				Source from		
Field Name	Required/Optional	Field Description	Master/Location		Guidance*	Public (MCL)/Internal to Mayo
		The additional equivalent test is essentially the same as				
		a "shared id test" EXCEPT there is a difference in			This is populated during the build process.	
		master field content that prevents it from having a			It is an additional table listed under	
Additional Equivalent Table	Optional	shared ID	Master		Equivalent Tests.	Internal
		Information indicating other testing that should be				
		ordered or considered, in addition to the test under				
					Example: All prenatal specimens must be	
		review. Different from the Testing Algorithm, which			accompanied by a maternal blood	
		indicates what is going to be performed and why, and			specimen ; order MATCC / Maternal Cell	
Additional Testing Dequinements	Ontional	Ordering Guidance, which has information to assist in selection of this test instead of other tests.	Mastar		Contamination, Molecular Analysis, Varies	Dublic
Additional Testing Requirements	Optional	selection of this test instead of other tests.	Master		on the maternal specimen.	Public
		List any tests that are always performed (for				
	Required for any additional tests	processing, billing, etc) with the initial test, at an				
	(always performed) as part of the	additional charge. Such as tissue culture performed for				
Additional Tests table	orderable test.	other labs.	Master			Public
		Lists additional common names for a test, as an aid in			Must use both hyphenated and	
		searching. This field controls key word searching in			nonhyphenated forms for clients to search	
		downstream systems (eg, MCL.com, MayoAccess,			either format	
Aliases	Required	Mayo Link).	Master		Does NOT need to match Epic Alias list	Public
Aliquot Notes	Optional	Instructions for Specimen Operations (SO) processing.	Master			Internal
					Provide alternate tube types for when the	
					preferred tube cannot be used.	
					If information is different for a specific	
		Mayo Clinic practice options for when preferred tube			location, list it in the Specimen Collection	T . 1
Alternate Tube Type (Internal)	Required for any blood specimen type	cannot be used	Master		Information (Internal) for that location.	Internal
		Defines the amount of time it takes the laboratory to			For example, if the sample is placed on an	
		setup and perform the test. This is defined in number of	2		instrument and takes 45 minutes to get the	
Analytic Time	Required	minutes, hours, days, weeks,etc	Master			Internal
					II cautions are not provided, the following	
					statement will be used: No significant	
					cautionary statements.	
					If statements about alternative testing or	
					•	
					additional testing are included, these will be	
					moved to the Additional Testing	
					Requirements or Ordering Guidance fields	
					as applicable.	
		Important points about the limitations of the test or			If statements include not useful for, these	
		specimen type, eg, cross-reacts with, treatment effects,			statements will be moved to the Useful For	
		drug effects, interfering substances, test is IgG only,			section and not useful will be bolded in the	
Cautions*	Required	values found in toxic conditions.	Master			Public
		Physiology, pathophysiology and general discussion of	1.145101			
		the clinical aspects of the assay/procedure/diseases or			Written for information directed to	
Clinical Information*	Required	conditions.	Master			Public
	Requireu	conditions.	IVIASICI		nearmeare providers	

E'.LI N		F' dd Daw dathar	Martin	Source from	C :1*	
Field Name	Required/Optional	Field Description	Master/Location	SOFT	Guidance* Do not include references that will be used	Public (MCL)/Internal to Mayo
					in the Method Description reference, unless	
		References cited within the text or for further in-depth			it is cited elsewhere in the test. Method	
		-				
	Dequired Some internal only tests	reading of a clinical nature; include at least one, 10			Description references will be removed from this list if not cited in the clinical	
	Required. Some internal-only tests	maximum preferred. At least 1 of the references must	N. (D 11
Clinical Reference	may be exempt.	be less than 10 years old.	Master		fields It is the responsibility of each laboratory to	Public
1					provide correct CPT codes to use for	
		Provides guidance in determining the appropriate			billing.	
		Current Procedural Terminology (CPT) code(s)			onning.	
		information for each test or profile. The listed CPT			CPT code descriptions are not required,	
		codes reflect Mayo Clinic Laboratories interpretation			exception are genetic and microbiology	
CPT Code Information	Dequined		Master			Public
	Required	of CPT coding requirements.	Waster		testing.	
