(Insert date)

Dear (insert doctor’s name)

Choose one of the following paragraphs.

My maternal/paternal (select one) mother/sister /aunt/grandmother/ (select one) was diagnosed with ovarian/breast cancer aged (insert age).

Or

My maternal/paternal (select one) father/brother /uncle/grandfather/ (select one) was diagnosed with/breast cancer aged (insert age).

There is a possibility that they carried a BRCA1/2 gene mutation, and if they did, there is a strong possibility that the gene will have been passed onto me.

While they are no longer available to be tested, according to NICE Guideline CG164 1.5.12, and NHS England policy E01/P/b, *Clinical Commissioning Policy: Genetic Testing for BRCA1 and BRCA2 Mutations,* I may be eligible for genetic testing to find out whether or not I am a carrier. The latter states*:*

“Genetic testing will be offered in specialist genetic clinics to a person with no personal history of breast or ovarian cancer if their combined BRCA1 and BRCA2 mutation carrier probability is 10% or more and an affected relative is unavailable for testing.”

I’m aware that having a BRCA1/2 gene mutation can raise risk of breast and ovarian cancer, and that it can impact on the treatment pathway of these diseases. I would like the opportunity to explore the preventative measures available to me in the event that I am a carrier.

I would also like to find out my BRCA status so I can advise members of my family whether they need to be tested too.

According to NICE clinical guideline CG164 1.5.2, I should be offered genetic counselling prior to being tested.

I would, therefore, be grateful if you could refer me to a genetics counsellor as the next stage in the testing process.

Yours sincerely,

(Insert name)

For more information, and a tailored CPD programme for general practitioners on ovarian cancer, please visit Ovarian Cancer Action’s website: [www.ovarian.org.uk/gps](http://www.ovarian.org.uk/gps)