.00
Inst. on Aging	Beyond Hangovers	82,500	\$15,400	\$6,254	\$9,146.00
Inst Alc Abuse	Drinking/yr pregncy	261,000	\$9,100	\$13,233	(\$4,133.00)
Inst Alc Abuse	Older adults/alcohol	11,500	\$4,500	\$5,418	(\$918.00)
Inst Drug Abuse	Brain Pwr pckg 4 & 5	6,490	\$41,000	\$7,059	\$33,941.00
Inst Drug Abuse	RR Sr Marijuana Abuse	59,450	\$10,900	\$4,042	\$6,858.00
Inst Drug Abuse	Hurn/Drugs & yr Body	40,750	\$3,800	\$6,724	(\$2,924.00)
Dfnss,C/Disordr	2012-13 Rsrc Directry	3,500	\$10,950	\$4,850	\$6,100.00
Dental, Cr Rsrch	Chemo and yr mouth	15,000	\$2,600	\$3,303	(\$703.00)
Dental, Cr Rsrch	Healthy mouth fr baby	17,750	\$4,500	\$3,336	\$664.00
Diab,Dgst,Kidney	WINTKA Crohn's disea	3,000	\$1,916	\$1,165	\$819.00
Diab,Dgst,Kidney	Protein Fact Sheet	50,000	\$1,696	\$1,174	\$522.00
Diab,Dgst,Kidney	WINTKA Gas (Span.)	1,000	\$987	\$699	\$288.00
Diab,Dgst,Kidney	PDP Kp Mouth Healthy	15,000	\$4,863	\$3,512	\$1,351.00
Diab,Dgst,Kidney	Rsrch Clinic Brochure	1,000	\$633	\$410	\$223.00
Diab,Dgst,Kidney	Choose More 50 Ways	102,500	\$6,300	\$4,198	\$2,102.00
Diab,Dgst,Kidney	We Have The Power	8,000	\$583	\$2003	(\$1,420.00)
Inst Gen Med Sci	Findings – Jan. 2012	35,000	\$12,383	\$5,299.35	\$7,083.65
Inst Gen Med Sci	Invest in Discvr Brchr	5,000	\$2,396	\$2,287	\$109.00
Inst Gen Med Sci	Undergrad Trng Flyer	2,000	\$987	\$1,275	(\$288.00)
Inst Ment Health	Marketing Material	3,000	\$813.15	\$2,200	(\$1,386.85)
Neur Dsrđ/Strok	Hunt diseas insrt card	7,000	\$447	\$1,075	(\$628.00)
Neur Dsrđ/Strok	Stroke clinic trials i/c	40,000	\$2,791	\$3,830	(\$1,039.00)
Neur Dsrđ/Strok	Seizures and epilepsy	15,000	\$1,556	\$690	\$866.00
Total					<u>\$56,885.80</u>

Our approach for performing the price comparison was to obtain a sample of each of the sampled printed product requisition worksheets from NIH and obtain a price estimate from GPO based on their assessment of the product requisition. During our review, GPO officials pointed out that products could have been grouped together into a term contract. Therefore, GPO provided price estimate information based on term contracts. To minimize the possibility of agency bias on the results, we randomly selected the products and did not tell GPO the prices paid by NIH for the printing services. Also, because our audit was based on a FY 2012 sample, it represents that period only.

We recognize that a price comparison does not show which services are more economical to the Government. Rather, it shows what customers are paying for services. We estimated that, in aggregate, based on multiplying the \$2.7 million

worth of NIH expenditure for FY 2012 commercial printing by the 39.9 percent costs difference of the 24 sampled items, GPO's prices would have saved the Government approximately \$1.077 million.

Information Not Always Disseminated and Accounted

Our audit revealed instances where information was not disseminated to the public and GPO did not have a full accounting of all publications NIH issued.

Of the 500 products NIH obtained from sources other than GPO, GPO determined that 208 met the criteria for inclusion in FDLP but were not included. GPO also determined that of those 208 products, 173 were made available by way of the Internet. However, 35 products (17 percent) were not made available through FDLP and/or the Internet. Appendix D details the list of the 208 information dissemination products meeting the criteria for inclusion in FDLP. The table below depicts the 35 items identified by GPO as requiring inclusion in the FDLP.

Government publications must generally be made available to the public through FDLP, which GPO administers. Exceptions are those publications determined by issuing Agencies to be required for official use only or for strictly administrative or operational purposes with no public interest or educational value, and publications classified for reasons of national security. NIH, which obtains publications from sources other than GPO, must furnish the Superintendent of Documents (SOD) a list of publications issued during any previous month. GPO catalogs and indexes each of the products and, at the close of each regular session of Congress, SOD prepares and publishes a comprehensive index of public information dissemination products. Government components that print solely through GPO are exempt from this monthly reporting requirement.

SOD Policy Statement Number 300⁴ states that SOD is responsible for ensuring that information dissemination products within the scope of the FDLP are disseminated and/or distributed to depository libraries and that all information dissemination products within scope are cataloged and indexed.

OMB Circular Number A-130 (Transmittal Memorandum No. 4) defines the term "information dissemination product" to mean any book, paper, map, machine-readable material, audiovisual production, or other documentary material, regardless of physical form or characteristic, disseminated by an agency to the public. It further defines a "government publication" as information published as an individual document at Government expense, or as required by law.