		Standard statements only:				
		1. Information on accessing digital images of IHC				
		stains and the manual requisition form can be accessed				
		through this website:				
		https://news.mayocliniclabs.com/ihc-stains/				
		2. Clients ordering stains using a manual requisition				
		form will not have access to digital images.				
		3. Clients wishing to access digital images must place				
		the order for IHC stains electronically. Information				
		regarding digital imaging can be accessed through this				
		website: https://news.mayocliniclabs.com/ihc-			Cannot modify the standard statements.	
Digital Image Access	Optional	stains/#FAQ	Master		Used for Tech Only stains currently.	Public
		Disease states for which the test is of value.				
		List disease names only. No abbreviations. Do not			Do not use with routine tests such as CBC,	
		include modifying content such as diagnosis, screening,			sodium, etc, where testing is appropriate for	
Disease States	Required, if appropriate	monitoring, etc.	Master		a wide variety of diseases. Lab should provide for new tests around the	Public
					implementation date and check during	
		The EMR information fields apply to Mayo Clinic			annual review to ensure accuracy if	
EMR Orderable Code	Required for Internal tests		Master		possible.	Internal
		The EMR information fields apply to Mayo Clinic			possiole.	
		testing only. The EMR information is housed in			Definitions come to TIP and will be	
EMR Billable Inpatient	Required for Internal tests	SoftAR.	Master		updated by the TIP team.	Internal
Evit Billable inpatient		The EMR information fields apply to Mayo Clinic	111110101			
		testing only. The EMR information is housed in			Definitions come to TIP and will be	
EMR Billable Outpatient	Required for Internal tests	SoftAR.	Master		updated by the TIP team.	Internal
			111110101		Infrequently used. Cloverleaf team assists	
		Used when Report Engine PDF reports are sent to			with this, a ticket must be submitted for this	
Epic Report Engine PDF	Optional	Epic; seen when populated	Master		assistance.	Internal
		Tests that are essentially the same and are therefore	11122101		Secondary test ID list for tests that are	
Equivalent Tests (shared test id)	Dequired for aquivalant tests	-	Moster			Internal
Equivalent Tests (shared test id)	Required for equivalent tests	assigned the same test ID.	Master		shared across multiple locations.	Internal

				Source from		
Field Name	Required/Optional	Field Description	Master/Location	SOFT	Guidance*	Public (MCL)/Internal to Mayo
					listed in Necessary Information, as well as	
					listed in the Forms field.	
					If a test is not on a requistion form, the link	
					to the form will be removed until added.	
					Publications will add as a part of the forms	
		Lists the required and optional forms that are			process	
		associated with the test. Provides links to test request				
		forms. Direction to See Special Instructions is no			Submit changes to existing forms or new	
		longer required and will be removed. Standard			forms to DLMP/MCL Form Request	
		verbiage is added by Publications. Additional verbiage			http://mayoweb.mayo.edu/dlmp/form-	
Forms	Optional	will be removed.	Master		request-form.html	Public
					Algorithm, Ordering Guidance, or Useful	
					For fields	
		Genetic information that may help with selection of the			If MCL Prior Authorization is approved,	
		correct test or proper submission of the test request.			add canned statement at the bottom of the	
					field:	
		If Prior Authorization is approved for MCL, note in			Prior Authorization is available for this	
Genetics Information	Optional	field.	Master	_	assay.	Public
					Include indications for test utilization,	
					especially in relation to other similar tests	
					or in algorithms. Comment on how the test is used, eg, screening, diagnosis,	
		Describe in brief sentences the important aspects of the			prognostication, or monitoring response to	
		test. No more than 5 will be accepted. No bullets as			therapy, as appropriate. Cannot match	
Highlights	Optional	they are not compatible with LTC.	Master		Useful For or Genetics Information.	Public
		This field addresses the infectious status of the			oserui i or or occiertes information.	
		specimen. This is a yes/no question field. This controls			Prints on separate batch sheet so Specimen	
	Must select YES for infectious	functionality in MayoAccess and Link to print			Operations knows that specimens are	
Infectious	specimens	infections paperwork.	Master		infectious	Public
					Do not simply repeat the actual Reference	
					Values in this field. There must be some	
					indication how to use the test results.	
