

Name _____ Section _____ Date _____



WELLNESS WORKSHEET 45

Creating a Detailed Family Health History and Tree

Knowing that a specific disease runs in your family allows you to watch closely for the early warning signs and get appropriate screening tests. It can also help you target important health habits to adopt. You can put together a simple family health tree by compiling key facts on your primary relatives; siblings, parents, aunts and uncles, and grandparents. If possible, have your primary relatives fill out a family health history record like the one below.

Family Health History

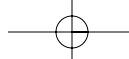
Name: _____ Ethnicity: _____ Date of birth: _____

Blood and Rh type: _____ Occupation: _____

Please note any serious or chronic diseases you have experienced, with special attention to the following:

- | | |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> Alcoholism | <input type="checkbox"/> Mental impairment (Down syndrome, fragile X, etc.) |
| <input type="checkbox"/> Allergies | <input type="checkbox"/> Migraine headaches |
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Miscarriages or neonatal deaths |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Multiple sclerosis |
| <input type="checkbox"/> Blood diseases (hemophilia, sickle-cell disease, thalassemia, hemochromatosis) | <input type="checkbox"/> Muscular dystrophy |
| <input type="checkbox"/> Cancer (breast, bowel, colon, ovarian, skin, and stomach, etc.) | <input type="checkbox"/> Myasthenia gravis |
| <input type="checkbox"/> Cystic fibrosis | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Phenylketonuria (PKU) |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Respiratory disease (emphysema, bacterial pneumonia) |
| <input type="checkbox"/> Familial high blood cholesterol levels | <input type="checkbox"/> Rh disease |
| <input type="checkbox"/> Hearing defects | <input type="checkbox"/> Skin disorders (particularly psoriasis) |
| <input type="checkbox"/> Heart defects | <input type="checkbox"/> Thyroid disorders |
| <input type="checkbox"/> Huntington's disease | <input type="checkbox"/> Tay-Sachs disease |
| <input type="checkbox"/> Hypertension (high blood pressure) | <input type="checkbox"/> Tuberculosis |
| <input type="checkbox"/> Learning disabilities (dyslexia, attention-deficit/hyperactivity disorder, autism) | <input type="checkbox"/> Visual disorders (dyslexia, glaucoma, retinitis pigmentosa) |
| <input type="checkbox"/> Liver disease (particularly hepatitis) | <input type="checkbox"/> Other (please list): |
| <input type="checkbox"/> Lupus | |
| <input type="checkbox"/> Mental illness (bipolar disorder, schizophrenia) | |

(over)



WELLNESS WORKSHEET 45 — continued

List any important health-related behaviors (including tobacco use, dietary and exercise habits, and alcohol use):

Please note names of your relatives below, along with indications of any illnesses, such as those listed on the previous page, that affected them. If they are deceased, list age and cause. Also make note of their lifestyle habits such as smoking.

Father: _____

Mother: _____

Brothers and sisters: _____

Children of brothers and sisters: _____

If you don't have enough information on past generations, you can get clues by requesting death certificates from state health departments or medical records from relatives' physicians or hospitals where they died. Once you've collected the information you want, plug it into a tree format. (An online version of a family health tree is available at <http://www.generational health.com>.)

