





Pathology and Laboratory Medicine

Orderable

Turnaround Time: 4 hours STAT: 1 hour (VH and UH only)

Alternate Name(s):

ProBNP (B-Type Natriuretic Peptide, NT Pro BNP N Terminal proBNP, BNP



Laboratory: Core Lab



Requisition:

GENERAL LABORATORY REQUISITION



Method of Analysis:

Electrochemiluminescene **Immunoassay**

Specimen:

| Adult | Pediatric |
|---|------------------------------|
| 4.5 mL Green top | 0-2 years: 0.5 mL Green top |
| Vacutainer tube | Microtainer 2-10 years: 3 mL |
| | Green top |
| Other acceptable samples include: Plasma (Li-heparin, EDTA, | |
| Serum (Gold or Red) | |



Collection Information:

Collect blood aseptically in a Vacutainer tube



Test Schedule:

Reference Ranges:

<125 ng/L:

Exclude cardiac dysfunction with a high level of certainty in patients with symptoms suggestive of heart failure e.g. dyspnea.

< 300 ng/L in an acute setting

Interpretive Comments:

Heart failure is unlikely if NT-proBNP concentration is:

<300 ng/L in an acute setting

<125 ng/L in an ambulatory setting

Heart failure is very likely in patients presenting with dyspnea in an acute setting when:

Age <50 years and NT-proBNP >450 ng/L

Age 50-75 years and NT-proBNP >900 ng/L

Age >75 years and NT-proBNP >1800 ng/L







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Preoperative NT-proBNP ≥300 ng/L: Patients 65 yrs or older, 45-64 yrs old with significant cardiovascular disease or Revised Cardiac Risk Score (RCRI) ≥1 are at high risk of death or myocardial infarction after noncardiac surgery (MINS)." CCS Guidelines: Can J Cardiol 33 (2017) 17-32.

Comments:

Aids in the diagnosis and monitoring of congestive heart failure.

Testing indications at LHSC is currently limited to the Heart Failure Clinic and for the assessment of preoperative risk in non-cardiac surgery.

Storage and Shipment:

Stable for 3 days at 20-25 °C, 6 days at 2-8 °C, 24 months at -20 °C (±5 °C). Freeze only once.