⁴ SOD Policy Statement Number 300, "Scope of Government Information Products included in the Cataloging and Indexing Program and Disseminate through the Federal Depository Library Program," dated February 5, 2008.

Table 3: Analysis of the Dissemination of Publications

	NIH Institute/Center	NIH Description	Reported on JCP Form No. 2
1	Heart, Lung, and Blood Institute	High Blood Pressure and Children	5/23/12
2	Institute on Alcohol Abuse and Alcoholism	Family History Alcoholism / Are You At Risk	11/17/12
3	Arthritis and Musculoskeletal and Skin Diseases	Tengo Arthritis/Do I Have Arthritis? (bilingual)	12/6/12
4	Institute on Child Health and Human Development	Media Smart Training Guide	11/17/12
5	Institute on Child Health and Human Development	Media Smart Tabs, Covers	11/17/12
6	Institute on Child Health and Human Development	National Children's Study	5/23/12
7	Institute on Drug Abuse	Principles of Drug Abuse	11/17/12
8	Institute on Drug Abuse	Marijuana Poster	11/17/12
9	Institute on Drug Abuse	Marijuana Spanish/Eng Poster	11/17/12
10	Institute on Drug Abuse	Marijuana/Parents Spanish	11/17/12
11	Institute on Drug Abuse	HURN/Drugs for Students	11/17/12
12	Institute on Drug Abuse	HURN/Drugs and your body	11/17/12
13	Institute of Dental and Craniofacial Research	POC Autism Brochure	11/17/12
14	Institute of Dental and Craniofacial Research	Oral Cancer fact sheet	11/17/12
15	Diabetes, Digestive and Kidney Diseases	Take Care Of Your Health	11/17/12
16	Diabetes, Digestive and Kidney Diseases	WINTKA: Gas	5/23/12
17	Diabetes, Digestive and Kidney Diseases	CKD Spanish Brochure	5/23/12
18	Diabetes, Digestive and Kidney Diseases	Eating Right – Overall Patients Fact Sheet	5/23/12
19	Diabetes, Digestive and Kidney Diseases	Sundays tool kit folder text	11/17/12
20	Diabetes, Digestive and Kidney Diseases	Sundays tool kit DVD	11/17/12
21	Diabetes, Digestive and Kidney Diseases	Urologic diseases in amer cd w/label	11/17/12
22	Diabetes, Digestive and Kidney Diseases	Gestational diabetes when pregnant	11/17/12
23	Diabetes, Digestive and Kidney Diseases	Family Reunion Tool Kit DVDs	11/17/12
24	Diabetes, Digestive and Kidney Diseases	Family Reunion Tool Kit Rev 8/12	11/17/12
25	Diabetes, Digestive and Kidney Diseases	Heartburn and GERD	5/23/12
26	Diabetes, Digestive and Kidney Diseases	Cystitis Painful Bladder Syndrome	5/23/12
27	Diabetes, Digestive and Kidney Diseases	Sodium Fact Sheet	5/23/12
28	Diabetes, Digestive and Kidney Diseases	WIN Publications CD, Jacket and Labels	5/23/12
29	Diabetes, Digestive and Kidney Diseases	NDIC Self Care Basics Starter Kit box	5/23/12
30	Diabetes, Digestive and Kidney Diseases	Info About Diabetes Blood Test	5/23/12
31	Diabetes, Digestive and Kidney Diseases	Am I At Risk	11/17/12
32	Diabetes, Digestive and Kidney Diseases	WINTKA Preparing Pregnancy/Diabetes	11/17/12
33	Diabetes, Digestive and Kidney Diseases	Sundays tool kit inserts	11/17/12
34	Institute of Neurological Disorders and Stroke	Parkinson's Disease Fact Sheet	5/23/12
35	Institute of Neurological Disorders and Stroke	Multiple Sclerosis Fact Sheet	5/23/12

Furthermore, because NIH did not report the 208 information dissemination products it obtained from sources other than GPO, GPO did not catalog and index them. Federal law requires each component of the Government to furnish the Superintendent of Documents a list of publications issued during the previous month and obtained from sources other than GPO.⁵ Government Printing and Binding Regulations⁶ require that in order to meet the requirement of Monthly Catalog listing of Government publications by SOD, each agency printing officer must forward two copies of those types of Government publications that are produced or procured through other than GPO sources to the Director, Library

⁵ 44 U.S.C. Chapter 19, §1902, "Availability of Government publications through Superintendent of Documents;" lists of publication not ordered from GPO.

⁶ Government Printing and Binding Regulations 41-2, Published by the Joint Committee on Printing, U.S. Congress, dated February 1990.

Programs Service. Additionally, each NIH Director⁷ must promptly publish, make available, and otherwise disseminate, in a form understandable and on as broad a basis as practicable so as to maximize its use, the results of research, demonstration projects, and evaluations conducted or supported under this chapter.

GPO guidance⁸ does not provide sufficient detail to identify missing information dissemination products. For example, our analysis was based on obtaining and comparing items reported on the FY 2012 JCP Commercial Printing Report Form No. 2 (JCP Form No. 2), which each NIH institute prepares semiannually (for direct procurements) and by their Printing Procurement Section (procured on behalf of the institutes and centers) to the content in FDLP, the NIH Web site, and information dissemination products cataloged and indexed. The guidance does not provide such a step-by-step approach as stated above.

