

HOW TO PREPARE YOUR MEDICAL FAMILY HISTORY

FIND A TEMPLATE FOR YOUR OWN FAMILY ON PAGE 2 AND 3

What information should you find?

- Current age or age at death
- Cause of death
- Name of disease/condition/diagnoses
- Age of onset of disease/ age at time of diagnoses
- If any disease, lifestyle that could cause the disease is also relevant

Who should you find information about?

- you and your children,
- your siblings and their children,
- your parents,
- your parent's siblings,
- your cousins on both sides and
- your grandparents on both sides
- Half siblings and deceased family members are also included

Example for living family members

Relation to	Age or Year of Birth	<ul style="list-style-type: none">• Health information throughout life• Age of onset of disease/condition• Life style that could affect disease (e.g. smoking, overweight, chemicals, drug/alcohol abuse)
Mother's sister (Jane)	42	Mildly allergic to cats. Started in adulthood, approx. age 30 Depression and anxiety. She takes medication. Diagnosed when she was 40. It was after a divorce. Migraine since she was 13. It is not diagnosed. Perhaps just bad headache.
Male cousin (Jane's son)	From 1995	Healthy

Example for a deceased family member

Relation to you	Age at death AND year of birth OR year of death	<ul style="list-style-type: none">• Cause of death• Health information throughout life• Age of onset of disease/condition• Life style that could affect disease (e.g. smoking, overweight, chemicals, drug/alcohol abuse)
Father's father (Peter)	72, died in 2014	He died of lung cancer. He was a smoker until he turned 65. He had a heart attack at age 62. He was overweight and not physically active. He got a pacemaker. He had no diagnoses prior to this.

What if I can't find the information?

We know that it is a difficult task, and sometimes not possible to find all the information. If there is some information you can't find or some family members you do not know much about, write down that this information is not available to you. That is also very useful for us to know.

We look forward to meeting you and tell you more about, what it means to be a donor in European Sperm Bank. Do not hesitate to contact us, if you have any questions.

Template

Living family members

Relation to donor	Age or Year of Birth	<ul style="list-style-type: none">• Health information throughout life• Age of onset of disease/condition• Life style that could affect disease (e.g. smoking, overweight, chemicals, drug/alcohol abuse)

Deceased family members

Relation to donor	Age at death AND year of birth OR year of death	<ul style="list-style-type: none"> • Cause of death • Health information throughout life • Age of onset of disease/condition • Life style that could affect disease (e.g. smoking, overweight, chemicals, drug/alcohol abuse)