**Symptoms and Labs**

**High Risk**
- 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**
- Persistently elevated PSA greater than 4
- Prostate Nodule

**Low Risk**
- Persistently elevated PSA greater than 4
- And/or
- Prostate Nodule

**Symptoms and Labs**

**Suggested Previsit Workup**
- Repeat PSA
- Bone Scan
- CT scan of the abdomen and pelvis, with contrast

**Suggested Consultation or Co-management**
- Referral to urology for Shared Decision Making regarding elevated PSA &/ prostate nodule

**Suggested Routine Care**
- 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**
- 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.