					For tests with interpretive reports, state	
					what will be provided within the report.	
		Discussion of the significance of abnormal values,			"An interpretive report will be	
Interpretation	Required	decision levels, treatment monitoring, etc.	Master		provided" is not sufficient in this field.	Public
		Date of original implementation only.				
		Only the date of first implementation is included N-			This field should be "resized" to the Toot	
		Only the date of first implementation is included. No			This field should be "paired" to the Test	
Launch Date	Ontional nonvioted by Dublications	notes, no comments. Does not change in response to test down/up changes.	Master		Implementation Notes field, which would	Internal
Mayo Test ID	Optional, populated by Publications Required		Master		include temporary test status changes, etc. AKA Primary Test ID	Internal Public
mayo rest ID	Nequiteu	omque in consisting of alpha and numeric text.	wiaster		ARA HIMALY TEST ID	1 uone

				Source from		
Field Name	Required/Optional	Field Description	Master/Location	SOFT	Guidance*	Public (MCL)/Internal to Mayo
					For profile and additional tests, which are	
		A short description of the method used to perform the			always performed, all methods must be	
		test, limit to one or a few words.			listed. For reflex tests, only list when the	
		Patent information is entered in this field under the			•	
Method Name*	Degrined	method name.	Mastan		client cannot go see the information (not	Public
Method Name*	Required	method name.	Master			Public
					Example:	
					The following information is required:	
					1. Pertinent clinical history including reason	
					for referral or clinical indication	
		Information that must be included with the specimen			2. Clinical or morphologic suspicion	
		for the best results. Not called "required information"			3. Specimen source	
Necessary Information	Optional	as not all items will be required.	Master		4. Date and time of collection	Public
		These are both a AOE (Ask at Order Entry) and a				
		resultable. These are mostly populated by the SOFT				
	Onting of (Department for Soft Min toots	file definition team.				
	Optional (Required for SoftMic tests				Displayed on MCL.com below Necessary	D.11
Order Question and Answers	offered to MCL)	Request Q code and AOE to be built in RnV Reportable in SOFT doesn't go to clients. Resultables	Master		Information	Public
		are actually reported to clients. Includes LOINC codes.				
		LOINC codes are entered by the LOINC Management			In LTC, shows as the Orderable LOINC	
		Application.			Information. On the web this is displayed	
		Approation.			with the Resultables (LOINC) field as well	
Orderable LOINC Information	Required	Populated by LOINC team.	Master			Internal
	1					
					Example: This test should be performed	
					prior to treatment initiation and in the	
					absence of therapy with complement	
					inhibitors, such as eculizumab or	
					ravulizumab. Complement inhibitors will	
					affect performance of these assays.	
					For evaluating patients with possible	
					thrombotic microangiopathies (TMA), the	
					recommended first-tier test is ADM13 /	
					ADAMTS13 Activity and Inhibitor Profile,	
		Information that is provided to assist in selection of this			Plasma.	
		test instead of other tests, specimen types that may				
		have special uses, etc.			For patients who have received eculizumab	
					or need to monitor response to eculizumab	
		May list alternative tests; names of diseases/conditions			therapy, the recommended test is ECUMP /	
Ordering Guidance	Optional	for which this test is appropriate.	Master			Public
Ordering Restrictions Internal	NOT IN USE as of 7/17/2023	Field removed from view		1		

Field Nome	Dogwinod/Orthered	Field Description	Mastan/Least	Source from	Cuidenee*
Field Name	Required/Optional	Field Description	Master/Location	SOFT	Guidance*
PDF report (Supplemental Attachment)	Optional, if selected required to pick 1 of 4 options. Default is No.	Added to indicate whether a PDF can be attached on a test. There are 4 choices: No, Referrals, Supplemental, and Supplemental RE. Referrals are reports that are attached in MayoAccess. Supplemental are reports that are attached in Soft. Supplemental RE are reports produced by the Report Engine.	Master		This applies to result reporting and is related to the PDFs that are either hyperlinked or located in Special Instructions.
