

**Reporting Title:** HLC IgM Kappa Lambda IF

**Performing Location:** Rochester

**Ordering Guidance:**

If additional interpretation/analysis is needed, request PATHC / Pathology Consultation along with this test and send the corresponding renal pathology light microscopy and immunofluorescence (IF) slides (or IF images on a CD), electron microscopy images (prints or CD), and the pathology report.

**Shipping Instructions:**

1. Advise shipping specimens in Styrofoam transportation coolers to avoid extreme hot or cold temperatures to ensure specimens are received at required specimen stability temperature.
2. Attach the green pathology address label included in the kit to the outside of the transport container.

**Specimen Requirements:**

**Preferred:** Frozen tissue

**Supplies:** Renal Biopsy Kit (T231)

**Specimen Type:** Kidney tissue

**Container/Tube:** Renal Biopsy Kit, Zeus/Michel's

**Specimen Volume:** Entire specimen

**Collection Instructions:** Collect specimens according to the instructions in [Renal Biopsy Procedure for Handling Tissue for Light Microscopy \(LM\), Immunofluorescent Histology \(IF\), and Electron Microscopy \(EM\)](#) in Special Instructions.

**Additional Information:** If standard immunoglobulin and complement immunofluorescence has already been performed, submit the residual frozen tissue (must contain glomeruli) on dry ice.

**Acceptable:** Tissue slides

**Collection Instructions:** Submit 2 frozen tissue unstained positively charged glass slides (25- x 75- x 1-mm) per test ordered; sections 4-microns thick. Ship on dry ice.

**Forms:**

[Renal Biopsy Patient Information](#) in Special Instructions

Specimen Type	Temperature	Time	Special Container
Special	Frozen (preferred)	0 hours	
	Ambient	0 hours	
	Refrigerated	0 hours	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC
610398	Interpretation	Alphanumeric		50595-8
610399	Participated in the Interpretation	Alphanumeric		No LOINC Needed
610400	Report electronically signed by	Alphanumeric		19139-5
610401	Addendum	Alphanumeric		35265-8
610403	Material Received	Alphanumeric		94736-6
610402	Gross Description	Alphanumeric		22634-0

610404	Disclaimer	Alphanumeric		62364-5
610405	Case Number	Alphanumeric		80398-1

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

88346-Primary IF

88350-If add'l IF

**Reflex Tests:**

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
IFPCI	IF Initial	1	88346	No	No
IFPCA	IF Additional	1	88350	No	No

**Reference Values:**

An interpretive report will be provided.