American College of Histocompatibility and Immunogenetics (ACHI)

Operations Manual

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I. ORGANIZATIONAL STRUCTURE

Mission
To uphold the highest professional standards in clinical histocompatibility and immunogenetics through rigorous certification programs, comprehensive competency verification, and a sustained commitment to excellence in laboratory quality and evidence-based clinical practice.

Purpose
The American College of Histocompatibility and Immunogenetics (ACHI) is affiliated with the American Society for Histocompatibility and Immunogenetics (ASHI) operating as a function of ASHI's Professional Standards Division to:

- Evaluate the education, training and experience of doctoral professionals in the field of histocompatibility and immunogenetics for eligibility to take its professional examinations .
- Evaluate all submitted documentation including case portfolios, statements from the mentoring director, and letters of recommendation for all prospective candidate directors and candidate technical supervisors.
- Approve proposed didactic, research, and clinical schedules for individual trainees or detailed plans for permanent director training fellowship programs.
- Evaluate scientific content of continuing educational activities for relevance and quality
- Review submitted applications for non-doctoral candidates to determine appropriate eligibility of CHS, CHT, and CHA candidates.
- Develop and administer professional credentialing exams for doctoral (fellow/formerly diplomate) and non-doctoral (CHS, CHT and CHA) candidates.
- Evaluate and accredit director training programs

II. BOARD OF DIRECTORS

Composition: The ACHI Board of Directors is comprised of 12 member volunteers, including a President, President-Elect, an Immediate Past President, a Treasurer, a Secretary and the chairs of the ACHI committees.

Executive Board: The Executive Board shall be comprised of the President, President-Elect, an Immediate Past President, a Treasurer, and Secretary.

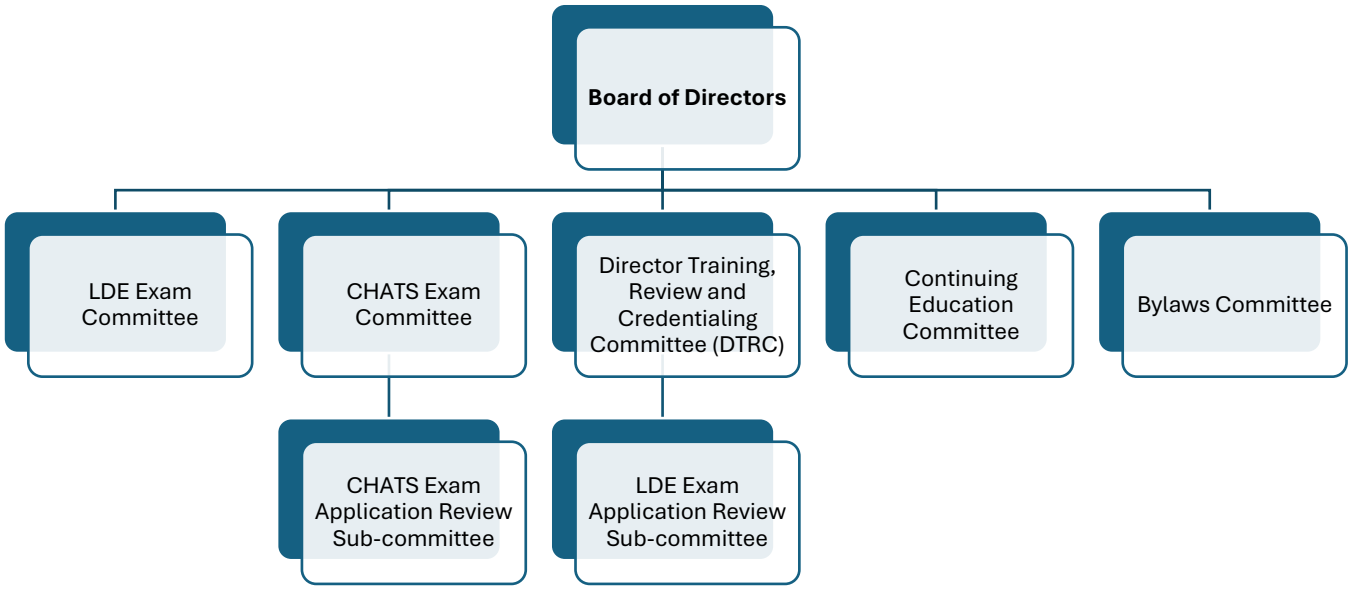
Nominations, Appointments, and Elections: Executive Board shall prepare a slate of nominees for Officers and will distribute to the full Board before the last day of the month in July. Nominees shall have an ACHI CHS or Diplomate designation. Nominees will be announced to the board at their August meeting. Election of Officers shall be approved by the full Board at their September meeting by a recorded vote reflected in the meeting minutes. The ASHI Board of Directors will grant final approval of candidates. Candidates will be notified of the board's decision by email from ACHI Headquarters staff no later than the end of October. Results of the election will be publicly announced in the ACHI e-newsletter

Term of Office: The President, President-Elect, Immediate Past President, Secretary, and Treasurer each shall hold office for a term of two years respectively which will terminate at the end of the calendar year. Any officer elected or appointed by the Board may be removed by the Board with cause by a vote of the majority of the Board.

The term of each board of director shall be two (2) years, which terms shall begin at the start of the new year on January 1. A director may be reelected or reappointed for one additional two (2) year term, depending on their committee service. Executive Board members are not eligible to renew for a consecutive term. Executive Board members shall not serve as the Chair of an ACHI committee.

The Board of Directors shall meet monthly, or as needed. Annual approval of changes to policies and procedures in the ACHI Bylaws, ACHI Operations Manual, or the Director, Training, Review and Credentialing (DTRC) Operations Manual is required from the ACHI Board of Directors.

III. ACHI COMMITTEES



Laboratory Director Examination (LDE) Committee
The Laboratory Director Examination Committee shall consist of a Chair and a Co-Chair and at least seven (7) and no more than twelve (12) members. The Committee Chair and Co-Chair shall serve a 2-year term respectively in each role. Incoming Co-Chairs shall be nominated by the current Committee Chairs and approved by the ACHI Board. Committee members serve a 3-year term which may be renewed at the approval of the Committee Chairs. Members shall be individuals who hold doctorate degrees and have been certified at the doctoral level as Fellows of the ACHI.