The public's lack of access to information dissemination products impacts the underlying principles of the FDLP. Such principles include the public's right to information contained in Government documents that have been published at public expense, and providing for a well-informed citizenry, cognizant of the policies and activities of its representative Government. Also, the lack of monthly commercial printing reports and submissions of published documents prevents GPO from fully accounting for information dissemination products and preparing an accurate comprehensive index of public documents.

Commercial Printing Not Always Reported to JCP

In May 2012, a NIH print specialist reported six instances of contracting with private vendors without GPO involvement. We reviewed the services and determined the print jobs that were not reported on the Commercial Printing Report to JCP. The table below depicts those instances reported to GPO and that OIG confirmed.

⁷ Public Law 100-607 (42 U.S.C. §299c-3), "Health Omnibus Programs Extension of 1988," dated November 4, 1988.

⁸ LSCM Guidance G400, Library Services and Content Management, Library Technical Information Services, Guidelines for Acquiring Information Products for the FDLP and Cataloging and Indexing Programs, dated December 17, 2010.

Table 4. Examples of Unreported Commercial Printing

NIH Institute/Center	Description of Document	Date of Purchase Request	Number of Copies	Vendor Name	Cost
National Library of Medicine	Native Voices Invite	7/19/2011	unknown	Petitt Design	\$2,800
National Library of Medicine	Native Voices Invitation Native Voices A7 envelope (blank)	8/29/2011	125	Rockville Printing & Graphics	1,319
National Library of Medicine	Native Voices Pocket Folder	8/30/2011	100	Rockville Printing & Graphics	2,238
National Library of Medicine	Native Voices Invitation Native Voices A7 envelope	9/8/2011	500	Rockville Printing & Graphics	560
National Library of Medicine	NLM Accordion Postcard	9/23/2011	2000	Rockville Printing & Graphics	3,238
National Library of Medicine	175th Anniversary Gift Card Gift Card Stamp Paper	10/27/2011	350	Rockville Printing & Graphics	<u>765</u>
Total					<u>\$10,920</u>

JCP Regulation 46-3 requires that procurements by waiver must be identified by number and date of issuance and subsequently reported on JCP Form No. 2, Commercial Printing Report. The Commercial Printing Report is a semiannual report covering transactions concerning composition, printing, binding, and blank-book work procured direct from commercial sources. Those procurements must be reported on JCP Form No. 2 and then forwarded to the committee by the department headquarters no later than 60 days after the close of each reporting period (for example, October through March and April through September). Agencies must also submit any negative reports.

Those regulations also state that individual printing and related items costing \$500 or less per line item may be procured without reference to the GPO Regional Printing Procurement Offices, provided that: (1) they are not of a continuing repetitive nature, (2) are not conducive to the establishment of an open-end indefinite quantity type contract, and (3) cannot be ordered against existing GPO contracts. However, the orders must be reported and identified on JCP Form No. 2 through use of an asterisk in the waiver column and an appropriate footnote.

The NIH print specialist was not aware of any additional unreported commercial printing, and we could not determine the extent of excluded print. While the extent of the inaccuracies is not known, without complete and accurate data, decision makers may not have all the necessary information needed for program monitoring and policymaking purposes.

Exception Cited But May Not Fall Under the Public Law 100-607

In FY 2012, the NIH Office of Research Services reported seven print services totaling \$13,118 were obtained through commercial printers without GPO involvement.

The Office of Research Services cited Public Law 100-607 as the exemption from using GPO services. Public Law 100-607, Section 405 (42 U.S.C. §284) provides that each director of a national research institute may publish, or arrange for the publication of, information with respect to the purpose of the Institute without regard to section 501 of title 44 of the United States Code.

Table 5. Commercial Printing Not Exempt by Public Law 100-607

Description of Document	Date of Purchase Request	Total Number of Copies	Pages/Binding	Cost
FY 2012 Calendars	1 st Half 2012	600	2/Other	\$464.00
NIH Form 2558	1 st Half 2012	6,000	1/Other	\$2,471.00
Chemical Waste Tag	2 nd Half 2012	2,005	2/Other	\$3,718.00
NIH Hazard Free Tag	2 nd Half 2012	5,000	2/Other	\$3,901.00
Reqst. for Translating	2 nd Half 2012	505	2/Other	\$225.00
Animal Expsr Pro Med	2 nd Half 2012	1,505	4/Other	\$999.00
Inside The Cell Poster	2 nd Half 2012	150	2/Other	<u>\$1,340.52</u>
Total				<u>\$13,118.52</u>

According to the Office of Research Services' public Web site, it plans and directs service programs for public safety and security operations, scientific and regulatory support programs, and a wide variety of other program and employee services. The office advises NIH senior staff on management and delivery of technical and administrative services in support of the NIH research mission.

Recommendations

We recommend the Superintendent of Documents:

1. Ensure all in scope NIH (FY 2012) information dissemination products are included in the FDLP and cataloged and indexed.
2. Strengthen LSCM Guidance G400 to provide sufficient detail for identifying and acquiring information dissemination products for inclusion in the FDLP and cataloging and indexing programs.
3. Reiterate to NIH the requirement to provide GPO a monthly listing of publications it issued that were obtained by sources other than GPO.

