Gender Affirming Surgical and Clinical Considerations

- Some transsexual, transgender, and gender non-conforming people choose to have surgery to treat severe gender dysphoria and others do not. This is a choice based on personal preferences and medical need.
- Surgery may have unexpected or unintended impact on gender dysphoria in some patients.
- Surgery is not required to make complete legal transition.

What is Hysterectomy Surgery?

- Hysterectomy removes uterus, tubes, and ovaries but does not remove the vagina or create a penis.
- Hysterectomy can be done using several procedures. While total vaginal hysterectomy with bilateral salpingo-oophorectomy is the least invasive it is not possible for all patients.
- The type of hysterectomy is based on uterus size and other patient factors and is determined by the gynecologist at the pre-op exam.
- Hysterectomy reduces estrogen to usual post-menopausal levels.

What is Aftercare for Hysterectomy Surgery like?

- Recovery time from hysterectomy depends on the type of procedure done.
- Overnight hospitalization is not typically required, but is dependent on the patient, surgeon and procedure.
- Return to work and normal activities depends on the type of procedure and usually ranges from 2-6 weeks after surgery.
- Complete instructions for pre-op preparation will be provided by the gynecologist and will include instructions for necessary bowel prep.

What are the risks and possible complications of Hysterectomy Surgery?

- Effects of surgery are permanent and irreversible.
- Hysterectomy causes irreversible loss of fertility.
- Cigarette smoking may interfere with wound healing and stopping smoking is highly recommended before surgery.
- Hysterectomy causes irreversible decrease in estrogen and therefore hormone therapy with estrogen or testosterone will be necessary to prevent osteoporosis.

What are the limitations of Hysterectomy Surgery?

- It is possible to store egg cells to preserve the possibility of fertility for the future, but this requires hormone manipulation therapy, minor surgical procedures, and is costly and usually not covered by health insurance, and may not work.

All of the information on this form has been reviewed with me and I understand it and have had any questions answered.

________________________________________
Patient / Client Name and Signature

I have reviewed all of the information on this form with my patient / client and I am confident that my patient / client understands this information.

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Provider Name and Signature