The Director Examination Committee shall be responsible for determining the content and passing scores for examinations and for determining the administration of examinations at intervals with the approval of the Board. The results of examinations and their validation shall be recorded by the committee and made available to the Board.

CHA/CHT/CHS Examinations Committee
The CHA/CHT/CHS Examinations Committee shall consist of minimally a Chair, Co-Chair, and at least ten (10) and no more than twenty (20) members. The Committee Chair and Co-Chair shall serve a 2-year term respectively in each role. Incoming Co-Chairs shall be nominated by the current Committee Chairs and approved by the ACHI Board. The term of office for committee members shall be three (3) years. Members shall include CHS-level certified individuals. Members may serve additional consecutive terms if approved by the Chairs.

The CHA/CHT/CHS Examinations Committee, working in conjunction with the exam company, shall be responsible for determining the content and passing scores for examinations and for the administration and scheduling of the examinations at intervals as are determined by the Board. The results of examinations and

their validation shall be recorded by the committee and made available to the Board.

CHA/CHT/CHS Exam Application Review Subcommittee
The CHA/CHT/CHS Exam Application Review Subcommittee is a standing group under the CHA/CHT/CHS Exam Committee and is responsible for supporting the integrity and quality of the ACHI exam application process. The subcommittee shall consist of a Chair and minimally four (4) members. The Committee Chair shall serve a 2-year term. Incoming Chairs shall be nominated by the current Committee Chair and approved by the ACHI Board. The term of office for committee members shall be three (3) years. Members shall include CHS-level certified individuals. Members may serve additional consecutive terms if approved by the Chairs.

The Subcommittee conducts detailed reviews of all CHA, CHT, and CHS exam applications to ensure candidates meet the eligibility and experience requirements established by ACHI. It also makes final approval decisions on complex or challenging applications when additional clarification or judgment is required. In addition, the Subcommittee reviews the content and structure of the application itself and recommends edits or improvements based on trends and issues identified during each review cycle.

Director Training, Review and Credentialing Committee (DTRC)
The DTRC committee is responsible for the approval of anyone who directs an ASHI accredited laboratory. Detailed procedures are listed in the DTRC Operations Manual (see appendix). The DTRC is charged with reviewing all submitted documentation including training plans, progress reports, case portfolios, statements from the mentoring director, and letters of recommendation for all prospective candidate directors and candidate technical supervisors. The DTRC, with assistance from the LDE Exam Application Review Subcommittee, also evaluates and approves the proposed didactic, research, and clinical schedules for individual trainees or detailed plans for permanent director training fellowship programs.

The DTRC is comprised of a Chair, Vice Chair, and varying numbers of committee members. The Vice Chair will make a commitment to serve four years, two as the Vice Chair and two more as the Committee Chair. Chair will be asked to sign a commitment agreement. The names of candidates for the Vice Chair position are submitted to the ACHI Board of Directors for approval. Past experience on the ASHI Accreditation Review Board (ARB) is highly desirable but not required. The DTRC Chair and Vice Chair will serve as liaisons to the ARB. Conversely, an ARB Co-Chair or the ARB Program Director will be present at all DTRC oral competency examinations. All committee members must have a doctoral level degree and serve as a director of an ASHI accredited laboratory, either part time or full time.

LDE Exam Application Review Subcommittee
The LDE Exam Application Review committee is a standing group under the LDE Exam Committee and is charged to work with the DTRC to review the credentials of 1) all candidates training to be HLA Directors and Technical Supervisors of ASHI accredited laboratories, 2) HLA Directors of non-ASHI accredited USA laboratories, and (3) HLA Directors from foreign countries (including the vetting of their graduate and post-graduate education by a recognized credential evaluating service) to determine if they meet the ASHI Standards to direct and/or provide technical supervision for an ASHI accredited laboratory.

Bylaws Committee
The Bylaws Committee strives to ensure that the ACHI Bylaws are consistent with the mission of the College and with current legal best practices for credentialing organizations. The Committee is also charged with maintaining and proposing revisions to the ACHI Operations Manual and ACHI Bylaws for Board approval on an annual basis.

The committee chair and vice chair shall serve a three (3) year term. During their last year of service, they will work together to select an incoming vice chair among the active members on the committee. At the

completion of their term, the vice chair will move into the chair position, and the newly appointed committee member will move into the vice chair position. If none of the committee members are ready or interested in the vice chair position, this position will be advertised in the ACHI e-newsletter and e-blasts.

The committee has no more than 10 members. The regular term for each committee member is three (3) years, which may be renewed for one additional 3-year term if mutually agreeable between the Chair, Vice Chair, and the member.

Ombudsman Subcommittee

An ad hoc Ombudsman Subcommittee shall operate within the Bylaws Committee to review disputes involving ACHI's CHA, CHT, and CHS certification programs. The subcommittee shall consist of three (3) members: the ACHI Immediate Past President and two (2) members of the Bylaws Committee selected by the Bylaws Committee Chair and approved by the ACHI Board of Directors.

The Ombudsman Subcommittee provides a fair, impartial, and confidential process for reviewing certification and examination disputes. The subcommittee reviews the written record and supporting documentation, applies the relevant ACHI policies and procedures, and issues a written determination.

The Ombudsman Subcommittee does not review allegations of ethical or professional misconduct, breaches of confidentiality, falsification, or other conduct subject to disciplinary action. Such matters will be addressed under the Certification Disciplinary Action Policy. Disputes involving the Laboratory Director Examination are addressed through the dispute process established by the Director Training and Review Committee (DTRC). That process is described in the DTRC Operations Manual.

Scope of Review

The Ombudsman Subcommittee may review disputes involving:

- Eligibility or application decisions;
- Examination administration concerns, including testing-center or remote-proctoring incidents;
- Testing accommodations;
- Examination results or scoring concerns;
- Certification maintenance or renewal decisions;
- The application or interpretation of an ACHI certification or examination policy; and
- Other adverse certification decisions affecting a CHA, CHT, or CHS candidate or certificant.

