

BIOGRAPHICAL SKETCH

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NAME: Pietroski, Richard Edward

eRA COMMONS USER NAME (credential, e.g., agency login): rpietroski

POSITION TITLE: Chief Executive Officer/Owner; Pietroski CEO LLC

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.*)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
Eastern Michigan University	BS	09/1980	Biology/Biochemistry
Eastern Michigan University	MS	12/1983	Physiology
Madonna University	Graduate	08/2000	Healthcare Risk Management

A. Personal Statement

For nearly four decades my life has been dedicated to the successful analysis, development and improvement of the organ donation and transplantation system across the globe. Through a vast number of appointments, my experience transcends the full scope of the deceased donor procurement and transplant process, and is balanced with national committee leadership work, legislative and regulatory policy development, administrative oversight of \$60+ Million budgets, multiple clinical foot-print building projects as large as 75K ft², and recognition of international and multicultural positions related to altruistic deceased organ donation. My commitment to succeed is underscored in my personal benefit of becoming a tissue allograft recipient to rebuild a failed shoulder and my 20-year old son becoming a donor.

Citations:

1. Ex Situ Perfusion of Human Limb Allografts for 24 Hours. Werner NL, Alghanem F, Rakestraw SL, Sarver DC, Nicely B, **Pietroski RE**, Lange P, Rudich SM, Mendias CL, Rojas-Pena A, Magee JC, Bartlett RH, Ozer K. Transplantation. 2017 Mar;101(3):68-74. PMID: 28222055
2. Predictors of liver donation without kidney recovery in a cohort of expanded criteria donors: identifying opportunities to improve expanded criteria donor kidney utilization. S L White, A B Leichtman, K O'Connor, G Lipkowitz, **R Pietroski**, J S Stoff, R S Luskin, J Belcher, K Meyer, R M Merion, F K Port, F L Delmonico. Transplant Proc. 2012 Sep; 44(7):2223-6. PMID: 22974959
3. Seropositive abdominal and thoracic donor organs are largely underutilized. Taylor RM, **Pietroski RE**, Hagan M, Eisenbrey AB, Fontana RJ. Transplant Proc. 2010 Dec;42(10):4479-87. Dec 2010. PMID: 21168721
4. Improving Organ Procurement Practices in Michigan. R J Lynch, AK Mathur, JC Hundley, J Kubus, **RE Pietroski**, BJ Mattice, et al. Am Journal of Transplantation: 2009 Oct; 9(10):2416-23. PMID: 19656129.
5. Early pancreas transplant outcomes with histidine-tryptophan-ketoglutarate preservation: a multicenter study. Englesbe MJ, Moyer A, Kim DY, Granger DK, **Pietroski R**, Yoshida A, Arenas

JD, Oh H, Pelletier SJ, Campbell DA Jr, Punch JD, Magee JC, Gruber SA, Sung RS. Transplantation. 2006 Jul 15;82(1):136-9. PMID: 16861954

6. Does using HTK solution for cold perfusion of cadaveric kidneys save money? Englesbe MJ, Heidt D, Sung R, **Pietroski R**. Transplantation Brief Communication. 2006 Jun 27;81(12):1750. PMID: 16794546
7. Is age the only determinant? Gruber SA, **Pietroski RE**. Transplantation. 2006 Apr 15;81(7):971-2. PMID
8. Quantifying organ donation rates by donation service area. Ojo AO, **Pietroski RE**, O'Connor K, McGowan JJ, Dickinson DM. Am J Transplant. 2005 Apr;5(4 Pt 2):958-66. PMID: 15760421
9. Organ donation in the United States. Nathan HM, Conrad SL, Held PJ, McCullough KP, **Pietroski RE**, Siminoff LA, Ojo AO. Am J Transplant. 2003; 3 Suppl 4:29-40. PMID: 12694048
10. A Critical Pathway: Guiding Care for Organ Donors (Feature Article). Holmquist, M., Chabalewski, F., Blount, T., Edwards, C., McBride, V., **Pietroski, R.E**. Critical Care Nurse. 9 (2): 84-98. April 1999. PMID: 10401306
11. Discordance in Interpretations of Potential Donor Echocardiograms. Lewandowski, T.J., Aaronson, K.D., **Pietroski, R.E**. J Heart Lung Transplant. 1998; 17:100.
12. Effect of Furosemide and/or Mannitol on the Immediate Function of Preserved Cadaver Kidneys. Kaplan, M.D., Toledo-Pereyra, L.H., **Pietroski, R.E.**, Rosenberg, J.C., and Allaben, R.D.: Transplantation 41:124-125, 1986.

