



The European Registry of Hereditary Pancreatic Diseases

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EUROPAC Referral Sheet

Participant Details			
Participant Name		M/F	
NHS Number		Date of Birth	
Participant address		Post Code	
Participant contact Number		Your Reference Number	
Referrer Details			
Referrer Name			
Date			
Referrer Email address			
Family History (Tick appropriate)			
2 or more First Degree Relative with first degree kinship with pancreatic cancer (For example, parent and grandparent, parent and sibling, parent, and aunt/uncle etc.)			
3 or more cases of pancreatic cancer in the family			
1 or more cases of pancreatic cancer with an associated syndrome (BRCA1, BRAC2, ATM, PALB2, Lynch Syndrome/HPNCC, FAMMM/ Multiple Melanoma)			
Peutz-Jeghers Syndrome			
Two or more relatives with idiopathic pancreatitis			
Family history of pancreatitis and PRSS1 mutation			
Other:			
Is the patient aware that this a study?		Is patient happy to be contacted by the EUROPAC Team?	
Has a referral been made to genetics?			
Referral Documents For genetics service only			
Family Pedigree	Yes	No	N/A
Lab Report	Yes	No	N/A
Confirmations of diagnosis	Yes	No	N/A

If you have any queries regarding eligibility, contact the EUROPAC Team via your Regional Navigator
The EUROPAC Study does take self-referrals, there is no referral sheet for this, patients simply contact the team.

Once complete please send the referral sheet to europac.study@liverpoolft.nhs.uk