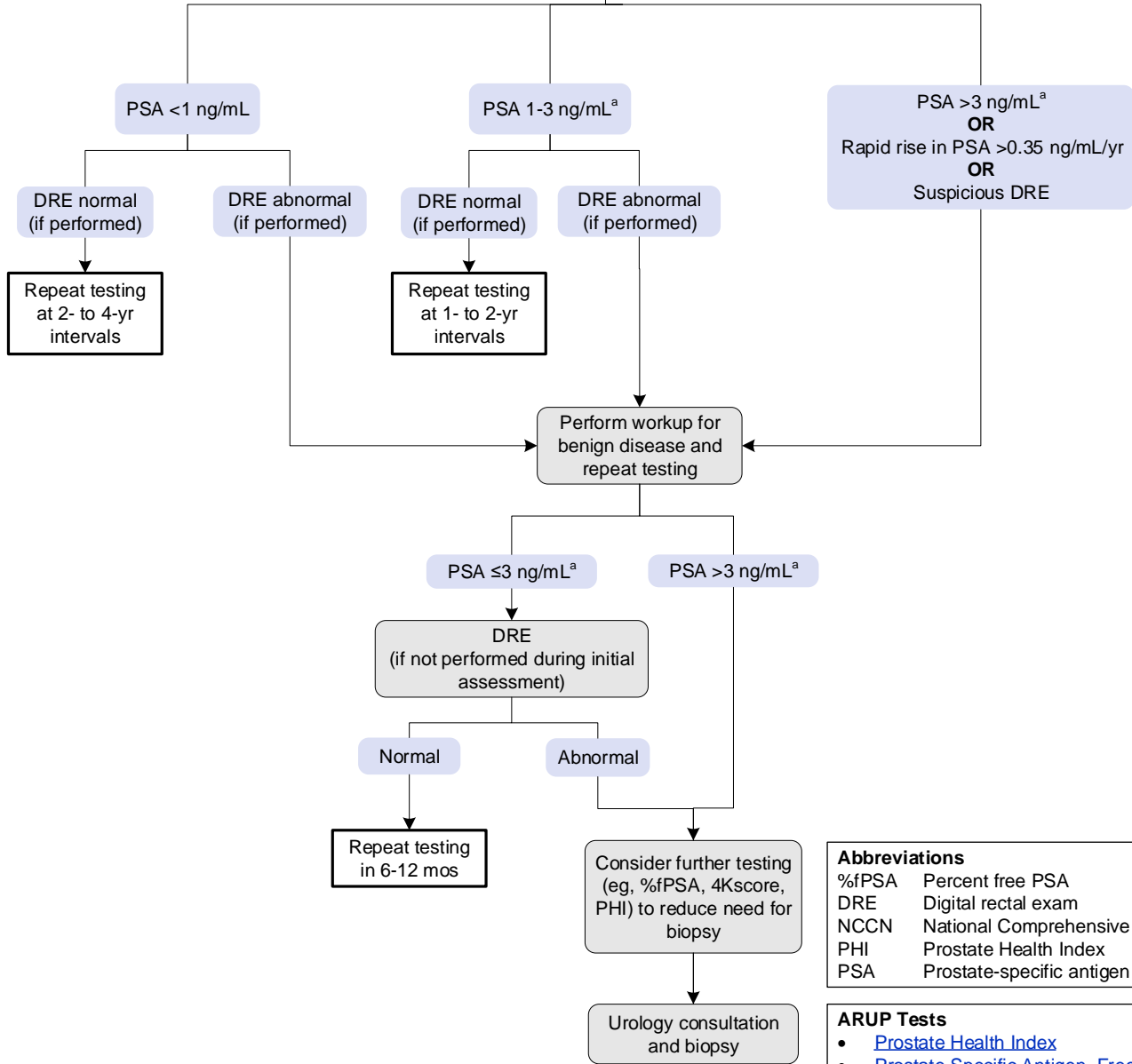


INDICATIONS FOR SCREENING

Shared decision-making is recommended to determine when to screen; age, life expectancy, and risk factors, such as family history and race, should be taken into account.

Note: PSA screening is favored by the American Cancer Society, American Society of Clinical Oncology, American Urological Association, National Comprehensive Cancer Network, and U.S. Preventive Services Task Force. For specific societal recommendations, refer to the [ARUP Consult Prostate Cancer](#) topic.

ORDER
Total PSA
AND
Consider DRE as complementary baseline test



Abbreviations

%fPSA	Percent free PSA
DRE	Digital rectal exam
NCCN	National Comprehensive Cancer Network
PHI	Prostate Health Index
PSA	Prostate-specific antigen

- ARUP Tests**
- [Prostate Health Index](#)
 - [Prostate Specific Antigen, Free Percentage \(Includes Free PSA and Total PSA\)](#)
 - [Prostate Specific Antigen, Total](#)
 - [Prostate-Specific Kallikrein, 4Kscore](#)

^aNCCN recommends a lower cutoff, 3 ng/mL, instead of the traditional 4 ng/mL cutoff.

Reference
NCCN Clinical Practice Guidelines in Oncology: prostate cancer early detection, version 2.2021. National Comprehensive Cancer Network. [Updated: Jul 2021; Accessed: Aug 2021]