

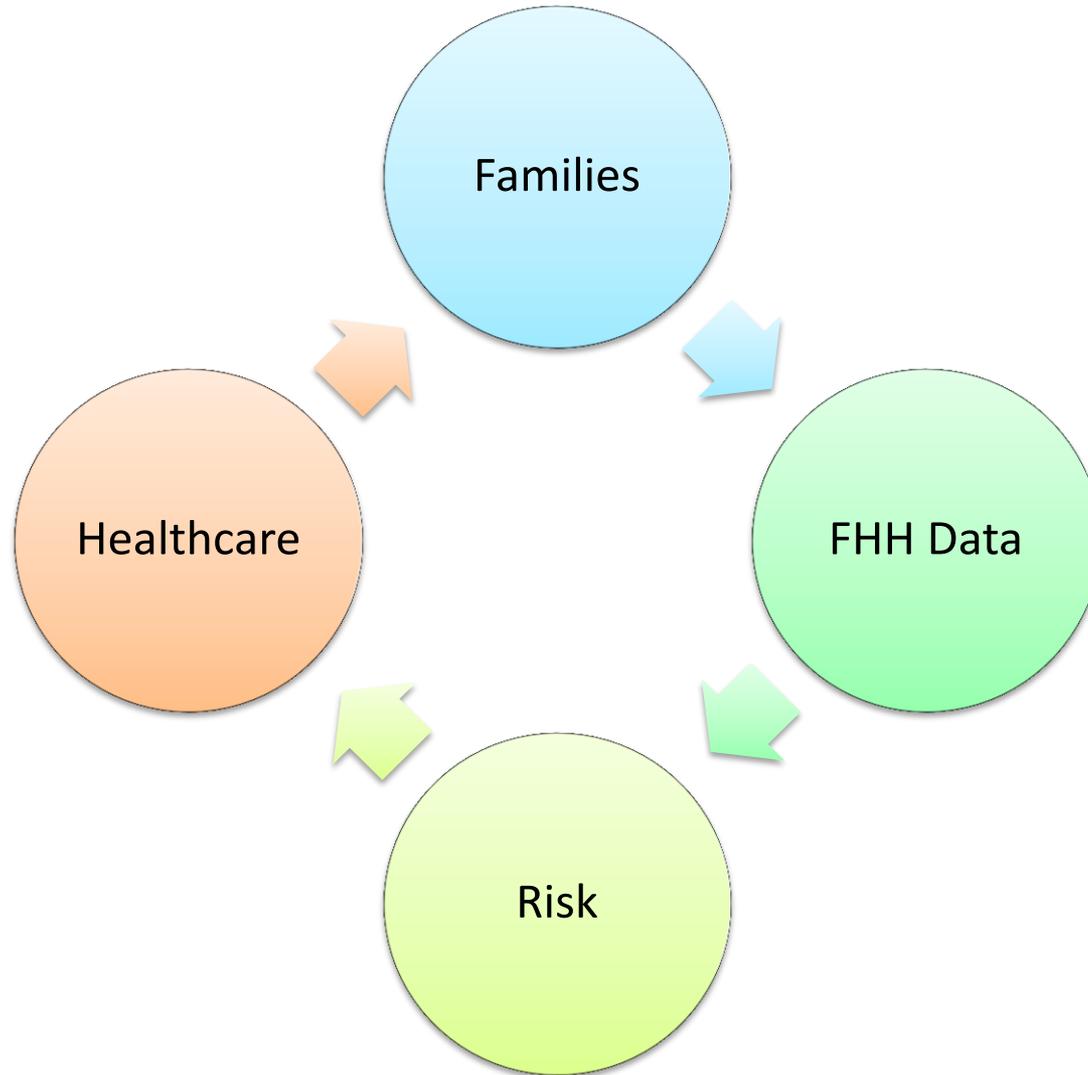
Family Health History: Framing the Problems and Possibilities

Robert S. Wildin, M.D.
Chief, Genomic Healthcare Branch
Division of Policy, Communications, and Education
NHGRI/NIH

