

Reporting Title: Bone HistoMorph Interp Only
Performing Location: Rochester

Necessary Information:
[Bone Histomorphometry: Patient Information](#) (T352) must be completed and sent with the specimen. The laboratory requires this information in order to perform testing.

Specimen Requirements:
Specimen Type: Bone
Source: Anterior iliac crest
Slides: 2
Submission Container/Tube: Plastic slide holder
Specimen Volume: A minimum of 1 Goldner Trichrome-stained slide and 1 hematoxylin and eosin-stained slide are required. One tetracycline slide should be submitted as applicable.
Collection Information: For complete instructions see [Bone Histomorphometry Specimen Preparation](#) (T579).

Forms:
[Bone Histomorphometry: Patient Information](#) (T352) is required

Specimen Type	Temperature	Time	Special Container
Varies	Ambient		

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
71168	Interpretation	Alphanumeric		59465-5
71169	Bone Marrow Interpretation	Alphanumeric		51628-6
71170	Participated in the Interpretation	Alphanumeric		No LOINC Needed
71171	Report electronically signed by	Alphanumeric		19139-5
71172	Material Received	Alphanumeric		22633-2
71787	Case Number	Alphanumeric		80398-1
601909	Disclaimer	Alphanumeric		62364-5

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:
No

CPT Code Information:
88321

Reference Values:

An interpretive report will be provided.