Primary Marketing Category	NOT IN USE	FIELD CURRENTLY NOT IN USE. May be repurposed for MCL.com.	Master		
Prior Authorization (Internal)	Optional	Identifies when Prior Authorization may be available for a Mayo Clinic test. Restricted to Mayo Clinic patients only.	Master		Yes when PA is available and not dis when unavailable. When Yes, the field display "If there are questions regard prior authorization process, please di those to the Precertification Office w Revenue Cycle at 4-0390.
Prior Authorization (External)	Optional	Identifies when Prior Authorization may be available for an MCL test.	Master		Insurance preauthorization is available this testing; forms are available in Sp Instructions. Patient financial assistance may be av to those who qualify. Patients who re bill from Mayo Clinic Laboratories w receive information on eligibility and to apply.
Processing Instructions (Internal)	Required for internal tests	How to process the specimen collected before sending to the laboratory for testing. Applies to Mayo Clinic (includes MCHS, MCA, MCF, MCR) patient testing	Master; if Location- specific differs, see Processing Instructions Override under Location information		Location-specfic information overrid Master information
Profile Information	Required for profile tests.	only. A profile is a group of laboratory tests that are ordered and performed together under a single Mayo Test ID. Profile information lists the testing performed, inclusive of the test fee, when a profile is ordered and includes reporting names and individual availability.	Master		Must be "Always Performed" "YE
Published Name	Required	The long (formal) name for a test that is used in the MCL Test Catalog.	Master		Follow Test Rules and Naming Polic https://mc.title21.com/DocDisplay/Sl Page?DocNo=DLMPIM.POL-65227
Question And Answers	Optional	Frequently asked questions and their answers. Note: in most cases, commonly asked issues should be addressed in the body of the test so that the information is viewable to the public. This is not a public field, but is viewable by MayoAccess and MayoLink clients.	Master		
Receipt and Verify Notes*	Optional	Rules are written to automatically enable specimen pass through or stop in Specimen Operations (SO).	Master		Labs must work with SO to develop 1

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within	Internal
ble for Special	
available receive a will nd how	Public
ides the	Internal
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icy. ShowPdf 27	Public
	MayoAccess & Internal
o rules.	Internal

				Source from		
Field Name	Required/Optional	Field Description	Master/Location	SOFT	Guidance*	Public (MCL)/Internal to Mayo
					The text is manually entered and not pulled	
					from SOFT. Values should match the values	
		The comprehensive reference values for the testing			in SOFT, if they are discrepant between	
		performed. May include age, sex, tanner stage			SOFT and LTC, they should be questioned.	
		designations. Reflects the information provided in the			If values differ between performing site	
		test result report.			there can be a separate field that overrides	
			Master unless Location-		the master value.	
		Pediatric reference ranges may include source citations.	specific information		-Presence of pediatric values triggers	
		Commercially required citations would also be	differs; see Location		manual inclusion in the pediatric reference	
Reference Values*	Required	included.	Reference Values.		values catalog	Public
	^				Must be "Always Performed" "NO."	
					If required fields are not viewable, the	
		Lists tests that may or may not be performed,			specific information must be provided in the	
		frequently at an additional charge, depending on the			orderable test.	
		result and interpretation of the initial test or tests.				
		Reflex Tests table may be updated without a LIST-IT if			The Testing Algorithm field must	
	Required for orderable tests that	they are a manulal reflex. Automated reflexes			indicate under what conditions the reflex	
Reflex Tests*	can add reflex tests	required a LIST-IT to be updated.	Master			Public
		r				
					Laboratories are required to provide this	
					information on all tests. These are drop-	
					down fields and do not offer free-text entry.	
					For more information about field	
					requirements, see Lab Test Catalog	
		Provides information about CLIA complexity, NYS			Regulatory Information Guidance:	
		Category, NYS informed consent, and test			RMCS.G-66933 in Title21	
		classification. Values should be determined using the				
		test classification assessment document: RDLMP.F-			All clinical assays must have a Test	Public: Test Classification
Regulatory Information*	Required	33693 in Title21	Master		-	Internal: CLIA Complexity
		55075 m 11021	Widster		Classification and CEIT Complexity instea.	
