Mapping your family's health history







Family Health History

Inherited Cancers Australia empowers individuals to understand and assess their hereditary cancer risk by providing support, information and tools.

A crucial step in this process is mapping out your family health history. It involves collating information from both maternal and paternal sides, including grandparents, parents, siblings, and other close relatives. By considering the full picture of your family's medical history, you'll gain a more accurate understanding of your personal lifetime risk and be better equipped to make informed decisions about your health.

Mapping Tips

For everyone in your family that you investigate, make sure you write down the following details: their name/initials, date of birth/death, any form of cancer they've had (breast, gynaecological [ovarian], bowel, prostate or pancreatic cancer) and the age at which their cancer commenced.

Remember that exploring family health history can be a delicate and sensitive topic requiring empathy, respect, and understanding when discussing with relatives. Take charge of your health by investigating your family health history, seeking expert medical advice, staying informed, and making proactive choices.

Let's start mapping



2. FATHER'S SIDE



1. MOTHER'S SIDE

Your Grand	mother	Your Grandmother		
Initials:	DOB/DOD:	Initials: DOB/DOD:		
Diagnosis and	Age at diagnosis:	Diagnosis and Age at diagnosis:		
Your Grand	father	Your Grandfather		
Initials:	DOB/DOD:	Initials: DOB/DOD:		
_	Age at diagnosis:			
Your Mothe	r	Your Father		
Initials:	DOB/DOD:	Initials: DOB/DOD:		
Diagnosis and	Age at diagnosis:	Diagnosis and Age at diagnosis:		
Mother's Sil	olings	Father's Siblings		
Initials:	DOB/DOD:	Initials: DOB/DOD:		
Diagnosis and Age at diagnosis:		Diagnosis and Age at diagnosis:		
Extra Notes:		Extra Notes:		
2 VOII				
3. YOU				
	· · · · · · · · · · · · · · · · · · ·	ust as important as that of your extended family here as you explore your family health history.		



4. YOUR SIBLINGS

•	any brothers or sisters, on this form as well.	make sur	e to update	e their ongoing health	
	DOB/DOD:		Initials:	DOB/DOD:	
	Age at diagnosis:			d Age at diagnosis:	
Initials:	DOB/DOD:		Initials:	DOB/DOD:	
Diagnosis and	Age at diagnosis:		Diagnosis and	d Age at diagnosis:	
5. FURTHI	ER FAMILY				
further degr	ees your family. Cousir For anyone that you ca	ns, great g	randparent	the health history from the s, great aunts and unclesit nformation about, record their	
Initials:	DOB/DOD:		Initials:	DOB/DOD:	
Diagnosis and Age at diagnosis:			Diagnosis and Age at diagnosis:		
Initials:	DOB/DOD:		Initials:	DOB/DOD:	
Diagnosis and Age at diagnosis:			Diagnosis and Age at diagnosis:		
EXTRA NO	DTES				