ELEVATED PSA/PROSTATE NODULE REFERRAL GUIDELINE

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HIGH RISK

SUGGESTED EMERGENT CONSULTATION

SYMPTOMS AND LABS

Markedly Elevated PSA (greater than 50 ng/ml)

With or without symptoms concerning for metastatic prostate cancer (severe hip or long bone pain)

***If patient is experiencing symptoms of cord compression including lower extremity weakness/severe back pain/ fecal incontinence refer immediately to the emergency department

MODERATE RISK

SUGGESTED CONSULTATION OR CO-MANAGEMENT

SYMPTOMS AND LABS

For men aged 55-69

Persistently elevated PSA greater than

And/Or

Prostate Nodule

For men less than 55-69 who have high risk patient characteristics (black race & first degree relative with prostate cancer)

Persistently elevated PSA greater than

And/Or

Prostate Nodule

LOW RISK

SUGGESTED ROUTINE CARE

SYMPTOMS AND LABS

Asymptomatic male with normal digital rectal exam

For men aged 55-69

With a single elevated PSA greater than

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Or

For men aged less than 55-69

With a single elevated PSA greater than 4

And who have high risk patient characteristics (black race & first degree relative with prostate cancer)

SUGGESTED PREVISIT WORKUP

Repeat PSA

Bone Scan

CT scan of the abdomen and pelvis, with contrast

SUGGESTED WORKUP

Repeat PSA

Referral to urology for Shared Decision Making regarding elevated PSA &/ prostate nodule

SUGGESTED MANAGEMENT

Repeat PSA in 2-3 month

If patient is experiencing Lower Urinary
Tract symptoms at the time of PSA
blood draw perform a U/A and Urine
Culture

Refer to urology if PSA greater than 4

CLINICAL PEARLS

- High risk patient characteristics: Black race &/ first degree relative with prostate cancer.
- Consider earlier PSA screening for men with high risk characteristics.
- Consider Urology referral for a man aged 40-49 with a PSA greater than 2.0.
- Consider Urology referral for a man aged 50-59 with a PSA greater than 3.0.
- If patient is experiencing Lower Urinary Tract symptoms at the time of PSA blood draw perform a U/A and Urine Culture.
- PSA screening is not recommended in men over 75 or in men with life expectancy less than 10yrs.

Maine Medical
PARTNERS

These clinical practice guidelines describe generally recommended evidence-based interventions for the evaluation, diagnosis and treatment of specific diseases or conditions. The guidelines are: (i) not considered to be entirely inclusive or exclusive of all methods of reasonable care that can obtain or produce the same results, and are not a statement of the standard of medical care; (ii) based on information available at the time and may not reflect the most current evidenced-based literature available at subsequent times; and (iii) not intended to substitute for the independent professional judgment of the responsible clinician(s). No set of guidelines can address the individual variation among patients or their unique needs, nor the combination of resources available to a particular community, provider or healthcare professional. Deviations from clinical practice guidelines thus may be appropriate based upon the specific patient circumstances.