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# COLLECTING SUFFICIENT FAMILY HISTORY

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*Collect history that indicates family structure and manifestations of disease.*

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Most patient family history forms and EHR templates are not specific enough to allow you to assess for cancer risk appropriately. It is important to ask additional questions about any relatives who have been diagnosed with cancer to assess the potential for underlying genetic risk. A good tool can help structure your questioning.

## **PARTICIPANTS**

Provider, patient

## **WHAT YOU'LL NEED**

Family history collection tool

## **BARRIERS**

Lack of complete family history knowledge, misattributed family relationships (e.g., paternity), time

## **PRACTICE THIS SKILL**

[Web module on Collecting Family History](#)

## **LEARN MORE**

[Selecting and Evaluating Tools for Collection and Risk Assessment](#)

[ACS Understanding Your Pathology Report: Polyps](#)

## **STEPS**

- 1** Determine who is in the family. Include at least parents, children, siblings, grandparents, aunts/uncles and nieces/nephews on both the maternal and paternal side. Expand to more distant relatives, such as first cousins, when it will help clarify your risk assessment. Asking about additional relatives can be helpful in situations in which there is an unusual cancer history, such as a rare or single early-onset cancer, or where there is limited family history information on closer relatives. Asking about each individual is more effective than just asking if anyone in the family has had cancer.
- 2** Ask about all types of cancer history, not just CRC. Cancer syndromes can include risk for multiple types of cancers. CRC is not always a presenting cancer. Ask about age of onset, history of more than one cancer, whether cancer is multifocal (multiple primary foci of cancer in the same organ at the same time) or bilateral. Ask about detailed polyp history, including the total number of polyps removed, ages at removal, and polyp type.
- 3** Ask if any relatives have had genetic counseling and/or genetic testing.
- 4** Ask about ancestry and ethnicity. African American ethnicity may be considered a risk factor for CRC.