CARDIOGENETICS FAMILY HISTORY FORM

YOUR CHILDREN							ON THE 'CARDIO bottom of page)
Number of biological daught	ters:	Curren	t ages <u>OR</u> ages at death: _	,	KI LLGLIN	□ NO	□ YES
Number of biological sons: _			t ages <u>OR</u> ages at death: _			□ NO	□ YES
YOUR SIBLINGS	ANY WITH A CONDITION LISTED ON THE 'CARDIO FAMILY HISTORY LEGEND'?						
			R ages at death:	_	□ NO	□ YI	
Number of brothers: Current ages <u>OR</u> ages			R ages at death:		□ NO	□ Y I	<u>-</u> S
Are any of these siblings half	f-siblings? 🗆 NO 🗆	YES					
YOUR MOTHER'S FAMILY				ANY WITH A CONDITION LISTED ON THE 'CARDIO FAMILY HISTORY LEGEND'?			
Maternal Ethnicity/Ancestry							
Is your mother living? NO YES			nt age <u>OR</u> age at death:		□ NO	□ YE	
			t age OR age at death:		□ NO	□ YE	
			nt age <u>OR</u> age at death:		□ NO	□ YE	
Aunts: # Living: # Decea					□ NO	□ YE	
Uncles: # Living: # Decea	ased:				□ NO	□ YE	S
YOUR FATHER'S FAMILY	ANY WITH A CONDITION LISTED ON THE 'CARDIO FAMILY HISTORY LEGEND'?						
Paternal Ethnicity/Ancestry:							
Is your father living? □ NO □ YES		Current age <u>OR</u> age at death:			□ NO	□ YE	S
Is your grandmother living? □ NO □ YES		Current age OR age at death:			□ NO	□ YE	S
Is your grandfather living? □ NO □ YES Curren			t age <u>OR</u> age at death:		□ NO	□ YE	S
Aunts: # Living: # Deceased:					□ NO	□ YE	S
Uncles: # Living: # Deceased:					□ NO	□ YE	S
FOR ANY RELATIVES YOU			CONDITION LISTED ON T THEIR INFORMATION BEL		MILY HI	STORY	LEGEND, PLEASE
RELATIONSHIP TO YOU MOM'S SIDE C				APPROXIMATE AGE			ALIVE OR
i.e. Aunt Dad's		event Cardiomyopathy	AT DIAGNOSIS/EVENT 50		1 10:1	DECEASED? Deceased	
			, , , , , , , , , , , , , , , , , , , ,				
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Relevant Condition or Event Legend

- a.) Cardiomyopathy (Hypertrophic, Dilated, Arrhythmogenic, Non-Compaction, Enlarged Heart)
- b.) Death from Accident (Motor Vehicle Accident (Driver), or Drowning)
- c.) Heart rhythm disturbance (Heart rate problem (too fast or slow), irregular rhythm)
- d.) Sudden Unexplained Death (Including at a young age)
- e.) Implanted Device (Pacemaker, Defibrillator)

- f.) Heart Failure
- g.) Recurrent Fainting / Seizures
- h.) Muscle Disease
- i.) Cardiac Arrest / Heart Attack
- j.) Known Genetic Condition