

PARENT/GUARDIAN STUDY ID

DAUGHTER STUDY ID

TODAY'S DATE

The LEGACY Girls Study

Baseline Parent/Guardian Questionnaire

For parent/guardians with daughters age 6-13 years

Cancer Family History

Self-administered

YOUR CANCER FAMILY HISTORY

These questions are asked from the perspective of the girl aged 6-13 years who participates in this study. We will refer to her as the "**Participating Daughter**" in the LEGACY Girls Study. In this questionnaire, when we ask about cancer we mean cancer diagnoses of all types.

We are only asking about blood relatives of Participants, so please don't include relatives by marriage. Please answer for each <u>blood relative</u> of the Participating Daughter:

Whether they have had cancer (check YES or NO) What type of cancer they had (write name of cancer) Age at diagnoses (write how old they were when first diagnosed)

		Section A	
A1.	Has the Participating Daughter ever had cancer?	 ☐ YES → ☐ NO ☐ DON'T KNOW 	If yes, what type of cancer?Age at diagnosis
A2.	Does she have any siblings ?	 ☐ YES → ☐ NO (Go to B1) ☐ DON'T KNOW (Go to B1) 	How many brothers? How many sisters? How many half-brothers? How many half-sisters?
Α3.	Have any siblings ever had cancer? Please enter half-siblings with cancer in B8 or C8	 YES → NO (Go to B1) DON'T KNOW (Go to B1) 	If yes, what sibling? Sister Brother What type of cancer? Age at diagnosis
Α4.	Does she have another sibling who has had cancer?	 YES → NO (Go to B1) DON'T KNOW (Go to B1) 	If yes, what sibling? Sister Brother What type of cancer? Age at diagnosis

Section B: Cancer on the Participant's <u>Mother's</u> Side of the Family (Maternal)			
B1.	Has the Participating Daughter's Mother ever had cancer?	 ☐ YES → ☐ NO ☐ DON'T KNOW 	If yes, what type of cancer? Age at diagnosis
B2.	Has the Participating Daughter's Maternal Grandmother ever had cancer?	 ☐ YES → ☐ NO ☐ DON'T KNOW 	If yes, what type of cancer? Age at diagnosis
B3.	Has the Participating Daughter's Maternal Grandfather ever had cancer?	 ☐ YES → ☐ NO ☐ DON'T KNOW 	If yes, what type of cancer? Age at diagnosis
B4.	Does the Participating Daughter have any Maternal Aunts?	 YES → NO (Go to B6) DON'T KNOW (Go to B6) 	If yes, how many?
B5.	Have any of them ever had cancer?	 YES → NO (Go to B6) DON'T KNOW (Go to B6) 	Maternal Aunt # 1 What type of cancer? Age at diagnosis
			Maternal Aunt # 2 What type of cancer? Age at diagnosis
			Maternal Aunt # 3 What type of cancer? Age at diagnosis

B6.	Does the Participating Daughter have any Maternal Uncles?	 ☐ YES → ☐ NO (Go to B8) ☐ DON'T KNOW (Go to B8) 	If yes, how many?
B7.	Have any of them ever had cancer?	 ☐ YES → ☐ NO (Go to B8) ☐ DON'T KNOW (Go to B8) 	Maternal Uncle # 1 What type of cancer? Age at diagnosis
			Maternal Uncle # 2 What type of cancer? Age at diagnosis
			Maternal Uncle # 3 What type of cancer? Age at diagnosis
B8.	Have any Other Maternal Relatives had cancer? This could be the Participating Daughter's half siblings, cousins, great aunts or great uncles.	 ☐ YES → ☐ NO (Go to C1) ☐ DON'T KNOW (Go to C1) 	Relative # 1: What relative?
			Relative # 2: What relative?
			Relative # 3: What relative?

Section C: Cancer on the Participant's Father's Side of the Family (Paternal)			
C1.	Has the Participating Daughter's Father ever had cancer?	 ☐ YES → ☐ NO ☐ DON'T KNOW 	If yes, what type of cancer? Age at diagnosis
C2.	Has the Participating Daughter's Paternal Grandmother ever had cancer?	 ☐ YES → ☐ NO ☐ DON'T KNOW 	If yes, what type of cancer? Age at diagnosis
С3.	Has the Participating Daughter's Paternal Grandfather ever had cancer?	 ☐ YES → ☐ NO ☐ DON'T KNOW 	If yes, what type of cancer? Age at diagnosis
C4.	Does the Participating Daughter have any Paternal Aunts?	 YES → NO (Go to C6) DON'T KNOW (Go to C6) 	If yes, how many?
C5.	Have any of them ever had cancer?	 ☐ YES → ☐ NO (Go to C6) ☐ DON'T KNOW (Go to C6) 	Paternal Aunt # 1 What type of cancer? Age at diagnosis
			Paternal Aunt # 2 What type of cancer? Age at diagnosis
			Paternal Aunt # 3 What type of cancer? Age at diagnosis

C6.	Does the Participating Daughter have any Paternal Uncles?	 YES → NO (Go to C8) DON'T KNOW (Go to C8) 	If yes, how many?
C7.	Have any of them ever had	□ YES →	Paternal Uncle # 1
	cancer?	 NO (Go to C8) DON'T KNOW (Go to C8) 	What type of cancer?
			Age at diagnosis
			Paternal Uncle # 2
			What type of cancer?
			Age at diagnosis
			Paternal Uncle # 3
			What type of cancer?
			Age at diagnosis
C8.	Have any Other Paternal Blood Relatives had cancer?	□ YES → □ NO	Relative # 1: What relative?
	This could be the Participating Daughter's half siblings, cousins, great aunts or great	DON'T KNOW	What type of cancer?
	uncles.		Age at diagnosis
			Relative # 2: What relative?
			What type of cancer?
			Age at diagnosis
			Relative # 3: What relative?
			What type of cancer?
			Age at diagnosis

Thank you for your time and participation