**Supplementary Table 1. Articles of interest citing the EGAPP and USPSTF recommendations, by topic covered.**

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| Recommendation | Topic | References |
| EGAPP recommendation | Cost effectiveness of LS screening all newly diagnosed colorectal cancers  | Grosse SD, Palomaki GE, Mvundura M, Hampel H. The cost-effectiveness of routine testing for Lynch syndrome in newly diagnosed patients with colorectal cancer in the United States: corrected estimates. *Genet Med.* 2015;17(6):510-511.Mvundura M, Grosse SD, Hampel H, Palomaki GE. The cost-effectiveness of genetic testing strategies for Lynch syndrome among newly diagnosed patients with colorectal cancer. *Genet Med.* 2010;12(2):93-104.Ladabaum U, Wang G, Terdiman J, et al. Strategies to identify the Lynch syndrome among patients with colorectal cancer. *Annals of Internal Medicine.* 2011;155(2):69-79. |
|  | Implementation of LS screening of all newly diagnosed colorectal cancers | Adar T, Rodgers LH, Shannon KM, et al. A tailored approach to BRAF and MLH1 methylation testing in a universal screening program for Lynch syndrome. Modern Pathology. 2017;30(3):440-447.Cohen SA, Laurino M, et al. Initiation of universal tumor screening for Lynch syndrome in colorectal cancer patients as a model for the implementation of genetic information into clinical oncology practice. *Cancer.* 2016;122(3):393-401.Dineen S, Lynch PM, Rodriguez-Bigas MA, et al. A Prospective six sigma quality improvement trial to optimize universal screening for genetic syndrome among patients with young-onset colorectal cancer. JNCCN Journal of the National Comprehensive Cancer Network. 2015;13(7):865-872.Erten MZ, Fernandez LP, Ng HK, et al. Universal Versus Targeted Screening for Lynch Syndrome: Comparing Ascertainment and Costs Based on Clinical Experience. *Digestive Diseases and Sciences.* 2016;61(10):2887-2895.Heald B, Plesec T, Liu X, et al. Implementation of universal microsatellite instability and immunohistochemistry screening for diagnosing lynch syndrome in a large academic medical center. Journal of Clinical Oncology. 2013;31(10):1336-1340.Kidambi TD, Blanco A, Myers M, Conrad P, Loranger K, Terdiman JP. Selective Versus Universal Screening for Lynch Syndrome: A Six-Year Clinical Experience. *Digestive Diseases and Sciences.* 2015;60(8):2463-2469.Marquez E, Geng Z, Pass S, et al. Implementation of routine screening for Lynch syndrome in university and safety-net health system settings: Successes and challenges. *Genetics in Medicine.* 2013;15(12):925-932.O'Kane GM, Ryan É, McVeigh TP, et al. Screening for mismatch repair deficiency in colorectal cancer: data from three academic medical centers. Cancer Medicine. 2017;6(6):1465-1472.Pearlman R, Frankel WL, Swanson B, et al. Prevalence and spectrum of germline cancer susceptibility gene mutations among patients with early-onset colorectal cancer. *JAMA Oncology.* 2017;3(4):464-471.Steinhagen E, Shia J, Markowitz AJ, et al. Systematic immunohistochemistry screening for lynch syndrome in early age-of-onset colorectal cancer patients undergoing surgical resection. *Journal of the American College of Surgeons.* 2012;214(1):61-67.Ward RL, Hicks S, Hawkins NJ. Population-based molecular screening for lynch syndrome: Implications for personalized medicine. Journal of Clinical Oncology. 2013;31(20):2554-2562.Haber KM, Seagle BLL, Drew B, et al. Genetic counseling for hereditary breast and gynecologic cancer syndromes at a community hospital. Connecticut Medicine. 2014;78(7):417-420.Zumstein V, Vinzens F, Zettl A, et al. Systematic immunohistochemical screening for Lynch syndrome in colorectal cancer: a single centre experience of 486 patients. Swiss Med Wkly. 2016;146:w14315. |
