



Home > HLA-Aware™ > Request HLA-Aware™ CERTIFICATE Access

Request HLA-Aware™ CERTIFICATE Access

Healthcare professionals who are new to the HLA-Aware™ program must be approved in order to print HLA-Aware™ CERTIFICATES for qualifying patients through the Diagnostic Resource Center. This request must be made through a Viiv Healthcare representative and typically takes 1-2 business days to process. Program approval unlocks the Print HLA-Aware™ CERTIFICATES page at ViiVHCDxResource.com for new program participants. Registration and login are also required to access this page.

To make a request, please select a healthcare professional from your territory.

National Provider Identifier (NPI)

[NPI Number]

Clinic Information:

[Clinic Name]

[Address]

[City]

[State]

[Zipcode]

[Phone Number]

Please note: Primary clinic details on file are shown here. Healthcare professionals can update clinic information once they have registered at ViiVHCDxResource.com.

Thank you.

We have received your request. Please look for an e-mail reply within 1-2 business days.



[Home](#) > [HLA-Aware™](#) > [HLA-Aware™ Program](#)

HLA-Aware™ Program

HLA-B*5701 Screening Supported by ViiV Healthcare

Step 1

[Register](#)

Step 2

[Print HLA-Aware™ CERTIFICATES*](#)

One-time healthcare professional registration

*New program participants must submit an HLA-Aware™ access request through their ViiV Healthcare representative; for more information, please refer to program access details below.

[▶ How does the program work?](#)

[▶ What is the process for requesting HLA-Aware™ program access?](#)

[▶ What is the process for submitting an HLA-Aware™ CERTIFICATE?](#)



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HLA-Aware™ Program Access

New HLA-Aware™ program participants are required to make a CERTIFICATE access request for the ability to print HLA-Aware™ CERTIFICATES through the Diagnostic Resource Center.

Contact your ViiV Healthcare representative to request HLA-Aware™ program access.

Sales Representative

[Sales Rep Name]

[Email Address]

[Telephone]

Displayed if the user is registered and NOT authorized to print/order HLA-Aware™ CERTIFICATES.

[Content about contacting Sales Rep.](#)

HLA-Aware is a trademark of the ViiV Healthcare group of companies.



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Print HLA-Aware™ CERTIFICATES

*Required Field

***Where would you like to receive HLA-B*5701 screening results?**

Add Location | Edit Location

***LabCorp Account #**

***How many CERTIFICATES would you like to print?**

▼ Add patient information to CERTIFICATE (optional)

Enter patient information below to generate prefilled, printable CERTIFICATES. The information will be cleared after printing.

ViiV Healthcare will NOT store any personally identifiable health information.

Patient 1

Last Name

First Name

Date of Birth

Office/Patient ID #

Sample Collection Date

Patient 2

Last Name

First Name

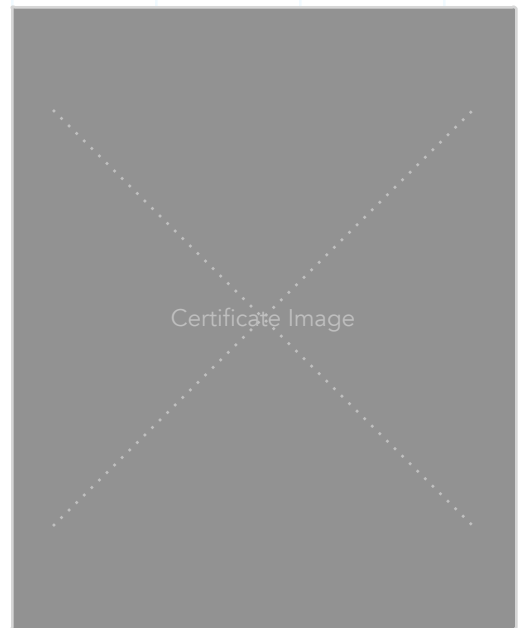
Date of Birth

Office/Patient ID #

Sample Collection Date

Print HLA-Aware™ CERTIFICATES

HLA-Aware is a trademark of the ViiV Healthcare group of companies. For additional assistance, call the ViiV Healthcare Customer Response Center at 1-877-844-8872.



Additional Resources

[HLA-Aware™ Reference Guide](#)

Questions?

For program information, please contact your ViiV Healthcare representative. If you would like to obtain a new LabCorp account number, contact LabCorp at **1-800-533-1037**



Manage HLA-Aware™ Requests

Collapse Library for more width.

