

Confirmation of HLA Typing

| Registry Use Only Sequence Number: Date Received: | OMB No: 0915-0310 Expiration Date: 12/31/2013 Public Burden Statement: An agency may not conduct or sponsor, and a person not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0310. Public reporting burden for this collection of information, in combination with the IDI Form 2004 and HCT Infusion Form 2006, is estimated to average 1.5 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857. Expiration date: 12/31/2013 | | | |
|---|---|----|----|--|
| CIBMTR Center Number: | | | | |
| CIBMTR Recipient ID: | | | | |
| Date of HCT for which this form is being completed: | | _ | | |
| Date of Fig. 181 which the form is being completed. | | MM | DD | |
| HCT type: (check all that apply) ☐ Autologous | | | | |
| ☐ Allogeneic, unrelated | | | | |
| ☐ Allogeneic, related | | | | |
| Product type: (check all that apply) | | | | |
| ☐ Bone marrow | | | | |
| □ PBSC | | | | |
| ☐ Single cord blood unit | | | | |
| ☐ Multiple cord blood units | | | | |
| ☐ Other product | | | | |
| Specify: | | | | |

This form must be completed for all non-NMDP allogeneic or syngeneic donors or recipients, or non-NMDP cord blood units. If the donor, recipient, or cord blood unit was secured through the NMDP, then report HLA typing on the appropriate NMDP forms.

| CIBMTR Center Number: CIBMTR Recipient ID: |
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| Donor / Cord Blood Unit Identification |
| |
| A separate copy of this form should be completed for each non-NMDP donor, recipient, or cord blood unit. |
| 1. Specify the person for whom this typing is being done: |
| ☐ Recipient — final typing – Go to question 13 |
| ☐ Recipient's biological mother — confirmatory typing – <i>Go to question</i> 7 |
| ☐ Recipient's biological father — confirmatory typing – <i>Go to question 7</i> |
| ☐ Other biological relative – Go to question 5 |
| ☐ Unrelated donor — confirmatory typing – <i>Go to question 2</i> |
| ☐ Cord blood unit — confirmatory typing – <i>Go to question 3</i> |
| ☐ Maternal HLA typing – Go to question 3 |
| 2. Non-NMDP unrelated donor ID: (not applicable for related donor) |
| Go to question 7 |
| |
| 3. Non-NMDP cord blood unit ID: (include related and autologous CBUs) |
| |
| to question 12. If reporting Cord blood unit – confirmatory typing, go to question 4. |
| 4. Was the maternal HLA typing considered in the selection of the cord blood unit? |
| ☐ Yes – Go to question 7 |
| □ No – Go to question 7 |
| 5. Specify recipient's other biological relative and typing: |
| ☐ Recipient's sibling – confirmatory typing – <i>Go to question 7</i> |
| ☐ Recipient's half sibling— confirmatory typing — <i>Go to question 7</i> |
| ☐ Recipient's syngeneic (identical) twin—confirmatory typing — Go to question 7 |
| ☐ Recipient's fraternal twin—confirmatory typing — <i>Go to question 7</i> |
| ☐ Recipient's maternal aunt – confirmatory typing – <i>Go to question 7</i> |
| ☐ Recipient's maternal uncle – confirmatory typing – <i>Go to question 7</i> |
| ☐ Recipient's maternal cousin – confirmatory typing – <i>Go to question 7</i> |
| ☐ Recipient's paternal aunt – confirmatory typing – Go to question 7 |

☐ Recipient's paternal uncle – confirmatory typing – *Go to question 7*

| CIBMTR C | enter N | Jumber: |
|------------------|---------|---|
| | □ F | Recipient's paternal cousin – confirmatory typing – <i>Go to question 7</i> |
| | | Other biological relative – <i>Go to question 6</i> |
| 6. | | Specify other biological relative and typing: |
| 7.Da | te of b | irth: (donor / infant) |
| | □ Kı | nown – Go to question 8 |
| | □ Ui | nknown – Go to question 9 |
| | 8. | Date of birth: (donor / infant) Go to question 11 |
| | 9. | Age: (donor / infant) |
| | | ☐ Known – Go to question 10 |
| | | ☐ Unknown – Go to question 11 |
| | | 10. Age: (donor / infant) □ Months (use only if less than 1 year old) □ Years |
| 11. | Sex: | (donor / infant) |
| | □м | ale |
| | □F€ | emale |
| | | |
| | | Was the person for whom this typing is being done used as the donor? |
| | | |
| | 1 | NO |
| | | |
| HLA Typin | g by C | NA Technology |
| 13. Wa | 'es | umentation submitted to the CIBMTR? (e.g. lab report) |

HLA Alleles Defined by DNA Technology (e.g., Sequence Specific Oligonucleotide Probe (SSOP) typing, Sequence Specific Primer (SSP) typing or Sequence Based (SBT) typing.)

