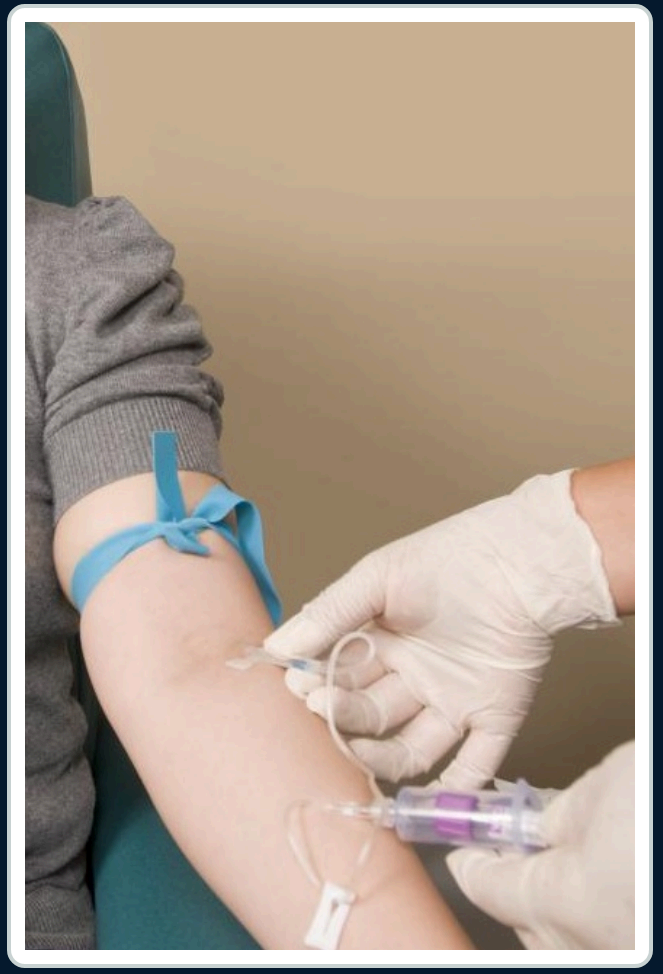
FACTBASEDUROLOGY

What does a PSA blood test tell you?



Prostate Health Series • FBU-P07

THE OPENING QUESTION

A result arrives: “PSA 5.2 ng/mL”

ILLUSTRATIVE LABORATORY EXTRACT

TOTAL PSA

5.2 ng/mL

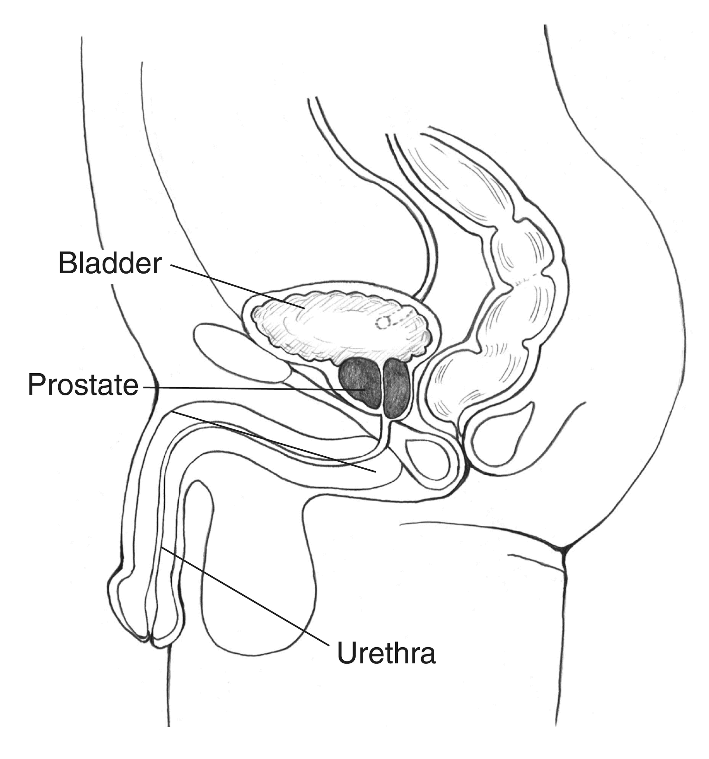
Fictional example · No patient data

What would you conclude from this single line?