					Either standard table or 1 of the standard	
		Identifies conditions that may cause the specimen to be			statements: No specimen should be rejected	
		rejected-this information is for the MCL clients and			or All secimens will be assessed at Mayo	
		does not affect rejections when received at Mayo,			Clinic Laboratories for test suitability.	
		but provides guidance to the client on what could cause				
		a rejection.			Table must include thawing criteria	
		Only gross criteria is listed for hemolysis, lipemia, and			when frozen is listed in Specimen	
		icterus.			Stability as an acceptable transport	
		Temperatures and other anticoagulants are <u>not included</u>			temperature. Thawing criteria is only	Public: Hemolysis, Lipemia, Icterus, Other
Reject Due To	Required		Master			Internal: Thawing
	incyun cu		master		dispayed memany.	internal. Thawing

				Source from		
Field Name	Required/Optional	Field Description	Master/Location	SOFT	Guidance*	Public (MCL)/Internal to Mayo
					Listed as a time frame, eg, 2 to 5 days; for	
					TAT calculation, the number of days is used	
					(eg, 4 weeks = 28 days)	
					Should not include extra verbiage; if	
					needed, edited by Medical Editor	
					For profiles: should reflect the most	
					stringent time frame from the component	
		Identifies the time frame from specimen receipt at a			tests	
		Mayo Clinic location (ie, MCL operations [external];			For tests with reflexes that are reported with	
		or receipt in the lab [internal]) to reporting the result.			profile: Minimum time - routine time	
		Profiles: Calculated as a profile from specimen receipt			without reflex; Maximum time - time	
		to when all components of the profile are reported,			including potential reflex testing	
		excluding any reflex tests (unless reflex result rolled			For reflexes that report separately: do not	
		into profile report).			include in the orderable test's Report	
		Reflex tests: Calculated individually from reflex	Master; if Location-		Available time frame	
		ordered date to the report date.	specific differs, see			
		1	Location Report		Location-specific information overrides the	
Report Available	Required	Field used to calculate TAT.	Available		-	Both
1	1				To test out various templates, see	
		Template is selected by a listing of pre-built Report			https://dev.reports.mayocliniclabs.com/moc	
		Engine templates. These templates are used by the			kup	
		Report Engine for reports viewed by clients in MCL			If a new template is needed, contact Scott	
Report Template	Default is Standard	ordering systems.	Master		Kaupa and Andrew Carlson.	Internal
					Canned comment: This test may be	
					reportable to your state health department.	
		Used to identify when a result may be reported to the			Please review specific state and local	
Reportable Disease	Required (if applicable)		Master		guidelines for reporting information.	Public
		A shorter version [35 character limit] of the Published			No edits accepted to this field unless	
		Name for a test. Please refer to "Test Rules and			accompanied by a LISTIT for changes to	
Reporting Name*	Required	Naming Policy" [065227]	Master	YES	Soft name.	Public
					LOINC codes are entered by the LOINC	
					Management Application.	
		Resultables reported to clients. Includes LOINC codes.			Resultables table contains information	
		LOINC auto-populated by LOINC database		Result Names	provided in the TIF	
Resultables (LOINC Resultables)	Required	Result Names are pulled from Soft.	Master	Only	Changes to Result Names require a LISTIT	Public
Resultables (LOINC Resultables)		Result Ivanies are puned from Soft.	1143101	Only	Example: Specimen must arrive within 48	
					hours of collection for spinal fluid, 96 hours	
		Shipping restrictions or guidance that is associated with			for whole blood and bone marrow, or 72	
Shipping Instructions	Optional		Master		hours for fluids.	Public

Field Name	Required/Optional	Field Description	Master/Location	Source from SOFT	Guidance*
					Includes informed consent and Prior Authorization forms.
