

CURRICULUM VITAE

Andrew R. Rezvani, M.D.

1. Personal Data

Place of birth: Philadelphia, PA
Citizenship: U.S.A.

2. Education

06/1997 B.A., Slavic Languages and Literature, Stanford University, Stanford, CA
05/2001 M.D., Temple University School of Medicine, Philadelphia, PA

3. Postgraduate Training

06/2001–06/2004 Internship and Residency in Internal Medicine
Duke University Medical Center, Durham, NC

07/2005–06/2008 Fellowship in Medical Oncology
Fred Hutchinson Cancer Research Ctr. & University of Washington
Seattle, WA

4. Faculty Positions

07/2008–03/2012 Research Associate, Fred Hutchinson Cancer Research Center
07/2008–03/2012 Acting Instructor, University of Washington Medical Center
03/2012–12/2013 Associate in Clinical Research, Fred Hutchinson Cancer Research Center
03/2012–12/2013 Acting Assistant Professor, University of Washington Medical Center
01/2014– Assistant Professor of Medicine, Stanford University

5. Hospital Positions

09/2004–06/2005 Staff Physician, Adult Hospitalist Team
Swedish Medical Center, Seattle, WA

6. Honors and Awards

1999 Medical Microbiology Honors Program, Temple University
2000 Member, Alpha Omega Alpha medical honor society
2007 American Society of Hematology Travel Award

7. Board Certification

2004 Internal Medicine
2008 Medical Oncology

8. Active Licenses to Practice

2004 (issued) Washington State Physician and Surgeon license
2014 (issued) California Physician's and Surgeon's license

9. Teaching Responsibilities

- Teaching of hematology/oncology fellows, residents, visiting physicians and mid-level providers as attending physician on the Stem Cell Transplantation Service.
- HuBio 552 (Hematology) small-group leader, University of Washington School of Medicine

10. Institutional Responsibilities

2012–2013 Member, Data and Safety Monitoring Board, FHCRC Protocol 2603 (Multi-center, open-label randomized study of single or double myeloablative cord blood transplantation with or without infusion of off-the-shelf ex vivo expanded cryopreserved cord blood progenitor cells in patients with hematologic malignancies)

11. Editorial Responsibilities

2008– Editorial consultant, American College of Physicians
Physician Information and Education Resource (PIER) module, indolent non-Hodgkin lymphoma

12. Research Funding

CURRENT:

Award Type: Mentored Research Scholar Grant (Foundation grant, PI: Rezvani)

Dates of Project: 07/01/12 - 06/30/16

Funding Source: American Cancer Society

Title of Project: Anti-B-Cell Therapy in Allogeneic Hematopoietic Cell Transplantation

Major Goal(s) of Project: The goal of this proposal is to study the incorporation of rituximab into non-myeloablative allogeneic hematopoietic cell transplantation regimen for patients with non-Hodgkin lymphoma. Major focuses include reducing relapse rate, determining optimal rituximab dosing and serum concentrations, exploring the effect of rituximab on graft-vs.-host disease, and studying B-cell reconstitution in this setting.

Role: Principal Investigator

Award Type: R21 OD010489 (PI: Rezvani, Graves)

Dates of Project: 06/13/13 – 03/31/15

Funding Source: NIH/NCRR

Title of Project: Characterization of Chronic Graft-versus-Host Disease in the Canine Model

Major Goal(s) of Project: We propose to develop a clinically relevant canine model of chronic GVHD as a platform for preclinical mechanistic and therapeutic investigations and, ultimately, the translation of new treatment approaches to the clinic.

Role: Co-Principal Investigator

COMPLETED:

Award type: Foundation grant

Dates of project: 6/1/11 – 5/31/12

Funding source: Gabrielle's Angels Foundation

Title of project: The Role of Rituximab in Allogeneic Hematopoietic Cell Transplantation for B-Cell Non-Hodgkin Lymphoma

Major Goal(s) of Project: To reduce the risks of post-transplant relapse and graft-vs.-host disease for patients undergoing allogeneic hematopoietic cell transplantation to treat non-Hodgkin lymphoma.

