

Dear Patient:

Welcome to the Cancer Genetic Counseling Program and The Hartford HealthCare Cancer Institute at The Hospital of Central Connecticut's George Bray Cancer Center in New Britain, Connecticut. Enclosed is a packet of information for you. This includes directions to our office and a family history questionnaire.

I am looking forward to meeting you at our appointment on:

_____ at _____
Date Time

Please see below for some frequently asked questions:

Q. What should I do to prepare before my appointment? Do I need to bring anything?

A. Please complete the family history questionnaire form to the best of your ability and return it to our office *prior* to your appointment. For your relatives who have had cancer, include the cancer type and age at diagnosis. For *all* your relatives (children, siblings, parents, aunt, uncles, and grandparents), please provide their approximate age or their age at death. Sending in the form prior to your appointment is preferred, but not required. If you are not able to send it in prior, please bring it with you to your appointment. Please return the form by one of the following:

- 1) Email the form ---- sara.carroll@hhchealth.org
- 2) Fax the form ----- (860) 827-4181
- 3) Mail the form ----- Attn: Sara Carroll
The Hospital of Central Connecticut
Cancer Center
183 North Mountain Road
New Britain, CT 06053

****If you or your relatives have had cancer genetic testing previously, please bring a copy of the report.****

Q. What should I do when I arrive to the Cancer Center at The Hospital of Central Connecticut?

A. There is no charge for parking. When you arrive at the Cancer Center, you may ask for directions to Genetics by asking the information desk on the right, or you may proceed to the second floor by taking the stairs or elevator which is just behind the fireplace as you walk in. Once on the second floor proceed to the offices on the right, and go towards the first desk on the left for "Medical Oncology Specialty Care". The person at this desk will register you for the appointment and will notify the genetic counselor of your arrival.

Q. What will happen during my genetic counseling appointment?

A. When you arrive, and after you have checked in, you will watch a video on genetic counseling and testing. This video will provide an overview about genetic testing. After the video, you will meet with the genetic counselor to review your medical history as well as your family history on both sides of your family. We will address any concerns you may have about hereditary cancer and what the options are for genetic testing as well as your continued health care. If genetic testing is appropriate, it is typically done by a blood draw – please drink plenty of water and eat breakfast and/or lunch as you normally would. You do *not* have to be fasting for your appointment. In some cases, genetic testing may be performed by saliva sample.

Q. How long will the appointment take?

A. The appointment may take approximately 30-60 minutes. Completely filling out the family history questionnaire before your appointment will help to expedite your appointment.

Q. Is there a cost for the genetic counseling or testing?

A. At present, there is *no charge* for the genetics consultation. If appropriate, we will discuss the process of insurance authorization for genetic testing at your appointment. If testing is pursued, the laboratory will contact you if there is a cost prior to starting the testing; most insurance companies cover testing for those who meet the medical criteria. If you do not have health insurance, coverage of testing may be available through a financial assistance program.

Thank you for choosing The Hartford HealthCare Cancer Institute at The Hospital of Central Connecticut. We are looking forward to participating in your care. If you have any questions, need to cancel or reschedule your appointment, please call (860) 827-4185.

Sincerely,
Sara Carroll, MS, CGC / Kelly Genzlinger, MS, CGC / Linda Steinmark, MS, CGC
Cancer Genetic Counselors

DIRECTIONS

Cancer Genetic Counseling Program
183 North Mountain Road, New Britain, CT 06053

From I-84W (from Hartford)

Take exit 36 on the right for Slater Road. Turn right onto Slater Road and go 0.7 miles. At the end of the road, turn right onto CT-372/West Main Street. Go straight for 0.8 miles. After going under the highway, make a right at the light for JOURNEY Road. Drive all the way up the hill, and proceed straight to head to the front entrance of the hospital.

From I-84E (from Waterbury)

Take exit 34, on the right for Crooked Street. Make a left onto Crooked Street, going over the highway, and then turn right at the end of this road, at the Sunoco gas station, onto New Britain Avenue (CT-372E). Proceed 0.3 miles and just before the underpass of the highway, make a left at the light for JOURNEY Road. Drive all the way up the hill, and proceed straight ahead to the front entrance of the hospital.

From Route 72W (from Route 9)

Take exit 7 on the right for Corbin Avenue/CT-372. Make a right onto Corbin Avenue. Drive 0.1 miles and safely merge into the left lane. At the light, make a left onto CT-372/West Main Street. Follow this road for 1.1 miles. After going under the highway, make a right at the light for JOURNEY Road. Drive all the way up the hill, and proceed straight ahead to the front entrance of the hospital.

From Route 72E (Bristol, Terryville, Thomaston)

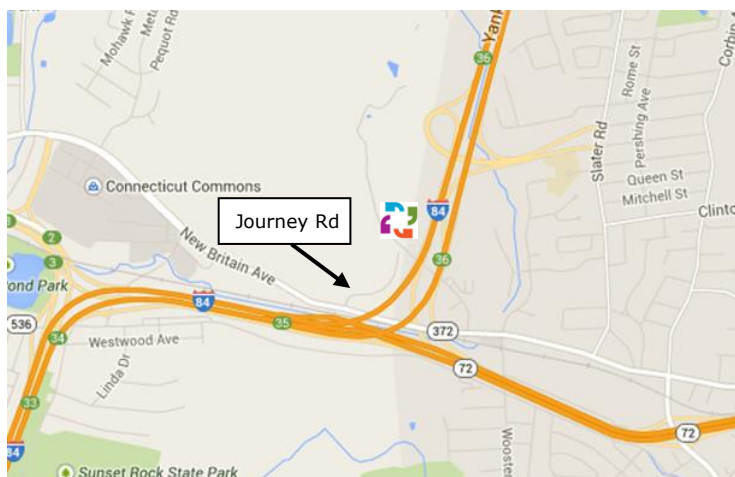
Stay to the right at the fork to continue on exits 3-4. Follow signs for I-84W/Waterbury/Woodford Ave. Keep right to continue on exit 3 and follow signs for Woodford Avenue. Turn left onto Woodford Avenue and go under the highways. Make your first left onto Crooked Street. At the end of this road, at the Sunoco gas station, turn right onto New Britain Avenue (CT-372E). Proceed 0.3 miles and just before the underpass of the highway, make a left at the light for JOURNEY Road. Drive all the way up the hill, and proceed straight ahead to the front entrance of the hospital.