DNA technology can be used to type for a single allele, combinations of alleles (allele strings) or a "generic" allele designation which is similar to a serologic typing result. For this reason, the number of digits, as well as the number of alleles, for reporting will vary.

Laboratories may use "/", "-" or a combination of numbers and letters on the typing report as a shorthand notation for the results. Transcribe the information onto the form as directly as possible. The letters are called allele codes, and will

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| comb | or more characters in length which represent a combination of possible alleles at a locus. The same allele ination may be reported several different ways (e.g., DRB1*01:01 or 01:02, DRB1*01:01/01:02, DRB1*01:01/02, RB1*01:AB). |
| of the | e will be two alleles reported for each locus, unless the individual is presumed homozygous (i.e., carries two copies same allele) at a locus. Transcribe the first allele designation in the first box, and the second allele designation in econd box. If the person is homozygous, leave the second box blank. |
| Class | S1 |
| 14. | Locus A |
| | ☐ Known – Go to question 15 |
| | ☐ Unknown – Go to question 16 |
| | 15. First A* allele designations |
| | |
| | Second A* allele designations |
| | Second A* allele designations |
| | |
| 16. | Locus B |
| | ☐ Known – Go to question 17 |
| | ☐ Unknown – Go to question 18 |
| | 17. First B* allele designations |
| | |
| | Second B* allele designations |
| | |
| | |
| 18. | Locus C |
| | ☐ Known – Go to question 19 |
| | ☐ Unknown – Go to question 20 |

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| | 19. First C* allele designations | |
| | | |
| | | |
| | Second C* allele designations | |
| | | |
| | | |
| | | |
| | | |
| Class | S II | |
| 20. | Locus DRB1 | |
| | ☐ Known – Go to question 21 | |
| | ☐ Unknown – Go to question 22 | |
| : | 21.First DRB1* allele designations | |
| | | |
| | | |
| | Second DRB1* allele designations | |
| | | |
| | | |
| | | |
| | | |
| Class | s II (Optional) | |
| Pleas | e provide the optional allele information if i | t is available from your laboratory. |
| 22. | Locus DRB3 | |
| | ☐ Known – Go to question 23 | |
| | ☐ Unknown – Go to question 24 | |
| | 23. First DRB3* allele designations | |
| | | |

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| | |
| Second DRB3* allele design | nations |
| | |
| | |
| Locus DRB4 | |
| ☐ Known – Go to question 25 | |
| ☐ Unknown – Go to question 26 | 3 |
| 25. First DRB4* allele designation | ions |
| | |
| | |
| Second DRB4* allele design | nations |
| | |
| | |
| Locus DRB5 | |
| ☐ Known – Go to question 27 | |
| ☐ Unknown – Go to question 28 | 3 |
| 27. First DRB5* allele designation | ions |
| | |
| | |
| Second DRB5* allele designations | s |
| | |
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| CIBMTR Center Number: | CIBMTR Recipient ID: |
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| ☐ Unknown – Go to question 30 | |
| 29. First DQB1* allele designations | |
| | |
| | |
| Second DQB1* allele designations | |
| | |
| | |
| 0. Locus DPB1 | |
| ☐ Known – Go to question 31 | |
| ☐ Unknown – Go to question 32 | |
| 31. First DPB1* allele designations | |
| | |
| | |
| Second DPB1* allele designations | |
| | |
| | |
| 2. Locus DQA1 | |
| ☐ Known – Go to question 33 | |
| ☐ Unknown – Go to question 34 | |
| 33. First DQA1* allele designations | |
| | |
| | |
| Second DQA1* allele designations | |
| | |
| | |

| CIBIV | IIR Ce | enter Number: | CIBMTR Recipient ID: |
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| 34. | Loc | cus DPA1 | |
| | ☐ Kr | nown – Go to question 35 | |
| | □ Uı | nknown – Go to question 36 | |
| | 35. | First DPA1* allele designations | |
| | | | |
| | | | |
| | | Second DPA1* allele designations | |
| | | | |
| | | | |
| | | | |

Use the following lists when reporting HLA-A and B antigens. Report broad antigens only when your laboratory was not able to confirm typing for a known split antigen.