Library

Search Pending

Sort by Date ▾

- Pending
- Approved
- Denied

[Date]
HCP: [HCP Name]
Rep: [Sales Rep Name]

[Date]
HCP: [HCP Name]
Rep: [Sales Rep Name]

[Date]
HCP: [HCP Name]
Rep: [Sales Rep Name]

[Date]
HCP: [HCP Name]
Rep: [Sales Rep Name]

[Date]
HCP: [HCP Name]
Rep: [Sales Rep Name]

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HCP: [HCP Name]
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Rep: [Sales Rep Name]

[Date]
HCP: [HCP Name]
Rep: [Sales Rep Name]

[Date]
HCP: [HCP Name]
Rep: [Sales Rep Name]

[Date]
HCP: [HCP Name]
Rep: [Sales Rep Name]

Approve Request
Deny Request

Healthcare Professional Information
 [NPI e.g. 1234567890]
 [HCP Name e.g. Dr. John Smith]
 [Clinic Name e.g. Central Clinic]
 [Street Address e.g. 123 Main Street]
 [City e.g. Research Triangle Park], [State e.g. NC] [Zip e.g. 27709-3398]
 [Phone e.g. 123-456-7890]

Viiv Healthcare Representative Information
 [Rep name e.g. Bob Jones]
 [Rep email (linked) e.g. Bob.E.Jones@viivhealthcare.com] [Open in admin's email client]
 [Rep phone e.g. 916 203 1505]

Request Info

Are you sure you would like to approve this request?

Cancel
Approve Request



Home > Admin > Manage HLA-Aware™ Requests

Manage HLA-Aware™ Requests

Library	Search Approved <input type="text"/>	Approved: May 21, 2014 Registered on: [Date]	Resend
	< Sort by Date ▾		
Pending	[Date] HCP: [HCP Name] Rep: [Sales Rep Name]	Healthcare Professional Information	
Approved	[Date] HCP: [HCP Name] Rep: [Sales Rep Name]	[NPI e.g. 1234567890] [HCP Name e.g. Dr. John Smith] [Clinic Name e.g. Central Clinic] [Street Address e.g. 123 Main Street] [City e.g. Research Triangle Park], [State e.g. NC] [Zip e.g. 27709-3398] [Phone e.g. 123-456-7890]	
Denied	[Date] HCP: [HCP Name] Rep: [Sales Rep Name]	ViiV Healthcare Representative Information	
	[Date] HCP: [HCP Name] Rep: [Sales Rep Name]	[Rep name e.g. Bob Jones] [Rep email (linked) e.g. Bob.E.Jones@viiVhealthcare.com][Open in admin's email client] [Rep phone e.g. 916 203 1505]	
	[Date] HCP: [HCP Name] Rep: [Sales Rep Name]		
	[Date] HCP: [HCP Name] Rep: [Sales Rep Name]		
	[Date] HCP: [HCP Name] Rep: [Sales Rep Name]		
	[Date] HCP: [HCP Name] Rep: [Sales Rep Name]		
	[Date] HCP: [HCP Name] Rep: [Sales Rep Name]		



Home > Admin > Manage HLA-Aware™ Requests

Manage HLA-Aware™ Requests

Library

Search Pending

Approve Request

Deny Request

Sort by Date ▾

	[Date]	HCP: [HCP Name] Rep: [Sales Rep Name]	Healthcare Professional Information
Pending	[Date]	HCP: [HCP Name] Rep: [Sales Rep Name]	
Approved	[Date]	HCP: [HCP Name] Rep: [Sales Rep Name]	
Denied	[Date]	HCP: [HCP Name] Rep: [Sales Rep Name]	
	[Date]	HCP: [HCP Name] Rep: [Sales Rep Name]	
	[Date]	HCP: [HCP Name] Rep: [Sales Rep Name]	
	[Date]	HCP: [HCP Name] Rep: [Sales Rep Name]	
	[Date]	HCP: [HCP Name] Rep: [Sales Rep Name]	
	[Date]	HCP: [HCP Name] Rep: [Sales Rep Name]	

Are you sure you would like to deny this request?
Denied requests cannot be reactivated.

Reason for denial (Optional)

Deny Request

Cancel

[Rep name e.g. Bob Jones]
 [Rep email (linked) e.g. Bob.E.Jones@viivhealthcare.com][Open in admin's email client]
 [Rep phone e.g. 916 203 1505]



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Manage HLA-Aware™ Requests

Library	Search Denied <input type="text"/>	Denied: [Date when denied] Reason for denial: [E.g. Missing information in request]
<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> Pending </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> Approved </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> Denied </div>	<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <input type="text" value="Search Denied"/> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> Sort by Date ▾ </div>	<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>Healthcare Professional Information</p> <p>[NPI e.g. 1234567890] [HCP Name e.g. Dr. John Smith] [Clinic Name e.g. Central Clinic] [Street Address e.g. 123 Main Street] [City e.g. Research Triangle Park], [State e.g. NC] [Zip e.g. 27709-3398] [Phone e.g. 123-456-7890]</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>ViiV Healthcare Representative Information</p> <p>[Rep name e.g. Bob Jones] [Rep email (linked) e.g. Bob.E.Jones@viivhealthcare.com][Open in admin's email client] [Rep phone e.g. 916 203 1505]</p> </div>
<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> [Date] HCP: [HCP Name] Rep: [Sales Rep Name] </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> [Date] HCP: [HCP Name] Rep: [Sales Rep Name] </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> [Date] HCP: [HCP Name] Rep: [Sales Rep Name] </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> [Date] HCP: [HCP Name] Rep: [Sales Rep Name] </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> [Date] HCP: [HCP Name] Rep: [Sales Rep Name] </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> [Date] HCP: [HCP Name] Rep: [Sales Rep Name] </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> [Date] HCP: [HCP Name] Rep: [Sales Rep Name] </div>		



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