

Jonathan Rosand, MD, MSc  
Massachusetts General Hospital  
Boston, MA

**Email:** jrosand@partners.org

**Please provide a paragraph describing your current positions, responsibilities and research:**

A critical care neurologist with expertise in cerebrovascular disorders and the genetics of complex disease, Dr. Rosand is Professor of Neurology at Harvard Medical School, where he is the J. Philip Kistler Neurologist at Massachusetts General Hospital and Chief of the MGH Division of Neurocritical Care and Emergency Neurology. His impact as clinician, investigator, mentor and administrator has been driven by his passion for patient care and his commitment to rigorous science, interdisciplinary collaboration, team-building and the embrace of new ideas and technologies. Dr. Rosand devotes a substantial proportion of his time to running a multi-disciplinary research group within the MGH Center for Human Genetic Research and the Broad Institute devoted to the genetics and imaging of cerebrovascular disease. In 2007, he led the establishment of the International Stroke Genetics Consortium, which has transformed the field and become an innovative model for international collaborative science.

Until 2010, Dr. Rosand was Director of the MGH/Brigham and Women's/Harvard Training Program in Vascular and Critical Care Neurology. He is particularly proud of his track record of collaboration with clinical fellows on first-rate scientific publications. In addition, he currently serves as mentor for three active K-23 awards, and current or past mentor for fellowship awards from the American Academy of Neurology, American Heart Association and National Stroke Association and other foundations. He has served on multiple NIH study sections and is currently a standing member of the NINDS NST-1 subcommittee, which is responsible for review of K awards.

**Please list your current or past NIH awards, American Heart Association or other Foundation Awards (up to 5):**

- NIH / NINDS R01NS059727 (Rosand, PI)  
*Gene Discovery of Warfarin Related Intracerebral Hemorrhage*  
This project will complete two whole genome association studies: one of intracerebral hemorrhage unrelated to warfarin and one of warfarin-related intracerebral hemorrhage.  
Role: PI

- NIH/NINDS U01NS069763 (Daniel Woo, PI)  
*Ethnic/Racial Variations of Intracerebral Hemorrhage*  
Whole genome association study of intracerebral hemorrhage in minority populations. MGH will serve as the imaging analysis site.  
Role: PI, Imaging Core
- NIH/NINDS U01NS069208 (Rosand, One of Multiple PIs)  
*NINDS Ischemic Stroke Genetics Consortium*  
Multi-stage genome wide association study of ischemic stroke in 7000 subjects.  
Role: PI
- NIH/NINDS R01 NS073344 (Rosand, PI)  
*SCORE-IT: The CTA Spot Sign Score in Acute Cerebral Hemorrhage*  
This project will determine whether CTA and MRI imaging characteristics predict treatment response in the ATACH-II clinical trial of aggressive blood pressure reduction for acute intracerebral hemorrhage.  
Role: PI
- NIH/NINDS U10NS080369-01 (Joshua Goldstein, PI)  
*The Boston NETT Group*  
Current and future Neurologic Emergencies Treatment Trials Network studies aim to improve care for patients with stroke, traumatic brain injury, and spinal cord injury by improving rapid diagnosis and early treatment to improve outcomes in patients with neurologic emergencies.  
Role: Co-Investigator

**Please list the very first grant you received as a trainee or junior faculty member:**

2000-2002

- National Stroke Association Research Fellowship in Cerebrovascular Disease
- Genetic and Clinical Determinants of Hematoma Size in Acute Intracerebral Hemorrhage

2000-2002

- American Academy of Neurology Clinical Research Training Fellowship
- Genetic and Clinical Determinants of Hematoma Size in Acute Intracerebral Hemorrhage

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**Please provide a paragraph that describes how your current grants relate to your first? What was the path that led to your current grants?**

These first fellowship awards grew out of a project I allowed myself to be pulled into by Steve Greenberg, whom I immediately recognized as an outstanding mentor when I met him. I did not have a clear sense of what kind of a research career I wanted to pursue, but I knew I wanted to study the sickest population. ICH was (as now) crying out for effective treatments, and caring for these patients preoccupied a substantial proportion of my time as a resident and fellow. These first grants had two aims: 1) Use CT perfusion to determine the extent of hypoperfusion surrounding the hematoma and 2) Determine the role of APOE in the extent of bleeding from ICH. Virtually all of my funded research has emerged from these two initial aims.

**Please list at least 4 past or current mentors:**

- Walter Koroshetz
- Steven M. Greenberg
- Anne B. Young
- David Altshuler