

Test Definition: _MG14

Metaphases, >15 (Bill Only)

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Method Name

This test is for billing purposes only.

This is not an orderable test.

Chromosome Analysis

NY State Available

Yes

Specimen

Specimen Required

This test is for billing purposes only.

This is not an orderable test.

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

Fees & Codes

Fees

Authorized users can sign in to <u>Test Prices</u> for detailed fee information.



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- 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

88267

88285