

Viral Smear, Shell Vial (Bill Only)

# Reporting Title: Viral Smear, Shell Vial Performing Location: Rochester

### **Specimen Requirements:**

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

Specimen Type	Temperature	Time	Special Container
Varies	Varies		

## **Supplemental Report:**

No

### **CPT Code Information:** 87254

### **Reference Values:**

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