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**Project BRA**

**Breast Cancer Risk Assessment Workflow Analysis**

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| Step 1:Assess Family History | Location | Process | Responsible | Included in Organizational Protocol |
| Do you use a tool to collect family history? Yes / No |  |  |  |  |
| Assess cancers diagnosed in first- or second-degree relatives, including type of cancer and age of diagnosis. |  |  |  |  |
| How and when is family history documented and updated in the EMR? |  |  |  |  |

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| Step 2:Assess Personal History | Location | Process | Responsible | Included in Organizational Protocol |
| Assess hormonal risk factors:* Age of menarche/menopause
* Age at first live birth/nulliparity
* Exogenous hormone use
* Obesity
 |  |  |  |  |
| Assess radiographic breast density |  |  |  |  |
| Does the patient have a history of prior breast biopsy?  |  |  |  |  |
| How and when will this information be documented and updated in the EMR? |  |  |  |  |

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| Step 3:Choose a Risk Prediction Model | Location | Process | Responsible | Included in Organizational Protocol |
| Do you use a Risk Prediction Model tool to conduct risk assessments? Yes / No If so, which one?* NCI Gail Model
* Family history-based model- IBIS Tyrer-Cuzick
* Other
 |  |  |  |  |
| How and when will this information be documented and updated in the EMR? |  |  |  |  |

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| Step 4:Interpret Risk Assessment | Location | Process | Responsible | Included in Organizational Protocol |
| Who will interpret risk as *Average* or *High-Risk* to inform the screening strategy? |  |  |  |  |
| How are risk assessment results communicated to the patient? |  |  |  |  |
| How and when is a lifetime risk of >20% documented in the EMR? |  |  |  |  |

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| Step 5:Management | Location | Process | Responsible | Included in Organizational Protocol |
| Navigate referrals for screening/specialists:* Genetic counseling
* High-Risk clinic referral
* Radiographic screening
 |  |  |  |  |
| Do you recommend additional screening to women with a lifetime risk of >20%?Yes / No |  |  |  |  |
| How are referrals and follow-up with patients managed? |  |  |  |  |