

## Discrepant HLA Typings Reporting Form

### Fields to be completed by members

Form Section	Field Label
Outstanding Donor Discprenacies	Donor ID
Outstanding Recipient Discrepancies	Recipient SSN
Outstanding and Resolved Donor Discprenacies, Outstanding Recipient Discprenacies	Record
Outstanding and Resolved Donor Discprenacies, Outstanding Recipient Discprenacies	HLA Typing Result
Outstanding and Resolved Donor Discprenacies, Outstanding Recipient Discprenacies	Lab Code
Outstanding and Resolved Donor Discprenacies, Outstanding Recipient Discprenacies	Class 1 Test Date
Outstanding and Resolved Donor Discprenacies, Outstanding Recipient Discprenacies	Class 2 Test Date
Outstanding and Resolved Donor Discprenacies, Outstanding Recipient Discprenacies	Resolved Reason for Discrepancy
Outstanding Donor Discprenacies, Outstanding Recipient Discprenacies	Due Date

OMB No. 0915-0157; Expiration Date: XX/XX/20XX

**PUBLIC BURDEN STATEMENT:**

The private, non-profit Organ Procurement and Transplantation Network (OPTN) collects this information for the following functions: to assess whether applicants meet OPTN Bylaw requirements for membership in the OPTN organizations with OPTN Obligations. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 3045-0047. This information collection is required to obtain or retain a benefit per 42 CFR §121.11(k) (42 CFR §121.11(k) Act protection (Privacy Act System of Records #09-15-0055)). Data collected by the private non-profit OPTN is protected by the Contractor's security features. The Contractor's security system meets or exceeds the requirements of a Security of Federal Automated Information Systems, and the Departments Automated Information System. The reporting burden for this collection of information is estimated to average 0.27 hours per response, including reviewing existing data sources, and completing and reviewing the collection of information. Send comments on this aspect of this collection of information, including suggestions for reducing this burden, to HRSA Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov).

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ation in order to perform the following OPTN  
; and to monitor compliance of member  
uired to respond to, a collection of information  
n collection is 0915-0157 and it is valid until  
) (2). All data collected will be subject to Privacy  
OPTN also are well protected by a number of the  
is prescribed by OMB Circular A-130, Appendix III,  
ystems Security Program Handbook. The public  
including the time for reviewing instructions,  
nments regarding this burden estimate or any  
. Information Collection Clearance Officer, 5600