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CMO Reg. No. RMEE 2445133 NABLReg. No.MC-2491 Certificate No. MIS-2023-0218

Patient Name : Ms.JP SHUKLA

Age/Gender : 68 Y/F

: 10133017 Lab No Referred By : Dr.RAJIV RASTOGI Refer Lab/Hosp : CHARAK NA Doctor Advice : TROPONIN-T hs Stat Visit No : CHA250035721

Registration ON : 27/Feb/2025 07:12PM

Sample Collected ON : 27/Feb/2025 07:17PM Sample Received ON : 27/Feb/2025 07:33PM

Report Generated ON : 27/Feb/2025 08:18PM

Test Name	Result	Unit	Bio. Ref. Range	Method
TROPONIN-T hs Stat				
TROPONIN-T	0.017	ng/ml	< 0.010	

NOTES:-

P.R.

Troponin T has is a member of the myofibrillar protiens of striated muscularis. These myofibrillar protiens are the buildling blocks of the contractile appratus. Tropnin T hs binds the tropnin complex to tropomyosin and binds the neighboring tropomycin molecules. The determination of troponin T in serum plays an important role in the diagnosis of myocardial infarction(AMI), microinfarction (minor myocardial damage - MMO) and myocarditis. Troponin T is detectable about 3 -4 hours after the occurrence of cardia symptome. Following acute myocardial ischemia, Troponin T rmains in the serum for a lengthy period of time and can hence help to detectmyocardial events that have occurd upto 14 days earlier.

Cobas E 411 Troponin T hs Stat emplyes monoclonal antibodies specifically directed against human cardiac Troponin T (after release from the free cytosol and myofibrils.)

Based on the WHO criteria for the definition of AMI from the 1970~s the cutoff (clinical discriminator) value for troponin T is 0.1 ng/ml according to ROC analysis.

Elevated Troponin T values are occasionally found in patients with restricted renal function despite the absence of definite evidence of myocardial Ischemia.

(ELECTRO-CHEMILUMINISCENCE TECHINIQUE BY Cobas E 411)

*** End Of Report ***



DR. SHADABKHAN