



Biopsy Site Guidelines for Direct Immunofluorescence:

BLISTERING DISORDERS:

Bullous pemphigoid, Epidermolysis Bullosa Acquisita and Pemphigus

- BIOPSY: the edge of an active blister or erythematous skin
- AVOID: having the epidermis come off, ulcers and the distal extremities

Dermatitis herpetiformis:

- BIOPSY: normal appearing skin 3 mm from a blister
- *Multiple biopsies may be required*
- AVOID: active lesions
- SPECIFY: “involved” or “uninvolved”

Porphyria and pseudoporphyria:

- BIOPSY: the edge of an active blister
- AVOID: ulcers, erosions and old lesions

CONNECTIVE TISSUE DISEASES:

Lupus erythematosus (LE) and Dermatomyositis (DM):

For DLE, SCLE and DM:

- BIOPSY: erythematous border of an established (>3 months) lesion
- AVOID: old lesions
- SPECIFY: “involved” or “lesional”

For SLE and the Lupus Band Test (LBT):

DO TWO BIOPSIES FOR DIF:

1. BIOPSY: erythematous or active border of an established lesion (“involved”)
2. BIOPSY: sun-protected, nonlesional, buttock or inner thigh
 - AVOID: old lesions, ulcerated skin, and facial lesions
 - SPECIFY: “uninvolved” or “nonlesional”

VASCULITIS (e.g. Henoch-Schonlein purpura):

- BIOPSY: fresh pink and/or active border of new lesion
- *ideal lesion should be less than 48 hours old*
- *uninvolved skin may yield diagnostic information but is less sensitive*
- AVOID: ulcers, old lesions, and when possible distal lower extremities
- SPECIFY: “involved” or “uninvolved”