Abbott

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

DELAYS IN MI ASSESSMENT CAN IMPACT TIME TO TREATMENT

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 MINUTES[1]

ED length of stay by 1.9 HOURS[2]

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

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

15+ YEARS EXPERIENCE IN TROPONIN TESTING

IN A STUDY OF OVER

3,500 PATIENTS AT

28 SITES

results from *i-STAT hs-TnI* have been shown to have similar performance to lab-based high-sensitivity troponin assays.[3]

Not all products are available in all regions.

i-STAT hs-TnI ENABLES RAPID DECISIONS IN CHEST PAIN ASSESSMENT

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
- Haematology
- Coagulation

SURVEYED CLINICIANS* WANT TO ACCELERATE CHEST PAIN DECISIONS

92% **of surveyed ED physicians**

92% **of surveyed cardiologists**

91% **of surveyed lab directors**

believe that hs-cTn at the point of care will be effective or extremely effective at accelerating chest pain decisions[4]

**n=182 (US, UK, Canada, Australia)*

ABBOTT POINT OF CARE SUPPORTS i-STAT hs-TnI IMPLEMENTATION AT THE BEDSIDE WITH:

SEAMLESS INTEGRATION
with your LIS and EMR for secure data sharing

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.** Abbott. Data on File. October 2024.

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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