## Pleae ask every patient on the list the following four questions:

Question 1: A first-degree relative of mine (parents, siblings, children) developed bowel cancer.

Question 2: A first-degree relative of mine (parents, siblings, children) who developed bowel cancer was under 50 years of age.

Question 3 A **bowel polyp** (adenoma) was discovered in a **first-degree relative** of mine (parents, siblings, children) before his or her 50th birthday.

Question 4 Three or more relatives of mine developed bowel cancer, stomach cancer, uterine cancer, ovarian cancer, ureteral cancer or cancer of the renal pelvis.

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Patient-ID			Were you able to ask the patient the		The answers to the 4 questions:		Arranged consultation?
			four questions about hereditary risk?				<ul> <li>Yes, forwarded patient directly to</li> </ul>
			☐ Yes, in the practice		Question 1: ☐ No ☐ Yes→→→		doctor
Patient's date of birth:			☐ Yes, on the phone		4		☐ Yes, arranged consultation
			☐ No, no interest		Question 2: ☐ No ☐ Yes→→→	$\Box$	☐ Patient desires further contact
<u> </u>	·	$\Box$	☐ Knows about hereditary risk (please ask	$\neg$	Question 2.	$\neg$	□ No, because:
Gender:	Date:		questions and invite patient anyway)		Question 3: ☐ No ☐ Yes→→→		Did the consultation with the doctor
☐ female			□ No, couldn't reach patient after 3		Question 3 No - res 2 2 2		take place?
□ male			attempts		Overtion 4: DNa DVar		□ Yes
			□ No, because		Question 4: ☐ No ☐ Yes→→→		□ No, because
Patient-ID			Were you able to ask the patient the		The answers to the 4 questions:		Arranged consultation?
Patient-ID			Were you able to ask the patient the four questions about hereditary risk?		The answers to the 4 questions:		Arranged consultation?  See Yes, forwarded patient directly to
			The state of the s		The answers to the 4 questions:  Question 1: □ No □ Yes→→→		_
Patient-ID  Patient's date o	f birth:		four questions about hereditary risk?		•		☐ Yes, forwarded patient directly to
	f birth:		four questions about hereditary risk?  — Yes, in the practice		Question 1: □ No □ Yes→→→		☐ Yes, forwarded patient directly to doctor
	f birth:	<b>⇒</b>	four questions about hereditary risk?  Yes, in the practice Yes, on the phone		•		<ul><li>Yes, forwarded patient directly to doctor</li><li>Yes, arranged consultation</li></ul>
	f birth:  Date:	<b>=</b>	four questions about hereditary risk?  Yes, in the practice Yes, on the phone No, no interest	$\Rightarrow$	Question 1: $\square$ No $\square$ Yes $\rightarrow\rightarrow$ $\rightarrow$ Question 2: $\square$ No $\square$ Yes $\rightarrow\rightarrow$	ightharpoons	<ul><li>☐ Yes, forwarded patient directly to doctor</li><li>☐ Yes, arranged consultation</li><li>☐ Patient desires further contact</li></ul>
Patient's date o			four questions about hereditary risk?  Yes, in the practice Yes, on the phone No, no interest Knows about hereditary risk (please ask		Question 1: □ No □ Yes→→→	ightharpoons	<ul> <li>Yes, forwarded patient directly to doctor</li> <li>Yes, arranged consultation</li> <li>Patient desires further contact</li> <li>No, because:</li> </ul>
Patient's date o			four questions about hereditary risk?  Yes, in the practice Yes, on the phone No, no interest Knows about hereditary risk (please ask questions and invite patient anyway)		Question 1: $\square$ No $\square$ Yes $\rightarrow\rightarrow$ $\rightarrow$ Question 2: $\square$ No $\square$ Yes $\rightarrow\rightarrow$	$\Rightarrow$	<ul> <li>Yes, forwarded patient directly to doctor</li> <li>Yes, arranged consultation</li> <li>Patient desires further contact</li> <li>No, because:</li> </ul> Did the consultation with the doctor

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Design: Spiral binding,

Size: Four entries (Participants) per site, overall 250 entries, around 70 pages