B. Positions, Scientific Appointments, and Honors

Positions and Scientific Appointments

2021	Consultant, Traferox Technologies Inc, Toronto, Ontario, Canada
2020 – Present	Consultant, Lung Bioengineering Inc – United Therapeutics Corp, Silver Spring, MD
2020 – Present	Consultant, Mayo Clinic, Jacksonville, FL
2020 – Present	Consultant, Hibernicor LLC, Abu Dhabi, United Arab Emirates
2020 – Present	Registered Lobbyist, Dade County, Miami, FL
2020 – Present	Chief Executive Officer and Owner, Pietroski CEO LLC, Pittsburgh, PA
2016 – Present	President, Lung Bioengineering Inc – United Therapeutics Corp, Silver Spring, MD
2016 – Present	Chief Executive Officer Emeritus, Gift of Life Michigan OPO, Ann Arbor, MI
2016 – Present	Consultant, OPO Leadership Innovation National Collaborative LLC, St. Louis, MO
2010 – Present	Arbor Research Collaborative for Health, Board of Director and Treasurer, Ann Arbor, MI
2015 – 2017	Organ Procurement and Transplantation Network, Board Treasurer, Richmond, VA
2010 – 2016	Organ Donation and Transplantation Alliance Board of Director, Atlanta, GA
2014	Transplant Procurement Management Training Course Faculty Barcelona, Spain
2010 – 2012	Organ Procurement and Transplantation Network Policy Oversight Comte, Richmond, VA
2009 – 2015	Organ Procurement and Transplantation Network OPO Committee/Chair, Richmond, VA
2008 – 2016	Chief Executive Officer, Gift of Life Michigan OPO, Ann Arbor, MI
2005 – 2008	INO Therapeutics Inc, Inhaled Covox Therapy Expert Advisory Panel, Hampton, NJ
2005 – 2007	American Board for Transplant Certification, Board and President, Kansas City, KS
2005	Visiting Scholar, Scientific Registry of Transplant Recipients, Ann Arbor, MI
2003 – Present	Adjunct Faculty, University of Toledo College of Medicine, Toledo, OH
2003 – 2008	Scientific Registry of Transplant Recipients, Board of Director, Ann Arbor, MI
1995 – 2016	Association of Organ Procurement Organizations, Board of Director, McLean, VA
1995 – 2008	Associate CEO/Chief Operations Officer, Gift of Life Michigan, Ann Arbor, MI
1992 – 2005	American Board for Transplant Certification, Board of Director Treasurer, Kansas City, KS
1990 – 1995	Clinical Director, Gift of Life Michigan OPO, Ann Arbor, MI

2010 to Present American Association of Transplant Surgeons, At-Large Member, Arlington, VA
2003 to Present American Society of Transplantation, At-Large Member, Mt. Laurel, NJ
1988 to Present North American Transplant Coordinators Organization, At-Large Member, Oak Hill, VA

Honors

2016 Donate Life Transplant Games of America, T.J Masiack Outstanding Support Award, Cleveland, OH
2016 Michigan Donor Family Council, Inspiration Award, Dearborn, MI
2016 Ruth Johnson, Michigan Secretary of State, Recognition Award, Dearborn, MI
2015 Assn Multicultural Affairs Transplant Professional, Outstanding Achievement Award, Detroit, MI
2015 Association of Organ Procurement Organizations, Top Abstract Award, Phoenix, AZ
2014 World Transplant Congress, Poster of Distinction Award, San Francisco, CA
2014 Association of Organ Procurement Organizations, Top Abstract Award, Baltimore, MD
2013 Kountz-Callender-Drew Trailblazer Award, Multicultural Organ & Tissue Transplant Pgm, Detroit, MI
2011 UNOS Transplant Management Forum, Best Poster Award, Denver, CO
2010 Midwest Eye-Banks Annual Meeting, Founders Award, Bloomfield Hills, MI
2005 Assn of Organ Procurement Organizations CryoLife Lifetime Achievement Award, Los Angeles, CA
1990 Faculty Member - Honorary, Kyushu University School of Medicine, Kyushu, Japan

C. Contributions to Science

1. My early career contribution to the field of organ transplant and donation was focused on the development of skills to optimize the medical management of the brain-dead organ donor, involving large animal pre-clinical research, peer review publications, pharma donor management advisory panel membership and participating in national instructional course faculty activities. My clinical involvement includes on-site critical care unit medical management of 850+ brain dead on-site donor cases.
2. The next phase of my career was focused on the expansion of organ donor sources through administrative and grass roots activities within Michigan and throughout the US. These activities included:
 - A statewide implementation of routine notification of more than 20,000 annual deaths being reported by 145 acute care hospitals to the Michigan OPO seven years before the Centers for Medicare and Medicaid Services promulgated the same process as a requirement under federal Conditions of Participation for hospitals.
 - Development and implementation of a controlled and uncontrolled donation after circulatory death (DCD) program that became the most productive program in the US. This DCD program was later augmented to incorporate use of extracorporeal membrane oxygenation technology post-death declaration to regionally perfuse and re-oxygenate abdominal organs in situ during surgical procurement.
 - Creation of a focused program to capture a cohort 80+ liver alone deceased organ donors for transplant, with subsequent analysis illustrating no impact on transplant outcomes through inductive donor and recipient selection criteria.
 - As a visiting scholar with the Scientific Registry of Transplant Recipients, developed the objective definition of Eligible Death through the incorporation of the ICD-10 Code dataset from the National Center for Health Statistics that allowed for the first-time calculation of Observed to Expected OPO ratio of donor conversion that was later adopted by the Centers for Medicare and Medicaid Services as an OPO performance measure regulation.
 - Established routine and customized HLA laboratory services for nine local transplant centers under an OPO operated CLIA certified laboratory.
 - Growing the first person authorization rate of Michigan adults from second to last (17%) in the US to second overall (62%).
3. Mid-career activity focused on system impact changes at the national level to impact new sources of organs for transplant, which involved:
 - The establishment of the nation's second OPO operated surgical procurement center with four ICU bays for deceased donor management, four operating rooms, and the employment of a full-time abdominal surgeon. Following the first 200 donor transfers, it was published that the OPO increased the rate of organs transplanted per donor, reduced local transplant center surgical

