WHEN TO COLLECT

Figure out when family history should initially be collected and assessed, and how often it should be updated.

Family history information by nature changes over time. Once collected, it is only valuable so long as it is an accurate representation of health and disease states among the patient’s family members. Your practice should establish a plan for how to collect an initial family history on existing patients and how to update the family history over time. To the degree possible, work with your practice to automate the steps so they are part of standard workflows and templates.

PARTICIPANTS
Implementation lead, staff involved in family history processes

WHAT YOU’LL NEED
Family history collection tool, knowledge of the type of information to collect

BARRIERS
Time, staff, infrastructure, IT

LEARN MORE
Collecting Sufficient Family History

STEPS

For initial collection

1 Include family history collection as a standard activity for all new patients entering the practice.

2 Determine how to best roll out your family history collection system to active patients in the practice, such as:
   • Incorporate it into preventive visits.
   • For patients that do not complete annual check-ups, run a report in the EHR to identify who has not participated and take action to include them (either through a separate appointment or adding family history collection into their next sick visit).
   • If your family history collection system does not center around an appointment with a provider, send a letter to patients and post flyers in the office advertising this new service for interested patients.

For updating

1 Encourage the patient to share changes to the family history over time, providing concrete examples, such as a new cancer diagnosis in a relative.

2 Update family history regularly. For adults aged 30-60 years, the family history should be updated annually in order to identify individuals that may benefit from increased cancer screening. It may be helpful to incorporate a standard question about updates to the family history as part of annual preventive visits, or setting a flag in the EHR to prompt updating the family history at the designated interval.

3 Ask about any new cancer diagnoses in the family when the patient presents with symptoms or concerns that may suggest cancer. For colorectal cancer, concerning signs or symptoms include blood in stool, anemia, and a change in bowel habits, among others.