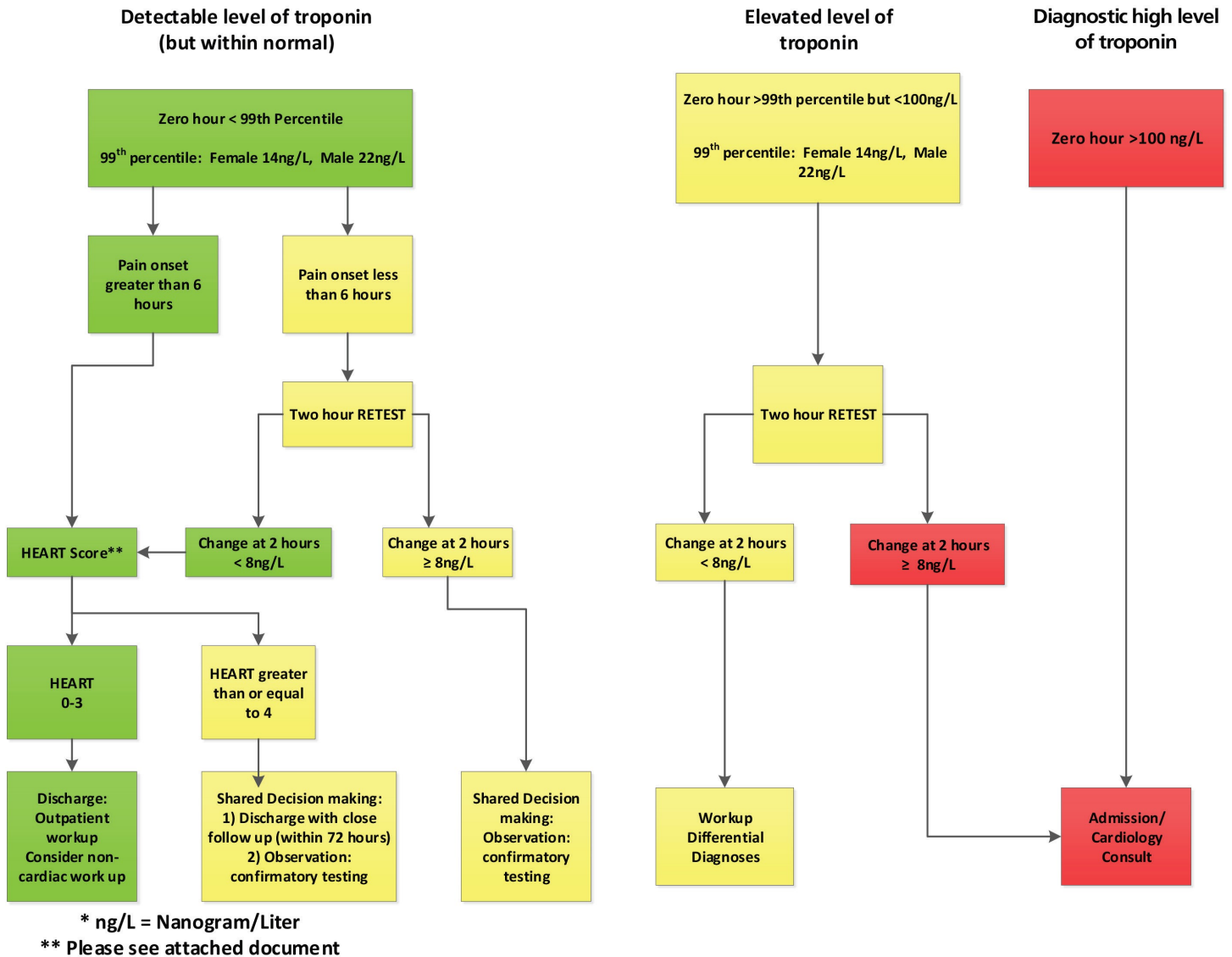


CPH Troponin Testing Algorithm



Note: Diagnosis of Myocardial Infarction is made with acute changes in cTn concentrations with at least one serial sample above the 99th percentile upper reference limit (URL), interpreted in the context of clinical symptoms and ECG changes. Elevated concentrations of cTn can also occur in other clinical conditions such as myocarditis, heart contusion, pulmonary embolism, and drug-induced cardiotoxicity.

HEART Score

| | | |
|---|--|-------------------|
| History | Slightly suspicious | 0 |
| | Moderately suspicious | +1 |
| | Highly suspicious | +2 |
| <hr/> | | |
| EKG 1 point: No ST depression but LBBB, LVH, repolarization changes (ex. digoxin). 2 points: ST depression/elevation not due to LBBB, LVH, or digoxin. | Normal | 0 |
| | Non-specific repolarization disturbance | +1 |
| | Significant ST depression | +2 |
| <hr/> | | |
| Age | <45 0 | 45-64 +1 |
| | | > 65 +2 |
| <hr/> | | |
| Risk Factors Risk factors: HTN, hypercholesterolemia, DM, obesity (BMI>30 kg/m ²) smoking (current, or smoking cessation ≤ 3 mo), positive family history (parent or sibling with CVD before age 65); atherosclerotic disease: prior MI, PCI/CABG, CVA/TIA, or peripheral arterial disease. | No know risk factors | 0 |
| | 1-2 risk factors | +1 |
| | ≥ 3 risk factors or history of atherosclerotic disease | +2 |
| <hr/> | | |
| Initial troponin Use local assays and corresponding cutoffs. | ≤ normal limit | 0 |
| | 1-3x normal limit | +1 |
| | > 3x normal limit | +2 |