

Reporting Title: Misc UW Virology Dept of Lab Med**Performing Location:** University of Washington**Specimen Requirements:**

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

Specimen Minimum Volume:

Varies

Specimen Type	Temperature	Time	Special Container
Varies	Varies		

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
ZW282	ZT282	Test Name	Plain Text	Yes
ZW282	ZD282	Referral Lab Code	Plain Text	No
ZW282	ZQ282	Specimen Type	Plain Text	No

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
ZT282	Test Name	Alphanumeric		19145-2
ZR282	Result	Alphanumeric		19146-0

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

Referral

CPT Code Information:

Varies

Reference Values:

Test Performed by: UW Virology Dept of Lab Medicine,
1616 Eastlake Ave E
Ste 320 BOX 358115
Seattle, WA 98102