

Hereditary Cancer and Genetic Testing After a Cancer Diagnosis

Pre-Test Counselling Checklist

Understanding Hereditary Cancer

Hereditary cancer happens when a person has a specific genetic change (called a pathogenic variant or mutation) that increases their risk of developing certain cancers. Most cancers are not hereditary.

If genetic testing finds a pathogenic variant, other relatives may also have the same pathogenic variant (including close and extended family members).

Key Discussion Points

A genetic test is a blood (or saliva) test to see **if your patient's cancer is hereditary**.

Genetic test results may identify **additional primary cancer risks** for your patient.

Genetic test results may **guide the treatment** of your patient's cancer.

Genetic test results may have implications for **cancer risk in your patient's relatives**.

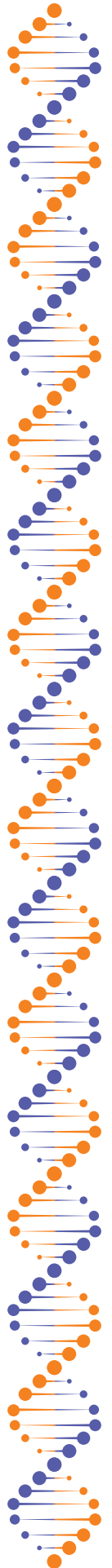
Genetic test results are **sometimes uncertain** (i.e. unknown if a variant is truly associated with why your patient developed cancer).

Genetic information is **protected** by the Genetic Non-Discrimination Act (GNDA July 2020).

Genetic testing is a choice. Not everyone wants to know about hereditary cancer risk. If your patient has many questions or wishes to speak with a genetic counsellor prior to deciding whether or not to have genetic testing, they can still be referred to clinical genetics. They should be aware that a referral to clinical genetics may mean a longer wait-time for their genetic test results.

Timeline

Genetic test results are usually available in _____ weeks after the blood (or saliva) sample is obtained.



Genetic Testing Outcomes



Positive: Pathogenic variant (mutation) detected. This likely explains why your patient has developed cancer. It also means that they might have an increased risk to develop other types of cancer.



Negative: No pathogenic variant (mutation) detected. This does not necessarily exclude an underlying hereditary predisposition. Medical recommendations should be made based on personal/family history of cancer.



VUS: Variant of uncertain clinical significance detected; cannot currently classify as pathogenic or benign. VUS results may be better understood or reclassified in the future. Medical recommendations should be made based on personal/family history of cancer.

Clinical Genetics Referral

Please discuss the genetic test results with the patient. In addition, provide them with a copy of their results and the appropriate handout (3 templates available separately):

Patients with _____ results should be offered an appointment with a genetic counsellor to ensure that results are reviewed with the patient and appropriate post-test follow-up occurs.

Patients with _____ results can be offered an appointment with a genetic counsellor at the request of the patient and/or healthcare provider.

Visit the [Canadian Association of Genetic Counsellors Website](http://www.cagc-accg.ca) for more information and resources, including a list of genetics clinics in Canada.

www.cagc-accg.ca

Developed by the Canadian Association of Genetic Counsellors

The content of this template handout pertains to constitutional (i.e. germline) genetic test results, and does not apply to somatic (i.e. tumour tissue) genetic test results.



Canadian Association of Genetic Counsellors
Association Canadienne des Conseillers en Génétique

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