We recommend the Acting Managing Director, Customer Services:

4. Reiterate to NIH requirements that the agency should select its printing and duplicating services based on the best quality, cost, and time of delivery.

Management's Response

GPO management concurred with the recommendations.

Evaluation of Managements Response

Management's planned actions are responsive to the recommendations. The recommendations are resolved and will remain open until planned action is complete.

Appendix A – Objectives, Scope, and Methodology

We performed fieldwork at the GPO Central Office in Washington, D.C. We conducted the audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence that will provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Objective

The objective of our audit was to assess GPO’s monitoring of key aspects of public printing and document retention requirements as prescribed in title 44 of the United States Code as it relates to NIH.

Scope and Methodology

To accomplish our audit objective, we obtained relevant print-related documents pertaining to the NIH (with the collaboration of the HHS OIG). To understand and describe Federal printing authorities, we reviewed title 44 of the United States Code and the 1990 JCP Regulations; various laws relevant to printing waivers and statutory exemptions; and GPO policies and procedures. We interviewed key management officials responsible for the print procurement program and FDLP. We obtained, reviewed, and analyzed cost data and estimates for products printed outside of GPO’s purview. We reviewed waivers and statutory exemptions, and analyzed their application to print procurement work associated with our audit objective. We reviewed records from the Office of Finance and Administration, Customer Services, and FDLP.

Management Controls Reviewed

We determined that the following internal controls were relevant to our audit objective:

Policies and procedures that GPO management implemented to reasonably ensure that processes met GPO’s objectives included the Web Archiving Task Force Program, July 2012. The program was designed and implemented to reasonably ensure that valid and reliable data are obtained, maintained, and fairly disclosed in reports.

Standard operating procedures (SOPs) used by Customer Services included GPO Instruction 110.20, “Authority to Grant Waivers, Authorizing Direct Commercial Procurement by an Entity of the Executive Branch,” April 20, 1993. SOPs used by LSCM include SOD Policy Statement 300 (“Scope of Information Products Included

in the Cataloging and Indexing Program”) and SOD 304 (“Harvesting Federal Digital Publications for GPO’s Superintendent of Documents’ Programs”), as well as LSCM Guidance 400, “Guidelines for Acquiring Information Products for the FDLP and Cataloging and Indexing Programs.”

The details of our examination of management controls, the results of our examination, and noted management control deficiencies are contained in the report narrative. Implementing the recommendations in this report should improve those management control deficiencies.

Computer-generated Data

We used computer-processed data that was extracted from NIH’s Print Procurement system. Although we did not independently verify the reliability of all of the information in the Print Procurement System we were able to tie the 24 printing jobs we sampled to the Commercial Printing Reports. We believe the information we obtained was reliable to meet our audit objective.

Appendix B – Acronyms Used

CFR	Code of Federal Regulations
DOJ	Department of Justice
FDLP	Federal Depository Library Program
FDsys	Federal Digital System
FY	Fiscal Year
GAO	Government Accountability Office
GPO	Government Printing Office
HHS	Department of Health and Human Services
JCP	Joint Committee on Printing
LSCM	Library Services and Content Management
NIH	National Institute of Health
NLM	National Library of Medicine
OIG	Office of Inspector General
OLC	Office of Legal Counsel
OMB	Office of Management and Budget
SOD	Superintendent Of Documents
U.S.C.	United States Code

Appendix C – Management’s Response



U.S. GOVERNMENT PRINTING OFFICE
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MEMORANDUM

Revised Draft Report, Report Number 14-02

11/27/13

SUBJECT

DATE

Chief of Staff

REPLY TO ATTENTION OF

Inspector General

TO

Thank you for the opportunity to review the revised draft report of the Office of Inspector General, Commercial Printing and Dissemination of Government Information at the National Institutes of Health (Report Number 14-02). Management concurs with the recommendations of this report.

Specifically, the Acting Managing Director, Customer Services, concurs with the recommendation to reiterate to NIH requirements that the agency should select its printing and duplicating services based on the best quality, cost, and time of delivery. Customer Services will conduct outreach to NIH, which will include consulting on the most cost-effective production method available through GPO for each print product that will satisfy NIH requirements based on requested quality level, cost, and delivery schedule. The expected completion date is the end of the second quarter of FY 2014.

The Superintendent of Documents concurs with the remaining recommendations of the report and will implement the appropriate actions, as detailed in the attached memorandum.

If you have any questions, please do not hesitate to contact me on 512-1100.

ANDREW M. SHERMAN

Attachment

Date: October 28, 2013

To: Inspector General

From: Superintendent of Documents

Subject: Draft Report—Commercial Printing and Dissemination of Government Information at the National Institutes of Health (Report Number 13-22)

Thank you for undertaking a thorough performance audit of the National Library of Medicine's compliance with the printing and information dissemination requirements of the Government Printing Office.

Identifying and acquiring U.S. Government Information products in all formats from a variety of Federal sources is critical in fulfilling the information dissemination mission of the Superintendent of Documents, outlined in 44 USC. All U.S. Government information products created and published with Federal funds and intended for a public audience are within scope of the Federal Depository Library Program (FDLP). Many of these titles are disseminated in tangible format to Federal depository libraries. In addition, online publications without a tangible equivalent, produced with Federal funds and intended for a public audience, are also within scope of the FDLP.

