
Overview**Method Name**

This test is for billing purposes only.
This is not an orderable test.

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**Test Classification**

Not Applicable

CPT Code Information

81443

