

KOS Diagnostic Lab

(A Unit of KOS Healthcare)



Dr. Vinay Chopra
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NAME : Mr. JAI DAYAL SACHDEVA

AGE/ GENDER : 82 YRS/MALE PATIENT ID : 1593495

COLLECTED BY : REG. NO./LAB NO. : 012408270058

 REFERRED BY
 : 27/Aug/2024 05:23 PM

 BARCODE NO.
 : 01515828
 COLLECTION DATE
 : 27/Aug/2024 05:27 PM

 CLIENT CODE.
 : KOS DIAGNOSTIC LAB
 REPORTING DATE
 : 27/Aug/2024 07:24 PM

CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Test Name Value Unit Biological Reference interval

TUMOUR MARKER

PROSTATE SPECIFIC ANTIGEN (PSA) - TOTAL

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5.19^H ng/mL

SERUM

by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)

INTERPRETATION:-

Expected Values for the PSA	
Smokers	< 4 ng/ml
Non-smokers	< 4 ng/ml

- 1.Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland.
- 2. Normally, very little PSA is secreted in the blood.

INCREASED:-

- 1.Increased in glandular size and tissue damage caused by benign prostatic hypertrophy.
- 2.Prostatitis
- 3. Prostate cancer may increase circulating PSA levels.
- 4.In patients with previously diagnosed prostate cance, PSA testing is advocated as an early indicator of tumor recurrence and as an indicator of response to therapy.

The test is also useful for initial screening for prostate cancer:-

- 1. Total PSA levels < 2 ng/ml almost rule out the possibility of prostatic malignancy.
- 2.Total PSA levels between 2 and 10 ng/ml lie in the grey zone. Such values may be obtained in prostatitis, benign hyperplasia and malignancy. Further testing including a free PSA/PSA ratio and prostate biopsy is recommended for these patients for confirmation of the diagnosis.

 3.Total PSA values >10 ng/ml are highly suspicious for prostate cancer but further testing, such as prostate biopsy, is needed to diagnose the exact pathology.

*** End Of Report ***



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