

Clinician Management Resource for *ATM*

This overview of clinical management guidelines is based on this patient's positive test result for an *ATM* gene mutation. Unless otherwise stated, medical management guidelines used here are limited to those issued by the National Comprehensive Cancer Network® (NCCN®)¹ in the U.S. Please consult the referenced guideline for complete details and further information.

Clinical correlation with the patient's past medical history, treatments, surgeries and family history may lead to changes in clinical management decisions; therefore, other management recommendations may be considered. Genetic testing results and medical society guidelines help inform medical management decisions but do not constitute formal recommendations. Discussions of medical management decisions and individualized treatment plans should be made in consultation between each patient and his or her healthcare provider, and may change over time.

SCREENING/SURGICAL CONSIDERATIONS	AGE TO START	FREQUENCY
Female Breast Cancer		
Breast awareness <ul style="list-style-type: none"> Women should be familiar with their breasts and promptly report changes to their healthcare provider. 	18 years old	Periodic and consistent
Clinical Breast Exam	30 years old, or 10 years before the earliest known breast cancer in the family	Every 6-12 months
Breast Screening ¹ <ul style="list-style-type: none"> Mammography with consideration of tomosynthesis Consider breast MRI with contrast 	40 years old, or 5-10 years before the earliest known breast cancer in the family	Every 12 months
For consideration of risk-reducing mastectomy manage based on family history	Individualized	N/A
Pancreatic Cancer²		
No specific screening guidelines exist at this time	N/A	N/A
Prostate Cancer³		
No specific screening guidelines exist at this time	N/A	N/A
Other¹		
Counsel for risk of autosomal recessive condition in offspring <ul style="list-style-type: none"> If both parents have an <i>ATM</i> mutation, each of their children have a 25% chance to have ataxia telangiectasia 	Individualized	N/A

1. [NCCN Clinical Practice Guidelines in Oncology®](#). Genetic/Familial High-Risk Assessment: Breast and Ovarian. V1.2018. Available at [nccn.org](#).

2. Canto MI, *et al.* International Cancer of the Pancreas Screening (CAPS) Consortium summit on the management of patients with increased risk for familial pancreatic cancer. [Gut](#). 2013 Mar;62(3):339-47.

3. Pritchard CC, *et al.* Inherited DNA-Repair Gene Mutations in Men with Metastatic Prostate Cancer. [N Engl J Med](#). 2016 Aug 4; 375(5):443-53.

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