		Location for linking to all PDFs associated with the test. Documents may include: specimen collection and preparation patient information signature forms			Submit changes to existing or new documents to DLMP/MCL Form Rec http://mayoweb.mayo.edu/dlmp/form request-form.html
Special Instructions	Optional	diagramatic test algorithms other	Master unless Location specific differs		Location-specfic information overrid Master information when populated
Specimen Collection Information (Internal)	Required for internal tests	Information about what specimen to collect and how to send to the lab. Applies to Mayo Clinic (including MCHS, MCA, MCF, MCR) patient testing only.	Master; if Location specific information differs, see Specimen Collection Override		This field must be populated for an ir only test. If the test is offered both externally and internally, both Specin Required and Special Collection Information fields must be populated Location-specific information override Master information when populated
Specimen Minimum Volume*	Required	Defines the amount of sample necessary to provide a clinically relevant result as determined by the Testing Laboratory.	Master		If specimen required = specimen min insert See Specimen Required. and re any other information. Information must match that in Soft, a <u>LISTIT may be required for updates.</u> Optional subneads include:
		Defines the optimal specimen. This field describes the type of specimen required to perform the test and the preferred volume to complete testing. The volume allows automated processing, fastest throughput and,			Container/Tube Collection Container/Tube Submission Container/Tube Patient Preparation Specimen Volume Collection Instructions Additional Information For Varies Tests ONLY Specimen Type Specimen Stability
Specimen Required	Required for external tests	when indicated, repeat or reflex testing.May include restrictions.	Master		See TEMP1 for more details
		Preferred temperature for transportation to the performing lab. Applies to Mayo Clinic patient testing			This is a drop-down field and only al choice from the following: Standard Ambient Refrigerated Frozen Varies
Specimen Transport Temp (Internal)) Required for internal tests	only.	Master		No free-text allowed.

	Public (MCL)/Internal to Mayo
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allows 1	Public
	Internal

				Source from		
Field Name	Required/Optional	Field Description	Master/Location	SOFT		Public (MCL)/Internal to Mayo
					This information is added in the Regulatory	
					Information field. When entered in the Test	
					Classification drop-down, the standalone	
					TC field displays the canned comment	
					selected in the drop-down. A free-text	
					option is also available as Manually Entered	
Test Classification*	Required	Standardized statements that must be populated.	Master		information	Public
		When a test is down and this field changes to Yes, it				
Test Down	Optional (default No)	prompts a banner to display on the website	Master			Internal
					Standardized sentence used in this field. NO	
					DATES	
					"This test is temporarily unavailable. For	
		When a test is down, the notes in this field are			alternative testing, order ABCDE. For	
Test Down Notes	Optional	displayed as a banner on the website	Master		additional details, see test update here."	Public
					This field should be "paired" to the Launch	
					Date field. Can include temporary test status	
Test Implementation Note	Optional	Any notes pertaining to the launch of a new test.	Master		changes, etc.	Internal
Test Method	Required for Rochester Test	Generic method based on Method Name	Master		Used for Global Business Report Limited to the following: DNA Sequencing; FISH; Flow Cytometry; Genotyping: HPLC; Immunoassay; Immunohistochemistry; Mass Spectrometry; Microassay; NGS; Nuclear Acid Amplication Test; PCR; Serology; Other: If Other used, supply the methodology	
Testing Algorithm	Required for profile, reflex, and additional tests.	A description of the testing that is performed under this test ID, including profile components, reflex, and additional tests. May include information about additional testing that should be ordered or considered. If applicable, add a reference to any diagrammatic testing algorithms, eg, See Celiac Disease Comprehensive Cascade in Special Instructions.	Master unless Location	n	Locations have the option to provide different information in location-specific fields. Location-specfic information overrides the Master information when populated	Public
		For 24-hour or longer urine tests only. Standardized	1			
	Required for 24 hour or longer	chart of preservative options. May include a notation to apply the temperature options within X number of hours. Changes to this field should be emailed to MMLTECHPUB to ensure that the 24-Hour Urine				
Urine Preservative Collection Options	s collections	Preservatives Chart online is updated.	Master		Information follows standard table format	Public

Field Name	Paguinad/Ontional	Field Description	Master/Location	Source from SOFT	Guidance*	Dublia (MCI)/Internal to Movo
Ficiu Ivallic	Required/Optional	Field Description	wiaster/Location	SUFT	Guidalite	Public (MCL)/Internal to Mayo
					Indications for using this test, eg, used for	
					determining toxicity only; names of	
					diseases/conditions for which this test is	
					appropriate.	
