**Case Study Template**: (for **ACGN** and **CGN**)

Patient: Use pseudonym to maintain privacy.

Date of Service:

Reason for Evaluation:

Personal Medical History:

Reproductive History: Include age of menarche, age of menopause or LMP, GPA, hormone use including contraceptives and fertility medications, breastfeeding history.

Screening History: Include breast, gyn, GI, skin and any other pertinent screening.

Social History: Includes relationship status, work history.

Exposure History and Lifestyle: Past and present tobacco, alcohol, drug use, diet, exercise, and possible occupational exposure.

Surgical History:

Family History: Narrative of family history including maternal and paternal family members affected with pertinent disease (cancer [including type], heart disease, etc.), and age of onset.

Family Pedigree: Three generation family pedigree including all known maternal and paternal relatives, current age, or age at death, indicate affected status, age at disease onset, consanguinity, ethnicity in each lineage, if known. **\*Please include a computer generated or drawn pedigree with each case study.**

Physical Exam (if applicable): Height, weight, OFC with centiles. Pertinent syndrome related findings documented

**FOR ACGN**: Differential Diagnosis:

Genetic Assessment: Summarize discussion with the patient regarding risk related to family history. Outline how risk would impact current medical care. Review discussion of impact of risk for other family members. Include patient feedback.

**FOR ACGN**: Discuss Genetic Testing Options:

**FOR ACGN**: Implementation: Provide counseling and obtain consent for genetic testing (if applicable). Summarize discussion with the patient about genetic test ordered, genes included, possible test results, testing process, how results will be disseminated. Provide appropriate patient resources.

**FOR CGN**: Implementation: Review plan for genetic testing – will the patient be referred for genetic counseling, is testing ordered through provider, etc. Summarize discussion with the patient about genetic test ordered, genes included, possible test results, testing process, how results will be disseminated. Provide appropriate patient resources.

Plan: Discuss the next steps in the process. Is testing taking place at this visit or does the patient want more time to consider? Is a sample being collected? What are plans for follow up? What is the patient’s reaction/response to plans for testing?

**FOR ACGN**: Evaluation: Evaluate the accuracy of the diagnosis and the effectiveness of the interventions and other variables in relation to the patient’s attainment of expected outcomes. After the visit, did you make outside referrals?

**FOR CGN**: Evaluation: Indicate how this interaction was documented. After the visit, did you make outside referrals? Was there collaboration regarding implementing the testing process. Detail any follow up after the patient visit.

Reflection: Why did you choose this case? Were there any ethical considerations with this patient and/or family? What were the challenges you faced with this case? How did you feel counseling this patient?