**Referring Physician Guide**

**High-Risk Program**

The high-risk program at **<INSERT YOUR INSTITUTION’S NAME>** offers counseling and testing for patients with cancer or

who are at an increased risk of certain cancers due to hereditary risk factors.

**How does a patient qualify for genetic counseling?**

The National Comprehensive Cancer Network (NCCN) guidelines help inform whether or not a patient meets genetic counseling criteria. Some examples of how a patient may meet criteria are:

* **Family history of cancer -** Having three or more relatives on the same side of the family with the same or related forms of cancer
* **Cancer at an early age -** Having two or more relatives diagnosed with cancer at an earlier age than what is common

* **Multiple cancers -** Having two or more types of cancer occurring in the same relative
* **Ashkenazi Jewish ancestry -** With a family history of breast, ovarian and pancreatic cancer

**What happens during a genetic counseling appointment?**

During their appointment, our genetics specialist will look at the patient’s comprehensive family and medical history to determine whether genetic testing needs to be ordered. The specialist will also discuss all the pathways your patient can take to reduce their cancer risk. This can include screening options such as MRI, nutrition and fitness programs, and types of preventative surgeries.

If a patient moves forward with genetic testing, the counselor will also meet with the patient to help them to understand their test results. After the visit, the counselor will send you a consultation note summarizing the visit and indicating referrals made or follow-up recommendations.

**How does the patient qualify for genetic testing?**

The following are some factors that may qualify a patient for hereditary breast and ovarian cancer (HBOC) genetic testing:

* **Family History:** A family member with a known BRCA1 or BRCA2 gene mutation
* **Personal History:** Breast cancer before age 50 and relative with a breast, pancreatic or prostate cancer diagnosis
	+ Diagnosed with triple negative breast cancer before age 60
	+ Diagnosed with breast cancer at any age with at least one relative diagnosed with breast cancer before age 50; More than two relatives diagnosed with pancreatic, prostate and breast cancer at any age; Or at least one relative with ovarian carcinoma
	+ A family or personal history of male breast cancer
* **Ashkenazi Jewish Ancestry:** With a family or personal history of breast, ovarian and pancreatic cancer

**What happens after the patient is tested?**

After the patient has completed genetic testing, the specialists will provide medical management recommendations based on their cancer risk and testing results. The specialist will have expertise in managing cancer risk caused by hereditary risk factors. They will also be able to provide recommendations for nutrition and wellness changes for patients whose cancer risk is compounded by lifestyle factors.

Upon test completion, the specialist will send the referring physician the patient’s test results and their recommendations for medical management. At this time, the specialist may request referrals for updated screening options the patient may qualify for.

**If the results are negative,** the nurse will call the patient with their results and provide a detailed explanation of what their results mean for their cancer risk. Some patients have negative test results but qualify for MRI screenings or increased mammogram screenings. The nurse will request new or updated referrals for the patient.

**If the results are positive** for a mutation that increases cancer risk, the nurse will notify the patient of their results and subsequently book an additional results disclosure appointment. During the appointment, the nurse will discuss the patient’s test results and expand on surveillance and care management options based on the patient’s results.

**What are the costs and insurance coverage for genetic testing?**

Typically, most health insurance companies will cover the appointment with a genetic counselor when the patient meets NCCN criteria. If the genetic counselor makes referrals for other services – including genetic testing – they will review fees and insurance issues with the patient.

**What does this mean for my practice?**

By knowing their cancer risk, your patients can take proactive steps towards reducing their risk and you will be able to make referrals to the right preventative services in a way that is minimally disruptive to your practice. For patients that are already diagnosed with cancer, genetic counseling and testing can inform treatment options. If you have patients that would be good candidates for genetic counseling or testing, you can refer them to our program.

If you have any further questions regarding the high-risk program, please contact the center at **<INSERT CONTACT NUMBER>**.