CLINIC SCOPE:

The Cancer Center's Genetic Testing Clinic at Moody provides cancer risk assessment genetic counseling, and genetic testing services. The Genetic Testing Clinic sees adult patients for hereditary cancer indications.

PROCEDURE:

A. Please see the chart below for appropriate referral characteristics and required minimum work-up prior to referral.
B. Routine referrals
   1) Submit as a routine when patient meet one or more criteria in table below and no immediate treatment or surgical decision depends on genetic evaluation.
C. Submit and schedule as a STAT referral for:
   1) All/specific Stage IV or metastatic cancers
   2) When genetic results may immediately affect treatment selection, surgical planning, or an urgent cascade-testing decision.

Clinical Condition	Minimum Work-Up Prior to Referral (within the last 6 months)
Hereditary cancer indications	
Any patient with cancer who has two or more close relatives with the same or related cancers (breast, ovarian, pancreatic, prostate, colon, uterine, etc.)	None
Any patient with cancer who has a parent, sibling, or child with the same type of cancer	None
Any patient with cancer who was diagnosed at an early age for that cancer type (i.e. <50 for colon cancer)	None
Any patient with a known cancer predisposition mutation in their family	None

Common indications recommending referral per national guidelines	
Breast cancer (dx ≤50)	None
Colon cancer (dx <50)	None
Pancreatic adenocarcinoma (all ages)	None
Prostate cancer (≤55 or metastatic)	None
Ovarian cancer (all histologies, all ages)	None
Uterine cancer (dx <50)	None
Less common indications recommending referrals per national guidelines	
Adrenal cortical carcinoma	None
Colon polyposis (>10 polyps)	None
Desmoid tumor	None
Endolymphatic sac tumors	None
Gastrinomas	None
Hemangioblastomas	None
Medullary Thyroid Cancer	None
Paragangliomas	None
Pheochromocytomas	None
Retinoblastoma	None
Rhabdoid tumors	None
Renal cancer (all histologies, dx <50)	None
Sarcoma (dx <45)	None
Tumors with absent staining on IHC for mismatch repair (MMR) proteins	None
Skin findings (trichilemmoma, acral keratoses, mucocutaneous hyperpigmentation, sebaceous adenoma, fibrofolliculoma, shagreen patch, angiofibromas)	None
Renal or pancreatic cysts	None
Leiomyoma (skin or uterine)	None
Parathyroid adenoma	None
Pituitary adenoma	None
High risk breast lesion (ex. ADH, LCIS)	None
Lung cysts/pneumothorax	None
Myxoma	None
Family history of cancer	None
Lhermitte-Duclos disease (LDD)	None
Hyperparathyroidism	None

Clinical Condition	Minimum Work-Up Prior to Referral (within the last 6 months)
Personal History Referral Criteria	
Breast Cancer • Breast cancer diagnosed at age 50 or younger. • Triple-negative breast cancer. • Male breast cancer. • Bilateral breast cancer, multiple primary breast cancers, or breast cancer with another cancer suggestive of a hereditary syndrome. • Breast cancer with a close relative who has breast cancer at age 50 or younger, ovarian cancer, pancreatic cancer, metastatic/high-risk prostate cancer, or male breast cancer. • Breast cancer in a person with a known familial pathogenic or likely pathogenic variant or ancestry/family history associated with increased hereditary risk.	None
Colorectal Cancer • Colorectal cancer diagnosed any age. • Tumor testing showing mismatch repair deficiency, microsatellite instability-high, or loss of mismatch repair protein expression not explained by an identified sporadic cause. • Multiple primary Lynch syndrome-associated cancers in the same person. • Colorectal cancer with a family history suggestive of Lynch syndrome.	None

Endocrine related Adrenocortical carcinoma, medullary thyroid cancer, pheochromocytoma, paraganglioma, gastrinoma, pituitary adenoma, parathyroid adenoma, or hyperparathyroidism when a hereditary syndrome is suspected.	None
Endometrial/Uterine • Endometrial/uterine cancer diagnosed any age. • Tumor testing showing mismatch repair deficiency, microsatellite instability-high, or loss of mismatch repair protein expression not explained by an identified sporadic cause. • Multiple primary Lynch syndrome-associated cancers in the same person. • Endometrial/uterine cancer with a family history suggestive of Lynch syndrome.	None
Gastric cancer • Diffuse gastric cancer. • Gastric cancer diagnosed at an any age. • Gastric cancer with a family history suggestive of hereditary diffuse gastric cancer, Lynch syndrome, or another hereditary cancer syndrome. • Multiple primary cancers or tumor findings that raise concern for a hereditary syndrome.	None
Ovarian Cancer • Epithelial ovarian, fallopian tube, or primary peritoneal cancer at any age. • Nonepithelial ovarian cancer when hereditary risk is suspected or current disease-specific criteria are met.	None
Pancreatic Cancer • Pancreatic adenocarcinoma at any age. • Other pancreatic tumors when the personal or family history suggests a hereditary syndrome.	None