The Ombudsman Subcommittee does not review:

- Disputes involving the Laboratory Director Examination, which are handled through the process described in the DTRC Operations Manual;
- General customer-service complaints that do not challenge a certification or examination-related decision;
- Allegations of discrimination, harassment, financial misconduct, ethical violations, or other matters governed by a separate ACHI policy;
- Requests to review or disclose individual examination questions, answer choices, correct answers, scoring keys, or other secure examination content;
- Requests to change an examination score based solely on personal hardship, effort, or proximity to the passing score; or
- Matters outside the authority of ACHI.

Dispute Review Process

1. Submission of a Dispute

A candidate or certificant must submit a dispute in writing by email to info@achicertification.org. The submission must include:

- The individual's full legal name;

- Candidate or certification identification number;
- The credential or examination involved;
- Examination date and testing method or location, if applicable;
- Date of the disputed event or decision;
- A clear description of the event or decision being disputed;
- The specific ACHI policy or procedure believed to have been applied incorrectly, if known;
- An explanation of why the individual believes the decision or outcome was incorrect or unfair;
- The specific resolution being requested;
- All available supporting documentation;
- Information regarding any report previously made to the testing provider, proctor, ACHI staff, or another party;
- The testing-provider case number, if applicable;
- A statement confirming that the information submitted is accurate and complete; and
- The individual's signature or electronic attestation and the submission date.

The review will ordinarily be based on the written record. Submission of a dispute does not guarantee a hearing or meeting with the Ombudsman Subcommittee.

Filing Deadlines

Type of dispute	Filing deadline
Testing-center, remote-proctoring, technical, or examination-administration incident	The incident should be reported to the proctor or testing provider immediately, when possible. A written dispute must be submitted to ACHI within ten (10) business days after the examination.
Examination score or results dispute	Within ten (10) business days after official examination results are issued.
Eligibility, accommodation, certification maintenance, renewal, or other certification decision	Within ten (10) business days after ACHI communicates the decision.
Late submission due to extraordinary circumstances	ACHI may accept a late submission when the individual provides documentation demonstrating circumstances that prevented timely filing.

Failure to report an examination-administration incident to the proctor or testing provider when it occurs may limit ACHI's ability to investigate the matter. Exceptions may be considered when immediate reporting was not reasonably possible.

2. Acknowledgment and Initial Processing

ACHI will acknowledge receipt of the dispute. ACHI may request additional information or documentation when necessary to complete the case file. A dispute that falls outside the scope of the Ombudsman Subcommittee may be referred to the appropriate ACHI committee, governing body, policy, or process.

3. Ombudsman Subcommittee Review

Once the case file is complete, the dispute and relevant supporting materials will be provided to the Ombudsman Subcommittee for review.

The subcommittee will determine whether the disputed decision or action:

- Was consistent with applicable ACHI policies and procedures;
- Was reasonably supported by the available documentation and record; and
- Was reached through a fair and impartial process.

The subcommittee may request additional written information from the candidate, certificant, ACHI staff, the testing provider, examination vendor, psychometric consultants, or other relevant parties.

4. Determination Letter
The Ombudsman Subcommittee's decision will be communicated through a written determination letter. The letter will state the decision and provide a concise explanation of the basis for the determination.

Review and Notification Timelines

Action	Timeframe
ACHI acknowledgment of the dispute	Within three (3) business days after receipt
Submission of requested missing or additional information	Within the timeframe specified by ACHI, ordinarily five (5) to ten (10) business days
Ombudsman Subcommittee determination	Within thirty (30) calendar days after the case file is complete
Submission of an appeal to the ACHI Board of Directors	Within ten (10) business days after the Ombudsman Subcommittee's determination letter is received
ACHI Board determination	Within forty-five (45) calendar days after receipt of a complete appeal

ACHI may extend a review period when additional investigation, vendor information, psychometric consultation, legal guidance, or governing-body coordination is required. ACHI will notify the individual in writing of a material extension and, when possible, provide an anticipated decision date.

5. Appeal to the ACHI Board of Directors
A candidate or certificant may appeal the Ombudsman Subcommittee's determination by submitting a written appeal to info@achicertification.org within ten (10) business days after receiving the determination letter.

The appeal must explain the basis for requesting further review and include any supporting documentation. Grounds for appeal may include:
- The incorrect application or interpretation of an ACHI policy;
- A material procedural error that may have affected the determination;
- A determination that was not reasonably supported by the written record;
- Relevant new information that was not reasonably available during the initial review; or
- A conflict of interest or other circumstance that may have materially affected the impartiality of the review.

General dissatisfaction with the Ombudsman Subcommittee's decision, without an identified basis for appeal, is not sufficient grounds for further review.

The ACHI Board of Directors may affirm, reverse, or modify the determination or return the matter to the Ombudsman Subcommittee for further review. The Board's decision will be communicated through a written determination letter and shall be final, concluding ACHI's internal dispute and appeal process.

Safeguards for Fairness
The following safeguards apply to reviews conducted under this process:
- Any subcommittee or Board member with an actual, potential, or perceived conflict of interest must disclose the conflict and recuse themselves from the review.
- An individual who was substantially involved in the original disputed decision shall not participate in reviewing that dispute.

- An alternate member may be appointed when a reviewer is recused, unavailable, or otherwise unable to participate.
- Candidate information, examination information, supporting documentation, deliberations, and decisions shall be treated as confidential and shared only as necessary to conduct the review.
- If ACHI obtains new information that may materially affect the determination, the candidate or certificant will ordinarily be provided an opportunity to respond in writing.
- Determinations shall be based on applicable ACHI policies and procedures and the available written record.
- ACHI is not required to disclose secure examination questions, answer choices, scoring keys, psychometric information, or other protected examination materials.
- Dispute materials, recusals, decisions, and determination letters shall be maintained in accordance with ACHI's records-retention requirements.
- Filing a good-faith dispute or participating in the review process will not negatively affect an individual's future eligibility, application, or certification status.

Continuing Education Committee
The Continuing Education Committee ensures that ACHI's continuing education and certification maintenance processes remain current, fair, and aligned with professional standards. The committee shall consist of a Chair and minimally four (4) members. The Committee Chair shall serve a 2-year term. Incoming Chairs shall be nominated by the current Committee Chair and approved by the ACHI Board. The term of office for committee members shall be three (3) years. Members shall include CHS-level certified individuals. Members may serve additional consecutive terms if approved by the Chairs.

