B-type natriuretic peptide (BNP) is an established biomarker for the differentiation of acute dyspnoea in the emergency department. However, evidence for BNP testing in outpatients is less strong. BNP is not a global test to detect cardiac abnormalities and is only helpful in a few clearly defined clinical settings. Similarly to its use in emergency department patients, BNP is useful in outpatients presenting with dyspnoea to estimate the likelihood of heart failure as the cause of dyspnoea. However, BNP does not provide any reliable information on the underlying cardiac pathology, and in virtually all cases additional examinations are required (primarily echocardiography). In addition, BNP is helpful for risk stratification in patients with heart failure, coronary artery disease and pulmonary artery hypertension.