



**SpottingCancer**

SAVES LIVES

STEP

3

# Chart Family Cancer History

<https://www.spottingcancer.org>



**Cancer  
Detection  
Squad**

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# Chart Your Biological Family Cancer History

**Learn how to chart your family cancer history to know if you are at risk!**



Family members share the same genes. You cannot change your genetic makeup. Knowing your family history can help manage your long-term wellness.

Today it is estimated that 5 to 10 percent of all cancers are genetically related. To assist the medical team in evaluating you and deciding which tests and screenings you should have and at what age to start it is essential that they know your biological family cancer history. An interactive chart is provided below to record the information. Therefore, it is suggested that you chart your family cancer history using the interactive chart provided below to record the information and give it to your medical team and share it with all your family members.

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**[Click here to join the Cancer Detection Squad!](#)**

# Get To Know Your Family History

Going over your family medical history can help you understand your cancer risk and can even help you beat the disease. Get to know your history today!

- 1. Fill out the Biological **Family Cancer History Chart** for three biological generations. If you are adopted, ask your adoptive parents if they have any medical information from your biological parents.
- 2. Work with your biological family members to get accurate information such as which relative had cancer, how many times, age when each cancer was diagnosed, type of cancer, and how many years in remission. For any family member with a second diagnosis of cancer, the adjacent set of columns should be completed in order to record it separately. Any additional occurrences need to be completed in section two of the form.
- 3. Give a copy of your completed Biological Family History Chart to your medical team and family members.
- 4. Determine with your primary doctor if you will need special testing or monitoring. This should include specific information on the type of tests and screenings you should have, how frequently you should schedule them, including doctor visits.
- 5. Discuss pros and cons of genetic testing for you and your biological family.



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# What Do I Need To Do Next?

- 🔍 Be vigilant – Keep the plan developed by you and your medical team. Schedule doctor visits, screenings, and diagnostic tests.
- 🔍 Discuss with your medical team and genetic specialist if you and your family should participate in genetic testing.
- 🔍 Update the Family Cancer History Chart as necessary and share updates with your medical team and family.



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# Family Cancer History Chart

## Family Biological Cancer History Chart

Name \_\_\_\_\_

Date Last Updated \_\_\_\_\_



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YOUR BIOLOGICAL RELATIVES (NO STEP RELATIVES)	AGE AT DIAGNOSIS	CANCER BACK WITHIN 5 YEARS? (Y/N)	TYPE OF CANCER	AGE AT DIAGNOSIS	CANCER BACK WITHIN 5 YEARS? (Y/N)	(2 <sup>ND</sup> CANCER)
<b>You:</b>						
*Your Child 1:						
*Your Child 2:						
Your Sibling 1:						
You Sibling 2:						
<b>Your Mother:</b>						
Her Sibling 1:						
Her Sibling 2:						
Her Mother:						
Her Sibling 1:						
Her Sibling 2:						
Her Father:						
His Sibling 1:						
His Sibling 2:						
<b>Your Father:</b>						
His Sibling 1:						
His Sibling 2:						
His Mother:						
Her Sibling 1:						
Her Sibling 2:						
His Father:						
His Sibling 1:						
His Sibling 2:						
<b>Additional Biological Relatives:</b>						

\*If children have a different biological parent a separate parent form must be filled out for that child(ern).

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## Family Biological Cancer History Chart



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YOUR CHILD'S BIOLOGICAL PARENT <small>(RELATIVES ONLY, NO STEP RELATIVES)</small>	AGE AT DIAGNOSIS	CANCER BACK WITHIN 5 YEARS? (Y/N)	TYPE OF CANCER	AGE AT DIAGNOSIS	CANCER BACK WITHIN 5 YEARS? (Y/N)	(2 <sup>ND</sup> CANCER)
<b>You:</b>						
*Your Child 1:						
*Your Child 2:						
Your Sibling 1:						
You Sibling 2:						
<b>Your Mother:</b>						
Her Sibling 1:						
Her Sibling 2:						
Her Mother:						
Her Sibling 1:						
Her Sibling 2:						
Her Father:						
His Sibling 1:						
His Sibling 2:						
<b>Your Father:</b>						
His Sibling 1:						
His Sibling 2:						
His Mother:						
Her Sibling 1:						
Her Sibling 2:						
His Father:						
His Sibling 1:						
His Sibling 2:						
<b>Additional Biological Relatives:</b>						

\*If children have a different biological parent a separate parent form must be filled out for that child(ern).

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# Join the Squad!

Join the **Cancer Detection Squad** and together, we can build a lasting habit that will help you and your loved ones to *#SpotandSurvive*.

*The Cancer Detection Squad is a movement of people committed to reducing cancer deaths through early detection and timely treatment.*

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# Thanks for Reading!

Don't forget to also download our other guides to help you **#SpotandSurvive!**



Download the Spotting Cancer **Signs & Symptoms Guide** to learn what to look for. Knowing and spotting indicators of cancer early can save your life.

[Download Now](#)



Download the **Full Body Monitoring Guide** to learn how to monitor your entire body for changes.

[Download Now](#)



Download the **Screening and Testing Guide** to know the various screenings/testings necessary to help detect cancer early and save your life.

[Download Now](#)

## Get the Word Out! We Can Beat Cancer Together.

*The more resources we have the more we can spread our message. Help us, if you can, by donating yourself (every little bit helps) or helping to spread the word as a Spotting Cancer ambassador!*

[Donate To Support](#)



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**DISCLAIMER**  
None of the information on this booklet & website is meant to take the place of a comprehensive medical exam or substitute for screening/testing.

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