The Committee reviews and approves complex and challenging course provider applications, evaluates continuing education activities for appropriate credit allocation, and periodically updates ACHI's course catalog and certification maintenance requirements.

Other Standing Committees
The President, with the approval of the Board, may appoint additional standing committees as the need arises.

Ad hoc Committees
The President with the approval of the Board, may appoint ad hoc committees as the need arises.

ASHI Liaison
The ASHI Board of Directors may designate an ASHI Board member to serve as a liaison to the ACHI Board of Directors.

IV. EXAMINATION POLICIES AND PROCEDURES

Laboratory Director Examination Process
The following examination process applies to all applicants .

1. Applicants must submit a complete application through the ACHI online application portal, including all required information, documentation, attestations, and applicable fees.
2. Each applicant must be evaluated and approved as meeting the current eligibility requirements before being authorized to take an examination. Eligibility approval applies only to the examination cycle for which the applicant is approved.
3. Applicants who are approved and have satisfied all applicable payment requirements will receive instructions for scheduling their examination during the applicable testing window.
4. An applicant who is approved but does not take the examination during the applicable testing window is not automatically authorized for a future examination cycle. The application will be subject to re-review under the eligibility requirements, policies, fees, and documentation requirements in effect for the future cycle. ACHI may require the applicant to update the application or provide additional documentation

before issuing a new examination authorization.

5. Candidates will receive examination results in accordance with the timeline established for the applicable examination administration. Results may be provided immediately following the examination or at a later date when post-examination analysis or standard-setting activities are required.
6. A candidate who achieves the established passing score and satisfies all applicable certification requirements will be granted the corresponding certification. Certificate issuance and ongoing certification requirements are addressed in the Certification Maintenance section of this Operations Manual.
7. A candidate who does not achieve the established passing score may apply to take the examination during a future testing window, provided the candidate meets the eligibility, application, documentation, and payment requirements then in effect. Candidates may not retake the examination during the same testing window. Additional information is provided in the Failure to Meet Requirements section of this Operations Manual.

Associate Certification Examination Requirements

The Laboratory Director Exam (LDE) is one option to meet the Board certification requirement. The DTRC will present this option to all DIT candidates at the time of initial registration.

Eligibility

Candidates must meet the established eligibility requirements before being authorized to sit for the certification examination. Eligibility requirements, including education, experience, documentation, application requirements, and applicable pathways, are maintained in the LDE Examination Handbook.

Applications

Each application for Associate certification must be submitted through the ACHI online application portal and include all required information and supporting documentation. The application must be electronically signed by the applicant. Upon approval of the application, the prescribed application fee must be paid before the candidate may schedule an examination date and time.

Any applicant may appeal a decision on the qualifications of an applicant to participate in the examination process to the DTRC within thirty (30) days of notification of the application's rejection. Additional evidence must then be submitted for admittance to the examination procedure.

Failure To Meet Requirements

If an individual does not meet the eligibility requirements or does not achieve a passing score on the applicable examination, they will not be granted certification. ACHI Staff will provide the individual with information regarding eligibility for reapplication or retesting, as applicable, and any additional requirements that must be met before reapplying or retesting.

Laboratory Director Fellow and Affiliate Certification Requirements

Laboratory Director Fellow or Affiliate status is granted by the College to qualified individuals who meet the applicable eligibility requirements and successfully complete the required portfolio review and oral competency assessment.

The portfolio review and oral competency assessment are conducted by the DTRC to evaluate the candidate's technical competency, critical thinking, laboratory practice, management knowledge, and ability to interpret and apply histocompatibility testing results.

Candidates may seek approval for one or more applicable ASHI Areas of Accreditation. Approval is granted separately for each area of accreditation requested and successfully completed.

Eligibility
To be eligible for Laboratory Director Fellow or Affiliate status, candidates must meet the applicable educational, professional, board certification, training, and experience requirements established by ACHI. Candidates must have completed the required training and experience and, where applicable, maintain the board certification or professional certification required for the ASHI areas of accreditation for which approval is sought.

Candidates must also submit a portfolio demonstrating competency in the requested area(s) of accreditation. The portfolio must include case reviews and detailed case studies sufficient to demonstrate technical competency and critical thinking, as well as any additional documentation required by the DTRC.

The portfolio requirements include, at a minimum:

- Major areas of accreditation: At least 50 case reviews, including 10 detailed case studies for each requested major area of accreditation.
- Histocompatibility Testing for Other Clinical Purposes and/or Transfusion Support: At least 20 case reviews, including 5 detailed case studies for each requested area of accreditation.
- Detailed case studies must demonstrate the candidate's ability to interpret results, provide appropriate recommendations, evaluate the benefits and limitations of testing, and apply testing results to patient care.
- Candidates must provide appropriate supporting documentation for detailed cases and remove all protected health information and patient identifiers.
- For each new area of accreditation, candidates must demonstrate knowledge of appropriate testing protocols and the rationale for selecting tests based on patient care and cost-effective laboratory practice.

The DTRC may waive all or part of the portfolio requirement and/or oral competency assessment for candidates who have previously established substantial experience in human histocompatibility testing or transplantation.

Candidates must receive approval to proceed with portfolio submission after completion of the required training and experience. Candidates seeking Laboratory Director approval must also satisfy applicable board certification requirements before proceeding to the portfolio and oral competency assessment stages.

Applications
Candidates seeking Laboratory Director Fellow or Affiliate status must submit an application and required documentation demonstrating completion of the applicable eligibility requirements and training.

Following completion of the required training and experience, the candidate must request authorization to submit the portfolio. Upon confirmation that the applicable requirements have been met, ACHI will authorize the candidate to submit the portfolio for review.

The portfolio will be reviewed by individuals designated by the DTRC. Candidates whose portfolios demonstrate the required competency will proceed to the oral competency assessment unless the assessment has been waived.

The oral competency assessment evaluates the candidate's knowledge and application of laboratory practice, testing methodologies, laboratory management, common testing challenges, and clinical interpretation of histocompatibility testing results. The assessment may be conducted virtually or in

person.

Following successful completion of the portfolio review and oral competency assessment, the DTRC will determine whether the candidate is approved for the requested area(s) of accreditation. A candidate may be approved for some areas of accreditation and not others.

