

# **Test Definition: IFI26**

IF Initial, Professional Only (Bill Only)

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#### **Method Name**

This test is for billing purposes only.

This is not an orderable test.

#### **NY State Available**

No

## **Specimen**

# **Specimen Type**

Varies

# **Specimen Required**

This test is for billing purposes only.

This is not an orderable test.

## **Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Varies	Ambient (preferred)		
	Refrigerated		

# **Clinical & Interpretive**

#### **Reference Values**

This test is for billing purposes only.

This is not an orderable test.

#### **Performance**

#### **PDF Report**

No

## **Performing Laboratory Location**

Rochester



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## **Fees & Codes**

#### **Fees**

- Authorized users can sign in to <u>Test Prices</u> for detailed fee information.
- Clients without access to Test Prices can contact <u>Customer Service</u> 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact <u>Customer Service</u>.

#### **Test Classification**

Not Applicable

#### **CPT Code Information**

88346-26