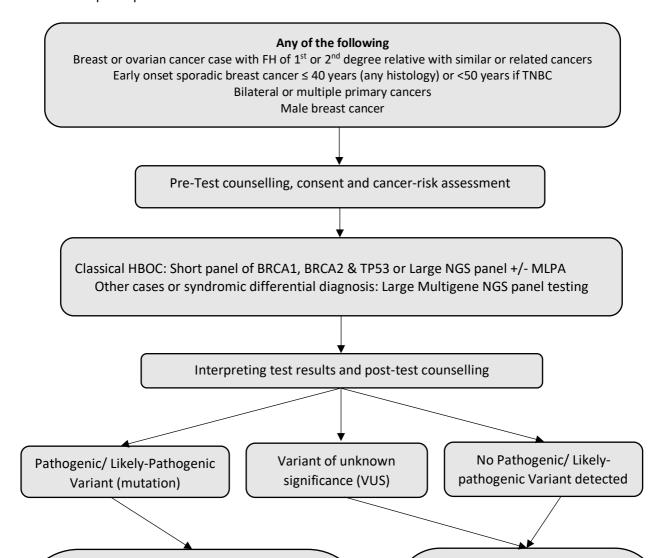
Guideline for testing and management of breast cancer patients with suspicion of hereditary cancer predisposition



Surveillance and prevention advice for Breast cancer patients with BRCA1/2 mutation:

- Monthly Breast Self-Examination
- Clinical breast examination every 6 months
- Bilateral MMG (or contralateral if MRM done) alternating with MRI annually. Annual MRI alone if breast is dense
- Risk reducing salpingo-oophorectomy (RRSO) at 35-40 years age and after completing family strongly recommended
- Option of contralateral Prophylactic Mastectomy with reconstruction to be discussed with its pros and cons
- Extended family testing of adult 1st degree relatives of BRCA mutation carriers
- Healthy female and male carriers identified in the family should be referred to high risk clinics for detailed counselling and advice regarding lifelong cancer screening and options of prophylactic surgery

Breast cancer patients with strong FH but no pathogenic or Likely Pathogenic mutation identified

- Characterize Variant and reclassify annually
- If required testing of additional genes and or MLPA test for BRCA1/2 or TP53
- Provide education & awareness on breast cancer and screening as for BRCA mutation carriers
- RRSO may be offered on a case to case basis after counselling
- Prophylactic contralateral mastectomy should not be considered in absence of pathogenic / likely pathogenic mutation