



Mr. LAWRENCE KOFI ADDEA

Tel No : 123

PID NO: P36170018065

Age: 47 Year(s) Sex: Male

Reference: Dr.GILEAD MEDICAL

Sample Collected At:
Ghana

VID: 36170118218

Registered On:

22/11/2017 04:47 PM

Collected On:

22/11/2017 10:17PM

Reported On:

23/11/2017 08:24 AM

TEST REPORT TEST REPORT

Investigation	Observed Value	Unit	Biological Reference Interval
---------------	----------------	------	-------------------------------

Cardiac Injury Profile-Mini

SGOT (AST)

(Serum,Enzymatic)

29

U/L

0-40

LDH-Lactate Dehydrogenase

(Serum)

240

U/L

0-250

CPK-Creatinine Phospho Kinase

(Serum,Enzymatic)

114

U/L

24-170

Interpretation : The major sources of CPK activity are skeletal muscle, myocardium & brain. CPK levels are useful for diagnosing and monitoring of myocardial infarction (MI) and myopathies such as progressive Duchenne muscular dystrophy. Exercise and muscle trauma can elevate CPK values. Presence of Macro CK may elevate CPK levels.

CK-MB (MB fraction of Creatinine Kinase)

(Serum)

21.00

U/L

0-25

- 1) The quantitation of CK-MB levels in serum is used as an aid in the diagnosis of myocardial injury.
- 2) Other condition causing elevated CK-MB levels include skeletal muscle trauma, dermatomyositis, Duchenne's muscular dystrophy, Reye's syndrome, rhabdomyolysis, drug overdoses, delirium tremens, or chronic alcohol poisoning.

Troponin-I

(Serum,ELFA)

2.20

ng/L

< 25

Please note changes in
Reference range , Unit and
Method

Interpretation :

- The current high-sensitivity troponin (hsTn) assay can detect low levels upto 0.003 µg/L (3 ng/L). (Following are the conversion factors- Concentration in pg/ml x 0.001= µg/L, Concentration in pg/ml x1.0 =ng/L)
- Reporting in many decimal point placements causes confusion and potentially can lead to misinterpretations, hence it has been recommended (IFCC2014) that the results are expressed in whole numbers by using ng/L as the unit of measurement.
- The high tissue specificity of cTnI measurements is beneficial for identifying cardiac injury in clinical conditions involving skeletal muscle injury resulting from surgery, trauma, extensive exercise, or muscular disease.
- Highly sensitive troponin (cTn) assay allows earlier detection of acute Myocardial Infarction (MI), with shortening of time window for serial measurement to 3 hours. Serial sampling to detect the temporal rise and fall of cTnI levels is recommended for the differentiation of acute cardiac events from chronic cardiac disease. STAT High Sensitive Troponin-I results should be used in conjunction with other information such as ECG, clinical observations, and symptoms, etc.
- Elevated troponin levels may be indicative of myocardial injury associated with heart failure, myocarditis, arrhythmias & other causes like chronic renal disease, pulmonary embolism.

Reference: hs Troponin I IFCC November 2014.

Page 2 of 3 **Referred **Mr. David Adjei Adu** sample as received
Bsc.Biomedical Scientists

METROPOLIS
The Pathology Specialist

Refer to conditions of reporting overleaf

INNER HEALTH REVEALED

**Referred Test

Results relate only to the sample as received

METROPOLIS