Alberta Health Services

Edmonton Medical Genetics Clinic
8-53 Medical Sciences Building
University of Alberta Hospital
Edmonton, AB T6G 2H7

Edmonton Hereditary Cancer Clinic Referral

Fax completed form to 780.407.6845
Phone 780.407.7333

Form must be complete, legible and include family history, & relevant patient pathology (if history of cancer). Incomplete referrals will not be processed.

Patient

Alberta Health Care #	Date of Birth *(yyyy-Mon-dd)*	Interpreter Required? ☐ No ☐ Yes, specify Language		
Last Name	First Name	Middle Initial	Gender ☐ Male ☐ Female	
Address	City/Town	Prov	Postal Code	Phone

Physician

Physician Name	Date of Referral *(yyyy-Mon-dd)*		
Physician Location/Facility/Address	Postal Code	Phone	Fax

Referral Details

☐ **Expedited / Urgent Referral** - Accepted **only** for impact on *immediate* cancer management **or** if patient is palliative. *Describe reason and required turn-around time*

Reason for Referral - *Please complete section A,B **or** C*

A. Blood relative with a <u>confirmed mutation</u> in a cancer susceptibility gene.

If known, specify gene _____ and program/ city where testing was done _____

Name of Relative_____ Relationship_____ ☐ Report Attached

B. Assess for specific hereditary cancer syndrome - *Page 2 must also be completed*

☐ Hereditary Breast/Ovarian Cancer (BRCA1, BRCA2)
☐ Lynch Syndrome (Hereditary Nonpolyposis Colorectal Cancer/HNPCC)
☐ Other, *specify*_____

C. Other personal/ family history suggesting inherited pattern of cancer - Please describe

Additional Information important to this Referral:

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** Ovarian cancer refers to invasive non-mucinous epithelial ovarian cancer; includes cancer of fallopian tubes or primary peritoneal cancer; excludes borderline or low malignant potential ovarian tumors.*

Hereditary Breast and/ or Ovarian Cancer (HBOC) *

Category A

- ☐ Personal history of breast cancer diagnosed at age 35 or younger.
- ☐ Personal history of more than one primary breast cancer; one diagnosed at age 50 or younger.
- ☐ Personal history of primary invasive epithelial ovarian/ fallopian tube/ primary peritoneal cancer at any age.
- ☐ Personal history of triple negative breast cancer (ER-ve, PR-ve, Her2-ve) diagnosed at age 60 or younger.
- ☐ Personal history of male breast cancer diagnosed at age 65 or younger.

Category B

- ☐ Personal history of breast and primary ovarian cancer*
- ☐ Personal history of breast cancer at age 50 or younger AND a family history of breast cancer at age 50 or younger.
- ☐ Personal history of breast cancer AND family members with breast cancer; one diagnosed at age 50 or younger.
- ☐ Personal history of breast cancer AND two family members with a pancreatic adenocarcinoma at any age.
- ☐ Personal history of male breast cancer diagnosed at any age, and a family history of breast or primary ovarian cancer*
- ☐ Personal history of breast cancer and family history of male breast cancer.
- ☐ Personal history of breast cancer at age 50 or younger AND a family history of breast cancer at age 50 or younger.
- ☐ Personal history of primary ovarian cancer* and a family history of breast and/or primary ovarian cancer*
- ☐ Personal history of pancreatic adenocarcinoma at any age AND 2 or more close relatives with breast/ primary ovarian*/ pancreatic cancer at any age.
- ☐ Personal history of breast or primary ovarian cancer* and Ashkenazi Jewish Ancestry.

☐ **Unaffected Individual** with a close family member meeting **Category B** above listed criteria. **Individuals unaffected by cancer are usually not eligible for genetic testing except where a mutation is already known.** Family history will be assessed to determine if/ what genetic services are available.

Lynch Syndrome (Hereditary Non-Polyposis Colorectal Cancer aka HNPCC)

Lynch syndrome related cancers include: colorectal, endometrial, ovarian, gastric, small bowel, gallbladder, bile duct, pancreatic, transitional cell tumour of kidney, ureter, or bladder, sebaceous gland neoplasm, glioblastoma.

- ☐ **Affected Individuals** with tumour immunohistochemistry (IHC) +/- Microsatellite Instablity suggestive of a germline mutation in the patient or deceased first degree relatives. Individuals meeting the Bethesda criteria possible Lynch Syndrome (eg. colorectal cancer or endometrial cancer at age 50 or younger) should first have IHC+/- Microsatellite Instability (MSI) testing on their tumor(s) by pathology. These tests can be requested from pathology by any physician/surgeon.
- ☐ **Affected or Unaffected Individual** with a close family history of three family members with colorectal cancer (Amsterdam I) OR colorectal PLUS related cancers as above (Amsterdam II), with at least 1 case at age 50 or younger. **Individuals unaffected by cancer are usually not eligible for genetic testing except where mutation is already known.** Family history will be assessed to determine if/what genetic serviced are available.