

University Hospital Waterford High-Sensitivity Cardiac Troponin T Guideline

<p>Troponin Tests should be performed on the following group of patients provided they fit the criteria for performing the test – presenting symptoms occurred at least 2 hours prior to the test being performed</p>	<p>Category of Patients who Do not require Troponin Test to be performed or repeated.</p>
<ul style="list-style-type: none"> ➤ Patients who present with Chest Pain / Discomfort which must have been present without relief for at least 30 minutes . ➤ Patients who present with Acute SOB, Collapse of unknown origin. ➤ Patients with Diabetes who present with history of weakness, SOB collapse without or without chest pain / discomfort. ➤ Use when ECG Unclear to Confirm or Exclude M.I. in above cases. ➤ Arrhythmias – Fast A Fib, ➤ Patients with ischaemic ECG changes, (peaked T's, flattened T's, Inverted T's, ST Segment depression with or without T inversion) ➤ New or presumed New LBBB on ECG ➤ Patients with result of > 14 - < 52 must have test repeated using fresh sample 2 hours after the first test was done. 	<ul style="list-style-type: none"> ➤ Patients who present and are diagnosed with STEMI and who are treated promptly either with Thrombolysis or fastracked to Cath Lab for rescue Angiogram +/- PCI DO NOT require Troponin T tests unless requested by Cardiologist ➤ Patients who have Troponin Test result > 2000 ng/l DO NOT NEED repeat test – Refer to Cath Lab / Cardiology Team ➤ Patients who do not have risk factors for CAD with test result of < 14 ng/l, do not need repeat testing provided the initial test was performed within the specified time frame of 2 hours post presenting complaint.

As Approved July 2020

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Interpretation of HsC Troponin T results

Troponin Results	Interpretation & Further Instructions
1 st TnT Result < 14ng/l (negative)	Troponin Test should be carried out 2 hours post onset of Chest Pain If ongoing pain ?cardiac chest pain- repeat Troponin 3 hours post first test
2 nd TnT Result < 14ng/l (negative)	Second test is now 5 hours post onset of chest pain, (Negative tests x 2) Cardiac damage can be out ruled
1 st TnT Result is >14- <53ng/l	Low Risk for cardiac damage - Repeat test 3 hours from first test If changes are >10ng/L there is an increased risk of Cardiac Involvement If no change, cardiac damage can out ruled
1 st TnT Result >53ng/l	High Risk- Highly indicative of Myocardial Injury. Repeat Test at 2 hours post 1st Test If changes are >10ng/L refer to Cardiology/Medics
1 st Result > 53 - <100ng/l	High Risk- Highly indicative of Myocardial Injury, but consider chronic elevation i.e. Elderly, Renal Impairment, CCF, Severe infections, Repeat Test 2 hours post 1st Test If changes are >10ng/L refer to Cardiology/Medics
If Result >100ng/l	High Risk- Highly indicative of Myocardial Injury, but must consider chronic elevations i.e. elderly, renal impairment, sepsis ect. Repeat Test 2 hours post first Test If changes are >10ng/L refer to cardiology/medics

Aug. 2020