# The Cancer Genetics Program – Screening Tool

<table>
<thead>
<tr>
<th>Check (√)</th>
<th>If Yes</th>
<th>If Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Do you or a close family member have any of the following?</strong></td>
<td><strong>If you answer YES to any of these questions or if you have a family history that concerns you contact us at 937-641-3800 to schedule an appointment. We provide genetic counseling services for children AND adults.</strong></td>
<td><strong>Do you or a family member have a mutation in a gene causing increased risk for cancer?</strong></td>
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## BREAST CANCER
- Breast cancer at age 45 or under
- 2 diagnoses of breast cancer in one person
- Triple negative breast cancer < age 60
- 2 people on the same side of the family with breast cancer with one of them diagnosed under age 50
- 2 affected people on the same side of the family 1 with breast cancer and 1 with ovarian cancer
- 3 people on the same side of the family with breast or ovarian cancer at any age
- Male breast cancer at any age
- Breast cancer and Ashkenazi Jewish heritage

## FEMALE CANCER
- Ovarian cancer at any age
- Endometrial (uterine) cancer at age < 50
- Endometrial cancer + colon cancer on the same side of the family

## PANCREATIC CANCER
- 3 or more people on the same side of the family with any of the following cancers: pancreatic, ovarian, breast, melanoma, aggressive prostate, colon, or endometrial (uterine)
- 1 or more people with pancreatic cancer and Ashkenazi Jewish heritage
- 2 of the cancers in the list* below in 1 person

**LIST**: □ Pancreas □ Endometrial □ Ovarian □ Breast □ Melanoma □ Aggressive Prostate □ Colorectal

## COLON CANCER
- 5 of more colon polyps in childhood or at an early age
- 10 or more colon polyps in one person
- Colorectal cancer diagnosed < age 50
- 2 diagnoses of colorectal cancer in 1 person
- 2 of the cancers in the list** below in 1 person
- 2 people on same side of the family with cancer from the list** below with 1 diagnosed < age 50
- 3 people on the same side of the family with one of the cancers from the list** below

**LIST**: □ Colorectal □ Endometrial □ Ovarian □ Stomach □ Pancreas □ Ureter/Kidney □ Brain □ Small Intestine □ Biliary Tract

## GENETIC TESTING
- Do you or a family member have a mutation in a gene causing increased risk for cancer?