



i-STAT hs-TnI CARTRIDGE

# WHEN EVERY MINUTE MATTERS

Support rapid and accurate myocardial infarction (MI) diagnosis in  $\approx 15$  minutes with *i-STAT*<sup>®</sup> *hs-TnI* (High Sensitivity Troponin-I) at the bedside



Assess suspected myocardial infarction at the bedside within  **$\sim 15$  minutes** with lab-quality, high-sensitivity troponin testing

## BEDSIDE TROPONIN TESTING REDUCES:



Time to anti-ischemic therapy by  **$\sim 45$  MINUTES<sup>1</sup>**



ED length of stay by **1.9 HOURS<sup>2</sup>**

## CURRENT APPROACHES TO TROPONIN TESTING HAVE DRAWBACKS

Current approaches to troponin testing require clinicians to choose between speed and sensitivity

	CURRENT APPROACHES		HIGH-SENSITIVITY TROPONIN at the bedside
	contemporary troponin at the bedside	hs-cTn from central lab	
<b>SPEED</b> Faster results at the bedside	✓	✗	✓
<b>SENSITIVITY</b> Earlier detection with hs-cTn	✗	✓	✓

## i-STAT DELIVERS LAB-QUALITY TROPONIN RESULTS AT THE BEDSIDE

Negative Predictive Value <sup>3*</sup>	$\sim 99\%$
Limit of Blank <sup>**</sup>	0.78 ng/L
Limit of Detection <sup>**</sup>	1.61 ng/L
Limit of Quantification <sup>**</sup>	2.90 ng/L

\* The NPV was calculated using the overall 99th percentile URL of 21 ng/L at  $>1$ -to- $3$  (hours) time interval.

\*\*These limits of measurement values are for whole blood sample types.



High-sensitivity troponin at the bedside delivers both **speed and sensitivity** to accelerate decision-making

## IN A STUDY OF OVER



**3,300** PATIENTS AT



**28** SITES

results from *i-STAT hs-TnI* have been shown to have similar performance to lab-based high-sensitivity troponin assays.<sup>4</sup>

## A COMPREHENSIVE MENU ON A SINGLE SYSTEM

*i-STAT System* enables accelerated decision making at the bedside by providing testing for:



- Chemistries
- Blood gases
- Lactate
- Electrolytes
- Hematology

Among ED clinicians who are current or former users\* of *i-STAT cTnI*:

**92%** of surveyed ED physicians

**98%** of surveyed cardiologists

**91%** of surveyed lab directors

believe that *i-STAT hs-TnI* at the point of care will be effective or extremely effective at accelerating chest pain decisions<sup>4</sup>

\*n=182

## ABBOTT SUPPORTS

### **i-STAT hs-TnI IMPLEMENTATION AT THE BEDSIDE WITH:**



**IMPLEMENTATION SUPPORT**  
to enable *i-STAT hs-TnI* go-live



**END-USER TRAINING**  
aligned to the needs of your staff



**ON-DEMAND RESOURCES**  
to provide technical assistance



TO LEARN MORE,  
**SCAN THE QR  
CODE OR CONTACT  
YOUR ABBOTT  
REPRESENTATIVE**

#### REFERENCES:

1. Kontos, Michael C. "Assessing the Role of Point-of-Care Cardiac Markers in the Emergency Department." American College of Cardiology, 24 Feb. 2011, [www.acc.org/latest-in-cardiology/articles/2014/07/18/16/27/assessing-the-role-of-point-of-care-cardiac-markers-in-the-emergency-department](http://www.acc.org/latest-in-cardiology/articles/2014/07/18/16/27/assessing-the-role-of-point-of-care-cardiac-markers-in-the-emergency-department). 2. Singer AJ, Ardise J, Gulla J, Cangro J. Point-of-care testing reduces length of stay in emergency department chest pain patients. *Annals of Emergency Medicine*. 2005;45(6):587-591. doi:<https://doi.org/10.1016/j.annemergmed.2004.11.020>. 3. *i-STAT hs-TnI* (High Sensitivity Troponin-I) Instructions for Use (Canada-REF 09P81-25). 4. Abbott, Data on File.

The *i-STAT hs-TnI* cartridge with the *i-STAT System* is intended for use in the *in vitro* quantification of cardiac troponin I (cTnI) in whole blood or plasma samples in point-of-care or clinical laboratory settings. The *i-STAT hs-TnI* cartridge with the *i-STAT System* is intended to be used as an aid in the diagnosis of myocardial infarction (MI).

For *in vitro* diagnostic use. This material is for use in Canada.

For intended use and complete product information, visit [www.globalpointofcare.abbott](http://www.globalpointofcare.abbott).

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