Upon approval, ACHI will issue documentation of the candidate's Laboratory Director status and approved area(s) of accreditation.

Failure to Meet Requirements
If a candidate's portfolio does not demonstrate the required competency or does not meet submission requirements, the candidate will not proceed to the oral competency assessment. The candidate will be notified of identified deficiencies and provided information regarding the additional training, experience, documentation, or other corrective action that may be required.

If a candidate is not approved following the oral competency assessment, the DTRC will determine the appropriate course of action based on the areas requiring further development. This may include additional training or experience, additional case reviews, submission of a revised or new portfolio, an additional oral competency assessment, additional mentoring, or other requirements determined by the Committee.

A candidate may be approved for some requested areas of accreditation while being required to complete additional requirements for other areas. Any additional training or requirements must be completed and approved before the candidate may receive approval for those areas.

Any applicant may appeal a decision by following the dispute process outlined in the DTRC Operations Manual.

Designations

- **ASSOCIATE:** When an individual passes the ACHI Laboratory Director exam, they become an Associate of the ACHI. This individual can NOT yet direct an ASHI-accredited laboratory. This individual will be issued a certificate of board certification.

- **AFFILIATE:** When an individual has an MD license current in the US (with appropriate board certification) and passes the portfolio process and oral competency assessment, they become an Affiliate of the American College of Histocompatibility and Immunogenetics. This individual can direct an ASHI-accredited laboratory and will be issued a letter and certificate of approval.

  OR

  When an individual has another Health and Human Services (HHS) approved board certification (other than the ACHI Associate certification) or international directors approved without board certification, and they pass the portfolio process and oral competency assessment, they become an Affiliate of the American College of Histocompatibility and Immunogenetics.

- **FELLOW:** When an individual passes the ACHI Laboratory Director exam, portfolio process, and oral competency assessment, they become a Fellow of the American College of Histocompatibility and Immunogenetics. This individual can direct an ASHI-accredited laboratory and will be issued a letter and certificate of approval.

Grandfathering:
1. Individuals who were ASHI-DTRC approved directors and ABHI certified Diplomates prior to October

31, 2020 are automatically recognized as Fellows of the American College of Histocompatibility and Immunogenetics.

2. Individuals who were ASHI-DTRC approved directors prior to October 31, 2020 but are board certified through another HHS approved organization (e.g. AP/CP, ABMLI, ABB) or international directors without board certification, are automatically recognized as Affiliates of the American College of Histocompatibility and Immunogenetics.

Technologist Certification through the ACHI

Certification as a Certified Histocompatibility Associate (CHA), Certified Histocompatibility Technologist (CHT), or Certified Histocompatibility Specialist (CHS) may be granted or issued by the American College of Histocompatibility and Immunogenetics to qualified individuals upon meeting the eligibility requirements for each examination and upon reaching a passing score on the examination.

Eligibility

Candidates must meet the established eligibility requirements for a Certified Histocompatibility Associate (CHA), Certified Histocompatibility Technologist (CHT), or Certified Histocompatibility Specialist (CHS) before being authorized to sit for the certification examination. Eligibility requirements, including education, experience, documentation, application requirements, and applicable pathways, are maintained in the CHA, CHT, and CHS Examination Handbook.

Applications

Each application for CHA, CHT or CHS certification must be submitted through the ACHI online application portal and include all required information and supporting documentation. The application must be electronically signed by the applicant. Upon approval of the application, the prescribed application fee must be paid before the candidate may schedule an examination date and time.

Any applicant may appeal a decision by following the dispute process outlined in the Ombudsman Subcommittee section of this manual.

Failure To Meet Requirements

If an individual does not meet the eligibility requirements or does not achieve a passing score on the applicable examination, they will not be granted certification. ACHI Staff will provide the individual with information regarding eligibility for reapplication or retesting, as applicable, and any additional requirements that must be met before reapplying or retesting.

Designations

- **CERTIFIED HISTOCOMPATIBILITY ASSOCIATE (CHA):** When an individual meets the eligibility requirements and passes the ACHI Certified Histocompatibility Associate (CHA) examination, they are granted the Certified Histocompatibility Associate (CHA) certification. The individual may use the CHA designation following their name in accordance with ACHI policies. The individual will be issued a certificate documenting their certification.

- **CERTIFIED HISTOCOMPATIBILITY TECHNOLOGIST (CHT):** When an individual meets the eligibility requirements and passes the ACHI Certified Histocompatibility Technologist (CHT) examination, they are granted the Certified Histocompatibility Technologist (CHT) certification. The individual may use the CHT designation following their name in accordance with ACHI policies. The individual will be issued a certificate documenting their certification.

- **CERTIFIED HISTOCOMPATIBILITY SPECIALIST (CHS):** When an individual meets the eligibility requirements and passes the ACHI Certified Histocompatibility Specialist (CHS) examination, they are granted the Certified Histocompatibility Specialist (CHS) certification. The

individual may use the CHS designation following their name in accordance with ACHI policies. The individual will be issued a certificate documenting their certification.

V. CERTIFICATE ISSUANCE

Candidates who successfully pass their ACHI examination will receive an email from ACHI Headquarters with instructions to complete an electronic certificate request form. ACHI offers two certificate formats: electronic credentials and printed certificates.

1. Electronic Credentials
Candidates may request electronic credentials through an electronic certificate request form.

- Upon submission of the electronic request form, digital certificates are issued promptly once processed by ACHI.
- Digital certificates are delivered directly to the candidate via email.

Candidates may instantly share their digital certificate on social media, forward it by email, or download a secure PDF copy for their records.

2. Printed Certificates
Candidates may request a printed, hard-copy certificate through an electronic certificate request form.

- Printed certificates typically require 7–21 business days for processing prior to mailing.
- Domestic delivery via USPS generally requires an additional 3–5 business days.
- International delivery times vary and may require additional transit time depending on the destination and USPS International service timelines.

Candidates are encouraged to consider their individual needs and timelines when selecting their preferred certificate format.

Certificate Reprints
Certified individuals may request a reprint of their ACHI certificate through an electronic request form located on the ACHI website.