Family Health History in Context

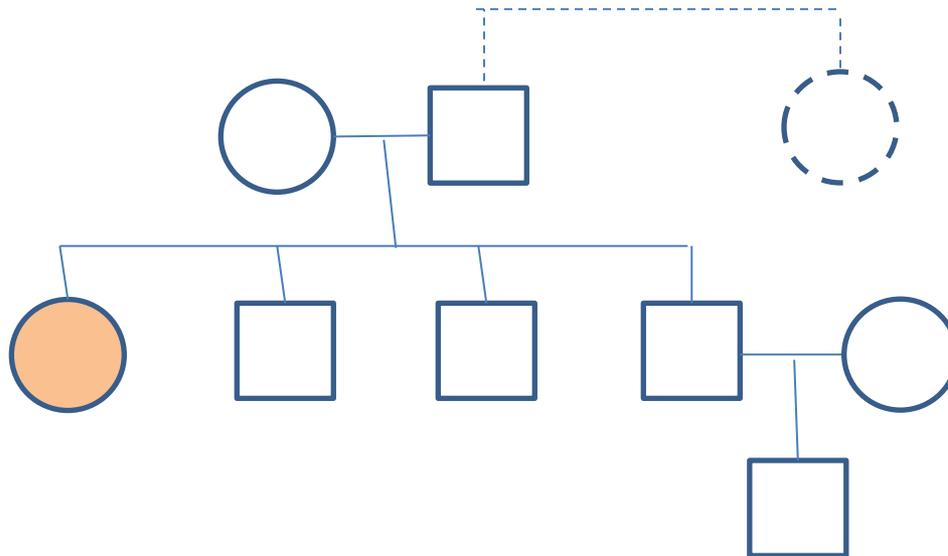
- Value is uncontested but variably quantified
- Clinically underutilized
 - Collection is time-consuming and requires skill
 - Accuracy is limited by hearsay, collection technique, and unknowns (including parentage)
 - Workflow accessibility is poor in EHRs
 - Data in EHRs is incomplete, or completeness is unknown
 - Provenance is not tracked
 - Privacy boundaries are not well understood
- Research uses are mostly for primary genetic studies

