

Breast Cancer Risk Assessment Clinic Checklist

This resource was developed by the American Cancer Society National Breast Cancer Roundtable (ACS NBCRT) to support providers in conducting breast cancer risk assessment. This document outlines key steps and considerations for providers at different stages of the risk assessment process.

1. Introduce Risk Assessment and Collect Family History

- Use a risk assessment script, visuals, or handouts as needed.
- Discuss the purpose of risk assessment and its role in guiding screening and prevention.
- Record personal and three-generation family history of breast, ovarian, pancreatic, prostate, and related cancers (including ages at diagnosis of both maternal and paternal sides).
- Inquire about personal and first-degree relative history of a *BRCA1/BRCA2* gene mutation.
- Ask about having radiation therapy to the chest before age 30.
- Question about personal or first-degree relative history of breast cancer-associated genetic syndromes.
- Ask about history of benign breast disease, breast biopsies, and breast density.
- Assess hormonal and lifestyle-related risk factors (e.g., age at first period, menopause, hormone use, alcohol use, BMI).
- Classify the patient as high or average risk, based on history.
- Discuss using a validated risk assessment tool with those patients who cannot be classified as at high risk but have a history suggestive of possible hereditary breast cancer or have a personal history of certain benign breast conditions.

2. Apply a Validated Risk Assessment Tool (During or After the Visit)

- Use a validated risk assessment tool suitable for the patient's background.
- Categorize the patient's risk as average or high based on results.
- Document the tool used and results in the patient's medical record.

3. Share Risk Level, and Tailor Guidance

- Use scripts, visuals, or handouts if helpful.
- Explain the patient's risk level and implications for screening, breast specialist or genetic counseling referral, and, eventually, risk-reducing measures, including prophylactic surgery.
- Address concerns or misconceptions; engage in shared decision-making.
- Discuss a personalized screening plan.
- Refer to a breast specialist or genetic counselor if needed.
- Provide educational materials and follow-up contact information.
- Review family and personal history regularly for changes.

Resources

- See the digital toolkit <https://nbcrt.org/risk-assessment-toolkit/> for more breast cancer risk assessment resources.