Role: Principal Investigator of FHCRC Protocol #2226.

Award Type: K12 CA076930 (PI: Bernstein)

Dates of Project: 7/10/2004-6/30/2009 (-08) and 9/1/2009-8/31/14 (-011)

Funding Source: NIH/NCI

Title of Project: Career Development in Pediatric and Medical Oncology

Major Goal(s) of Project: The aim of the Career Development Program is to develop clinical investigators. It supports physicians who have completed three years of fellowship training in the pediatric or medical oncology training programs. Those most qualified and motivated to enter into investigative endeavors in clinical research will be selected. During their two to three years supported by the K12 grant, trainees will gain the tools and experience necessary to conduct clinical research, translate their findings to patients, and generate sufficient data to help establish independent research careers.

Role: Principal Investigator, FHCRC protocol #2226

Award Type: Industry (PI: Deeg)

Dates of Project: 12/01/2006 - 12/31/2008

Funding Source: PDL Biopharma

Title of Project: FHCRC Protocol #2130: Cyclophosphamide Followed by Intravenous Busulfan as Conditioning for Hematopoietic Cell Transplantation in Patients with Myelofibrosis, Acute Myeloid Leukemia, and Myelodysplasia: a Phase I/II Study.

Major Goal(s) of Project: Reduce regimen-related toxicity by altering the sequencing of cyclophosphamide and busulfan in myeloablative conditioning for allogeneic hematopoietic cell transplantation (HCT). Collect pharmacokinetic and pharmacogenomic data on patient exposure to toxic metabolites of cyclophosphamide with this dosing sequence.

Role: Principal investigator of FHCRC Protocol #2130

Award Type: T32 CA009515 (PI: Appelbaum)

Dates of Project: 7/1/2005 - 6/30/2010

Funding Source: NIH/NCI

Title of Project: Training in Cancer Biology and Transplantation

Major Goal(s) of Project: The aim of this training program is to prepare highly qualified physicians for an academic research career in medical oncology by developing research skills in cancer biology and cancer therapy as related to the problems of bone marrow transplantation and the allied fields of T cell-mediated adoptive tumor immunotherapy and gene transfer therapy.

Role: Senior Fellow, 1 July 2005 – 30 June 2008

13. Publications

REFEREED JOURNALS:

