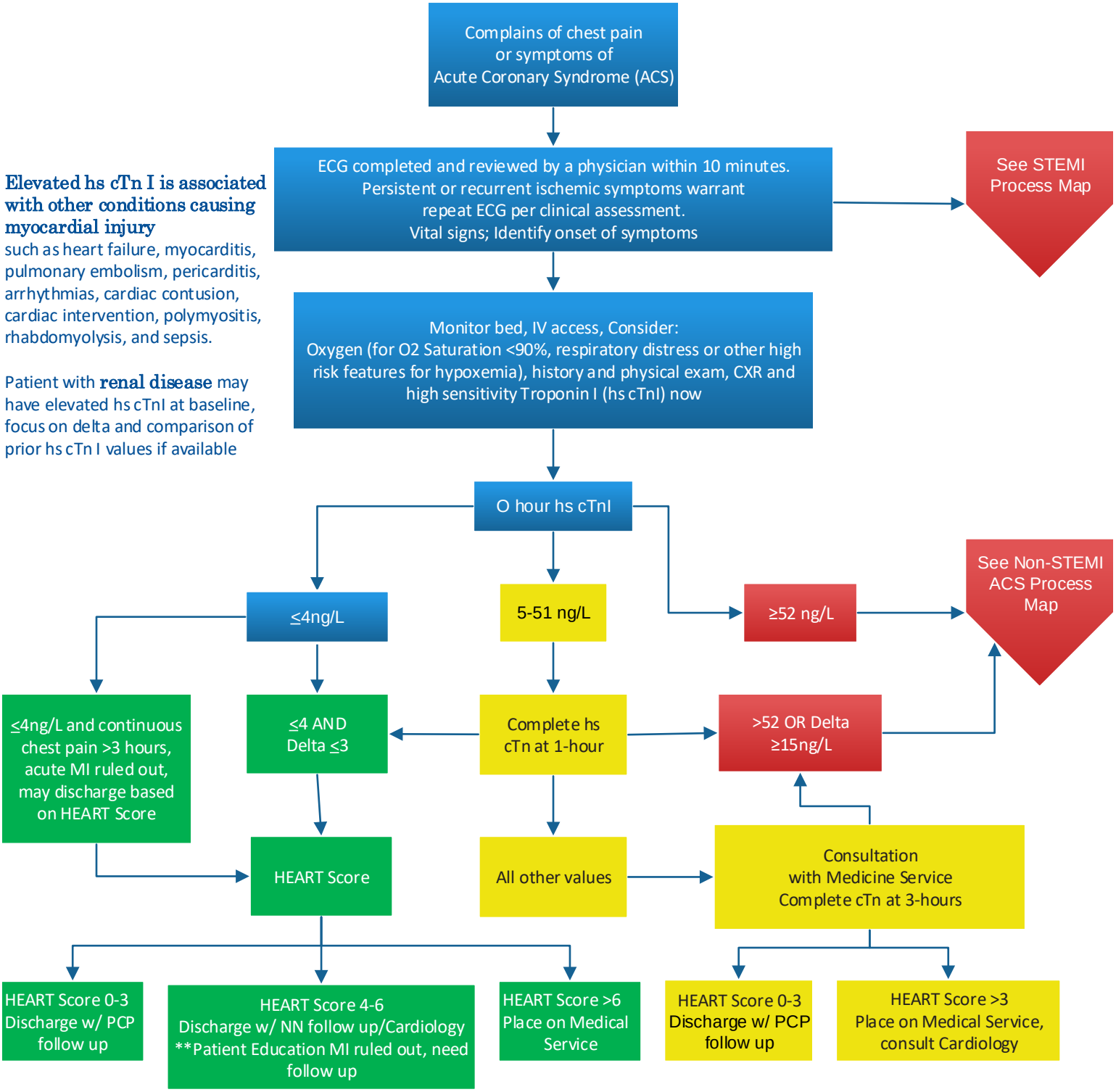
Penn Medicine
Chester County Hospital

High Sensitivity Troponin I Algorithm- CCH

GUIDELINES DO NOT REPLACE THE PROVIDER'S CLINICAL IMPRESSION.
Not all chest pain is cardiac, consider other causes

Elevated hs cTn I is associated with other conditions causing myocardial injury such as heart failure, myocarditis, pulmonary embolism, pericarditis, arrhythmias, cardiac contusion, cardiac intervention, polymyositis, rhabdomyolysis, and sepsis.

Patient with **renal disease** may have elevated hs cTnI at baseline, focus on delta and comparison of prior hs cTn I values if available



Rule in or out for AMI should include clinical assessment and history, 12-lead ECG, chest radiography (as indicated), continuous ECG monitoring and vital signs including pulse oximetry.

99th percentile <15ng/L
0 hour hs cTnI ≥ 52 ng/L Rule IN; Admit, see NSTEMI pathway, Cardiology Consult
Any hs cTnI with delta ≥ 15 ng/L Rule IN; Admit, see NSTEMI pathway, Stat Cardiology Consult, delta is compared from baseline to 1-hour or 3-hour
A delta <3ng/L discharge with follow up based on HEART Score

Reviewed, updated 1/30/23
For implementation 3/1/23