resource requirements, maintained high donor family satisfaction statistics, while saving more than \$1 Million in direct donor expenses compare to the previous 200 local organ donors. Donor transport logistics involved ground and fixed wing, with the longest transfer of ventilated deceased donors being 450 miles.

- Co-chaired the Organ Procurement and Transplantation Network HOPE Act policy implementation to allow for the routine procurement of kidneys and livers from HIV reactive deceased donors for transplant into HIV reactive recipients.
 - Led the Organ Procurement and Transplantation Network Finance Committee to develop and successful implementation a plan for the reduction of patient transplant waitlisting fees.
 - Implemented a AHSI laboratory fellowship training program that produced two ASHI/ABHI qualified laboratory directors.
 - Liaison to State of Michigan and US Congress, resulting in 10+ Bills being legislated.
 - Administered to, and grew, HLA and infectious disease laboratory director services for three OPOs, one local, and one non-local transplant centers.
 - Contracted with the US Department of Agriculture to help develop Swine Leukocyte Antigen nomenclature.
4. More recent career activities continue to focus on large scale improvements in the donation process at more of a macro level:
- Organization of a cadre of four large OPOs, with organ procurement centers and on a Baldrige Quality Journey, to form an LLC to achieve administrative, medical and cost efficiencies.
 - Development of an OPO brain dead body for study program which allowed for the ethical utilization of deceased patients that were ruled out for organ donation for medical and surgical training aspects of organ procurement and donor management while the body retained intact cardiac circulation and being artificially ventilated.
 - Establishment of the nation's first OPO-operated ex vivo lung perfusion device for shared utilization among three local lung transplant centers.
 - Conducting a series of upper limb recoveries from brain dead bodies for study at Gift of Life Michigan for successful 24-hour limb perfusion management to demonstrate the potential of a centralized approach to vascular composite allograft procurement, allocation, and potential to maximize utilization nationally.
 - Leading the Lung Bioengineering team to launch two clinical trials involving clinical ex vivo lung perfusion (EVLP) within a regional perfusion center that supplied an added 170+ lungs to 16 transplant centers that would have otherwise not have been used for direct transplant from the deceased donor.
 - Leading the Lung Bioengineering team to launch the nation's first commercial operation for clinical EVLP services through centralized CLIA certified operations located in Silver Spring, MD and Jacksonville, FL.
 - Providing international healthcare consultation services for donation and transplant system process improvement in Canada, Spain, United Arab Emirates and the United States.

D. Additional Information: Research Support and/or Scholastic Performance

Completed Research Support

Fujisawa Healthcare, Inc. Unrestricted Educational Grant Pietroski (PI) 1/30/2004

American Board for Transplant Certification, Development of Clinical Transplant Certification.

The goal of this project is to perform baseline competency assessment and distribution of skills necessary for a nurse to administer to the pre- and post-surgical care needs of a transplant patient and the subsequent development of psychometric certification examination.

Role: PI

5 H39 OT 00067-02 Pietroski (SubPI) 9/2002 to 9/2007

Model Interventions to Increase Organ Donation: Physician Peer Minority Organ Donation Education

National Institute of Diabetic and Digestive and Kidney

The goal of this project was to establish baseline practices of critical care physicians for the development of a continuing medical education program to be administered by peer physicians and measure pre- and post-test

changes in their potential organ donation practice beliefs and to track the human subject physician actual patient practices and outcomes for organ donation.

Role: Project Director

1 H39 OT 00123-01

Pietroski (SubPI)

9/2002 to 9/2005

The Impact of an Expedited Allocation System

Healthcare Resources Services Administration Division of Transplantation

The purpose of this project was to develop an assessment scale of individual expanded criteria donor kidneys available for transplant through organ procurement organizations and to identify best practices leading to successful placement and transplant.

Role: Intervention Core Investigator

Musculoskeletal Transplant Foundation Restricted Grant

Pietroski (PI)

8/2002 to 7/2003

Assessment of Telephone Consent Models for the Improvement of Tissue Donation Rates

The purpose of this project was to develop a mutually exclusion set of stratified conditions involving events and timing of when families of potential donors are contacted by telephone to request authorization for tissue for transplant and the possible identification of key process indicators for improved authorization rates.

Role: Principal Investigator