

**Reporting Title:** Bone HistoMorph Interp Only  
**Performing Location:** Mayo Clinic Laboratories - Rochester Main Campus

**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:**

# Test Definition: BHISI

Bone Histomorphometry, Consultant  
Interpretation, Slides Only

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An interpretive report will be provided.