Beyond the requirements for the FDLP, Library Services and Content Management (LSCM) has an additional responsibility. LSCM is legally entrusted with providing free online access services to search and identify all Federal tangible and online information titles. This is accomplished via the Cataloging and Indexing Program (C&I). The scope of the C&I program is far-reaching, and includes bibliographic control of all Federal information products in all formats, even if not intended for a public audience. To accomplish that, by law, agencies must notify the Superintendent of Documents of their publications. With proper notification, GPO creates comprehensive cataloging and a complete bibliography of all published U.S. Government information products from all three branches of government.

As requested, please find below comments on each of the report's three recommendations.

1. Ensure all in scope NIH (FY 2012) information dissemination products identified during this inquiry/investigation are included in the FDLP, and cataloged and indexed.

We concur. LSCM staff have begun to catalog and index the titles listed in Appendix E – Information Dissemination Products Meeting Criteria for Inclusion in the FDLP. The expected completion date is the end of FY14 Q1.

2. Strengthen LSCM Guidance G400 to provide sufficient detail for identifying and acquiring information dissemination products for inclusion in the FDLP and Cataloging and Indexing programs.

We concur. LSCM's Director of Technical Services will oversee the updating project. The expected completion date is the end of FY14 Q3.

3. Reiterate to NIH the requirement to provide GPO a monthly listing of publications it issued that were obtained by sources other than GPO.

We concur. We suggest that the preferred course of action is for the Superintendent of Documents, accompanied by the GPO Inspector General, to meet with the Director of the National Library of Medicine and the NIH Inspector General. Such a meeting would be beneficial to both agencies in ensuring that NIH complies with the laws, regulations and policies related to the Cataloging & Indexing and Federal Depository Library Programs, including the requirement that NIH provide GPO a monthly listing of publications issued or obtained by sources other than GPO. The expected completion date, dependent upon the availability of all parties to meet, is the end of FY14 Q2.

Mary Alice Baish

MARY ALICE BAISH
Superintendent of Documents

cc:
Public Printer
Deputy Public Printer
General Counsel

Appendix D – Status of Recommendations

Recommendation	Resolved	Unresolved	Open/ECD*	Closed
1	x		End of FY 2014 Quarter 1	
2	x		End of FY 2014 Quarter 3	
3	x		End of FY 2014 Quarter 2	
4	x		End of FY 2014 Quarter 2	

*Estimated Completion Date.

Appendix E – Information Dissemination Products Meeting Criteria for Inclusion in the FDLP

	Document Title	NIH Institute or Center	Available Online? (Yes/No)
1	NIA Publications	Nat'l Institute on Aging	Yes
2	Tip Sheet: Participating in Activities	Nat'l Institute on Aging	Yes
3	Age Page: High Blood Pressure	Nat'l Institute on Aging	Yes
4	Age Page: Shots for Safety	Nat'l Institute on Aging	Yes
5	Age Page: Elder Abuse (Spanish)	Nat'l Institute on Aging	Yes
6	Age Page: Constipation (Spanish)	Nat'l Institute on Aging	Yes
7	Age Page: Hypothermia (Spanish)	Nat'l Institute on Aging	Yes
8	Age Page: Lung Problems (Spanish)	Nat'l Institute on Aging	Yes
9	Age Page: Fatigue	Nat'l Institute on Aging	Yes
10	Tip Sheet: Finding Your Way	Nat'l Institute on Aging	Yes
11	Tip Sheet: Advance Care Planning	Nat'l Institute on Aging	Yes
12	DVD Go For Life Exercises	Nat'l Institute on Aging	Yes
13	Caring For A Person With Alzheimer's	Nat'l Institute on Aging	Yes
14	What's on your plate: smart food choices	Nat'l Institute on Aging	Yes
15	Age Page: Forgetfulness	Nat'l Institute on Aging	Yes
16	Age Page: Healthy Eating Over 50	Nat'l Institute on Aging	Yes
17	Age Page: Alcohol Use In Older People	Nat'l Institute on Aging	Yes
18	Tip Sheet: Hormones And Menopause	Nat'l Institute on Aging	Yes
19	Tip Sheet: Can We Prevent Aging	Nat'l Institute on Aging	Yes
20	Go4Life Flyer	Nat'l Institute on Aging	Yes
21	Preventing Alzheimer's Disease	Nat'l Institute on Aging	Yes
22	NIAAA Spectrum	Inst. on Alcohol Abuse	Yes
23	Fall Semester: A Time For Parents To...	Inst. on Alcohol Abuse	Yes
24	Family History Alcoholism	Inst. on Alcohol Abuse	No
25	Older Adults/Alcohol/You Can Get Help	Inst. on Alcohol Abuse	Yes
26	Be The Generation Posters (Eng., Span.)	Allergy, Infect. Diseases	Yes
27	Food Allergy An Overview	Allergy, Infect. Diseases	Yes
28	Food Allergy And Overview	Allergy, Infect. Diseases	Yes
29	Ankylosing Spondilitis Q&A	Arthritis, Musc/Skin Dis.	Yes
30	Rheumatoid Arthritis HOH	Arthritis, Musc/Skin Dis.	Yes
31	Paget's Disease Q&A	Arthritis, Musc/Skin Dis.	Yes
32	Growth Plate Injuries Q&A	Arthritis, Musc/Skin Dis.	Yes
33	Marfan Syndrome Q&A	Arthritis, Musc/Skin Dis.	Yes
34	Osteoporosis HOH	Arthritis, Musc/Skin Dis.	Yes
35	Systemic Lupus Erthyematous HOH	Arthritis, Musc/Skin Dis.	Yes
36	NMOI Planners Amer Indian/Alaska	Arthritis, Musc/Skin Dis.	Yes
37	NMOI Planners Latinos	Arthritis, Musc/Skin Dis.	Yes
38	Alopecia Areata Q&A	Arthritis, Musc/Skin Dis.	Yes
39	High Blood Pressure and Children	Heart/Lung/Blood Inst.	No
40	Surgeon Gen'l Report on Osteoporosis	Arthritis, Musc/Skin Dis.	Yes
41	La Historia de Ana/Ana's Story	Arthritis, Musc/Skin Dis.	Yes
42	Q&A Gout	Arthritis, Musc/Skin Dis.	Yes
43	Q&A Arthritis and Rheumatic Diseases	Arthritis, Musc/Skin Dis.	Yes
44	Tengo artritis/Do I have arthritis?	Arthritis, Musc/Skin Dis.	Yes
45	Adventures In Parenting	Child Health/Human Dv	Yes
46	STS/Amer Ind/Alaska Native Outreach	Child Health/Human Dv	Yes
47	STS General Outreach	Child Health/Human Dv	Yes

