

Date: September 1, 2011

To: North Zone (Former Aspen) and Central Zone (Former East Central)
Physicians, Nurses and Laboratory Directors and Managers

From: AHS Laboratory Services – North Zone and Central Zone

Re: Troponin Assay – Upgrade and Reporting Changes

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Key Messages:

- Significant efforts are focused on the development and implementation of increasingly more sensitive assays for Troponin. Sites that are currently using the Biosite Triage assay for Troponin I (Tnl) will be switching to a more sensitive version of the assay effective:
 - September 1, 2011 - North Zone (former Aspen Health Region)
 - October 4, 2011 - Central Zone (former East Central Health Region)
- To move towards standardization of the reporting of Troponin results, the following comment will be included in all reports for the new Troponin I (Tnl) assay:

In a clinical setting consistent with Acute Coronary Syndrome, Tnl > 0.02 ug/L is consistent with myocardial injury whereas peak Tnl ≤ 0.02 ug/L is consistent with myocardial ischemia without injury.

Tnl > 0.02 ug/L may also be observed in several other cardiac and systemic diseases (most commonly – acute pulmonary embolism (PE), acute pericarditis, acute or severe heart failure (HF), myocarditis, sepsis and/or shock).

For a more comprehensive list of other causes and mechanisms of Troponin elevation, please consult the following reference:

Jeremias A, Gibson CM. *Annals of Internal Medicine* 2005; 42:786-791

For additional questions contact:

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This bulletin has been reviewed and approved by:

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