

# **Test Definition: ZW1**

Miscellaneous MML Referral Test 1

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### **NY State Available**

No

# **Specimen**

### **Specimen Type**

Varies

# **Specimen Required**

This is a Miscellaneous Referral Test. For specific requirements, refer to the Referred Tests List under the Test Catalog tab on <a href="www.MayoClinicLabs.com">www.MayoClinicLabs.com</a>. Internal Mayo Clinic providers: refer to the Referral Catalog in CRM. If unable to find the correct test, request forms, or specimen requirements, contact Customer Service at 800-533-1710 or 507-266-5700.

#### The following must be provided when ordering:

- 1. Test name
- 2. Performing lab code
- 3. Specimen Type
- 4. For required forms including requisitions and patient specific information forms, ie, consent forms, clinical information, family history, contact Customer Service at 800-533-1710 or 507-266-5700.

# **Specimen Minimum Volume**

See Individual Test ID on the Referred Tests List

## **Reject Due To**

All specimens will be evaluated by the processing and performing laboratories for test suitability.

### **Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Varies	Varies		

# Clinical & Interpretive

#### **Performance**

### **PDF Report**



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Referral

Day(s) Performed

Varies

**Report Available** 

Varies

## Fees & Codes

#### **Fees**

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

### **CPT Code Information**

See Individual Test ID on the Referred Tests List

#### **LOINC®** Information

Test ID	Test Order Name	Order LOINC® Value
ZW1	Misc MML Referral Test 1	51991-8

Result ID	Test Result Name	Result LOINC® Value	
ZT1	Test Name	19145-2	
ZR1	Result	19146-0	
ZF1	Flag	No LOINC Needed	
ZV1	Reference Value	19147-8	
ZU1	Unit of Measure	No LOINC Needed	