

**Overview****NY State Available**

No

**Specimen****Specimen Type**

Varies

**Specimen Required**

Varies

This is a Miscellaneous Referral Test. For specific requirements, please refer to the referred tests list under the catalog tab on the MCL Website (external) or the Referral Catalog (CRM) (internal). If unable to find the correct test, request forms, or specimen requirements, contact Customer Service at 1-800-533-1710 or 6-5700.

NOTE: Provide when ordering

1. Test name
2. Performing lab code
3. Specimen Type

**Specimen Minimum Volume**

Varies

**Reject Due To**

Hemolysis	NA
Lipemia	NA
Icterus	NA
Other	NA

**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Varies	Varies		

**Clinical & Interpretive**

**Reference Values**

Test Performed by: UPMC Molecular and Genomic Pathology  
3477 Euler Way  
Pittsburgh, PA 15213

**Performance****PDF Report**

Referral

**Day(s) Performed**

Varies

**Report Available**

Varies

**Performing Laboratory Location**

UPMC Molecular and Genomic Pathology

**Fees & Codes****Fees**

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

**CPT Code Information**

Varies

**LOINC® Information**

Test ID	Test Order Name	Order LOINC® Value
ZW293	Misc UPMC Mol/Gen Path Lab	51991-8

Result ID	Test Result Name	Result LOINC® Value
ZT293	Test Name	19145-2
ZR293	Result	19146-0