

Patient Name : Demo Patient Name
Age / Sex : 68 Y / M
Referred By : DEMO HOSPITAL
Centre : HOD Head Office

Lab No : Demo Visit No
Registration On : 20-Jan-25 16:44
Patient ID : UHID.DEMO.001

Free/Total PSA Ratio

Serum Sample

Accession No: DEMO_BARCODE **Collected On:** 20-Jan-25 16:44 **Received On:** 21-Jan-25 12:21 **Approved On:** 21-Jan-25 14:04

Observation	Result	Unit	Biological Ref. Interval	Method
Free Prostatic Specific Antigen	1.60	ng/mL	0.04 - 0.50	CLIA
Total PSA	11.0	ng/mL	0-4	CLIA
% Free PSA Ratio	14.55	%		Calculated

Reference Interval:

Probability (95% C.I.) of finding Prostate Cancer on Needle Biopsy

%fPSA = fPSA/Total PSA

%fPSA	50-59 years	60-69 years	>=70 years
</=10	56.0 (29.2-71.6)	70.5 (56.5-81.5)	72.0 (56.0-83.8)
11-18	31.0 (18.6-47.0)	45.8 (35.9-56.1)	47.6 (35.4-60.1)
19-25	27.9 (14.8-46.3)	42.1 (28.2-57.4)	43.8 (29.5-59.3)
>25	11.2 (4.36-26.0)	19.2 (9.05-36.2)	20.3 (9.63-37.9)

Clinical Significance of Free PSA:

- Total PSA comprises of complexed PSA and uncomplexed or free PSA. It was noticed in some studies that the proportion of free PSA was significantly higher in patients with BPH than in patients with prostate cancer.
- The free PSA fraction (free PSA divided by total PSA) is considered a better indicator of the risk predictability marker for prostatic cancer as compared to only total PSA values. Higher total PSA levels and lower percentages of free PSA are associated with higher risks of prostate cancer. When total PSA is in the range of 4.0-10.0 ng/mL, a free:total PSA ratio < or =0.10 indicates 49% to 65% risk of prostate cancer depending on age; a free:total PSA ratio >0.25 indicates a 9% to 16% risk , of prostate cancer, depending on age.
- PSA occurs in three major forms in circulation, total PSA, complexed PSA and uncomplexed free PSA. It was noticed in some studies that the proportion of free PSA was significantly higher in patients with benign prostate hyperplasia (BPH) than in patients with prostate cancer. Using Immunometric assays, if PSA has been found to comprise a significantly smaller fraction in patients with untreated prostatic cancer than in patients with benign prostatic hypertrophy. In men with borderline S. PSA levels comparing total PSA levels to Free PSA fractions has been proposed as a way to facilitate discrimination between cancer and BPH.

Remarks: Please correlate results with clinical conditions.



This is a Demo Signature
and the doctor's signature should appear here

In case of any unexpected or alarming results, please contact us immediately for re-confirmation, clarifications, and rectifications, if needed.

