



Women's Medicine Collaborative

A program of The Miriam Hospital

Lifespan. Delivering health with care.™

Genetic Counseling
146 West River Street, Providence, RI 02904

3rd Floor ~ Suite 11-D

401 793-7410

Fax: 401 793-7988

Back Line for Physician Office Use: 401 793-7485

Genetics Evaluation Referral Form

Fax with any pertinent records and lab/test results to: (401) 793-7801 ~ Thank you.

PATIENT _____ DOB _____ / _____ / _____

ADDRESS _____

PHONE Home _____ Cell _____ Work _____

May we leave a message stating the call is from "Women's Medicine Collaborative" or "Genetics Office at WMC"? Yes No

PRIMARY INSURANCE _____ ID# _____

SECONDARY INSURANCE _____ ID# _____

REFERRING PROVIDER _____ PHONE _____ FAX _____

Authorization obtained? No Yes - Authorization # _____

Translator needed? No Yes - Language Spoken: _____

REASON FOR REFERRAL: _____

Personal/Family History of Genetic Disorder – congenital anomalies, neurological diseases, endocrine diseases, intellectual disability. If yes, please specify: _____

Recurrent miscarriages > 3

BREAST CANCER

- Triple negative (ER-, PR-, HER2-) breast cancer
- One (1) or more first, second, or third degree relatives with breast cancer before age 50 or a first, second, or third degree relative with epithelial ovarian/fallopian tube/primary peritoneal cancer at any age
- Two (2) or more first, second, or third degree relatives with breast cancer and/or pancreatic cancer at any age
- Breast cancer before age 50
- Bilateral breast cancer or ovarian cancer at any age
- Breast and ovarian cancer in the same individual at any age
- Male breast cancer at any age
- Ashkenazi (European) Jewish ancestry in an individual with breast or ovarian cancer at any age
- Relatives of a BRCA mutation carrier

HEREDITARY COLORECTAL CANCER

Lynch Syndrome/Hereditary Nonpolyposis Colorectal Cancer (HNPCC)

- Colorectal cancer before age 50
- Colorectal cancer before age 60 with IHC tumor testing results indicative of Lynch Syndrome
- Colorectal cancer with related diagnoses including endometrial, gastric, small bowel, ovarian, sebaceous adenomas, CNS/glioblastoma, hepatobiliary tract, pancreatic, & urinary tract with family history of colon cancer
- Colorectal cancer diagnosis with one or more first-degree relatives with a Lynch Syndrome related cancer, with one relative being diagnosed
- Colorectal cancer before age 50, affected first and second degree relatives with a Lynch Syndrome related cancer, regardless of age

Familial Adenomatous Polyposis (FAP)/Attenuated Familial Adenomatous Polyposis (AFAP)/MYH-associated Polyposis (MAP)

- Greater than 10 adenomas in the same individual
- Multiple gastrointestinal hamartomatous polyps or hyperplastic polyps
- Congenital hypertrophy of retinal pigment epithelium (CHRPE)
- Osteomas, supernumerary teeth, odontomas
- Presence of extra-colonic cancers including intra-abdominal desmoids, epidermoid cysts, small bowel polyps/cancer, duodenal or periampullary cancer, gastric cancer, papillary thyroid cancer, gastric fundic gland polyps

OTHER CANCER SUGGESTIVE OF A HEREDITARY CANCER

- Astrocytoma
- Hemangioblastoma
- Neuroendocrine tumor
- Sarcoma
- Bilateral renal cell carcinoma
- Medullary thyroid cancer
- Pheochromocytoma