Instructions for the use of the "X" Antigen Specificity for Typing By Serology

Antigens Defined by Serologic Typing

Each HLA locus has a serologically defined "X" antigen specificity: AX, BX, CX, DRX, DPX, and DQX. At this time an "X" specificity is defined as "unknown but known to be different from the other antigen at that locus." This is different from a blank specificity, which is defined as "unknown but assumed to be the same as the other antigen at that locus." When comparisons between recipient and donor antigens involve an "X" or "blank" specificity, the "X" or "blank" is assumed to be homozygous for the antigen reported at the locus. In other words, the search algorithm treats typings containing "blank" or "X" antigens in the same manner as known homozygous typings.

| CIBN | ATR Center Number: | CIBMTR Recipient ID: | |
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| | | | |
| A Ar | ntigens | | |
| 36. | Number of antigens provided: | | |
| | ☐ One – Go to question 37, the | n continue with question 39 | |
| | ☐ Two – Go to questions 37-38 | | |
| | 37 | | Specificity – 1st antigen |
| | □ A1 | | |
| | □ A2 | | |
| | □ A203 | | |
| | □ A210 | | |
| | □ A3 | | |
| | □ A9 | | |
| | □ A10 | | |
| | □ A11 | | |
| | □ A19 | | |
| | □ A23(9) | | |
| | □ A24(9) | | |
| | □ A2403 | | |
| | □ A25(10) | | |
| | □ A26(10) | | |
| | □ A28 | | |
| | □ A29(19) | | |
| | □ A30(19) | | |
| | □ A31(19) | | |
| | □ A32(19) | | |
| | □ A33(19) | | |
| | □ A34(10) | | |
| | □ A36 | | |
| | □ A43 | | |
| | □ A66(10) | | |
| | □ A68(28) | | |
| | □ A69(28) | | |
| | □ A74(19) | | |
| | □ A80 | | |
| | □ AX | | |

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| | | |
| 38 | | Specificity – 2nd antigen |
| □ A1 | | |
| □ A2 | | |
| □ A203 | | |
| □ A210 | | |
| □ A3 | | |
| □ A9 | | |
| □ A10 | | |
| □ A11 | | |
| □ A19 | | |
| □ A23(9) | | |
| □ A24(9) | | |
| □ A2403 | | |
| □ A25(10) | | |
| □ A26(10) | | |
| □ A28 | | |
| □ A29(19) | | |
| □ A30(19) | | |
| □ A31(19) | | |
| □ A32(19) | | |
| □ A33(19) | | |
| □ A34(10) | | |
| □ A36 | | |
| □ A43 | | |
| □ A66(10) | | |
| □ A68(28) | | |
| □ A69(28) | | |
| □ A74(19) | | |
| □ A80 | | |

 \square AX

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| | | | |
| B A | ntigens | | |
| 39. | Number of antigens provided: | | |
| | ☐ One – Go to question 40, then | continue with question 42 | |
| | ☐ Two – Go to questions 40-41 | | |
| | 40. | | Specificity – 1st antigen |
| | □ B5 | | |
| | □ B7 | | |
| | □ B703 | | |
| | □ B8 | | |
| | □ B12 | | |
| | □ B13 | | |
| | □ B14 | | |
| | □ B15 | | |
| | □ B16 | | |
| | □ B17 | | |
| | □ B18 | | |
| | □ B21 | | |
| | □ B22 | | |
| | □ B27 | | |
| | □ B2708 | | |
| | □ B35 | | |
| | □ B37 | | |
| | □ B38(16) | | |
| | □ B39(16) | | |
| | □ B3901 | | |
| | □ B3902 | | |
| | □ B40 | | |
| | □ B4005 | | |
| | □ B41 | | |
| | □ B42 | | |
| | □ B44(12) | | |
| | □ B45(12) | | |
| | □ B46 | | |

