

# MY FAMILY CANCER HISTORY



Name: \_\_\_\_\_  
 Ethnicity: \_\_\_\_\_  
 Side: (circle one) Paternal / Maternal

Include first-degree relatives (parents, children and full siblings) and second-degree relatives (grandparents, aunts/uncles, nieces/nephews and half-siblings).

Relationship:	Type of cancer:
Age at diagnosis:	Ethnicity:
Genetic testing results:	
Additional cancer diagnoses:	
Additional information:	

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