

Family History Questionnaire for Common Hereditary Cancer Syndromes

Patient Name: _____ Date of Birth: _____ Age: _____

Please indicate if there is a **personal or family history** of any of the following cancers. If yes, then **indicate family relationship** and **AGE at diagnosis** in the appropriate column. Consider parents, children, brothers, sisters, grandparents, aunts, uncles, and cousins.

Example: Colon Cancer Brother 36 yrs Aunt 44 yrs Grandfather 65 yrs
Cousin 58 yrs

BREAST AND OVARIAN CANCER (HBOC)

			You (age of diagnosis)	Siblings / Children (age of diagnosis)	Mother's Side (age of diagnosis)	Father's Side (age of diagnosis)
Y	N	Breast cancer				
Y	N	Breast cancer in both breasts OR multiple primary breast cancers				
Y	N	Ovarian cancer				
Y	N	Male breast cancer				
		Are you of Ashkenazi Jewish descent? Please Circle:	YES / NO			

COLON AND UTERINE CANCER (LYNCH)

			You (age of diagnosis)	Siblings / Children (age of diagnosis)	Mother's Side (age of diagnosis)	Father's Side (age of diagnosis)
Y	N	Uterine (endometrial) cancer				
Y	N	Colon cancer				
Y	N	Gastric/stomach cancer				
Y	N	Ovarian cancer				
Y	N	Kidney/bladder/ureter, brain or small bowel cancer				
Y	N	10 or more colon polyps in a lifetime				

Y	N	Prostate Cancer (HBOC)				
Y	N	Melanoma (HBOC)				
Y	N	Pancreatic Cancer (HBOC/Lyn)				
Y	N	Other Cancers				

Patient's Signature: _____ Date: _____

HBOC - Personal or Family History (Derived from NCCN)

One person with: (out to 2nd degree)

- Breast CA (diagnosed ≤45)
- Ovarian CA, any age
- Male breast CA, any age
- Bilateral breast CA (1st cancer dx'd ≤50)
- Triple negative Breast CA (dx'd ≤60)

Two persons with: (out to 2nd degree)

- Breast Cancer (2 dx'd ≤ 50)

Three Persons with: (out to 2nd degree)

- Combination of breast/pancreatic any age

NOTE:

- A. Lower threshold for testing in Ashkenazi Jewish individuals.
- B. 3rd degree blood relative with breast cancer and/or ovarian cancer with 2 or more close blood relatives with breast cancer (at least 1 breast cancer dx'd at or under age 50) and/or ovarian cancer.
- C. Limited family structure (fewer than 2 female 1st or 2nd degree relatives living past age 45) may mask a mutation in a family

Lynch*- Personal or Family History (Derived from SGO)

One or Two persons with: (out to 2nd degree)

- Endometrial or Colorectal Cancer (1 diagnosed ≤50)
- CRC, endo, gastric, or ovarian cancer along with another Lynch associated cancer in the same individual
- Endo or CRC Cancer at any age & another Lynch* cancer dx'd under 50

Three persons with: (out to 2nd degree)

- Lynch* cancers with 1 being Endometrial or Colorectal, any age

*Endo, CRC, ovarian, stomach, brain, pancreas, small bowel, ureter/renal pelvis, biliary tract, sebaceous adenomas