Patient Name: _________________________________     Date of Birth: ___________________
Guarantor Name (if different): ____________________     Date completed: ________________

Patient Education for Vaginoplasty Surgery

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. (Some states or countries require specific surgery to change birth certificate information.)

What is Vaginoplasty Surgery?

• The intended results of vaginoplasty are to relieve severe gender dysphoria by creation of a natural appearing vagina with normal sensation and capability of satisfying sexual sensation and functioning.
• There are several techniques for vaginoplasty and the technique used will depend on the patient and the surgeon.
• Vaginoplasty may use tissue from the scrotum and penis to create a vagina. After the surgery there will be no more scrotum or penis.
• Vaginoplasty does not create uterus or ovaries and menstruation and pregnancy are not possible.
• Vaginoplasty includes removal of both testes (orchiectomy).
• Orchiectomy reduces testosterone to typically female levels.
• Vaginoplasty does not remove the prostate gland and a risk for prostate cancer is still present.
• Sexual feelings and orgasm are usually described as different after vaginoplasty. Most patients are able to experience orgasm.
• Vaginoplasty surgery usually takes 3-5 hours in the operating room.
• Estrogen hormone therapy should be stopped 2 - 4 weeks or more before surgery to reduce the risk of blood clots. It may be advisable to taper off hormones for a longer period of time to avoid adverse effects on mood.
• For best post-surgical results, electrolysis or laser hair removal is recommended starting several months before surgery.
• It is recommended that before undergoing vaginoplasty patients look at photos of a variety of women’s genital areas and photos of the results for the surgeon they chose and other surgeons.
• Vaginoplasty can be done successfully for some patients who have had orchiectomy in the past, but it is recommended to speak with your doctor.
• Vaginoplasty is not minor surgery.

What is Aftercare for Vaginoplasty Surgery like?

• Vaginoplasty may require 2 or more different surgeries to complete.
• Vaginoplasty usually requires 2-3 or more days of hospitalization after surgery.
• Vaginoplasty usually requires 2 ½ to 3 weeks of recuperation before being able to go back to desk work and no strenuous activities for 4-6 weeks.
• Vaginoplasty requires following a dilating protocol. At first, 10 – 20 minutes at 2-3 times per day and then gradually decreasing to once a day and then at least weekly (if not sexually active with insertive vaginal sex) for life.
• Insertive vaginal intercourse is not recommended for 6 weeks after surgery but other sex can be started based on personal preference.
• Most patients require lubrication for sex.
• Vaginoplasty causes moderate to severe pain immediately after and during surgery recovery.
• Complete instructions for pre-op preparation and post-operative care will be provided by the surgeon.

What are the risks and possible complications of Vaginoplasty Surgery?

- Effects of surgery are permanent and irreversible.
- If orchiectomy surgery is performed during vaginoplasty surgery, this causes irreversible loss of fertility. This will cause permanent sterility.
- Cigarette smoking may interfere with wound healing and stopping smoking is highly recommended before surgery. Some surgeons require smoking cessation 6 months before surgery and 6 months after.
- Obesity may create complications and interfere with wound healing. Some surgeons have maximum BMI (body mass index – a measure of obesity) that they perform surgery on.
- Body shape may have a large effect on the possibility of successful vaginoplasty and a surgeon will consider both weight and height, as well as body shape.
- If orchiectomy surgery is performed during vaginoplasty surgery, this will cause irreversible decrease in testosterone and therefore hormone therapy with estrogen or testosterone will be necessary to prevent osteoporosis.
- Low testosterone usually results in decreased libido although this is variable from individual to individual.

What are the limitations of Vaginoplasty Surgery?

- Insertive sexual penetration may always require lubrication.
- Dilating protocol is required for life.
- It is possible to store sperm to preserve the possibility of having biological children after orchiectomy during vaginoplasty surgery. This is usually not covered by health insurance and is not guaranteed to 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.

_______________________________________________________
Provider Name and Signature