

Specimen Information

Test Order ID: 2012
Specimen ID: 20000003



Participant Information

Name: **Paul Fletcher**
DOB: **02/23/1973**
Age: **52**
Gender: **Male**
Fasting Conditions: **Unknown**

Client Information

Account Number: **10000002**
Ordering Physician: **DTC**

Specimen Collection Date: **06/10/2024**

Receipt Date: **06/10/2024**

Test Date: **06/10/2024**

Date Reported: **06/10/2024**

Biomarkers: **Prostate Health**

Flag Legends

H Above Reference Range **L** Below Reference Range **U** Critical Result. It requires urgent medical consultation

Disclaimer

These Test Results do NOT make or confirm a diagnosis which can only be made by a qualified health practitioner

Prostate-Specific Antigen (tPSA), Total

Test	Result	Flag	Units	Reference Interval
PSA, total	0.73		ng//mL	< 4.0

The PSA assay method is Roche Elecsys ECL. PSA test results obtained with different assay methods cannot be used interchangeable. The reference range is for men under 61 years old (JAMA 270 (7) 1993, 860-864).

Purpose and Interpretation of the Test

Prostate-specific antigen is a protein produced by the prostate gland and can be measured in the blood. The PSA test screens for early detection of prostate cancer and other prostate conditions. Prostate cancer is the most common cancer among men in the United States. Risk factors include increasing age, African ancestry, and a family history of the disease. The National Comprehensive Cancer Network (NCCN) recommends an annual PSA test for high risk men over 40 years old with a PSA greater than 1 ng/mL. An elevated PSA level may indicate prostate inflammation, benign prostate enlargement, or infection, but does not mean cancer is present. Neither does a normal test result rule out the possibility of having cancer. Typical biological variation of PSA is 20% for men over 50. The use treatments for hair loss (e.g. Propecia) may affect PSA results.