					When possible, sentence construction is	
					"This test is Useful for" No period at	
					the end of the statement	
					Should not contain the same information as	
		Suggests clinical disorders or settings where the test			Highlights field, Genetics Information, or	
		may be helpful or appropriate			Testing Algorithm field.	
					Information in this field must be unique	
		Also includes "not useful for" statements: not useful for			to the test. No 2 tests can have the exact	
	Required	disease/improper uses.	Master		same Useful For information.	Public
The fol	llowing fields are location level fields. T	hese fields are unique to your specific laboratory.				
		Yes or No field to indicate if test can be performed on				
Add-on to Stored Specimen	Required	stored specimen.	Location			Internal
					Used for Global Business Report.	
	Required, for Rochester Location, if	Any preanalytical equipment (eg, liquid handler) or			List specific vendor and model or software	
Ancillary Equipment/Software	used		Location		name.	Internal
		If test can be performed on a different brand of				
		instrument; eg, chemistry test that are currently				
		performed on Roche but could switch to Beckman if				
Alternative Instrument/Model	Optional, for Rochester Location	needed	Location		Used for Global Business Report.	Internal
		Similar to Instrument: Space Required but for the				
Alternative Instrument: Space required	Optional, for Rochester Location	alternate instrumentation	Location		Used for Global Business Report.	Internal
<u> </u>						
Alternative Test Kit	Optional, for Rochester Location	If a different test kit or reagents can be used, list here.	Location			Internal
					Prepopulated or new information. Once	
					populated the department and contact	
		Consultant contact information for the lab. List in			information will prepopulate for the	
Consultants	Required	preferred contact order.	Location		selected consultant.	Internal
		Outlines the days the test is performed. This field				
		reflects the day the sample must be in the testing				
Day(s) Performed	Required	laboratory to begin the testing process.	Location		See Templates for examples	Public
Delivery Location*	Required	Specimen distribution drop location.	Location	YES		Internal
		Notes for when a test is inactivated, either temporarily			Free text field. This field supports the	
Inactivation Notes	Optional	or permenantly.	Location		Obsoletetion Date field.	Internal
		Listing of instrument used for analysis, including				
Instrument Name and Model	Required, for Rochester Location	vendor and model	Location		Used for Global Business Report	Internal
		The amount of space required to perform the full				
		workflow of the test in square feet and the approximate				
Instrument Space Required	Required, for Rochester Location	volume that could be run in that space	Location		Used for Global Business Report	Internal
		Day that annual review is finalized by Publications			Entered by Publications when LTC Annual	
		Annual Review initiated by the laboratory at a			Review is selected on Request form. Date is	
		minimum of every two years, must go through			the day the review has been finalized by	
Last Annual Review Date	Optional, populated by Pubs	Publications to be considered reviewed.	Location			Internal
		If a lab has different reference values from what is				
		listed in the Master field, they are placed here. This is				
		updated and displayed based on the performing	Master unless Location-		On Location document after the Performing	
Location Reference Values	Optional	location	specific differs			Public
		100001011				1 00110

				Source from		
Field Name	Required/Optional	Field Description	Master/Location	SOFT	Guidance*	Public (MCL)/Internal to Mayo
		If a lab has different a testing process what is listed in				
		the Master field, it is placed here; this is updated and	Master unless Location-		On Location document after the Performing	
Location Testing Algorithm	Optional	displayed based on the performing location	specific differs		Lab information	Public
		This is used when either more or fewer tube labels are				
		needed for MCL Clients than what is defined in the				
			т ,·			T / 1
MayoAccess Delivery Location	Optional	LIS. Typically used for profile component tests only.	Location			Internal
					Describe, in sentences, how the test is	
					performed and instruments used.	
					For Mayo-developed tests, limit the	
					information to prevent disclosure of	
					proprietary information.	
