

# **Test Definition: IHTOA**

IHC Additional, Tech Only (Bill Only)

_			
<i>(</i> )\	/er	<b>\//</b> 1/	$\Delta M$
$\mathbf{C}$		VI	

#### **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**

#### **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>.

#### **Test Classification**

Not Applicable



# **Test Definition: IHTOA**

IHC Additional, Tech Only (Bill Only)

**CPT Code Information** 

88341-TC