

**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).

**Specimen Minimum Volume:**

See Specimen Required

**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

Result ID	Reporting Name	Type	Unit	LOINC®
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.