Parking

There is no charge for parking at the Cancer Center.

George Bray Cancer Center

When you arrive at the Cancer Center, you may ask for directions to Genetics by asking the information desk on the right, or you may proceed to the second floor by taking the stairs or elevator which are just behind the fireplace as you walk in. Once on the second floor proceed to the right, and go towards the first desk on the left for "Medical Oncology Specialty Care". The person at the desk will register you for the appointment and will notify the genetic counselor of your arrival.



HEREDITARY CANCER GENETICS FAMILY HISTORY QUESTIONNAIRE

Please complete this form to the best of your ability.
Prior to your appointment return this form to the indicated location:

Hartford Hospital
Helen & Harry Gray Cancer Center
80 Seymour Street
Hartford, CT 06102
Attn: Cancer Genetics
Ph: (860) 972-6000
Fax: (860) 545-4657

The Hospital of Central Connecticut
George Bray Cancer Center
183 North Mountain Road
New Britain, CT 06053
Ph: (860) 827-4185
Fax: (860) 827-4181

MidState Medical Center
Medical Oncology
435 Lewis Avenue, #220
Meriden, CT 06451
Ph: (203) 238-7747
Fax: (203) 686-0282

Reproductive History (for Women)

Please check one

At what age did your periods begin (menarche)? _____
If applicable, at what age did your periods stop (menopause)? _____

Have you ever taken hormonal contraceptives (i.e., birth control pills)? **YES** **NO**
At what age did you start? _____
Taken for how many years? _____ continuously not continuously

Have you ever taken hormone replacement therapy (HRT)? **YES** **NO**
At what age did you start? _____ Taken for how many years? _____

Have you ever been pregnant? **YES** **NO**
How many times have you been pregnant? _____
How many children have you given birth to? _____
How old were you when you gave birth to your *first* child? _____

Have you had surgery to remove your uterus (hysterectomy)? **YES** **NO**
At what age? _____ Reason for surgery? _____

Have you had surgery to remove both ovaries (oophorectomy)? **YES** **NO**
At what age? _____ Reason for surgery? _____

Cancer Screening History

Have you ever had a breast biopsy? **YES** **NO**
How many breast biopsies have you had? _____
Results of the biopsy? benign atypical hyperplasia LCIS DCIS cancer

Have you ever had a colon exam (colonoscopy)? **YES** **NO**
How often do you have colon exams? _____
Have you ever had any colon polyps? **YES** **NO**
Age at first polyp: _____ Total number of polyps: _____
Type of polyp(s): hyperplastic adenomatous not sure other: _____

Have you ever had a skin (dermatology) exam? **YES** **NO**
How often do you have dermatology exams? _____
How many skin biopsies have you had? _____
Results of the biopsy? benign squamous basal cell not sure other: _____

Do you or have you ever smoked? **CURRENT** **FORMER** **NEVER**

Cancer History

Have you ever been diagnosed with cancer? **YES** **NO**
If yes, please list the type(s) or site(s) of cancer and your age at the time of diagnosis:

Please describe your cancer treatment (chemotherapy, radiation, surgery):

Cancer Institute

Family History

During your appointment, a genetic counselor will review the family history of cancer for your maternal and paternal relatives including siblings, half-siblings, nieces, nephews, aunts, uncles, cousins, grandparents and great-grandparents. Knowing the current ages, or age at death, cancer type, and age at cancer diagnoses for all your relatives is helpful in providing a cancer risk assessment.

Are you adopted?

Please check one

YES NO

Have you or anyone in your family had genetic testing for hereditary cancer?

YES NO

If yes, please explain or provide a copy of those results: _____

What is your ethnic background? (African-American, Ashkenazi Jewish, French-Canadian, Polish, Puerto Rican, etc)

Mother's family: _____ Father's family: _____

Please use the chart below to record ages of **ALL RELATIVES** in your family, including those who have not had cancer.

Relative (circle appropriate; include first name if desired)	Alive? Y/N	Current Age or age at death	Cancer? Y/N	Cancer Type (include colon polyps)	Age at Diagnosis	Comments (pathology, genetic test results, treatment, etc)	# of Children	
							Males	Females
Son / Daughter								
Son / Daughter								
Son / Daughter								
Son / Daughter								
Brother / Sister (full or half)								
Brother / Sister (full or half)								
Brother / Sister (full or half)								
Brother / Sister (full or half)								
FATHER								
Father's Brother / Sister								
Father's Brother / Sister								
Father's Brother / Sister								
Father's Brother / Sister								
Father's Father (Grandfather)								
Father's Mother (Grandmother)								
MOTHER								
Mother's Brother / Sister								
Mother's Brother / Sister								
Mother's Brother / Sister								
Mother's Brother / Sister								
Mother's Father (Grandfather)								
Mother's Mother (Grandmother)								
OTHER (e.g. paternal cousin)								
OTHER								
OTHER								
OTHER								

If additional space is needed, please feel free to use an extra page