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| USPSTF recommendation | Implementation of breast cancer risk assessment for women without a personal history of breast cancer in primary care settings  | Anderson EE, Tejeda S, Childers K, Stolley MR, Warnecke RB, Hoskins KF. Breast cancer risk assessment among low-income women of color in primary care: A pilot study. Journal of Oncology Practice. 2015;11(4):e460-e467.Brannon Traxler L, Martin ML, et al. Implementing a Screening Tool for Identifying Patients at Risk for Hereditary Breast and Ovarian Cancer: A Statewide Initiative. Annals of Surgical Oncology. 2014;21(10):3342-3347.Paris NM, Gabram-Mendola SGA, Kerber AS, et al. Hereditary breast and ovarian cancer: Risk assessment in minority women and provider knowledge gaps. Journal of Community and Supportive Oncology. 2016;14(6):261-267.Rubinstein WS, Acheson LS, O'Neill SM, et al. Clinical utility of family history for cancer screening and referral in primary care: A report from the Family Healthware Impact Trial. Genetics in Medicine. 2011;13(11):956-965.Guerra CE, Sherman M, Armstrong K. Diffusion of breast cancer risk assessment in primary care. Journal of the American Board of Family Medicine. 2009;22(3):272-279.Kaplan CP, Livaudais-Toman J, Tice JA, et al. A randomized, controlled trial to increase discussion of breast cancer in primary care. Cancer Epidemiology Biomarkers and Prevention. 2014;23(7):1245-1253.Orlando LA, Wu RR, Beadles C, et al. Implementing family health history risk stratification in primary care: Impact of guideline criteria on populations and resource demand. American Journal of Medical Genetics, Part C: Seminars in Medical Genetics. 2014;166(1):24-33. |
|  | Implementation of breast cancer risk assessment for women without a personal history of breast cancer among women receiving screening mammograms | Cohen SA, Nixon DM. A collaborative approach to cancer risk assessment services using genetic counselor extenders in a multi-system community hospital. Breast Cancer Research and Treatment. 2016;159(3):527-534.Destounis S, Arieno A, Morgan R. Implementation of a risk assessment program in a breast-imaging community practice. Breast Cancer. 2016;23(2):273-278. |
|  | Evaluation of hereditary cancer risk assessment tools and protocol | Kaplan CP, Livaudais-Toman J, Tice JA, et al. A randomized, controlled trial to increase discussion of breast cancer in primary care. Cancer Epidemiology Biomarkers and Prevention. 2014;23(7):1245-1253.Stewart SL, Kaplan CP, Lee R, et al. Validation of an Efficient Screening Tool to Identify Low-Income Women at High Risk for Hereditary Breast Cancer. Public Health Genomics. 2017;19(6):342-351.Sweet K, Sturm AC, Rettig A, McElroy J, Agnese D. Clinically relevant lessons from Family HealthLink: A cancer and coronary heart disease familial risk assessment tool. Genetics in Medicine. 2015;17(6):493-500.Acheson LS, Zyzanski SJ, Stange KC, Deptowicz A, Wiesner GL. Validation of a self-administered, computerized tool for collecting and displaying the family history of cancer. Journal of Clinical Oncology. 2006;24(34):5395-5402.Bellcross CA, Lemke AA, Pape LS, Tess AL, Meisner LT. Evaluation of a breast/ovarian cancer genetics referral screening tool in a mammography population. Genetics in Medicine. 2009;11(11):783-789.Hoskins KF, Zwaagstra A, Ranz M. Validation of a tool for identifying women at high risk for hereditary breast cancer in population-based screening. Cancer. 2006;107(8):1769-1776.Orlando LA, Wu RR, Myers RA, et al. Clinical utility of a Web-enabled risk-assessment and clinical decision support program. Genetics in Medicine. 2016;18(10):1020-1028.Teller P, Hoskins KF, Zwaagstra A, et al. Validation of the Pedigree Assessment Tool (PAT) in families with BRCA1 and BRCA2 mutations. Annals of Surgical Oncology. 2010;17(1):240-246.Wu RR, Orlando LA, Himmel TL, et al. Patient and primary care provider experience using a family health history collection, risk stratification, and clinical decision support tool: A type 2 hybrid controlled implementation-effectiveness trial. BMC Family Practice. 2013;14.McClain MR, Palomaki GE, Hampel H, Westman JA, Haddow JE. Screen positive rates among six family history screening protocols for breast/ovarian cancer in four cohorts of women. Familial Cancer. 