



# Family History Questionnaire

## Clinical Genomics

This form collects information that is not part of the medical record. **Discard after use.**

You have been scheduled to meet with a genetic counselor. At the beginning of your appointment, you will be asked for detailed information about your family members. To prepare for this, complete both pages of this form to the best of your ability and bring it to your appointment.

### Patient Information

Mayo Clinic Number	Patient Name <i>(First, Middle, Last)</i>	Birth Date <i>(Month DD, YYYY)</i>
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### Children and Siblings (indicate if half sibling)

Relative	How Many	If Living, Current Age(s)	If Deceased, Age(s) at Death
Daughters			
Sons			
Sisters			
Brothers			

### Maternal Family

Relative		If Living, Current Age	If Deceased, Age at Death
Patient's Mother			
Grandmother (mother's mother)			
Grandfather (mother's father)			
	How Many	If Living, Current Age(s)	If Deceased, Age(s) at Death
Aunts (mother's sisters)			
Uncles (mother's brothers)			

### Paternal Family

Relative		If Living, Current Age	If Deceased, Age at Death
Patient's Father			
Grandmother (father's mother)			
Grandfather (father's father)			
	How Many	If Living, Current Age(s)	If Deceased, Age(s) at Death
Aunts (father's sisters)			
Uncles (father's brothers)			

Mayo Clinic Number	Patient Name (First, Middle, Last)
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In the chart below list your relatives who have been diagnosed with conditions **related to the referral**. Include the specific diagnosis and the age at the time of diagnosis. If you or a family member has completed genetic testing, a copy of test results will be helpful in your appointment. Indicate if relatives are maternal (on your mother's side of the family) or paternal (on your father's side of the family). If you have questions regarding this form, call 507-284-8198.

Relative's First Name	Relationship to You	Status	Current Age or Age at Death	Diagnosis	Age of Diagnosis
<i>Example: Jane</i>	<i>Maternal Aunt</i>	<input checked="" type="checkbox"/> Living <input type="checkbox"/> Deceased	85	<i>Left breast (ductal carcinoma in situ)</i>	54
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