The Family Health Cycle

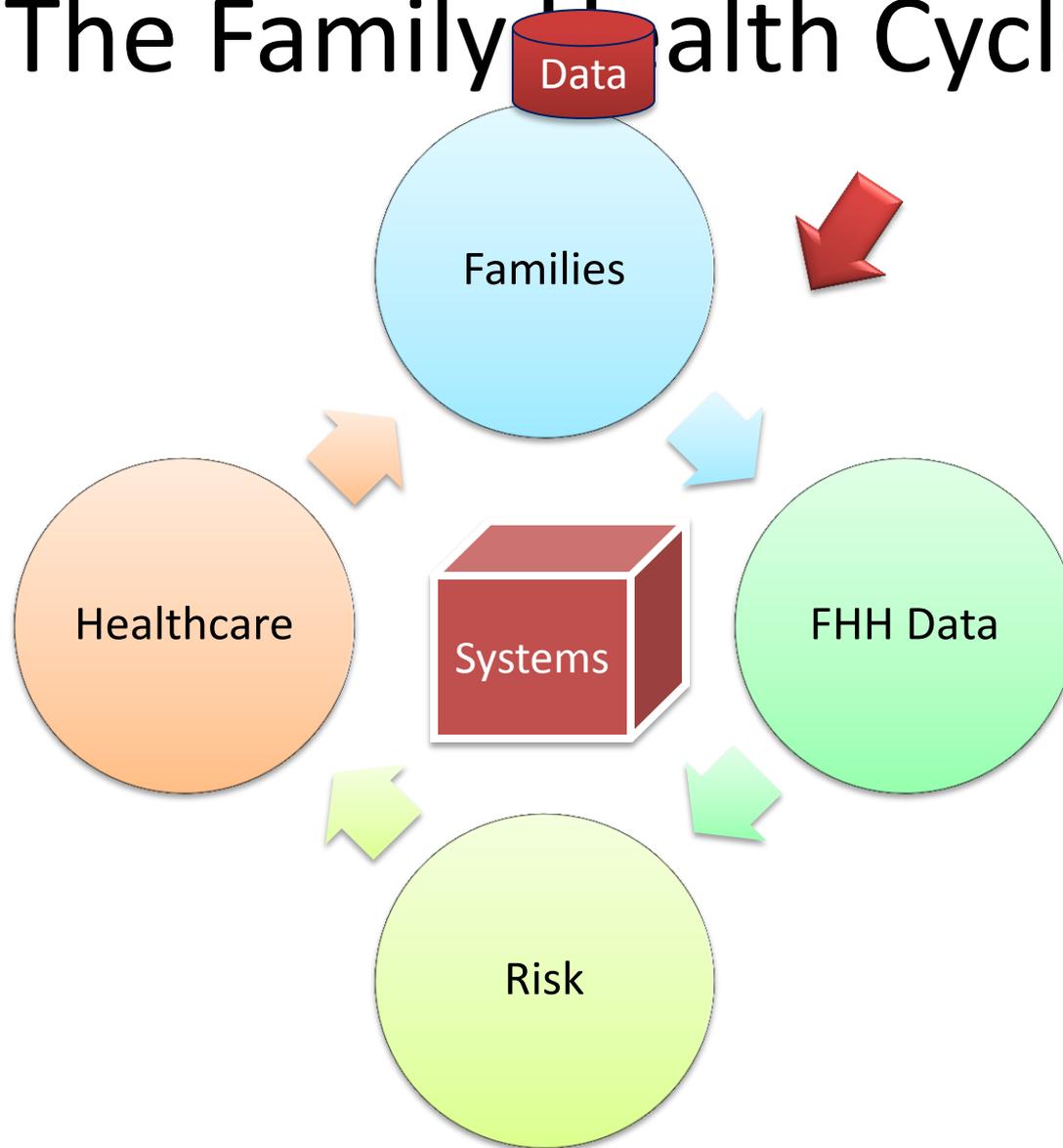


The Family Health Cycle

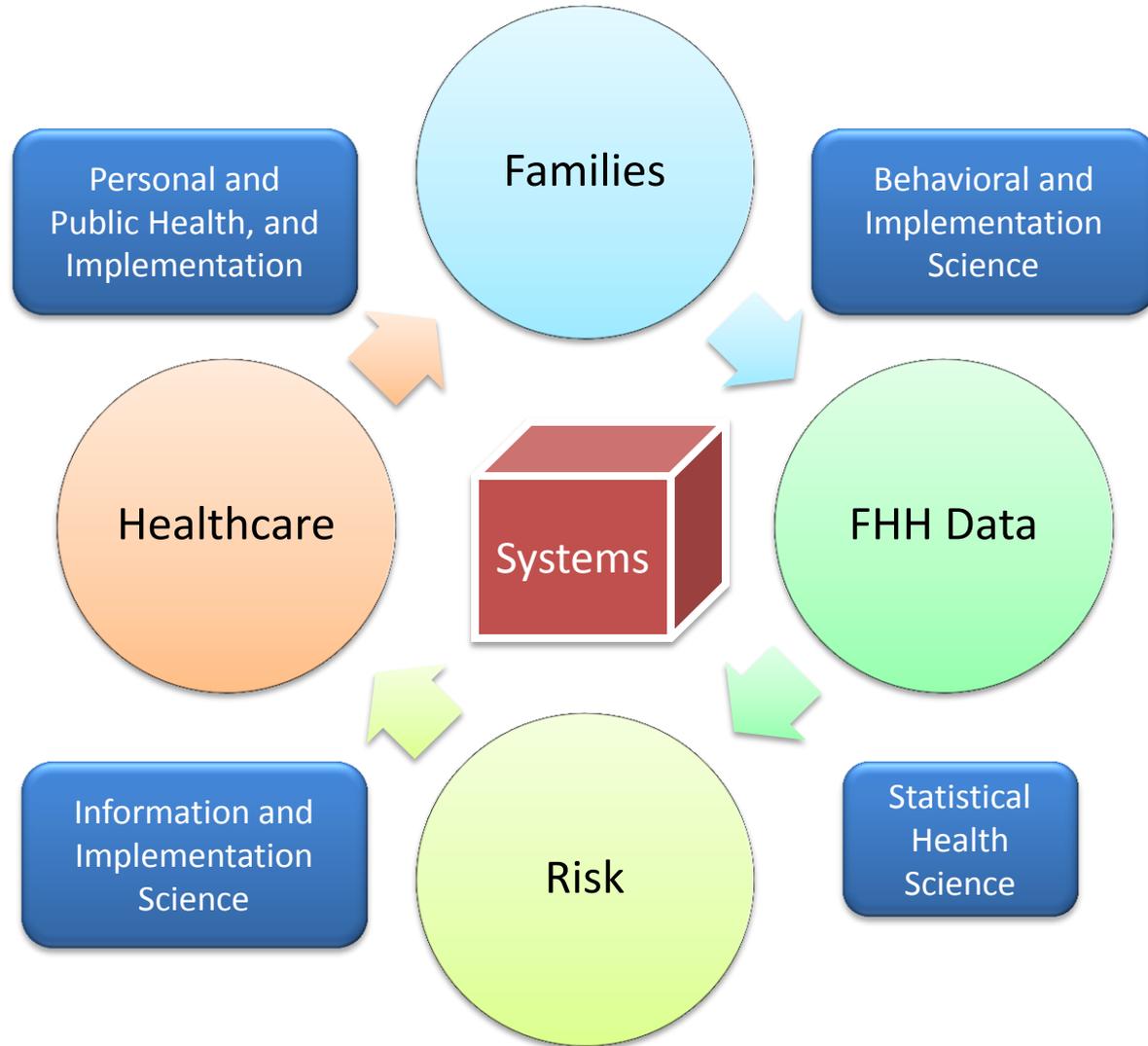
Families



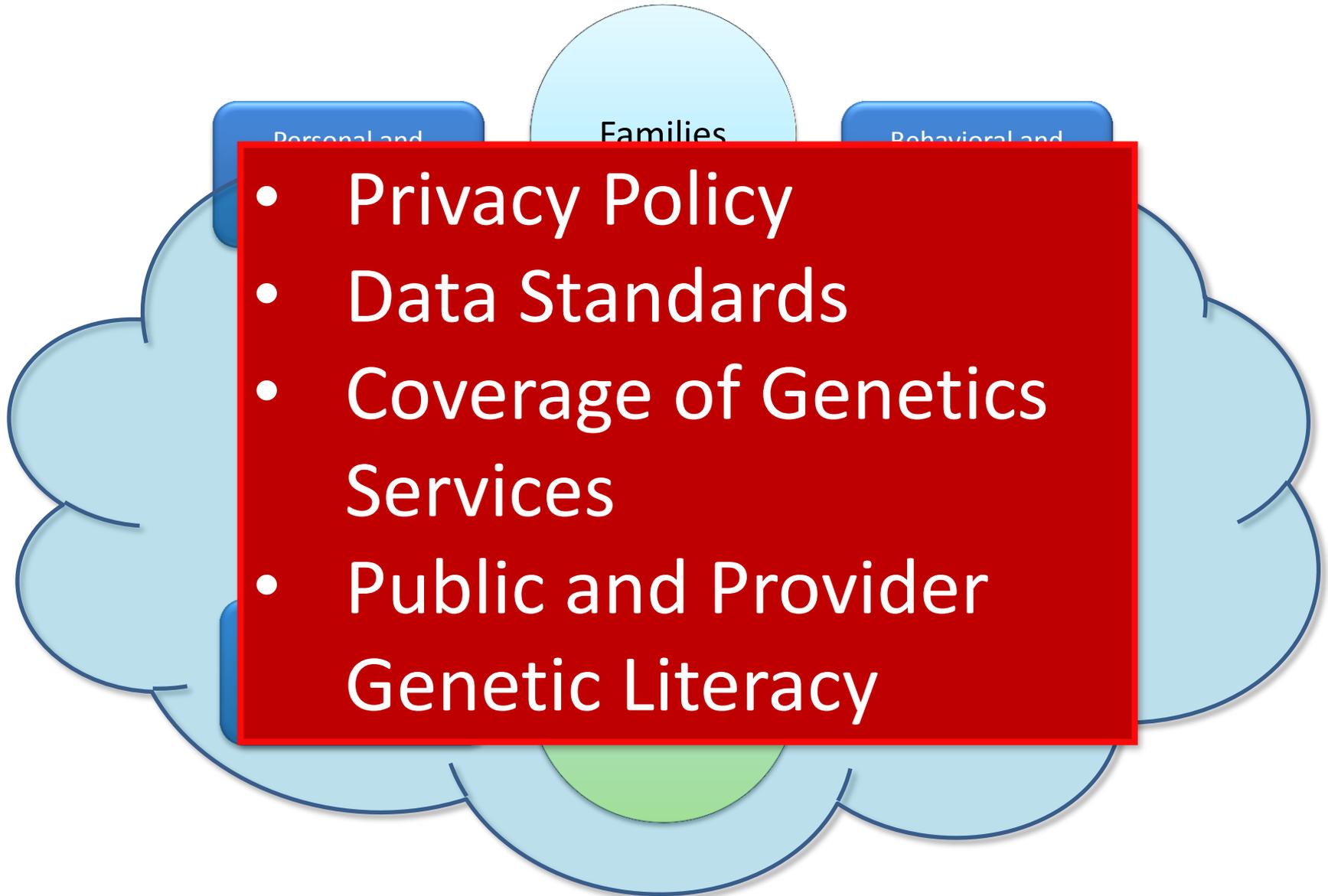
