

The pages below provide detailed clinical information for elevated cancer risk identified as part of this patient's testing. This information should only be used after confirming that it matches the patient's Genetic Test Result and should not be distributed or used to guide medical care independently of the Genetic Test Result.

RiskScore[®] at or above the 20% threshold



Associated Syndrome Name:
Remaining lifetime breast cancer risk estimated to be 20% or higher

RiskScore Summary Cancer Risk Table

CANCER	GENETIC CANCER RISK
Female Breast	Elevated Risk

RiskScore Overview

Remaining lifetime breast cancer risk estimated to be 20% or higher^{1,2,4,5}

- This woman has an estimated remaining lifetime risk for breast cancer at or above the 20% threshold based on RiskScore. This is the estimated risk of developing breast cancer from this woman's current age to age 85.
- RiskScore is partially based on the analysis of selected genetic markers known to have an impact on breast cancer risk. Although the level of risk associated with each individual marker is small, results from the combined analysis of multiple markers can have a significant impact on breast cancer risk estimates.
- The RiskScore estimate is also based on information about the woman's personal medical history and any history of breast and ovarian cancer in her relatives. The RiskScore estimate will be less accurate if any of the information that was provided is incomplete or incorrect.
- Currently there are no guidelines for the medical management of breast cancer risk in women based on RiskScore. However, it may be appropriate to consider options based on guidelines for other situations where the estimated remaining lifetime breast cancer risk is at or above the 20% threshold.

RiskScore Cancer Risk Table

CANCER TYPE	AGE RANGE	CANCER RISK	RISK FOR GENERAL POPULATION
Female Breast	Remaining lifetime risk ⁴ (age at time of testing to age 85)	See Genetic Test Result for personalized RiskScore estimate	See Genetic Test Result for estimate based on current age

RiskScore Cancer Risk Management Table

The overview of medical management options provided is a summary of professional society guidelines. The most recent version of each guideline should be consulted for more detailed and up-to-date information before developing a treatment plan for a particular patient.

This overview is provided for informational purposes only and does not constitute a recommendation. While the medical society guidelines summarized herein provide important and useful information, medical management decisions for any particular patient should be made in consultation between that patient and his or her healthcare provider and may differ from society guidelines based on a complete understanding of the patient's personal medical history, surgeries and other treatments.

CANCER TYPE	PROCEDURE	AGE TO BEGIN	FREQUENCY (UNLESS OTHERWISE INDICATED BY FINDINGS)
Female Breast	Currently there are no specific medical management guidelines for breast cancer risk based on RiskScore. However, the estimated remaining lifetime risk at or above the 20% threshold warrants consideration of risk-reduction strategies similar to those listed below, which are recommended for women with an estimated lifetime risk greater than 20% based on other risk prediction methods. ³	At age identified as being at increased risk	NA
	Breast awareness - Women should be familiar with their breasts and promptly report changes to their healthcare provider. ³	NA	NA
	Clinical encounter, including clinical breast exam, ongoing risk assessment and risk reduction counseling ³	At age identified as being at risk	Every 6 to 12 months
	Mammography, with tomosynthesis ³	40 years, or individualized to a younger age based on family history	Annually
	Breast MRI with and without contrast ³	40 years, or individualized to a younger age based on family history	Annually
	Consider additional risk-reduction strategies. ³	Individualized	NA

Information for Family Members

This patient has an estimated remaining lifetime risk of breast cancer greater than 20% based on the breast cancer RiskScore estimate, which includes both genetic and non-genetic factors that may be shared within the family. Female relatives of this patient may also be at a significantly increased risk for breast cancer and should consult with a healthcare provider to discuss their own risk.

References

1. Mavaddat N, et al. Prediction of breast cancer risk based on profiling with common genetic variants. J Natl Cancer Inst. 2015 107:djv036. PMID 25855707.
2. Michailidou K, et al. Genome-wide association analysis of more than 120,000 individuals identifies 15 new susceptibility loci for breast cancer. Nat Genet. 2015 47:3737-80. PMID: 2575625.
3. Bevers TB, et al. NCCN Clinical Practice Guidelines in Oncology®: Breast Cancer Screening and Diagnosis. V2.2025. Mar 28. Available at <http://www.nccn.org>.
4. Hughes E, et al. Development and Validation of a Clinical Polygenic Risk Score to Predict Breast Cancer Risk. JCO Precision Oncology 2020 4:585-592.
5. Hughes E, et al. Development and Validation of a Breast Cancer Polygenic Risk Score on the Basis of Genetic Ancestry Composition. JCO Precis Oncol. 2022 Nov;6:e2200084. PMID: 36331239.