Disclaimer
The pathway map is intended to be used for informational purposes only. The pathway map is not intended to constitute or be a substitute for medical advice and should not be relied upon in any such regard. Further, all pathway maps are subject to clinical judgment and actual practice patterns may not follow the proposed steps set out in the pathway map. In the situation where the reader is not a healthcare provider, the reader should always consult a healthcare provider if he/she has any questions regarding the information set out in the pathway map. The information in the pathway map does not create a physician-patient relationship between Cancer Care Ontario (CCO) and the reader.
Target Population

- Prostate cancer patients who have completed primary treatment for prostate cancer and are without evidence of disease, but would potentially be candidates for further treatment if recurrence or new prostate cancer were detected.

Pathway Map Considerations

- Primary care providers play an important role in the cancer journey and should be informed of relevant tests and consultations. Ongoing care with a primary care provider is assumed to be part of the pathway map. For patients who do not have a primary care provider, Health Care Connect is a government resource that helps patients find a family doctor or nurse practitioner.
- Throughout the pathway map, a shared decision-making model should be implemented to enable and encourage patients to play an active role in the management of their care. For more information see Person-Centered Care Guideline and EBS #19-2 Provider-Patient Communication.
- Hyperlinks are used throughout the pathway map to provide information about relevant CCO tools, resources and guidance documents.
- The term ‘health care provider’, used throughout the pathway map, includes primary care providers and specialists, nurse practitioners, and emergency physicians.

* Note. EBS #19-2 is older than 3 years and is currently listed as ‘For Education and Information Purposes’. This means that the recommendations will no longer be maintained but may still be useful for academic or other information purposes.

Pathway Map Disclaimer

This pathway map is a resource that provides an overview of the treatment that an individual in the Ontario cancer system may receive.

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Patients who have completed prostate cancer treatment with surgery +/- subsequent radiation and PSA < 0.1ng/mL

Regular Follow-up Surveillance
Refer to EBS #26-4

Medical History

PSA Testing
• Every three months in year 1
• Every six months in year 2
• Annually thereafter

Recommendations for health promotion and disease prevention
Assessment areas to address can include (but are not limited to) diet, exercise, smoking status, alcohol, sun safety, mental health, sexual health and other informational needs
Refer to Guideline #19-5

Management of symptoms and side effects related to prostate cancer treatments
Refer to EBS #26-4 and Your symptoms matter – Prostate Cancer

Results

PSA ≤ 0.1 ng/mL
PSA is rising and is >0.1 ng/mL

Urologist
Proceed to Prostate Cancer Treatment Pathway Map (Page 7)

Patients who have completed external beam radiation, brachytherapy, or combined modality and PSA < 2ng/mL

Regular Follow-up Surveillance
Refer to EBS #26-4

Medical History

PSA Testing
• First test six months after treatment completion
• Every six months until end of year 5
• Annually thereafter

Recommendations for health promotion and disease prevention
Assessment areas to address can include (but are not limited to) diet, exercise, smoking status, alcohol, sun safety, mental health, sexual health and other informational needs
Refer to Guideline #19-5

Management of symptoms and side effects related to prostate cancer treatments
Refer to EBS #26-4 and Your symptoms matter – Prostate Cancer

Results

PSA ≤ 2 ng/mL
PSA is rising and is >2 ng/mL

Radiation Oncologist
Proceed to Prostate Cancer Treatment Pathway Map (Page 7)