- A $25 reprint fee applies to each printed certificate request.
- Reprint processing and delivery timelines follow the same schedule as initial printed certificates (7–21 business days for processing, plus applicable USPS delivery time).
- Certificate reprints may be requested during three designated times per calendar year, as noted on the ACHI website.

VI. CERTIFICATION MAINTENANCE

Director Associate and Fellow Certification Maintenance
Upon passing the exam, your certification will be valid for three years. To maintain an active certification status, you must:

- Pay $250 annual maintenance fees
- Submit continuing education credits (CECs) by the end of your three-year certification cycle.

ACHI-approved courses award Certified Education Credits (CECs), which are specifically recognized for recertification. Review the "ACHI Approved Course Categories" document on the Resources page to learn more about how to earn CECs.

Annual Maintenance Fees
Annual maintenance fees are due by December 31 each year and must be submitted through ACHI's

online certification management platform. For more information and step-by-step instructions on using the platform, please visit the Resources page of the ACHI website.

Continuing Education (CE) Requirements
To be eligible for recertification at the end of your three-year cycle, you must complete ACHI-approved continuing education activities and submit documentation by December 31 of your recertifying year.

Required CE Credits (every 3 years)
15.0 CECs (equivalent to 100 contact hours)

CEC Documentation
To receive credit for continuing education activities, certificants must submit appropriate supporting documentation through LearningBuilder. Acceptable forms of documentation include:

- Certificates of completion that clearly state the activity title, date, duration, and the name of the issuing organization.
- Official transcripts from accredited academic institutions.
- Letters of participation on the sponsoring organization's official letterhead, signed by an authorized representative.
- Conference attendance records or registration confirmations with session details.
- Agendas or program materials accompanied by verification of attendance.

All documentation must clearly indicate the number of contact hours completed and be submitted no later than December 31 of your recertifying year.

Affiliate Director Recognition Maintenance
Individuals who hold an ACHI Affiliate designation and use the credential A(ACHI) must complete an annual review process. To maintain active Affiliate recognition, individuals must:

- Pay a $175 annual maintenance fee.
- Submit verification that their qualifying board certification remains current and active by the end of their three-year designation cycle.

Affiliate designation holders are not required to submit continuing education credits (CECs) to ACHI.

Annual Maintenance Fees
Annual maintenance fees are due by December 31 each year and must be submitted through ACHI's online certification management platform. For more information and step-by-step instructions on using the platform, please visit the Resources page of the ACHI website.

Board Certification Verification
By December 31 of the individual's third year, an Affiliate designation holder must submit a current verification letter from the applicable certifying board. The letter must confirm:

- The name of the board certification held.
- That the board certification is current and active.
- The board certification's expiration date or current certification period.

The verification letter must be submitted through ACHI's certification maintenance platform. Continuing education documentation is not required for renewal of the Affiliate designation.

Grace Period for Annual Maintenance Fees
If a certificant does not pay the required annual maintenance fee by December 31, the certification will be considered lapsed effective January 1. Certificants will have until January 31 of the following year to pay

the outstanding annual maintenance fee and bring their designation current. If the required fee is paid by January 31, the designation will be reinstated.

CHA, CHT and CHS Certification Maintenance
Upon passing the exam, your certification will be valid for three years. To maintain an active certification status, you must:

- Pay $65 annual maintenance fees (for all levels – CHA, CHS, CHT).
- Submit continuing education credits (CECs) by the end of your three-year certification cycle.

ACHI-approved courses award Certified Education Credits (CECs), which are specifically recognized for recertification. Review the "ACHI Approved Course Categories" document on the Resources tab to learn more about how to earn CECs.

Annual Maintenance Fees
Annual maintenance fees are due by December 31 each year and must be submitted through ACHI's online certification management platform. For more information and step-by-step instructions on using the platform, please visit the Resources page of the ACHI website.

Continuing Education (CE) Requirements
To be eligible for recertification at the end of your three-year cycle, you must complete ACHI-approved continuing education activities and submit documentation in ACHI's certification maintenance platform by December 31 of your recertifying year.

Required CE Credits (every 3 years):

- CHS: 8.0 CECs (equivalent to 80 contact hours)
- CHA / CHT: 6.0 CECs (equivalent to 60 contact hours)

CEC Documentation
To receive credit for continuing education activities, certificants must submit appropriate supporting documentation through ACHI's certification maintenance platform. Acceptable forms of documentation include:

- Certificates of completion that clearly state the activity title, date, duration, and the name of the issuing organization.
- Official transcripts from accredited academic institutions.
- Letters of participation on the sponsoring organization's official letterhead, signed by an authorized representative.
- Conference attendance records or registration confirmations with session details.
- Agendas or program materials accompanied by verification of attendance.

All documentation must clearly indicate the number of contact hours completed and be submitted no later than December 31 of your recertifying year.

Lapsed Certification
Maintaining active certification is a professional responsibility and ensures that certificants remain current with standards in histocompatibility and immunogenetics. Occasionally, certifications may lapse due to missed recertification deadlines. This section outlines the process for reinstating a certification that has lapsed, including the documentation, fees, and time limits required to restore active status. Individuals should review these requirements carefully to ensure compliance and avoid permanent lapse.

Grace Period for Annual Maintenance Fees
If a certificant does not pay the required annual maintenance fee by December 31, the certification will be

considered lapsed effective January 1. Certificants will have until April 30 of the following year to pay the outstanding annual maintenance fee and bring their certification current. If the required fee is paid by April 30, the certification will be reinstated without application of the additional fees or requirements outlined in the reinstatement policy.

Beginning May 1, certifications that remain lapsed will be subject to the Process for Reinstating a Lapsed Certification, including applicable reinstatement and penalty fees.

Process for Reinstating a Lapsed Certification

1. Submit all outstanding recertification documentation (e.g., Continuing Education Credits, professional activity records, etc.) demonstrating compliance with the requirements in place at the time of expiration.
2. Pay applicable fees, including:
    a. The standard recertification fee; and
    b. A penalty fee per year of lapse as follows:
        i. $50 per year for doctoral-level certificants
        ii. $25 per year for non-doctoral certificants
3. Certifications that remain lapsed beyond two years from the expiration date are not eligible for reinstatement. Individuals must reapply for certification as new candidates, meeting all current eligibility and examination requirements.
4. All certifications that lapse at the Director level will be reported to the ASHI Accreditation Review Board (ARB).