Hold that thought. We will return to the report after the evidence.

WHAT THE ASSAY MEASURES

PSA comes from prostate cells



NORMAL TISSUE

Produces PSA

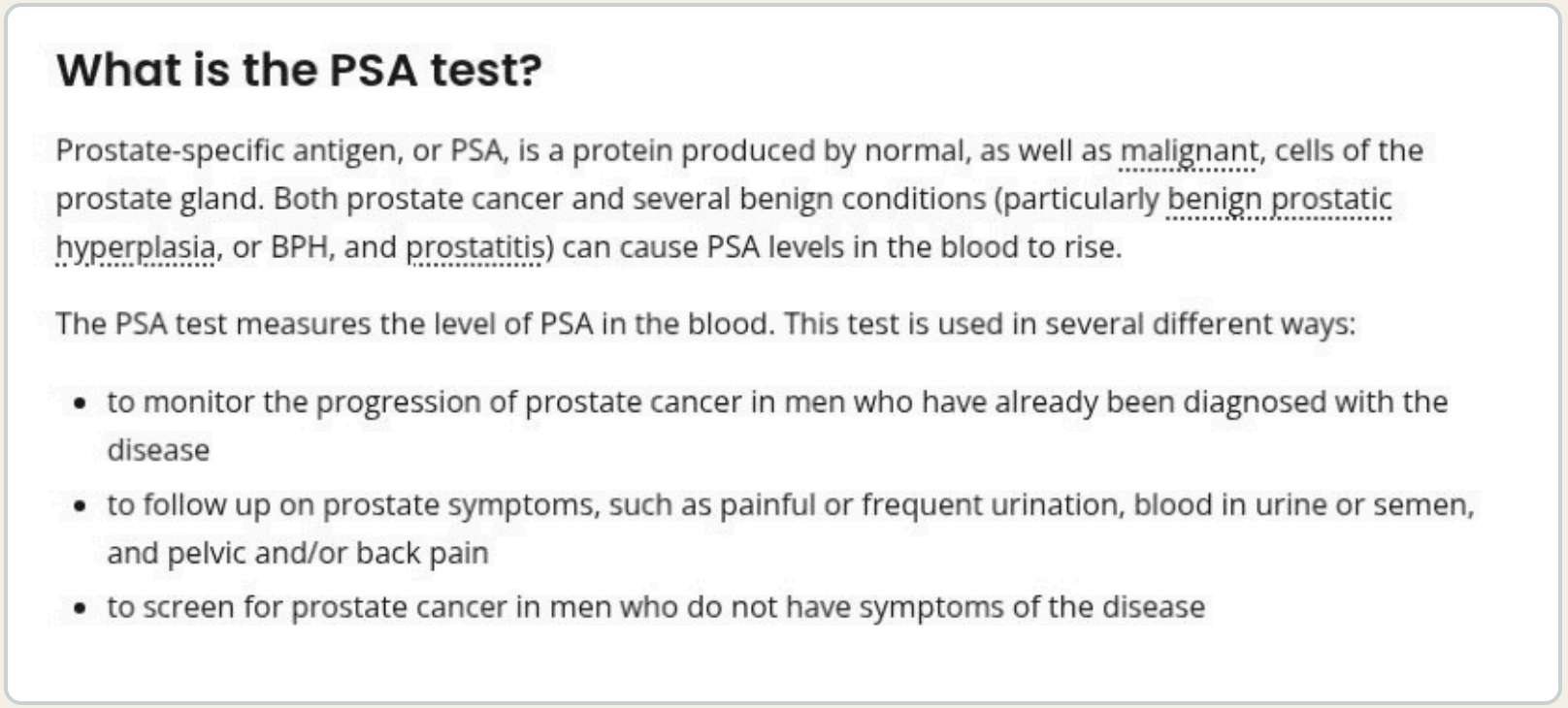
MALIGNANT TISSUE

Can also produce PSA

The blood test measures the amount circulating in blood.

