

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
4. Required consent and/or requisitions form including patient specific information, i.e. consent forms, clinical information, family history. Please contact Customer Service at 1-800-533-1710 or 6-5700 for required forms.

Reject Due To

All specimens will be evaluated at Mayo Clinic Laboratories for test suitability.

Specimen Minimum Volume

Varies

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Varies (preferred)		

Clinical & Interpretive**Performance****PDF Report**

Referral

Performing Laboratory Location

Esoterix Genetic MA

Fees & Codes

Test Classification

CPT Code Information

Varies