

Pedigree information - prerequisite for Hereditary Breast and Ovarian Cancer Counselling

For detailed counselling in our clinic we kindly ask you to provide us with information about your pedigree.
Please complete this questionnaire and send it back before your appointment or bring it with you to the clinic.

1. Please fill in the actual age of all your relatives even if they are not affected by cancer.

2. If one of your relatives is affected by cancer please add the age at diagnosis.

3. If one of your relatives died of cancer please add the age of death.

4. Please specify if one of your relatives is/was affected by ovarian or uterus cancer.

Relatives degree	Name	Date of birth	Actual age	Cancer	Age of diagnosis	Date of death
Consulter/Patient						
Children:						
Siblings:						
Mother:						
Father:						
Siblings of the mother:						

Relatives degree	Name	Date of birth	Actual age	Cancer	Age of diagnosis	Date of death
Children of the siblings of the mother:						
Siblings of the father:						
Children of the siblings of the father:						
Parents of the mother:						
Siblings of the mother's parents:						
Parents of the father:						
Siblings of the father's parents:						

Thank you very much!

Sincerely yours,
Center of Hereditary Breast and Ovarian Cancer at the Charité Berlin