

Questionnaire to Assess Your Inherited 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 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

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

Personally had metastatic Her2 negative breast cancer

Personally diagnosed with breast cancer at 65 or under

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

Basal cell skin cancer before age 30

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, MSH6, or IHC abnormal/MSI-high.

A concerning number or type of polyp(s) in the colon, rectum or small intestine

More than 10 pre-cancerous colon/rectal polyps (called "adenomas"), 2 or more hamartoma polyps, 5 or more serrated polyps, or multiple polyps of gastrointestinal (GI) tract.

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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?

Please do not include cervical, testicular and basal cell/squamous cell skin cancers.

A cancer at age 50 or younger

Two cancers diagnosed in the same person.

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.

3. Have you or any relatives had an uncommon cancer, tumor, or feature that can occur with an inherited cancer syndrome? If YES, check the relevant boxes below.

Rare forms of thyroid cancer (medullary, cribriform-morular variant)

Adrenal gland tumors (adrenocortical carcinoma, pheochromocytoma)

Paranglioma

Rhabdomyosarcoma (soft tissue/muscle tumor)

Choroid plexus carcinoma (brain tumor)

Retinoblastoma of eye

Osteomas (bony jaw cysts)

Desmoid tumor

Hepatoblastoma of liver

Parathyroid adenoma (before age 30)

Clustered marks on the retina sometimes referred to as "bear tracks" or CHRPE

Born with extra teeth (beyond wisdom teeth)

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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 cancer condition. 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. Are there THREE or more instances of the following cancers clustering on the SAME side of the family? This can include multiple cancers in the same individual that are not metastases.
If YES, check the relevant boxes below.

Example: paternal aunt with colon cancer, paternal uncle with prostate cancer, paternal cousin with uterine cancer

Breast cancer	Sarcoma	Small bowel/Intestine cancer
Uterine cancer	Kidney cancer	Ureter cancer
Colon or rectal cancer	Gallbladder cancer	Bladder cancer
Prostate cancer	Cholangiocarcinoma	Tumor of the oil gland or hair follicle in the skin (not including skin cysts)
Thyroid cancer	Hepatobiliary cancer	"The technical name for this tumor type is sebaceous adenoma/ carcinoma or keratoacanthoma"
Melanoma	Brain cancer or tumor	
Leukemia	Stomach cancer	

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?
If YES, check the relevant box below.

Please do not include cervical, testicular and basal cell / squamous cell skin cancers.

Example: mother, maternal aunt and maternal grandmother with lymphoma.

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 cancer syndromes.

1. Are there TWO close relatives on the same side of the family with parathyroid adenomas and/or pituitary adenomas?

2. 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.

References

- National Comprehensive Cancer Network. NCCN Clinical Practice Guidelines in Oncology Genetic/Familial High-Risk Assessment: Breast and Ovarian, Version 3.2024. www.nccn.org.
- National Comprehensive Cancer Network. NCCN Clinical Practice Guidelines in Oncology Genetic/Familial High-Risk Assessment: Colorectal, Version 2.2023. www.nccn.org.
- USPSTF Statement: Risk Assessment, Genetic Counseling, and Genetic Testing for BRCARelated Cancer. JAMA. 2019;322(7):652-665
- Hampel H, et al. A practice guideline from the American College of Medical Genetics and Genomics and the National Society of Genetic Counselors: referral indications for cancer predisposition assessment. Genet Med. 2015 Jan;17(1):70-87.

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