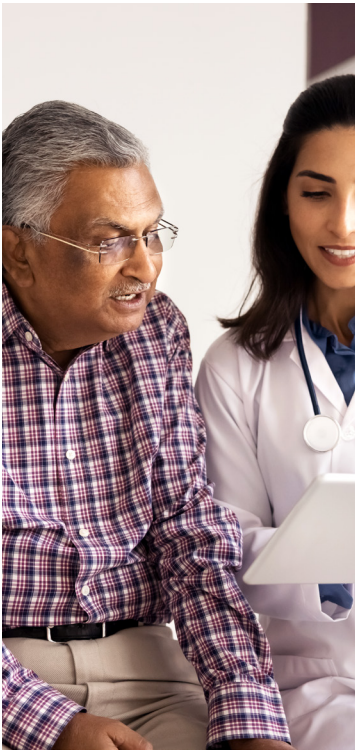


MI ASSESSMENT: PATIENT EXAMPLE

RAMESH WAITS HOURS
FOR TREATMENT



Ramesh arrives with chest pain. The ED nurse draws blood for a lab-based hs-cTn test. Ramesh waits 60 minutes for the initial result and then another 2 hours for a second serial troponin result that is elevated.

RAMESH IS MOVED
TO ANTI-ISCHAEMIC
TREATMENT NEARLY
3 HOURS AFTER
ARRIVAL

HOW CAN WE
DO BETTER?



DELAYED ANTI-ISCHAEMIC THERAPY TIME
can increase the risk of poor
patient outcomes⁴



DELAYS IN MI TRIAGE
can increase length of stay, slowing
patient throughput and workflow
efficiency across the ED

ABBOTT POINT OF CARE 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 MC. Assessing the role of point-of-care cardiac markers in the emergency department. American College of Cardiology. Published 24 February 2011. Accessed 22 January 2025. 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. U.S. Department of Health and Human Services. 510(k) premarket notification. U.S. Food and Drug Administration. Published 3 January 2025. Accessed 22 January 2025. <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm?ID=K240984>. 4. Milosevic A, Vasiljevic-Pokrajic Z, Milasinovic D, et al. Immediate versus delayed invasive intervention for non-STEMI patients: the RIDDLE-NSTEMI study. *JACC Cardiovasc Interv*. 2016;9(6):541-549

INTENDED USE:

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.
Not all products are available in all regions.
For intended use and complete product information,
visit www.globalpointofcare.abbott.
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i-STAT hs-TnI CVA Brochure
6035.REV1.APOC.EN-GB 02/2025



i-STAT hs-TnI CARTRIDGE

WHEN EVERY
MINUTE MATTERS

Support rapid and accurate myocardial infarction (MI) diagnosis in ~15 minutes with *i-STAT*® High Sensitivity Troponin-I (hs-TnI) at the bedside



Not all products are available in all regions.

WHEN A PATIENT WITH CHEST PAIN PRESENTS,
FAST AND ACCURATE TROPONIN RESULTS CAN AID IN THE
DIAGNOSIS OF MI

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	
SPEED Faster results at the bedside	+		+
SENSITIVITY Earlier detection with hs-cTn		+	+

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



BEDSIDE TROPONIN TESTING REDUCES:

- ↓ Time to anti-ischaemic therapy by **~45 MINUTES¹**
- ↓ ED length of stay by **1.9 HOURS²**

i-STAT hs-TnI DELIVERS
LAB-QUALITY TROPONIN
RESULTS **AT THE BEDSIDE**



LAB-QUALITY RESULTS

Negative Predictive Value ^{3*}	~99%
Limit of Blank ^{**}	0.78 ng/L
Limit of Detection ^{**}	1.61 ng/L
Limit of Quantitation ^{**}	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.

** Values are based on results from whole blood.



WHOLE BLOOD DRAWN AT THE
BEDSIDE DELIVERS RESULTS IN
~15 MINUTES



VALIDATED IN A RECENT STUDY
WITH OVER **3,500** PATIENTS
ACROSS **28 SITES³**

A COMPREHENSIVE MENU ON
A SINGLE HANDHELD SYSTEM

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

- Chemistries
- Blood gases
- Lactate
- Electrolytes
- Haematology
- Coagulation



Visit www.globalpointofcare.abbott
to learn more about the tests available
on i-STAT and i-STAT Alinity systems.

i-STAT hs-TnI can support earlier MI
detection across the continuum of care



TRANSPORT
i-STAT hs-TnI can help avoid unnecessary transport
for patients who can be safely treated onsite



URGENT TREATMENT CENTRE
i-STAT hs-TnI provides lab-quality results
without the lab for pre-hospital sites of care



EMERGENCY DEPARTMENT
Point-of-care troponin testing could enable accelerated
decision making for improved patient throughput



CATHETERISATION LAB
Testing can be completed earlier, allowing
cardiologists to act faster on MI