

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

Phone: 0522-4062223, 9305548277, 8400888844 9415577933, 9336154100, Tollfree No.: 8688360360

E-mail: charak1984@gmail.com

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

Patient Name : Mr. UMA SHANKER GUPTA

Age/Gender : 68 Y/M

Lab No: 10138464Referred By: Dr.RAJIV RASTOGIRefer Lab/Hosp: CHARAK NADoctor Advice: TROPONIN-T hs Stat

Visit No : CHA250041169

Registration ON : 07/Mar/2025 12: 35PM Sample Collected ON : 07/Mar/2025 12: 36PM

Sample Received ON : 07/Mar/2025 12:46PM

Report Generated ON : 07/Mar/2025 01:52PM



	Test Name	Result	Unit	Bio. Ref. Range	Method
TROPONIN-T hs Stat					
	TROPONIN-T	0.014	ng/ml	< 0.010	_

## NOTES:-

P.R.

Troponin T hs 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 \*\*\*



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