					A method reference is required , either a	
					literature citation, package insert	
					information, or "Unpublished Mayo	
					method," in parentheses as the last line in	
		Describes how the test is nonformed and movides a			-	
	De surine d	Describes how the test is performed and provides a	T .		this paragraph (a date is required for all	D 11'
Method Description	Required	method-specific reference (include a publication date).	Location		literature citations or package inserts).	Public
		This field is populated by MLI and provides				
		information to reduce calls to the laboratory, identify			Stability information should not be added	
MLI Notes	Ontional	contacts, and other reference information about the test	Lagation		•	Internal
MLI Notes	Optional	contacts, and other reference information about the test	Location			Internal
NY State Available*					Field name updated to reflect availability	
					and not approval.	
		Indicates the status of NY State availability and if the			Default value is "No." When No is selected,	
		test is orderable for NY State. If NY State Available			no other NYS fields are displayed.	
	Required	does not apply (ie, internal test only), indicate with No.	Location			Public
N I State Available	Kequiteu	Date that the test is permenantly inactivated. This is a	Location		Diop-down list.	
Obsoletion Date	Optional, populated by Pubs	date field only.	Location		Do not fill in if the test is down temporarily	Internal
	Optional, populated by 1 dos		Location			
		Includes the following: Laboratory Full Name, Short				
		Name, Performing Module (eg Soft BioChem),				
		Working Hours, Address (physical), Lab Phones,				
		Laboratory Contact, which includes, Name, Title,				
		Organization, Department, Email, Phones (replicated				Internal full information/External =
Performing Laboratory Information	Required	for supervisor, assistant supervisor, etc)	Location		All information is linked together.	"Rochester"
;					6	
Processing Instructions Override		If a lab has different processing instructions, there are	Master unless Location-		On Location document after the Performing	
(Internal)	Optional	added, per performing locations	specific differs		e	Internal
PT/AAP (Proficiency Testing/						
Alternative assessment of						
performance)	NOT IN USE	fields removed from LTC in 2022				
Specimen Collection Override		If a lab has different specimen collection information, it	Master unless Location-		On Location document after the Performing	
(Internal)	Optional	is added, per performing locations	specific differs		Lab information	Internal
		Presentation of SOFT information as to the specimen			If Varies/Varies is used, specimen stability	
		type, identified transport temperature, and any time			information must be provided for each	
Specimen Stability Information*	Required and pulled from SOFT	restrictions. Optional Specimen Container column.	Location	YES	specimen type listed in Specimen Required.	Public

				Source from		
Field Name	Required/Optional	Field Description	Master/Location	SOFT	Guidance*	Public (MCL)/Internal to Mayo
					If the specimen is not kept after testing, as	
		Defines the length of time after testing that a specimen			with Point of Care testing, enter as Not	
Specimen Retention Time	Required	is kept in the laboratory before it is discarded	Location		retained.	Public
		The temperature at which the specimen is stored while			Enter Not stored if specimen is not kept	
Specimen Storage Temperature	Required	it is retained.	Location		after testing.	Internal
		Indicates whether a test can be performed on stored				
		serum (for RST sites: stored serum is from SST, in				
		original tube [sitting on gel], and stored on-gel at 6				
MCR Stored Serum	Required , for Rochester Location		Location		Used by MCR Clinical Processing	Internal
		Clinical correlative studies. Do not use this field for	2000000		This information is location specific and	
upportive Data	Optional	lists of additional reading/reference articles.	Location		cannot be shared between locations.	Public
Test Kit	Required , for Rochester Location	Test kit or special reagents used for testing.	Location		Used for Global Business Report.	Internal
	· · · · · · · · · · · · · · · · · · ·	Outlines the times the test is performed. This field				
		reflects the time the sample must be in the testing				
		laboratory to begin the testing process and includes any	7			
		specimen preparation and processing time required				
		before the test is performed. Some tests are listed as				
		continuously performed, which means assays are				
Time(s) Performed	Required	performed several times during the day.	Location		See Templates for examples	Public
		This field is populated by Internal Operations and				
		provides information for how to triage				
Triage Notes	Optional	specimens/paperwork received in IO.	Location			Internal
		This field uses the second data point from Report				
		Available.			Populated by Publications when Report	
urnaround Time Target	Required	Number only as this field is used for dashboards	Location		Available is changed.	Internal
*To determine which changes require LISTIT, please see						Red text=New field or new information