

FAMILY HISTORY WORKSHEET

Sarah Lawrence College Human Genetics Program
Center for Primary Care Education and Research, New York Medical College

CONDITION	Y/N	SPECIAL	OTHER INFORMATION	CONCERNS
Birth Defect	Y N	Sporadic vs. Recurrent	Malformation/Deformation/ Laterality of defect Other systems affected?	Recurrence Risk, Chromosomes Genetic syndrome, Maternal Substance Abuse Maternal Illness/Medication Use
Pregnancy Loss	Y N	Recurrent	Timing of loss, Abnormalities noted, # of relatives affected, closeness of relationships	Chromosomes Thrombophilias
Newborn death/stillbirth	Y N	Recurrent	Malformations Cause of Death	Recurrence Risk, Chromosomes Genetic syndrome, Metabolic Disorder
Infertility	Y N	Male vs. Female	Duration of infertility Work-ups completed, # of relatives affected, closeness of relationships	Chromosome Abnormalities (Klinefelters, Turners, mosaicism), Molecular Testing (Cystic Fibrosis-CBAVD, Fragile X-Premature Ovarian Failure) , Congenital Adrenal Hyperplasia
Vision/hearing problems	Y N		Lens dislocations, other health problems, Birth History (medications, infections) # of relatives affected, closeness of relationships	Mitochondrial Disorder (LHON) Collagen Disorders (Marfan) Retinoblastoma, Non-syndromic Hearing Loss
Muscular Problems	Y N	Male vs. female	# of relatives affected, closeness of relationships	Duchenne/Becker Dystrophy, Myotonic Dystrophy
Chronic Anemia	Y N	Ethnicity	Sickle Cell Anemia-Black Thalassemia-Mediterranean/Asian	Hemoglobinopathies

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Bleeding/ Clotting Problems	Y N		Hemophilias, Factor V Leiden, # of relatives affected, closeness of relationships	Coagulopathies- Thrombophilias
Developmental Delay/Mental Retardation	Y N	Global vs. Specific Male vs. Female	Unusual behaviors Eating problems, seizures, hearing, vision, other affected	Recurrence Risk, Chromosomes Molecular Testing (Fragile X, Prader- Willi Syndrome, Rett Syndrome)
Cancer	Y N	Breast/Ovarian Gastrointestinal Prostate, Pancreas, Endocrine	Onset, # of affected relatives, closeness of relationship, <i>site of cancer</i> Lifestyle issues	Predisposition syndromes BRCA1 and 2, HNPCC, FAP
Heart Disease	Y N		Onset, # of affected relatives, closeness of relationship, Lifestyle issues, <i>cholesterol</i>	Hypercholesterolemia, Marfan Syndrome Long QT Syndrome
Diabetes	Y N		Onset, # of affected relatives, closeness of relationship, Lifestyle issues	Mitochondrial Disorders
Chronic Infections	Y N		Recurrent Sinusitis, Pulmonary infections, Chronic Fatigue, Onset, # of affected relatives, closeness of relationship	Cystic Fibrosis, Hemochromatosis Immunofunction disorder
Memory Loss/ Dementia	Y N		Onset, # of affected relatives, closeness of relationship, Lifestyle issues	AD, ALS, Parkinson's, Alcoholism, schizophrenia
Skin changes	Y N		Café au lait spots, ashleaf spots, skin cancers, onset, # of affected relatives, closeness of relationship, Other health problems (seizures)	NF, Tuberous sclerosis
Asthma	Y N			

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PATIENT'S NAME: _____ AGE: _____ ETHNIC ORIGIN: _____

HAS ANYONE IN THE PATIENT'S FAMILY HAD ANY OF THE FOLLOWING?

CONDITION	Y/N		RELATIONSHIP TO PATIENT (CIRCLE ALL THAT APPLY)	AGE	SPECIFICS
Birth Defect	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	FATHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	
Pregnancy Loss	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	FATHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	
Newborn death/stillbirth	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	FATHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	
Infertility	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	FATHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	
Developmental Delay/Mental Retardation	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	FATHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	
Vision/hearing problems	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	FATHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	
Chronic Anemia	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	FATHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	
Cancer	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	FATHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	
Bleeding Problems	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	FATHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent	

HAS ANYONE IN THE PATIENT'S FAMILY HAD ANY OF THE FOLLOWING?

CONDITION	Y/N		RELATIONSHIP TO PATIENT (CIRCLE ALL THAT APPLY)	AGE	SPECIFICS
Heart Disease	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent		
Diabetes	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent		
Memory Loss Alzheimer's	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent		
Skin changes	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent		
Chronic Infections	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent		
Asthma	Y N	Self	MOTHER'S SIDE Parent Brother/Sister Aunt/Uncle Cousin Grandparent		

PEDIGREE-Physician to complete