	Document Title	NIH Institute or Center	Available Online? (Yes/No)
48	STS General Outreach Spanish	Child Health/Human Dv	Yes
49	STS Spanish Outreach	Child Health/Human Dv	Yes
50	Media Smart Training Guide	Child Health/Human Dv	No
51	Buddy Brush Coloring Book	Child Health/Human Dv	Yes
52	Media Smart Tabs and Covers	Child Health/Human Dv	No
53	STS/General Outreach	Child Health/Human Dv	Yes
54	DVD Safe Sleep	Child Health/Human Dv	Yes
55	STS African Amer Outreach	Child Health/Human Dv	Yes
56	Am I at risk for gestational diabetes	Child Health/Human Dv	Yes
57	National Children's Study	Child Health/Human Dv	Yes
58	Principles Of Drug Abuse	Inst. on Drug Abuse	No
59	Brain Power Package 4 and 5	Inst. on Drug Abuse	Yes
60	Brain Power Package 2 and 3	Inst. on Drug Abuse	Yes
61	Shatter The Myth	Inst. on Drug Abuse	Yes
62	Shatter The Myth reprint	Inst. on Drug Abuse	Yes
63	Marijuana Poster	Inst. on Drug Abuse	No
64	Marijuana Spanish/English Poster	Inst. on Drug Abuse	No
65	Commonly Abused Drugs Chart	Inst. on Drug Abuse	Yes
66	Marijuana/Parents spanish	Inst. on Drug Abuse	No
67	RRS/Drug Abuse and HIV	Inst. on Drug Abuse	Yes
68	RR Series Inhalant Abuse	Inst. on Drug Abuse	Yes
69	HURN/Drugs For Students	Inst. on Drug Abuse	No
70	HURN/Drugs and Your Body	Inst. on Drug Abuse	No
71	American Sign Language Fact Sheet	Deafness/Comm. Disrdr	Yes
72	Baby's Hearing and Development Chklist	Deafness/Comm. Disrdr	Yes
73	Balance Disorders Fact Sheet	Deafness/Comm. Disrdr	Yes
74	Ear Infections Fact Sheet	Deafness/Comm. Disrdr	Yes
75	Ear Infections Fact Sheet (Spanish)	Deafness/Comm. Disrdr	Yes
76	Hearing Aids Fact Sheet	Deafness/Comm. Disrdr	Yes
77	Hearing Loss and Older Adults (Span.)	Deafness/Comm. Disrdr	Yes
78	Hearing Loss and Older Adults Fact Sheet	Deafness/Comm. Disrdr	Yes
79	How to Apply for a Grant Brochure	Deafness/Comm. Disrdr	Yes
80	It's important...baby's hearing F/S	Deafness/Comm. Disrdr	Yes
81	Meniere's disease Fact Sheet	Deafness/Comm. Disrdr	Yes
82	Noise-induced Hearing Loss Fact Sheet	Deafness/Comm. Disrdr	Yes
83	Noisy Planet: Poster: Cartoon (11x17)	Deafness/Comm. Disrdr	Yes
84	Noisy Planet: Poster: Farm (11x17)	Deafness/Comm. Disrdr	Yes
85	Noisy Planet: Poster: Words (11x17)	Deafness/Comm. Disrdr	Yes
86	Noisy Planet: Bookmark	Deafness/Comm. Disrdr	Yes
87	NP: Noise: Keep it down (Spanish)	Deafness/Comm. Disrdr	Yes
88	NP: Noise: Keep it down (English)	Deafness/Comm. Disrdr	Yes
89	NP: Keep it down on the farm tip sheet	Deafness/Comm. Disrdr	Yes
90	NP: Sound advice on Hearing Protectors	Deafness/Comm. Disrdr	Yes
91	NP: Teachable moments about Hearing	Deafness/Comm. Disrdr	Yes
92	NP: Teaching tweens about noise- HL	Deafness/Comm. Disrdr	Yes
93	Noisy Planet: What Parents Can Do	Deafness/Comm. Disrdr	Yes
94	Pendred Syndrome Fact Sheet	Deafness/Comm. Disrdr	Yes
95	Spanish Publications List	Deafness/Comm. Disrdr	Yes
96	Specific Language Impairment F/S	Deafness/Comm. Disrdr	Yes
97	Speech/Lang. Development Milestones	Deafness/Comm. Disrdr	Yes

