

**Overview**
**Method Name**

Varies

**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

**Reject Due To**

Specimens other than	Varies
Anticoagulants other than	NA
Hemolysis	NA
Lipemia	NA
Icteric	NA

**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Varies	Varies		

**Clinical and Interpretive**
**Reference Values**

Test Performed By: University of Utah Genome Center

20 South 2030 East

Biomedical Polymers Building 570

Room 308

Salt Lake City, UT 84112-9454

## Performance

### PDF Report

Referral

### Day(s) and Time(s) Test Performed

Varies

### Analytic Time

Varies

### Maximum Laboratory Time

Varies

### Performing Laboratory Location

Univeristy of Utah Genome Center

## Fees and 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 Regional Manager. For assistance, contact [Customer Service](#).

### CPT Code Information

Varies

### LOINC® Information

Test ID	Test Order Name	Order LOINC Value
ZW217	Misc Univ of UT Genome Ctr	51991-8

Result ID	Test Result Name	Result LOINC Value
ZT217	Test Name	19145-2
ZR217	Result	19146-0
ZF217	Flag	No LOINC Needed
ZV217	Reference Value	19147-8
ZU217	Unit of Measure	No LOINC Needed

