

Triage Criteria for Prostate 2ww referral May 2019

Age-specific normal PSA ranges

Age	PSA \geq =
40-49 years	2.5ng/ml
50-59 years	3ng/ml
60-69 years	4ng/ml
70-80 years	5ng/ml
80+ years	15ng/ml

1. Patients with an abnormal digital rectal examination (DRE) should be referred immediately on a two-week wait pathway with one PSA result.

2. For those patients with raised PSA and benign DRE:

Exclude infection

- It is necessary to exclude UTI
- Symptoms of UTI like dysuria or temporarily increased LUTS and/or positive dipstick testing is sufficient, and if infection is suspected, treat appropriately and repeat the PSA six weeks later.
- In those without infection, follow the management guidelines below –

No infection Asymptomatic

Patients with PSA ≥ 10 80 years and younger PSA ≥ 15 80+ years refer

Patients with PSA < 10 repeat PSA in 4 weeks before 2ww referral

3. All symptomatic patients with PSA above age specific range refer

- Symptoms likely related to presence of a cancer in the urinary tract (not necessarily prostate cancer): Haematuria, weight loss and bone pain
- Isolated LUTS without a raised PSA or abnormal DRE is usually not a sign of prostate cancer

Family history

If PSA > 20 and age < 80 y needs CT Bone Scan booking.

If two raised PSA > 20 and age < 75 for MRI

Actions

Request 2nd PSA if needed, check for UTI, request MRI if appropriate, request Bone Scan if appropriate, forward referral to booking staff.

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