	Document Title	NIH Institute or Center	Available Online? (Yes/No)
98	Taking Care Of Your Voice Fact Sheet	Deafness/Comm. Disrdr	Yes
99	Tinnitus Fact Sheet	Deafness/Comm. Disrdr	Yes
100	Vocal Cord Paralysis Fact Sheet	Deafness/Comm. Disrdr	Yes
101	WINTKA: Gas	Diabets/Digstv/Kidney	No
102	Child at risk for kidney disease (poster)	Diabets/Digstv/Kidney	Yes
103	CKD Spanish brochure: chronic kidney	Diabets/Digstv/Kidney	No
104	Eating right – overall patients fact sheet	Diabets/Digstv/Kidney	No
105	Cystitis Painful Bladder Syndrome	Diabets/Digstv/Kidney	No
106	Urodynamic Testing	Diabets/Digstv/Kidney	Yes
107	NDIC Prevent Diabetes Problems Box	Diabets/Digstv/Kidney	Yes
108	Sodium Fact Sheet	Diabets/Digstv/Kidney	No
109	Urinary Tract Infection	Diabets/Digstv/Kidney	No
110	Ulcerative colitis	Diabets/Digstv/Kidney	Yes
111	Charge up healthy meals and snacks	Diabets/Digstv/Kidney	Yes
112	WINTKA: Irritable bowel syndrome	Diabets/Digstv/Kidney	Yes
113	WINTKA: Crohn's Disease	Diabets/Digstv/Kidney	Yes
114	Diet Materials: assessmt, mgmt, treatmt	Diabets/Digstv/Kidney	Yes
115	Kidney Stones in children Fact Sheet	Diabets/Digstv/Kidney	Yes
116	NDIC Self Care Basics Starter Kit Box	Diabets/Digstv/Kidney	No
117	Never too early/prevent diabetes(span)	Diabets/Digstv/Kidney	Yes
118	Food Label Fact Sheet	Diabets/Digstv/Kidney	Yes
119	Phosphorus Fact Sheet	Diabets/Digstv/Kidney	Yes
120	Potassium Fact Sheet	Diabets/Digstv/Kidney	Yes
121	WPNTK: High BP and children	Diabets/Digstv/Kidney	Yes
122	Info about diabetes blood test	Diabets/Digstv/Kidney	No
123	Your kidney test results	Diabets/Digstv/Kidney	Yes
124	WINTKA: My child's urinary tract infect	Diabets/Digstv/Kidney	Yes
125	Urinary tract infections WYNTK	Diabets/Digstv/Kidney	Yes
126	Heartburn and GERD	Diabets/Digstv/Kidney	No
127	WINTKA: Gas (Spanish)	Diabets/Digstv/Kidney	Yes
128	WINTKA gestational diabetes	Diabets/Digstv/Kidney	Yes
129	Sundays tool kit folder text	Diabets/Digstv/Kidney	No
130	Sundays tool kit inserts	Diabets/Digstv/Kidney	No
131	Sundays tool kit DVD	Diabets/Digstv/Kidney	No
132	WINTKA Diabetes meds large print	Diabets/Digstv/Kidney	Yes
133	WINTKA diabetes meds lg print (AA)	Diabets/Digstv/Kidney	Yes
134	WINTKA Diabetes medicines	Diabets/Digstv/Kidney	Yes
135	Urologic diseases in amer CD w/label	Diabets/Digstv/Kidney	No
136	Your Guide to type 1/2 diabetes	Diabets/Digstv/Kidney	Yes
137	2 Reasons I Find Time to Prevent diabet	Diabets/Digstv/Kidney	Yes
138	More than 50 ways to prevent diabetes	Diabets/Digstv/Kidney	Yes
139	Know Your Blood Sugar Numbers	Diabets/Digstv/Kidney	Yes
140	Gestational diabets when pregnant	Diabets/Digstv/Kidney	No
141	Crohn's Disease WINTK	Diabets/Digstv/Kidney	Yes
142	Never Too Early to Prevent diabets	Diabets/Digstv/Kidney	Yes
143	Am I At Risk	Diabets/Digstv/Kidney	No
144	The Diabetic Directory	Diabets/Digstv/Kidney	Yes
145	Urinary Tract Infection Adult	Diabets/Digstv/Kidney	Yes
146	Your Guide to type 1/2 diabets Span	Diabets/Digstv/Kidney	Yes
147	Power To Control Your Diabetes	Diabets/Digstv/Kidney	Yes