SOURCE CHECK

The NCI defines what the test measures



What is the PSA test?

Prostate-specific antigen, or PSA, is a protein produced by normal, as well as malignant, cells of the prostate gland. Both prostate cancer and several benign conditions (particularly benign prostatic hyperplasia, or BPH, and prostatitis) can cause PSA levels in the blood to rise.

The PSA test measures the level of PSA in the blood. This test is used in several different ways:

- to monitor the progression of prostate cancer in men who have already been diagnosed with the disease
- to follow up on prostate symptoms, such as painful or frequent urination, blood in urine or semen, and pelvic and/or back pain
- to screen for prostate cancer in men who do not have symptoms of the disease

Normal and malignant prostate cells both produce PSA.

Source: National Cancer Institute
Captured 29 Sep 2026

CAUSE MAP

Several conditions can raise PSA



BEFORE THE BLOOD DRAW

Timing can change the number

Prostate infection or inflammation	May remain raised while the condition resolves.
Recent prostate biopsy	Can raise PSA for a month or two.
Ejaculation or vigorous cycling	Can raise PSA transiently.

MEDICATION CONTEXT

Some medicines lower measured PSA

5-ALPHA-REDUCTASE INHIBITORS

Finasteride
Dutasteride

Tell the clinician before the result is interpreted.

NCI notes that these medicines lower PSA. The measured value needs medication context.

INTERPRETATION

There is no single universal cutoff

The higher the PSA, the more likely cancer may be present.

What is a normal PSA test result?

There is no single threshold that distinguishes a normal versus an abnormal PSA result. This is in part because there is no specific PSA level that means that someone has prostate cancer. However, the higher someone's PSA level, the likelier it is that prostate cancer is present.

NCI: no one value confirms cancer

The NCI explains why a cutoff needs context.

NCI page capture, 29 Sep 2026

WHAT SCREENING DATA SHOW

An elevated PSA often has another explanation

~25%

of men biopsied because of an elevated PSA are found to have prostate cancer



NCI summary of biopsy outcomes after an elevated PSA. This is not an individual risk estimate.

RETURN TO THE SAMPLE RESULT

The report needs its missing context

FICTIONAL REPORT, TEACHING EXAMPLE

Total PSA 5.2 ng/mL

One measurement
No clinical history shown

- Was this newly elevated?
- Any infection or recent biopsy?
- Finasteride or dutasteride?
- What is the person's risk context?

WHAT HAPPENS NEXT

A new abnormal result may be repeated

01

Review

History, medicines and recent events

→

02

Repeat

Confirm a newly elevated PSA

→

03

Assess

Consider risk and other findings

→

04

Discuss

Further tests if warranted

NCI describes repeat testing after 6–8 weeks for some asymptomatic screening results. Your clinician decides the timing.

SELECTIVE TESTS

Persistent elevation can lead to more evaluation

ADDITIONAL INFORMATION

Previous PSA results
Clinical examination
Blood or urine biomarkers

WHEN INDICATED

Prostate imaging
Prostate biopsy

The choice depends on risk and what a result would change.

CHECK YOUR UNDERSTANDING

Pause: what does a high PSA tell you?

A **Prostate cancer is confirmed**

B **A signal needs clinical context**

Choose one before the next slide.

THE ANSWER

B: the result needs context

PSA measures a protein in blood.

A higher value can arise from several conditions.

A clinician determines whether repeat testing or further evaluation is appropriate.

THE CONVERSATION

Four useful questions for the appointment

01 What was my earlier PSA, if any?

02 Could timing or medication affect this result?

03 Should we repeat the test, and when?

04 What would change if we order another test?

FACTBASEDUROLOGY

The test gives a clue.
Context gives it meaning.

Next in the series: how PSA results are interpreted over time

REFERENCES

Sources and visual credits

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