The Family Health Cycle



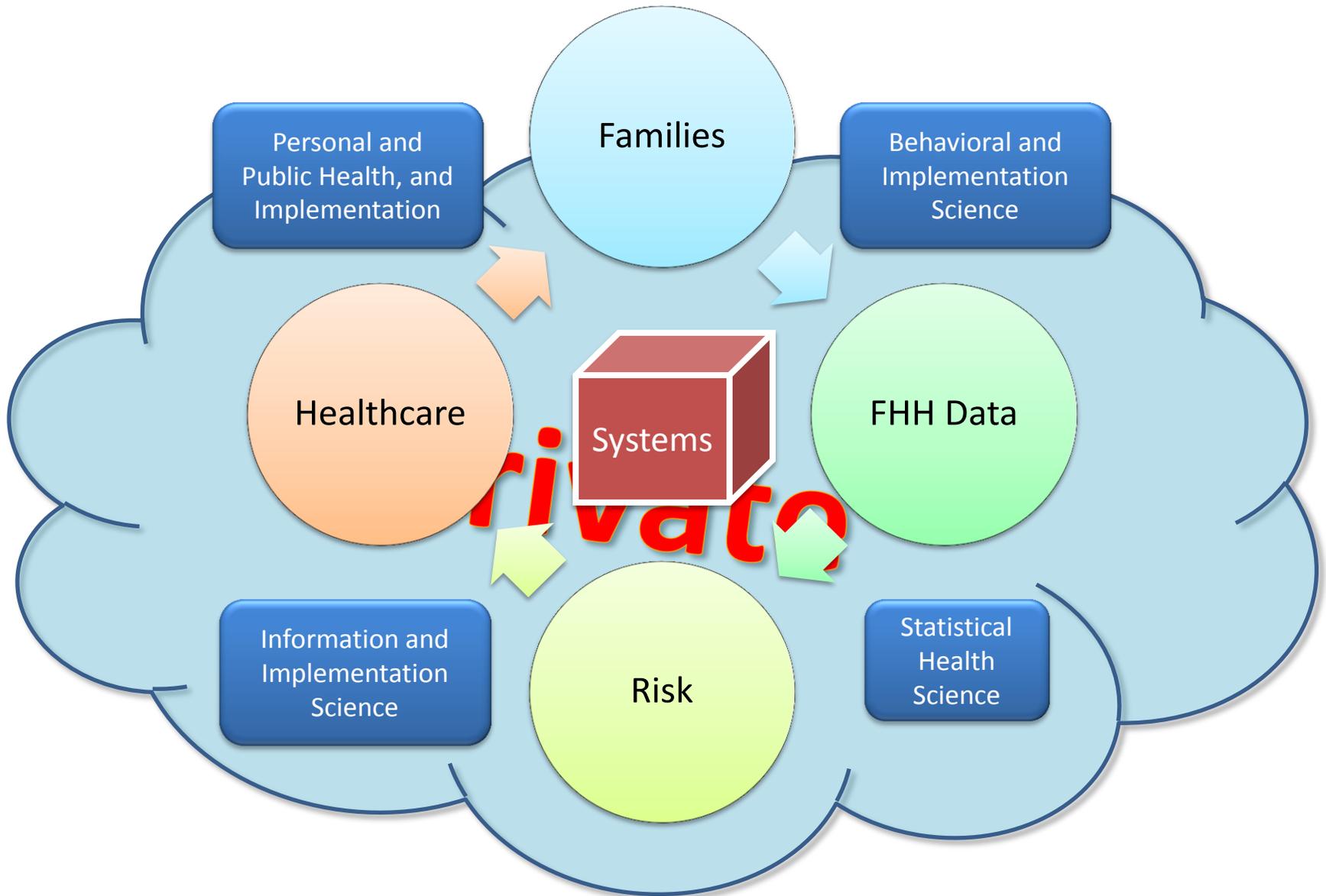
The Family Health Cycle



The Family Health Cycle



The Family Health Cycle



Making the Most

- Write down questions and key thoughts
- Use discussion and break time
- Think in terms of 'action'
- Request agenda time on the Fed/Non-Fed Family History Group calls
 - First Monday of every EVEN numbered month at 3pm Eastern Time

Opportunity

