

# Prostate-Specific Antigen, Total

## CPT Code:

**Prostate-Specific Antigen, Total:** 84153

**Prostate-Specific Antigen, Total with reflex to Prostate-Specific Antigen, Free:** If Total PSA is >4.000 ng/mL and <10.000 ng/mL, then PSA Free will be performed at an additional charge (CPT code: 84154).

## Order Code:

**Prostate-Specific Antigen, Total:** C154

**Prostate-Specific Antigen, Total with reflex to Prostate-Specific Antigen, Free:** C512

**ABN Requirement:** No

**Synonyms:** PSA; TPSA

**Specimen:** Serum

**Volume:** 0.5 mL

**Minimum Volume:** 0.2 mL

**Container:** Gel-barrier tube (SST, Tiger Top)

## Collection:

1. Collect and label sample according to standard protocols.
2. Gently invert tube 5 times immediately after draw. DO NOT SHAKE.
3. Allow blood to clot 30 minutes.
4. Centrifuge for 10 minutes.

**Special Instructions:** Samples should not be taken from patients receiving therapy with high biotin doses (>5 mg/day) until at least 8 hours following the last dose. Samples should be collected prior to a patient receiving a digital rectal exam.

**Transport:** Store serum at 2°C to 8°C after collection and ship the same day per packaging instructions included with the provided shipping box.

## Stability:

**Ambient (15-25°C):** 24 hours

**Refrigerated (2-8°C):** 5 days

**Frozen (-20°C):** 6 months

**Causes for Rejection:** Samples which are heat-inactivated; specimens other than serum; improper labeling; samples not stored properly; samples older than stability limits

**Methodology:** Electrochemiluminescence Immunoassay (ECLIA)

**Turn Around Time:** 1 to 3 days

**Reference Range:**

Age	ng/mL
All Ages	≤4.000

**Clinical Significance:** Elevated serum PSA concentrations have been reported in men with prostate cancer, benign prostatic hypertrophy, and inflammatory conditions of the prostate.

**Limitations:** In rare cases, interference due to extremely high titers of antibodies to analyte-specific antibodies, streptavidin or ruthenium can occur.

*The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.*