2008;7(4):341-345.Niendorf KB, Geller MA, Vogel RI, et al. A model for patient-direct screening and referral for familial cancer risk. Familial Cancer. 2016;15(4):707-716.Ozanne EM, Loberg A, Hughes S, et al. Identification and management of women at high risk for hereditary Breast/Ovarian cancer syndrome. Breast Journal. 2009;15(2):155-162.Palomaki GE, McClain MR, Steinort K, Sifri R, LoPresti L, Haddow JE. Screen-positive rates and agreement among six family history screening protocols for breast/ovarian cancer in a population-based cohort of 21- to 55-year-old women. Genetics in Medicine. 2006;8(3):161-168.Scheuner MT, Hamilton AB, Peredo J, et al. A cancer genetics toolkit improves access to genetic services through documentation and use of the family history by primary-care clinicians. Genetics in Medicine. 2014;16(1):60-69. |
|  | Assessment of primary care clinicians’ ability to determine hereditary cancer risk | Baldwin LM, Trivers KF, Andrilla CHA, et al. Accuracy of ovarian and colon cancer risk assessments by U.S. physicians. Journal of General Internal Medicine. 2014;29(5):741-749.Bellcross CA, Kolor K, Goddard KAB, Coates RJ, Reyes M, Khoury MJ. Awareness and utilization of BRCA1/2 testing among U.S. Primary Care Physicians. American Journal of Preventive Medicine. 2011;40(1):61-66.Burke W, Culver J, et al. Genetic assessment of breast cancer risk in primary care practice. American Journal of Medical Genetics, Part A. 2009;149(3):349-356.Trivers KF, Baldwin LM, Miller JW, et al. Reported referral for genetic counseling or BRCA 1/2 testing among United States physicians: A vignette-based study. Cancer. 2011;117(23):5334-5343. |
|  | Identification of ways to improve cancer risk assessment and access to genetic services for those at-risk | Cohen SA, Nixon DM. A collaborative approach to cancer risk assessment services using genetic counselor extenders in a multi-system community hospital. Breast Cancer Research and Treatment. 2016;159(3):527-534.Orlando LA, Henrich VC, Hauser ER, Wilson C, Ginsburg GS. The genomic medicine model: An integrated approach to implementation of family health history in primary care. Personalized Medicine. 2013;10(3):295-306.Shah A, Harris H, Brown T, et al. Analysis of insurance preauthorization requests for BRCA1 and BRCA2 genetic testing: Experience of the Humana Genetic Guidance Program. Personalized Medicine. 2011;8(5):563-569. |
|  | Prevalence of and characteristics associated with referrals, genetic counseling, and testing for HBOC | Haber KM, Seagle BLL, Drew B, et al. Genetic counseling for hereditary breast and gynecologic cancer syndromes at a community hospital. Connecticut Medicine. 2014;78(7):417-420.Bellcross CA, Leadbetter S, Alford SH, Peipins LA. Prevalence and healthcare actions of women in a large health system with a family history meeting the 2005 USPSTF recommendation for BRCA genetic counseling referral. Cancer Epidemiology Biomarkers and Prevention. 2013;22(4):728-735.Bellcross CA, Peipins LA, McCarty FA, et al. Characteristics associated with genetic counseling referral and BRCA1/2 testing among women in a large integrated health system. Genetics in Medicine. 2015;17(1):43-50.Quillin JM, Krist AH, Gyure M, et al. Patient-reported hereditary breast and ovarian cancer in a primary care practice. Journal of Community Genetics. 2014;5(2):179-183.Levy DE, Garber JE, Shields AE. Guidelines for genetic risk assessment of hereditary breast and ovarian cancer: early disagreements and low utilization. J Gen Intern Med. 2009;24(7):822-828.White DB, Bonham VL, Jenkins J, Stevens N, McBride CM. Too many referrals of low-risk women for BRCA1/2 genetic services by family physicians. Cancer Epidemiology Biomarkers and Prevention. 2008;17(11):2980-2986.Wood ME, Kadlubek P, Pham TH, et al. Quality of cancer family history and referral for genetic counseling and testing among oncology practices: A pilot test of quality measures as part of the American Society of Clinical Oncology Quality Oncology Practice Initiative. Journal of Clinical Oncology. 2014;32(8):824-829. |