1. **Rezvani AR**, Storer B, Maris M, Sorrow ML, Agura E, Maziarz RT, Wade JC, Chauncey T, Forman SJ, Lange T, Shizuru J, Langston A, Pulsipher MA, Sandmaier BM, Storb R, Maloney DG. Nonmyeloablative allogeneic hematopoietic cell transplantation in relapsed, refractory, and transformed indolent non-Hodgkin's lymphoma. Journal of Clinical Oncology 2008; 26(2):211-7.
2. **Rezvani AR**, Storb R. Using allogeneic stem cell/T-cell grafts to cure hematologic malignancies. Expert Opinion on Biological Therapy 2008; 8(2):161-79.
3. **Rezvani AR**, Storb RF. Separation of graft-vs.-tumor effects from graft-vs.-host disease in allogeneic hematopoietic cell transplantation. Journal of Autoimmunity 2008; 30(3):172-9.
4. **Rezvani AR**, Norasetthada L, Gooley T, Sorrow M, Bouvier ME, Sahebi F, Agura E, Chauncey T, Maziarz RT, Maris M, Shizuru J, Bruno B, Bredeson C, Lange T, Yeager A, Sandmaier BM, Storb RF, Maloney DG. Non-myeloablative allogeneic haematopoietic cell transplantation for relapsed diffuse large B-cell lymphoma: a multicentre experience. British Journal of Haematology 2008; 143(3):395-403.
5. Flowers ME, Storer B, Carpenter P, **Rezvani AR**, Vigorito AC, Campregher PV, Moravec C, Kiem HP, Fero M, Georges G, Warren E, Lee S, Sanders JE, Appelbaum F, Martin PJ. Treatment change as a predictor of outcome among patients with classic chronic graft-versus-host disease. Biology of Blood and Marrow Transplantation 2008; 14(12):1380-4.
6. Gyurkocza B, **Rezvani AR**, Storb RF. Allogeneic hematopoietic cell transplantation: state of the art. Expert Review of Hematology 2010; 3(3):285-99.
7. **Rezvani AR**, Maloney DG. Rituximab resistance. Best Practice & Research Clinical Haematology 2011; 24(2):203-16.
8. **Rezvani AR**, Storer BE, Storb RF, Mielcarek M, Maloney DG, Sandmaier BM, Martin PJ, McDonald GB. Decreased serum albumin as a biomarker for severe acute graft-versus-host disease after reduced-intensity allogeneic hematopoietic cell transplantation. Biology of Blood and Marrow Transplantation 2011; 17(11):1594-601.
9. Yeh RF, Pawlikowski MA, Blough DK, McDonald GB, O'Donnell PV, **Rezvani A**, Deeg HJ, McCune JS. Accurate targeting of daily intravenous busulfan with 8-hour blood sampling in hospitalized adult hematopoietic cell transplant recipients. Biology of Blood and Marrow Transplantation 2012; 18(2):265-72.
10. Scott BL, Gooley T, Sorrow M, **Rezvani A**, Linenberger M, Grim J, Sandmaier B, Myerson D, Chauncey T, Storb R, Buxhofer-Ausch V, Radich J, Appelbaum F, Deeg HJ. The Dynamic International Prognostic Scoring System for Myelofibrosis Predicts Outcomes after Hematopoietic Cell Transplantation. Blood 2012; 119(11):2657-64.
11. **Rezvani AR**, Storb RF. Prevention of graft-vs.-host disease. Expert Opinion on Pharmacotherapy 2012; 13(12):1737-50.
12. Sato M, Loretz C, Stone D, Storb R, **Rezvani AR**, Sale GE, Graves SS. Inducible co-stimulator (ICOS) up-regulation on activated T-cells in chronic graft-vs.-host disease following dog-leukocyte-antigen-nonidentical hematopoietic cell transplantation: A potential therapeutic target. Transplantation 2013; 96(1):34-41.

13. **Rezvani AR**, McCune JS, Storer BE, Batchelder A, Kida A, Deeg HJ, McDonald GB. Cyclophosphamide followed by intravenous targeted busulfan for allogeneic hematopoietic cell transplantation: pharmacokinetics and clinical outcomes. Biology of Blood and Marrow Transplantation 2013; 19(7):1033-9.
14. **Rezvani AR**, Sandmaier BM. Allogeneic hematopoietic cell transplantation for indolent non-Hodgkin lymphoma: indications and outcomes. Current Opinion in Hematology 2013 2013;20(6):509-14.

BOOK CHAPTERS:

1. **Rezvani AR**, Deeg HJ. Introduction to Hematopoietic Stem Cell Transplantation. In Transplant Infections, 3rd edition. Lippincott Williams & Wilkins 2010.

SELECTED MEETING ABSTRACTS:

1. **Rezvani AR**, Leisenring W, Martin PL, Flowers MED, Maloney DG, Chauncey TR, Sandmaier BM, Storb RF. Duration of Immunosuppressive Therapy for Chronic Graft-vs.-Host Disease (cGVHD) following Non-myeloablative Allogeneic Hematopoietic Cell Transplantation (HCT). Blood 118 (11):324a-325a, 2007 (abstract #1071, American Society of Hematology annual meeting).
2. **Rezvani AR**, McCune JS, Batchelder A, Storer BE, McDonald GB, Deeg HJ. Low Toxicity and Mortality with Reversed-Order Conditioning (Cyclophosphamide Followed by Targeted Intravenous Busulfan) in Allogeneic Hematopoietic Cell Transplantation: Preliminary Results of a Prospective Clinical Trial. Blood 114 (22):482-3, 2009 (abstract #1175, American Society of Hematology annual meeting).