	Document Title	NIH Institute or Center	Available Online? (Yes/No)
148	Dry Mouth	Diabets/Digstv/Kidney	Yes
149	Take Care Of Your Feet for a Lifetime	Diabets/Digstv/Kidney	Yes
150	Choose More 50 Ways to prevent type 2	Diabets/Digstv/Kidney	Yes
151	Better Health And You	Diabets/Digstv/Kidney	Yes
152	PDP Keep Your Diabetes Under Control	Diabets/Digstv/Kidney	Yes
153	PDP Keep Your heart and blood healthy	Diabets/Digstv/Kidney	Yes
154	PDP Health Kidneys	Diabets/Digstv/Kidney	Yes
155	WINTKA Painful Bladder	Diabets/Digstv/Kidney	Yes
156	PDP Kidney Health	Diabets/Digstv/Kidney	Yes
157	PDF Keep Kidneys Healthy Spanish	Diabets/Digstv/Kidney	Yes
158	WINTKA Preparing Pregnancy/diabetes	Diabets/Digstv/Kidney	No
159	Help A Loved One with Diabetes	Diabets/Digstv/Kidney	No
160	Take Care Of Your Health	Diabets/Digstv/Kidney	No
161	Family Reunion Tool Kit DVDs	Diabets/Digstv/Kidney	No
162	Family Reunion Tool Kit Rev 8/12	Diabets/Digstv/Kidney	Yes
163	WINTKA My Child's Bedwetting	Diabets/Digstv/Kidney	Yes
164	Erectile Dysfunction	Diabets/Digstv/Kidney	Yes
165	H.Pylori/ Peptic Ulcer Fact Sheet	Diabets/Digstv/Kidney	Yes
166	Take Care Of Your Heart mng diabetes	Diabets/Digstv/Kidney	Yes
167	Irritable Bowel Syndrome	Diabets/Digstv/Kidney	Yes
168	Kidney Disease Statistics for the US	Diabets/Digstv/Kidney	Yes
169	Pre-diabetes WYNTK	Diabets/Digstv/Kidney	Yes
170	Stool Diary/Stool Scale	Diabets/Digstv/Kidney	Yes
171	Gastroporesis Fact Sheet	Diabets/Digstv/Kidney	Yes
172	NIDDK Newsletter	Diabets/Digstv/Kidney	Yes
173	Type 2 Diabetes WYNTK	Diabets/Digstv/Kidney	Yes
174	Kidney Disease of Diabetes	Diabets/Digstv/Kidney	Yes
175	Just Enough Spanish	Diabets/Digstv/Kidney	Yes
176	ERCP Spanish	Diabets/Digstv/Kidney	Yes
177	Chemotherapy and Your Mouth	Dental/Craniofac Rsrch	Yes
178	Dental Care Everyday	Dental/Craniofac Rsrch	Yes
179	POC Autism Brochure	Dental/Craniofac Rsrch	No
180	Healthy Mouth For Your Baby AI/AN	Dental/Craniofac Rsrch	Yes
181	Oral Cancer Fact Sheet	Dental/Craniofac Rsrch	No
182	Head/Neck Radiation Therapy REV	Dental/Craniofac Rsrch	Yes
183	Seal Out Tooth Decay	Dental/Craniofac Rsrch	Yes
184	PDP Keep Your Mouth Healthy Spanish	Dental/Craniofac Rsrch	Yes
185	Spit Tobacco	Dental/Craniofac Rsrch	Yes
186	Three good reasons dentist cancer trtm	Dental/Craniofac Rsrch	Yes
187	Curiosity Creates Cures	Gen'l Med'l Sciences	Yes
188	Undergraduate Training Flyer	Gen'l Med'l Sciences	Yes
189	Common Data Elements Brochure	Neuro Disordrs/Stroke	Yes
190	Parkinson's Disease Fact Sheet	Neuro Disordrs/Stroke	No
191	Multiple Sclerosis Fact Sheet	Neuro Disordrs/Stroke	No
192	Multiple Sclerosis Atrophy Fact Sheet	Neuro Disordrs/Stroke	Yes
193	Transverse Myelitis F/S	Neuro Disordrs/Stroke	Yes
194	Transverse Myelitis F/S Spanish	Neuro Disordrs/Stroke	Yes
195	Tremors F/S Spanish	Neuro Disordrs/Stroke	Yes
196	Carpal Tunnel	Neuro Disordrs/Stroke	Yes
197	Carpal Tunnel Spanish	Neuro Disordrs/Stroke	Yes

	Document Title	NIH Institute or Center	Available Online? (Yes/No)
198	Febrile Seizures Fact Sheet	Neuro Disordrs/Stroke	Yes
199	Spinal Cord Injury HTR	Neuro Disordrs/Stroke	Yes
200	Myoclonus Fact Sheet	Neuro Disordrs/Stroke	Yes
201	Myoclonus Fact Sheet Spanish	Neuro Disordrs/Stroke	Yes
202	Pain Information Resources HTR	Neuro Disordrs/Stroke	Yes
203	Seizures And Epilepsy	Neuro Disordrs/Stroke	Yes
204	DVD's NEHEP 2010-11 Year-end report	Nat'l Eye Institute	No
205	Diabetes and Healthy Eyes Toolkit CD	Nat'l Eye Institute	Yes
206	NEI Vision Research Needs	Nat'l Eye Institute	Yes
207	NIBIB Strategic Plan	Inst. Biomed Imaging	Yes
208	NIBIB 10 th Anniversary Brochure	Inst. Biomed Imaging	Yes

Appendix F - Report Distribution

Public Printer

Deputy Public Printer

General Counsel

Acting Managing Director, Customer Services

Major Contributors to the Report

David B. Schaub, Lead Auditor