

Questionnaire to Assess Your Inherited Breast Cancer Risk



This questionnaire will help determine if your family cancer history suggests that you could benefit from a genetic counseling & evaluation appointment. Answer all questions as best as you are able. If an answer is unknown, leave it blank.

Today's Date: _____

PATIENT INFORMATION

Full Name: _____ Date of Birth: _____

Questions About Your Risk for Hereditary Breast Cancer

When referenced below, "relatives" include parents, children/grandchildren, siblings/half-siblings, grandparents/great grandparents, aunts/uncles, great-aunts/great-uncles, cousins, on both mother's and father's side of the family.

SECTION 1

1. Have you or any relatives had any of the following? *If YES, check the relevant boxes below.*

Ovarian cancer (this also includes fallopian tube or primary peritoneal cancer)

Pancreatic cancer

Personally diagnosed with breast cancer at 65 or younger.

Triple negative (ER-/PR-/Her2-) breast cancer

Personally had metastatic Her2 negative breast cancer

Breast cancer at any age in a first degree relative (mother, sister or daughter)

Male breast cancer

Aggressive prostate cancer (at least Gleason 8) or metastatic prostate cancer

"Metastatic" = stage 4 cancer that has spread outside of the prostate and nearby lymph nodes. This does not include biochemical recurrence only.

Ashkenazi Jewish (Eastern European) ancestry with at least one individual in the family with breast or prostate cancer

A test result that suggests an inherited cancer risk in yourself or a blood relative

A test result refers to a genetic test done by BLOOD, SALIVA or TUMOR. EX: BRCA1, CHEK2, PALB2.

An uncommon cancer or tumor that can occur with an inherited breast cancer syndrome

Such as: adrenocortical carcinoma (adrenal gland tumor), rhabdomyosarcoma (cancer of the soft tissue or muscle), osteosarcoma (bone cancer) or choroid plexus carcinoma (brain tumor).

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YES. STOP. A genetics evaluation is recommended for you.

NO. GO to the next question.

2. Have you or any relatives had either of the following?

A breast cancer at age 50 or younger

Two cancers diagnosed in the same person, with one being breast cancer.

EX: breast and uterine cancers in an aunt. Please do not include one cancer that spread from one site to another.

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YES. STOP. A genetics evaluation is recommended for you.

NO. GO to the next question.

SECTION 2

Seeing clusters of certain types of cancer in a family may raise concern for a hereditary breast cancer. The next few questions will check for these clusters — only consider cancers that occur in people who are on the same side of the family, either your mother's side or your father's side separately. This means relatives who are all related to each other by blood, including yourself.

1. Is there a clustering of TWO people on the same side of the family, where ONE relative had BREAST CANCER and the OTHER relative had one of the following (especially if one was diagnosed at or under age 50)? If YES, check the relevant boxes below.

Example: paternal aunt with breast cancer and paternal cousin with uterine cancer at 49

Relative #1 had Breast cancer and Relative #2 had one of the following:

Breast cancer	Sarcoma	Prostate cancer
Colon or rectal cancer	Stomach cancer (especially if "diffuse")	Leukemia
Thyroid cancer	Uterine cancer	Brain tumor

YES. STOP. A genetics evaluation is recommended for you.

NO. GO to the next question.

2. Are there THREE or more people on the same side of the family with the SAME cancer type listed below? If YES, check the relevant box below.

Example: mother, maternal aunt and maternal grandmother with breast cancer.

Breast cancer	Colon or rectal cancer	Sarcoma
Uterine (endometrial) cancer	Thyroid cancer	Leukemia
Diffuse gastric (stomach) cancer	Brain tumor	

YES. STOP. A genetics evaluation is recommended for you.

NO. GO to the next question.

SECTION 3

Other non-cancerous growths can sometimes be seen with inherited breast cancer syndromes.

1. Do you or your health care provider have concerns that you or your relatives have any of the following non-cancerous growths?

Examples of non-cancerous growths include thyroid nodules/adenomas/goiters, gastrointestinal polyps, ganglioneuromas, rare skin findings such as trichilemmoma, oral papillomatosis, and facial papules, keratoses on hands/feet; very large head size.

YES. STOP. A genetics evaluation is recommended for you.

NO. A genetics evaluation is NOT recommended for you at this time.

Disclaimer

Criteria reflects national guidelines for genetic counseling referral for inherited breast cancer syndromes but does not assess risk for other cancer syndromes.

References

- National Comprehensive Cancer Network. NCCN Clinical Practice Guidelines in Oncology Genetic/Familial High-Risk Assessment: Breast/Ovarian, Version 3.2024 www.nccn.org
- USPSTF Statement: Risk Assessment, Genetic Counseling, and Genetic Testing for BRCA-Related Cancer. JAMA. 2019;322(7):652-665

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Meets criteria, referred
Meets criteria, referral declined
Meets criteria, already had genetic counseling
Does not meet criteria