[Clinic Name]
[Clinic Address]
[City, State, Zip Code]
[Phone Number]

[Date]

[Patient Name]
[Patient Address]
[City, State, Zip Code]

Dear [Patient Name],

We are writing to provide you with the results of your recent baseline Prostate Specific Antigen (PSA) blood test performed on [Date of Test].

Your PSA Level: [Insert Result] ng/mL

A baseline test is used to establish your current PSA level, which will serve as a point of comparison for future tests. This helps us monitor any changes in your prostate health over time.

Clinical Assessment:
[ ] Your result is within the expected range for your age group.
[ ] Your result is slightly elevated and requires a follow-up consultation.
[ ] Further diagnostic testing is recommended.

It is important to remember that PSA levels can be influenced by various factors, including age, recent physical activity, certain medications, or non-cancerous conditions like an enlarged prostate (BPH) or inflammation.

Next Steps:
[ ] No immediate action is required. We recommend a repeat test in [Number] months/years.
[ ] Please schedule an appointment with [Doctor Name] to discuss these results in detail.

If you have any questions or would like to schedule an appointment, please contact our office at [Phone Number].

Sincerely,

[Doctor/Provider Name]
[Clinic Name]