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| □ B47 | 7 | |
| □ B48 | 3 | |
| □ B49 | 9(21) | |
| □ B50 | | |
| □ B51 | L(5) | |
| □ B51 | 102 | |
| □ B51 | 103 | |
| □ B52 | 2(5) | |
| □ B53 | 3 | |
| □ B54 | 4(22) | |
| □ B55 | 5(22) | |
| □ B56 | 6(22) | |
| □ B57 | 7(17) | |
| □ B58 | 3(17) | |
| □ B59 |) | |
| □ B60 | 0(40) | |
| □ B61 | L(40) | |
| □ B62 | 2(15) | |
| □ B63 | 3(15) | |
| □ B64 | 4(14) | |
| □ B65 | 5(14) | |
| □ B67 | 7 | |
| □ B70 |) | |
| □ B71 | L(70) | |
| □ B72 | 2(70) | |
| □ B73 | 3 | |
| □ B75 | 5(15) | |
| □ B76 | | |
| □ B77 | | |
| □ B78 | | |
| □ B81 | | |
| □ B82 | 2 | |

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| | | |
| | | Specificity – 2nd antigen |
| □ B5 | | |
| □ B7 | | |
| □ B703 | | |
| □ B8 | | |
| □ B12 | | |
| □ B13 | | |
| □ B14 | | |
| □ B15 | | |
| □ B16 | | |
| □ B17 | | |
| □ B18 | | |
| □ B21 | | |
| □ B22 | | |
| □ B27 | | |
| □ B2708 | | |
| □ B35 | | |
| □ B37 | | |
| □ B38(16) | | |
| □ B39(16) | | |
| □ B3901 | | |
| □ B3902 | | |
| □ B40 | | |
| □ B4005 | | |
| □ B41 | | |
| □ B42 | | |
| □ B44(12) | | |
| □ B45(12) | | |
| □ B46 | | |
| □ B47 | | |
| □ B48 | | |
| □ B49(21) | | |
| □ B50(21) | | |
| □ B51(5) | | |

□ B5102

| CIBMTR Center | Number: | CIBMTR Recipient ID: |
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| | B5103 | |
| | B52(5) | |
| | B53 | |
| | B54(22) | |
| | B55(22) | |
| | B56(22) | |
| | B57(17) | |
| | B58(17) | |
| | B59 | |
| | B60(40) | |
| | B61(40) | |
| | B62(15) | |
| | B63(15) | |
| | B64(14) | |
| | B65(14) | |
| | B67 | |
| | B70 | |
| | B71(70) | |
| | B72(70) | |
| | B73 | |
| | B75(15) | |
| | B76(15) | |
| | B77(15) | |
| | B78 | |
| | B81 | |
| | B82 | |
| | BX | |

| CIBN | MTR Center Number: | CIBMTR Recipient ID: |
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| | | |
| Opti | onal Antigen Reporting | |
| | | |
| Plea | se provide the following optiona | al antigen information if it is available from your laboratory. |
| Anti | gens Defined by Serologic Typii | na |
| 7 | gono Bonnou by Corologio Typn | -9 |
| C Ar | ntigens | |
| | | |
| 42. | Number of antigens provided: | |
| | · | hen continue with question 45 |
| | ☐ Two – Go to questions 43- 4 | 44 |
| | 43 | Specificity – 1st antigen |
| | □ Cw1 | |
| | □ Cw2 | |
| | □ Cw3 | |
| | ☐ Cw4 | |
| | ☐ Cw5 | |
| | □ Cw6 | |
| | □ Cw7 | |
| | ☐ Cw8 | |
| | ☐ Cw9(w3) | |
| | ☐ Cw10(w3) | |
| | □ сх | |
| | 44. | Specificity – 2nd antigen |
| | □ Cw1 | Specificity – 2nd analysis |
| | □ Cw2 | |
| | □ Cw3 | |
| | □ Cw4 | |
| | □ Cw5 | |
| | □ Cw6 | |
| | □ Cw7 | |
| | □ Cw8 | |
| | ☐ Cw9(w3) | |
| | ☐ Cw10(w3) | |
| | □ сх | |

