



Summary of Data Elements Requested

Please complete this template and upload it, along with all supporting documentation, to your project in IRBNet. **(You may need to click "Enable Editing" on the yellow bar above in order to complete this template)**

Submission Date: (Submit completed template to dha.ncr.dha-cs-mgt.mbx.hrpp@mail.mil)

1. Full Study Title:

2. Instructions: Please complete the following table and provide additional justification where requested. To indicate your request to receive a specific data element, please check the box next to that element.

<input type="checkbox"/> Name(s)	<input type="checkbox"/> Account Number(s)
<input type="checkbox"/> Geographic subdivision(s) smaller than state(s) ¹	<input type="checkbox"/> Certificate/License Number(s)
<input type="checkbox"/> Date(s) (except year) ²	<input type="checkbox"/> Vehicle Identifier(s) and/or Serial Number(s) ³
<input type="checkbox"/> Telephone Number(s)	<input type="checkbox"/> Device Identifier(s)/Serial Number(s)
<input type="checkbox"/> Fax Number(s)	<input type="checkbox"/> Web Universal Resource Locator(s) (URL)
<input type="checkbox"/> Electronic Mail Address(es)	<input type="checkbox"/> Internet Protocol Address Number(s)
<input type="checkbox"/> Social Security Number(s)	<input type="checkbox"/> Biometric Identifier(s) ⁴
<input type="checkbox"/> Medical Record Number(s)	<input type="checkbox"/> Full-face Photographic Image(s) / Comparable image(s)
<input type="checkbox"/> Health Plan Beneficiary Number(s)	<input type="checkbox"/> Any other unique identifying number(s), characteristic(s), or code(s) (describe list below)

3. Other unique identifying number/characteristic/code: List them here.

4. Justification for use of SSN: Please provide your justification for requesting Social Security Number among the data elements requested. If you are using it to match data from multiple databases and/or datasets, then please explain steps you have taken to find alternatives to the SSN. Will the SSN be removed as an identifier from datasets prior to data analysis?⁵ Limit your response to 350 words.

¹ Including street address, city, county, precinct, zip code

² Including birth date, admission date, discharge date, date of death and all ages over 89

³ Including license plate number(s)

⁴ Including Fingerprints and Voice Prints

⁵ Truncating or scrambling of SSN or other identifier numbers is not a form of removal or de-identification