



City and County of San Francisco  
London N. Breed  
Mayor

# San Francisco Department of Public Health

Grant N. Colfax, MD  
Director of SF DPH

## Pre-Surgical Assessment for Gender Affirming Surgery: What I Need to Know

### 1. What the assessment is not

- a. It is not an evaluation of one's gender. No one can assess another person's gender.
- b. It is not a test. There are no right or wrong answers. The more accurate information you provide, the better and more complete your assessment will be. A more complete assessment means we will be more able to provide you with the supports and resources you will need to have a positive outcome from surgery
- c. There is no singular narrative or experience of gender and we are not looking for a specific narrative. You have your own experience of gender and gender transition and the uniqueness of your experience is very important. Surgery can be helpful for people who have a binary identity as well as for people who have a non-binary, genderqueer, gender fluid, or gender non-conforming identity.

### 2. What is the purpose of the assessment?

- a. To support you in the process of obtaining surgery and increase the likelihood of a positive outcome from surgery and recovery
- b. To identify any areas in your life that might need additional support and/or resources
- c. To help create a plan for getting that support
- d. To establish "medical necessity" for obtaining surgery
- e. To establish criteria under WPATH Standards of Care 7
- f. To provide information to insurance, Gender Health SF, and the surgeon(s)
- g. To assess capacity to give informed consent
- h. To discuss outcomes and expectations
- i. To provide you with information about the procedure(s) and aftercare needs
- j. To gather collateral information as available and necessary

### 3. What are the possible outcomes of the assessment?

- a. I will receive a diagnosis of Gender Dysphoria and any other mental health condition(s) present
- b. A letter or form that states one of the following:
  - i. I am ready for surgery and there are no concerns to be addressed
  - ii. I am ready for surgery and need a few supports in place
  - iii. I will be ready for surgery after I have supports in place
  - iv. An agreement (including tx plan with time frame) with client that there are currently significant issues that are barriers to informed consent, to readiness for surgery, or to positive post-surgery outcomes. A letter would



# San Francisco Department of Public Health

Grant N. Colfax, MD

Director of SF DPH

City and County of San Francisco  
London N. Breed  
Mayor

be provided in the future when the person has stabilized in the identified areas, if still desired and appropriate.

- c. A treatment plan outlining the plan for supports that may be needed
- d. This is not a “yes” or “no” process, but rather a chance for us to make a plan for surgery
- e. The assessment is valid for one year

#### **4. How long will the assessment take?**

- a. A first assessment will take a *minimum* of three 50-minute sessions. The length depends on how the process goes. It is best not to rush the assessment.
- b. A second assessment (required only for genital surgeries) typically takes one-to-two 50-minute sessions, but the length also depends on how the process goes

#### **5. Who will read this assessment**

- a. The surgeon(s), Gender Health San Francisco (if you live in SF), your PCP, your insurance, and you

#### **6. What happens after the assessment is done?**

- a. The assessment will be added to your medical chart and sent to Gender Health SF for review
- b. Once reviewed by Gender Health SF, it will be sent to your insurance for consultation authorization
- c. Once reviewed by your insurance, you will receive notification of either authorization, deferral, or denial. If you receive an authorization, it will be to schedule an appointment with the surgeon for consultation. If you receive a deferral or a denial, we will work with you to address the reasons for the deferral or denial
- d. This part of the process can take several months
- e. Typically, a surgery date will be discussed at the consultation appointment with the surgeon

Author: Tim Sasaki, LCSW, MPH