| CIBN | MTR Center Number: | CIBMTR Recipient ID: | |
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| | | | |
| Bw S | Specificity | | |
| 45. | Specificity Bw4 present? | | |
| | ☐ Yes | | |
| | □ No | | |
| 46. | Specificity Bw6 present? | | |
| | ☐ Yes | | |
| | □ No | | |
| DR / | Antigens | | |
| 47. | Number of antigens provided: | | |
| | ☐ One – Go to question 48, the | n continue with question 50 | |
| | ☐ Two – Go to questions 48-49 | | |
| | 48 | | Specificity – 1st antigen |
| | ☐ DR1 | | |
| | ☐ DR103 | | |
| | □ DR2 | | |
| | □ DR3 | | |
| | □ DR4 | | |
| | □ DR5 | | |
| | □ DR6 | | |
| | □ DR7 | | |
| | □ DR8 | | |
| | □ DR9 | | |
| | □ DR10 | | |
| | ☐ DR11(5) | | |
| | ☐ DR12(5) | | |
| | ☐ DR13(6) | | |
| | □ DR14(6) | | |
| | ☐ DR1403 | | |
| | ☐ DR1404 | | |
| | □ DR15(2) | | |
| | □ DR16(2) | | |

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| | | DR17(3) | | |
| | | DR18(3) | | |
| | | DRX | | |
| | | | | |
| | | | | _Specificity – 2nd antigen |
| | | DR1 | | |
| | | DR103 | | |
| | | DR2 | | |
| | | DR3 | | |
| | | DR4 | | |
| | | DR5 | | |
| | | DR6 | | |
| | | DR7 | | |
| | | DR8 | | |
| | | DR9 | | |
| | | DR10 | | |
| | | DR11(5) | | |
| | | DR12(5) | | |
| | | DR13(6) | | |
| | | DR14(6) | | |
| | | DR1403 | | |
| | | DR1404 | | |
| | | DR15(2) | | |
| | | DR16(2) | | |
| | | DR17(3) | | |
| | | DR18(3) | | |
| | | DRX | | |
| DR51 | Antigen | | | |
| 50. | Specifici | ty DR51 present? | | |
| | □ Yes | | | |
| | □ No | | | |

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| | | | |
| DR5 | 2 Antigen | | |
| 51. | Specificity DR52 present? | | |
| | ☐ Yes | | |
| | □ No | | |
| DR5 | 3 Antigen | | |
| 52. | Specificity DR53 present? | | |
| | ☐ Yes | | |
| | □ No | | |
| DQ A | Antigens | | |
| 53. | Number of antigens provided: | | |
| | ☐ One – Go to question 54, then | n continue with question 56 | |
| | ☐ Two – Go to questions 54-55 | | |
| | 54 | | Specificity – 1st antigen |
| | □ DQ1 | | |
| | □ DQ2 | | |
| | □ DQ3 | | |
| | □ DQ4 | | |
| | □ DQ5(1) | | |
| | □ DQ6(1) | | |
| | □ DQ7(3) | | |
| | □ DQ8(3) | | |
| | □ DQ9(3) | | |
| | □ DQX | | |

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| | 55 | Specificity – 2nd ar | ntigen |
| | □ DQ1 | | lugen |
| | DQ2 | | |
| | □ DQ3 | | |
| | □ DQ4 | | |
| | □ DQ5(1) | | |
| | □ DQ6(1) | | |
| | □ DQ7(3) | | |
| | □ DQ8(3) | | |
| | □ DQ9(3) | | |
| | □ DQX | | |
| DP A | Antigens | | |
| 56. | Number of antigens provided: | | |
| | ☐ One – Go to question 57, the | n continue with signature line | |
| | ☐ Two – Go to questions 57-58 | | |
| | 57 | Specificity – 1st ar | ntigen |
| | □ DPw1 | | |
| | □ DPw2 | | |
| | □ DPw3 | | |
| | □ DPw4 | | |
| | □ DPw5 | | |
| | □ DPw6 | | |
| | □ DPX | | |
| | 58 | Specificity – 2nd ar | ntigen |
| | □ DPw1 | | |
| | □ DPw2 | | |
| | □ DPw3 | | |
| | □ DPw4 | | |
| | □ DPw5 | | |
| | □ DPw6 | | |
| | □ npy | | |

| IBMTR Center Number: | CIBMTR Recipient ID: | |
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| | | |
| | | |
| | | |
| First Name: | | |
| | Person completing form | |
| Last Name: | | |
| | | |
| E-mail address: | | |
| | | |
| Date: | | |
| YYYY | MM DD | |