VII. CERTIFICATION DISCIPLINARY POLICY

Maintaining a professional, ethical, and accountable workplace is essential to the success of our organization. To support this standard, the ACHI Operations Manual includes a Disciplinary Action Policy that outlines the expectations for employees, ACHI leadership, committee members, certificants, and other stakeholder conduct, as well as the procedures for addressing violations. This policy provides guidance on the types of behavior that may result in corrective action, the progressive steps that may be taken, and the roles and responsibilities of both management and staff in ensuring compliance.

For detailed procedures and examples, please refer to the Disciplinary Action Policy in the appendix.

VIII. PUBLICATIONS

ACHI maintains publication resources designed to support certified professionals and applicants. These publications serve as key channels for sharing organizational updates, certification information, and professional achievements.

1. The Compatibility Chronicle (Monthly Newsletter)

The Compatibility Chronicle is ACHI's primary communication vehicle for sharing timely updates and essential information with the community. Published monthly, the newsletter includes:

- **ACHI Announcements & Operational Updates:** Regular updates from the Board, committees, and Headquarters staff.
- **Certification Insights:** Information on upcoming exam cycles, policy changes, application reminders, and guidance for candidates.
- **Professional Recognition:** Highlights of newly certified individuals, member achievements, and contributions within the field.
- **Program & Event Information:** Notifications about webinars, volunteer opportunities, and continuing education resources.

2. Additional Publications (as applicable)
ACHI may produce supplementary materials, such as policy briefs, exam preparation resources, annual reports, and special announcements, to support operations and enhance transparency. Frequency and distribution of these materials are determined by organizational needs.

IX. APPENDIX 1 - HLA LABORATORY DIRECTOR TRAINING PLAN TEMPLATE

Institution:
Address:
Candidate:
Degree (PhD or MD):

Post-doctoral experience:

Training site(s):
If more than one training site, indicate % time to be spent at each site and areas of accreditation covered at each site:

Mentor(s):
Indicate amount of time per week to be spent with mentor(s) for teaching/training follow-up/evaluation purposes:

If mentor(s) not on-site, indicate frequency of meetings and media used: Other Key Personnel:

Start Date (HLA Director-in-training):
% time devoted to formal training:
Expected completion date:
Objectives:
Example. The training plan is structured to fulfill the two-year requirement for Histocompatibility and Immunogenetics training, meeting or exceeding the standards set forth under CLIA 42CFR 493.1441 and to meet the requirements for an HLA Director as prescribed by the American Society of Histocompatibility and Immunogenetics (ASHI), the College of American Pathologists (CAP), the United Network for Organ Sharing (UNOS), and the National Marrow Donor Program (NMDP).

Goal:

Example: The candidate will be exposed to testing methods and technologies used in a Histocompatibility laboratory that supports both Solid Organ and Stem Cell transplants. After completion of the technical components, the candidate will focus on interpretation, with great emphasis placed on antibody identification and correlation with HLA typing and crossmatching. This will be accomplished by being a reviewer of testing worksheets and by incorporating interpretation comments as needed into the reports. At the end of the training, the candidate should be able to function as a Director, Technical Supervisor, and Clinical Consultant for a Histocompatibility Laboratory.

Overview of Training Plan:

The training will consist of the following components:

A. Didactic training:

(give detailed plan)

B. Technical Training:

(give detailed plan); should include validations, if possible

C. Review and Interpretation

(give detailed plan and expectations at end of training)

D. Management, QA, Miscellaneous

(give detailed plan; should include: QA reporting and monitoring, Proficiency testing review, competency assessment, evaluations of personnel, workload assessment, cost report, computer system, laboratory test management, interactions with transplant center personnel, compliance with regulatory agencies, etc.

E. Research/ Special Project

F. Training Log and Portfolio of Detailed Cases

1. The trainee should gain experience in the following areas of accreditation*:

   Solid Organ Transplantation- Living Donor Solid Organ Transplantation- Deceased Donor HSCT- related donor
   HSCT- unrelated donor
   Testing for Other Clinical Purposes Transfusion Support

   **All areas of accreditation are not required. Choose only those which were included in training laboratory.*

2. The trainee will make a log of cases reviewed: minimum of 50 cases for the first four areas listed above and 20 cases for Testing for Other Clinical Purposes and Transfusion Support

3. Ten (10) of the most interesting cases will be written up in detail for each of the four main areas of accreditation and 5 detailed cases for Testing for Other Clinical Purposes and Transfusion Support.

4. The mentor will send a 1-year progress report to the Registrar to ensure that the candidate is on track to complete the training. If the trainee is not able to spend full time training, the training period may be extended to ensure that all aspects of the training plan have been completed.

Training Timeline

Year One Example:

- Complete "hands-on" training of all HLA testing procedures
- Acquire working proficiency of principles, workflow, instrumentation and troubleshooting of technologies commonly used in histocompatibility laboratories including flow cytometry, Luminex based assays, Sanger sequencing, NGS and fragment analysis
- Learn the procedures and reasoning for all reagent QC.
- Become competent for instrument calibrations and troubleshooting
- Become familiar with the HLA computer system to be competent at accessioning, ordering tests, entering results, reporting, billing, turnaround time, and pulling data for research.
- Review all procedure manuals and propose improvements/ modifications, if applicable
- Learn the HLA nomenclature and learn parent antigens vs splits, CREG groups, common epitopes,

common vs rare alleles, and NMDP rules for high resolution

- Learn how to analyze antibody identification and discuss difficult cases with mentors
- Become familiar with UNET web site; Learn how to enter typing results for deceased donors, attach HLA report, enter unacceptable, verify highly sensitized patients, make customized reports, learn Tiedi.
- Participate in relevant lectures at institution
- Attend a workshop or meeting
- Attend weekly candidate selection committee meetings for renal and HSCT programs.
- Participate in preparation of abstracts, case studies and meeting presentations.

Year Two Example

- Perform review of worksheets and reports and prepare interpretive comments, when applicable.
- Continue to attend candidate selection committee meetings for renal and HSCT programs
- Give at least one in-service lecture to transplant team(s) and HLA staff
- Review all QC documentation and prepare QA report
- Gain knowledge of budget preparation and cost report.
- Gain knowledge of standards and regulations relevant to running an HLA laboratory
- Participate in preparation of accreditation applications and participate in self- inspections.
- Conduct research project or special project
- Complete log of case reviews and detailed write-ups of detailed cases.
- Become competent to take administrative call during deceased donor cases; understand when to defer to Director.

