

Transgender Health Services Policy Page

Transsexual, transgender and gender-nonconforming people may have gender dysphoria that requires treatment. Hormone therapy and sex reassignment surgery are medically necessary treatments for appropriate patients. Masculinizing or feminizing hormone therapy is a well established intervention for many patients. Surgery is often the last and most involved step in the treatment process for gender dysphoria.

TRANSGENDER HEALTH SERVICES

I. Hormone Therapy Services

Questions regarding hormone therapy frequently come up in the care of transsexual, transgender, and gender nonconforming patients. You may use this eReferral system to obtain expert advice on challenging cases. *This is an advice-only service and we are currently unable to see patients for evaluation or management.* Additional resources are available on the SFDPH transgender health website and can also be found [here](#).

II. Transgender Sex Reassignment Surgery Services

Referrals for Sex Reassignment Surgery services are accepted from primary care providers of patients who have established primary care relationships. In general the expectation is that the patient has been in care in San Francisco for greater than 1 year and has had at least 4 visits in the past year. However, for patients who are stable and have been in care for many years, this requirement can be flexible. In your initial referral please indicate the length of time you have seen the referred patient and the regularity or frequency of care provided. A medical evaluation form is necessary for all referrals and can be found [here](#).

Patients are not required to have an established relationship with a mental health provider, but referring providers should describe how a patient will obtain psychosocial assessment. Transgender Health Services can provide a referral if necessary. Detailed discussion of the role of the mental health professional is available in [WPATH SOC7](#) (see pp 23-33 and 57-62). The SFDPH guidelines for psychosocial assessments and letters is available at <http://transgenderhealthservices.wordpress.com/>.

San Francisco Health Network, San Francisco Health Plan, and Anthem Blue Cross Medi-Cal all follow World Professional Association for Transgender Health (WPATH) Standards of Care guidelines for eligibility criteria. SFDPH and SFHP unified criteria are available [here](#).

Please note: Other health plans may not cover sex reassignment surgery or may have additional criteria. We will attempt to clarify criteria and availability of service for each patient referred.

Transgender Sex Reassignment Surgery Services encompass the following:

A. Orientation Sessions

Quarterly orientations are held to educate patients about available services and choices. These are drop-in sessions open to all patients interested in learning about or considering sex reassignment surgery. Attendance at orientation session is not required for referral.

B. Education and Preparation Program: a 4 session program is mandatory. After eReferral is completed patients will be invited to participate in the education and preparation program. This

will usually occur several months before scheduled surgery. Primary care providers will be notified before their patients are invited.

C. Surgery Referrals

Transgender surgeries are described below with specific patient education documents. Please review the relevant form with your patient and indicate with a signature that they received and understood the material.

Feminizing surgeries

Orchiectomy: The following patients may be appropriate for orchiectomy: transsexual, transgender, and gender non-conforming individuals who wish to permanently remove testes to eliminate the production of testosterone, to make tucking less painful / more convenient, or due to another cause of persistent and well-documented dysphoria caused by the presence of testes. More information on **Orchiectomy education documentation**, click [here](#) for English version and [here](#) for Spanish version.

Vaginoplasty: The following patients may be appropriate for vaginoplasty: transsexual, transgender, and gender non-conforming individuals with persistent and well-documented gender dysphoria that would be relieved by undergoing surgery for surgical alteration of external male genital structure for creation of vulva and vagina. More information on **Vaginoplasty education documentation**, click [here](#) for English version and [here](#) for Spanish version.

Feminizing Mammoplasty (breast augmentation): The following patients may be appropriate for feminizing mammoplasty: transsexual, transgender, and gender non-conforming individuals with persistent and well-documented gender dysphoria who have not had breast growth from feminizing hormone therapy adequate to relieve their gender dysphoria and who would benefit from surgery to create a female appearing chest and breasts. Generally it is recommended that individuals undergoing this surgery have been on hormone therapy for at least 1 -2 years to allow breast growth sufficient to give the best surgical results

Other surgeries: The following are not currently provided by San Francisco Health Network, but advice regarding the appropriateness of these surgeries for individual patients is available: facial feminization, thyroid cartilage reduction, and voice surgeries.

Masculinizing surgeries

Subcutaneous mastectomy and male chest creation (SCM): The following patients may be appropriate for SCM: transsexual, transgender, and gender non-conforming individuals with persistent and well-documented gender dysphoria that would be relieved by undergoing surgery for removal of breast tissue and creation of a male appearing chest. More information on **SCM education documentation**, click [here](#).

Hysterectomy with or without bilateral or unilateral salpingectomy and oophorectomy: The following patients may be appropriate for hysterectomy: transsexual, transgender, and gender non-conforming individuals with persistent and well-documented gender dysphoria that would be relieved by undergoing surgery for removal of uterus, and or ovaries and fallopian tubes. More information on **Hysterectomy education documentation**, click [here](#).

Metoidioplasty: The following patients may be appropriate for metoidioplasty: transsexual, transgender, and gender non-conforming individuals with persistent and well-documented gender dysphoria that would be relieved by undergoing surgery to alter enlarged clitoris to better resemble a small penis, with or without urethral extension. Generally it is recommended that individuals undergoing this surgery have

been on hormone therapy for at least 1 -2 years to allow enlargement of the clitoris sufficiently to give the best post operative results. **Metoidioplasty education documentation**, [click here](#)

Phalloplasty: The following patients may be appropriate for phalloplasty: transsexual, transgender, and gender non-conforming individuals with severe persisting and well-documented gender dysphoria that would be relieved by undergoing surgery for creation of a penis and who are willing and able to undergo surgery that has a high complication rate, is considered extensive and technically complex, requires multiple stages, is significantly scarring at the donor site, and has prolonged recovery time. **Phalloplasty education documentation**, [click here](#).

DIRECTIONS FOR EREFERRAL REQUESTS

Advice regarding evaluation and management of hormone therapy may be obtained by all clinicians and can be initiated by submitting a referral.

Referrals for sexual reassignment surgery must meet the criteria above. Some surgeries are offered at SFGH and others may be available out of network depending upon the patient's insurance status. Transgender Health Services will assist with determining eligibility and availability.

IMPORTANT :In order to best serve you and your patient, please ensure that you have completed all the steps below.

1. In your eReferral, indicate what type of surgery is requested. Please also briefly describe the length of time you have seen the patient and how often the patient has been seen for care. Please indicate whether or not this patient currently receives mental health care or has in the recent past and where.
2. If the mental health assessment and letters have been completed, please fax these documents to **Barry Zevin MD attention Transgender Health Project** at 415-355-7407 or scan into eCw or email barry.zevin@sfdph.org. If they have not yet been completed, please include in your eReferral your plans for obtaining this required service.
3. Complete and fax the appropriate patient education documentation form, which must be signed by both patient and clinician providing the education, to **Barry Zevin MD attention Transgender Health Project** 415-355-7407 or scan into eCw or email barry.zevin@sfdph.org. You can find the patient education documentation form above in the section for the specific types of surgery.
4. Complete and fax the [SRS Medical Evaluation Form](#) to **Barry Zevin MD attention Transgender Health Project** at 415-355-7407 or email barry.zevin@sfdph.org.
5. After submitting an eReferral you will receive a response within 5 days. If this has not occurred, please contact Barry Zevin MD at barry.zevin@sfdph.org or 415-355-7520.