

Clinician Management Resource for *RAD51C*

This overview of clinical management guidelines is based on this patient's positive test result for a *RAD51C* 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 ¹	AGE TO START	FREQUENCY
Ovarian Cancer		
Consider risk-reducing salpingo-oophorectomy	45-50 years old (or earlier based on a specific family history of an earlier onset ovarian cancer)	N/A
Breast Cancer		
Potential increase in triple negative female breast cancer risk with insufficient evidence for risk management	N/A	N/A
Other		
Counsel for risk of autosomal recessive condition in offspring <ul style="list-style-type: none"> If both parents have a <i>RAD51C</i> mutation, each of their children have a 25% chance to have Fanconi anemia 	Individualized	N/A

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