X. APPENDIX 2 - DTRC OPERATIONS MANUAL

The detailed policies, procedures, and operational guidelines governing the Director Training, Review and Credentialing (DTRC) Committee are outlined in the DTRC Operations Manual. The Manual serves as a supplemental governing document to these Bylaws and provides additional guidance regarding the administration and oversight of DTRC activities.

The current Board-approved DTRC Operations Manual is available on the ACHI website and may be accessed here.

XI. APPENDIX 3 - CERTIFICATION DISCIPLINARY ACTION POLICY

Purpose
The purpose of this policy is to ensure that all actions regarding disciplinary matters for certificants, board members, officers, and committee members of the American College of Histocompatibility and Immunogenetics (ACHI) are handled consistently, fairly, and in accordance with the organization's mission, bylaws, and applicable legal and professional standards.

Scope
This policy applies to:

- ACHI certificants and individuals holding an ACHI Affiliate designation
- ACHI Board of Directors
- ACHI officers
- Individuals serving on ACHI committees

Principles

1. All individuals are expected to uphold the philosophy, purpose, and goals of ACHI.
2. Confidentiality and ethical standards must be maintained at all times.
3. Disciplinary actions will be applied consistently, fairly, and with due process.
4. Decisions affecting certification are separate from decisions affecting committee or Board service.

Grounds for Disciplinary Action
Disciplinary action may be taken for, but is not limited to:

- Breach of confidentiality or misuse of privileged information
- Violation of ACHI ethical or professional standards
- Falsification of certification or membership information
- Conduct detrimental to the organization, its mission, or its certificants
- Failure to comply with ACHI policies or procedures

Types of Disciplinary Action
For Committee/Board/Officer Conduct

1. Warning or written reprimand
2. Removal from committee, officer, or Board position
3. Restrictions on participation in ACHI activities

For Certification

1. Warning or probationary status
2. Suspension of certification
3. Revocation of certification

Procedure

1. **Reporting**
   Alleged breaches should be reported in writing to this email address: info@achicertification.org.

2. **Initial Review**
   The ASHI Headquarters Staff will submit the allegation to the ACHI Executive Board members.

3. **Investigation**
   If a formal investigation is warranted, the Executive Board will appoint an impartial individual or review panel to conduct the investigation and gather the relevant evidence. This may include:
   - Interviewing involved parties and witnesses.
   - Reviewing written statements, documents, emails, or other proof related to the allegation.
   - Consulting with subject matter experts or legal counsel, as appropriate.
   - Requesting additional information or clarification from any party involved.

   Individuals under review will be notified in writing and provided an opportunity to respond to the allegations within a specified timeframe (e.g., 10 business days). The investigator(s) will compile a written summary of findings and recommendations to present to the Executive Board for consideration.

4. **Decision**
   The Executive Board will vote to approve or disapprove of the recommended disciplinary decision. The outcome of the vote will serve as the final determination.

Documentation
All actions, evidence, and decisions shall be documented and maintained in confidential records by ACHI Headquarters Staff.

Confidentiality
All disciplinary matters will be handled confidentially to the extent possible while meeting legal and regulatory requirements.

XII. APPENDIX 4 - ACHI CONFIDENTIALITY POLICY AND AGREEMENT FORMS FOR EXAM COMMITTEE MEMBERS

ACHI Confidentiality Policy
The American College of Histocompatibility and Immunogenetics (ACHI) requires volunteers serving on the Laboratory Director Examination (LDE) Committee or the CHA/CHT/CHS Examination Committee to keep all exam details, including items, scores and other relevant information, confidential to protect the integrity of the exam.

ACHI is responsible for its organization's confidential information contained in the Board certification examinations. Volunteers serving on ACHI's examination committees must agree to protect this information and therefore the integrity of the organization.

The term "Confidential Information" means information, not generally known, which may be acquired by the examination committee member's period of service with ACHI and the testing company that ACHI employs. When handling this sensitive information, great care should be taken to keep it protected. Individuals with access to online and database software must log out when stepping away from their desk or leaving for the day.
This policy should not be utilized as the only reference for confidentiality concerns. The ACHI President or a member of the ACHI Executive Committee should be consulted regarding any questions about this confidentiality policy. If an examination committee member does not protect the confidentiality of the Board certification exams, that member may be relieved of all ACHI responsibilities.

Prior to participating in any examination development activities or discussions, volunteers serving on the LDE or the CHA/CHT/CHS Examination Committee must sign and date the following ACHI Confidentiality Agreement which outlines prohibited activities related to exam development.

Confidentiality Statement of Agreement
As a member of the CHA/CHT/CHS Examination Committee for the American College of Histocompatibility and Immunogenetics (ACHI), I understand that I may be privy to confidential information about processes and data related to the development and maintenance of ACHI's certification program and I agree to the following:

1. I will maintain security of all materials at all times.
2. I will return or destroy any materials entrusted to me in the secure manner requested by ACHI and the testing development company contracted by ACHI.
3. I will not divulge this confidential information.
4. I will not reproduce, divulge, or disseminate any portion of the materials referred to in this agreement without permission of ACHI and the testing development company contracted by ACHI.
5. All items, or revisions to items, I submit will become the sole property of ACHI.
6. All items and problems I submit are original, and have not appeared in the exact form on any examination, reference book, textbook, or in any other educational document of which I have knowledge.
7. Items or problems I submit will not appear, in exact form, on any examination, reference book, textbook, or in any other educational document of which I have knowledge now or in the future.
8. Participation in virtual meetings will be a location free of potential listeners and observers.
9. Completing the online exams will be in a location free of observers.
10. I will not take 'screen shots' of exam items
11. I will not share exam items or content information
12. I will not participate in the development or presentation of any materials, outlines, tests, or courses specifically designed to prepare applicants for ACHI certification examinations during my term of service and for at least three years after my term of service is concluded.
13. Should I discover a breach of security, I will immediately contact the ACHI and relay complete and detailed information regarding the incident.