

Cancer Genetics Risk Assessment

The Clinical Cancer Genetics Program at OHSU Knight Cancer Institute is designed to evaluate individuals to better understand their chance of having an inherited cancer syndrome. This service is provided by a board certified medical geneticist or board certified genetic counselor.



Cancer Genetics Consult:

- ◆ Review of personal and family history of cancer
- ◆ Review of hereditary basis of cancer
- ◆ Individualized risk assessment (inherited mutation or development of cancer based on the family history)
- ◆ Recommendations for the appropriate screening
- ◆ Comprehensive review of genetic testing options
- ◆ In depth review of possible test results and the implications for medical management and family members
- ◆ Discuss risks and benefits of genetic testing

Comprehensive Genetic Testing Coordination:

- ◆ Results notification and interpretation
- ◆ Follow up result consultation available
- ◆ Discuss recommendations based on the test result
- ◆ Test result and detailed letter sent to patient and referring provider
- ◆ Information for support services (if needed)
- ◆ Letter for the patient to share with family members (if positive)

Who Should Be Tested?

It is ideal to begin testing in a family with the family member diagnosed with cancer/polyps or the most closely related living relative to the affected family member. Most families with an inherited cancer syndrome have one or more of the following:

- ◆ Cancer diagnosis under age 50
- ◆ Triple negative breast cancer under age 60
- ◆ Rare cancers
- ◆ Ovarian cancer
- ◆ Paraganglioma
- ◆ Male breast cancer
- ◆ Pheochromocytoma
- ◆ Medullary thyroid cancer
- ◆ Adrenocortical carcinoma
- ◆ Multiple family members diagnosed with the same type of cancer or related cancers (i.e., breast and ovarian, breast and pancreas, colon and uterine, 2 primary colon cancers)
- ◆ Individuals with multiple GI tract polyps (>10) or rare colon polyps (Peutz-Jegher polyps, juvenile polyps)
- ◆ Ashkenazi Jewish ancestry and breast or ovarian cancer at any age
- ◆ Individuals with pathology indicating a possible inherited cancer syndrome**

**i.e., MSI-High or MLH1, MSH2, MSH6, or PMS2 missing on IHC; BRCA gene mutation detected on tumor profiling

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