Prostate Cancer • Metastatic prostate cancer. • Regional, node-positive, high-risk, or very-high-risk prostate cancer. • Prostate cancer diagnosed at age 55 or younger. • Prostate cancer with a close relative who has breast cancer at age 50 or younger, ovarian cancer, pancreatic cancer, metastatic/high-risk prostate cancer, or a known familial pathogenic or likely pathogenic variant.	None
Renal cancer • Renal cancer at age 46 or younger, or at an unusually young age based on clinical judgment. • Bilateral or multifocal renal tumors, hereditary-associated renal histology, or renal cancer with a close relative with renal cancer.	None
Rare tumor or syndrome-associated findings • Retinoblastoma, rhabdoid tumor, desmoid tumor, hemangioblastoma, endolymphatic sac tumor, Lhermitte-Duclos disease, or another tumor strongly associated with a hereditary cancer syndrome. • Sarcoma diagnosed before age 45, multiple primary tumors, or sarcoma with a Li-Fraumeni-associated personal or family history.	None
Polyposis and other high-risk findings • More than 10 cumulative colorectal adenomatous polyps or a burden suggestive of inherited polyposis. • Multiple hamartomatous, juvenile, or serrated polyps when an inherited syndrome is suspected. • Sebaceous or characteristic dermatologic findings suggestive of a hereditary syndrome. • Renal or pancreatic cysts, lung cysts/spontaneous pneumothorax, leiomyomas, myxomas, or other syndrome-associated findings.	None

• A high-risk breast lesion when personal or family history raises hereditary cancer concern.	
Family History and Cascade testing	
• Known pathogenic or likely pathogenic hereditary cancer variant in a blood relative. • A first-degree or second-degree relative meeting one or more personal-history criteria, particularly when the affected relative is unavailable for testing. • Two or more close blood relatives on the same side of the family with the same or related cancers. • Cancer diagnosed at an unusually young age in a close blood relative. • Multiple primary cancers in one relative or a family pattern suggestive of a recognized hereditary cancer syndrome. • A limited or unknown family history, small family structure, adoption, or early deaths that may obscure a hereditary pattern.	None

2. Not within the Scope of this Clinic

   A. Any non-cancer/oncology related indication is not within the scope of this clinic.

   B. Please see below for where to refer patients that are not within the scope of this clinic.

Clinical Condition	Refer Patient to:
Patients younger than 18 years	• Children's Health – Dr. Jonathan Wickiser (Dallas) • Dr. Avanthi Shah (Dallas and Plano)
Benign hematologic disorders	• Benign or Malignant Hematology
Genetic testing related to pregnancy/prenatal care	• Prenatal Genetic Counseling

General adult genetic indications unrelated to cancer (ex: Marfan's syndrome, Inherited cardiomyopathies, Fragile X, etc.). Currently there are no Adult General Genetic services at Parkland.	• For patients with insurance, consider referring to Dr. Markey McNutt and Dr. Helen Hobbs at UT Southwestern • Erin Coffman and Kristi Tu – Genetic Counselors at UT Southwestern • For appointments, contact 214-645-2800

REFERENCES:

National Comprehensive Cancer Network. *NCCN Clinical Practice Guidelines in Oncology: Genetic/Familial High-Risk Assessment: Breast, Ovarian, Pancreatic, and Prostate*. Version 3.2026, National Comprehensive Cancer Network, 19 Feb. 2026. [nccn.org]

National Comprehensive Cancer Network. *NCCN Clinical Practice Guidelines in Oncology: Genetic/Familial High-Risk Assessment: Colorectal, Endometrial, Esophageal, and Gastric*. Version 1.2026, National Comprehensive Cancer Network, 16 June 2026. [lynchsyndr...reness.com], [inheritedcancer.net]