

HEREDITARY CANCER RISK ASSESSMENT FORM

Patient's Name: _____

Today's Date: _____

Date of Birth: _____

Have you **and/or** a close blood relative (**father, mother, brother, sister, child, uncle, aunt, grandfather, grandmother, nephew, niece**) had any of the following:

PLEASE CIRCLE Y or N BELOW FOR ALL THAT APPLY:

Cancer Family History			SELF	Which relative(s) was diagnosed with cancer?		Age at Diagnosis
				Mother's Side	Father's Side	
Y	N	Breast cancer diagnosed BEFORE AGE 50				
Y	N	3 Breast cancers on the same side of the family AT ANY AGE				
Y	N	Ovarian or Pancreatic cancer diagnosed AT ANY AGE				
Y	N	1 Colon and/or Uterine cancer diagnosed BEFORE AGE 50?				
Y	N	3 or more Colon and/or Uterine cancers on the same side of the family AT ANY AGE				

Please circle any other cancers in the family: PROSTATE MELANOMA GASTRIC Age at Diagnosis _____

Patient Signature: _____ Which Provider are you seeing today? _____ Insurance Plan: _____

PLEASE SEE REVERSE SIDE

Please complete if you are FEMALE and NEVER had breast cancer

- Your current height (ft/in) _____ Your current weight (lbs) _____
- Your menopausal status; please circle
Pre-menopausal
Peri- menopausal (time before menopause marked by irregular cycles)
Post- menopausal: Age of onset _____
(permanent cessation of period for 12 months or longer)
- Your age at time of first menstrual period _____
- Your age at time of first live birth _____
- Did you ever use Hormone Replacement Therapy? Yes No
- If yes, type: Combined Estrogen only Progesterone only Unknown
- If yes, are you a: Current user: How many years ago did you start? _____
Intend to use for _____ more years
- Past user: How many years ago did you stop using? _____
- Have you ever had a breast biopsy? Yes No
- If yes, do you know your diagnosis? _____
- Number of daughters _____ Number of sisters _____
- Number of maternal aunts (mother's sisters) _____
- Number of paternal aunts (father's sisters) _____

- 1 family member with ovarian or pancreatic cancer at any age (rare)
- 1 family member with cancer dx under 50 (young)
- 2 family members (same side) with one dx under 50 (young)
- 3 family members (same side) dx at any ages (multiples)
- Triple Negative Breast Cancer (TNBC) dx under 60
- Male breast cancer (rare)
- Ashkenazi Jewish descent (1 in 40 carry mutation)