

Reporting Title: EM, Renal Biopsy **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 | Ambient (preferred) | | |
| | Refrigerated | | |

Supplemental Report:

No

CPT Code Information:

88348

Reference Values:

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