
Checklist: Caring for Transgender Patients

Understand and Use the Right Transgender or Gender-Diverse Lingo

- Ask and document which name and pronoun patients use. Explain to patients that you need the name and gender on file with their insurance for billing.
- Understand common terms related to sex, gender identity, and sexual orientation:
 - **agender**: a person who does not identify with a gender.
 - **assigned sex at birth**: the sex (male, female, intersex) assigned to a child at birth, most often based on the child's external anatomy. Also known as birth sex, natal sex, biological sex, or sex.
 - **bigender**: a person whose gender identity is a combination of two genders.
 - **bisexual**: a person who is emotionally and sexually attracted to both their own and other genders.
 - **cisgender**: a person whose gender identity and assigned sex at birth correspond.
 - **gay**: a person who is emotionally and sexually attracted to people of their own gender. Can be used regardless of gender identity, but is more commonly used to describe men.
 - **gender binary**: the classification of gender into two distinct, opposite, and disconnected forms of masculine and feminine.
 - **genderqueer/gender expansive**: identity falls outside the traditional gender categories.
 - **lesbian**: a woman who is emotionally and sexually attracted to other women.
 - **LGBTQ**: lesbian, gay, bisexual, transgender, queer and/or questioning population.
 - **pangender**: a person whose gender identity is made up of many genders.
 - **transgender male/female-to-male (FTM)**: assigned as female at birth and identifies as male.
 - **transgender female/male-to-female (MTF)**: assigned male at birth and identifies as female.

Provide Comprehensive Care

- Keep assigned sex at birth in mind for diagnoses. Assigned sex at birth is protected by HIPAA.⁴ But, remember contraception may be needed in some transgender males taking meds with fetal risk (e.g., ACEIs, ARBs, statins) and prostatitis may develop in transgender females.
- Document sex, gender identity, and sexual preference in your computer system (e.g., EHR).
- Document medication indications to avoid confusion. For example, in a transgender female, spironolactone may be used to block testosterone production.
- Consider calculating renal function using gender identity rather than sex at birth for patients who have been on transgender hormone therapy for at least six months. Hormones can affect lean body weight and serum creatinine.⁵
- Screen for health conditions. The LGBTQ patients may be more likely to have or less likely to be screened for some conditions compared to the non-LGBTQ population.¹⁻³ Conditions may include:
 - depression, anxiety, and suicide
 - alcohol, tobacco, and illicit drug use
 - cardiovascular disease; use our chart, *Common Cardiovascular Risk Calculators*, to assess risk.
 - cancers (e.g., breast cancer transgender males)
 - HIV; use our checklists, *Pre-Exposure Prophylaxis (PrEP) Checklist* and *Post-Exposure Prophylaxis (PEP) Checklist*, to safely prescribe PEP and PrEP to appropriate patients.

Help Patients Feel Welcome

- Ensure patients can **confidentially** identify their gender identity and sexual orientation.
- Ensure staff are trained on culturally competent and empathetic care. Use our CE, *Cultural Competence: LGBTQ Patients*, as a part of this training.
- Ask gender-neutral questions, like “How may I help you?” or “What are your concerns today?”

More . . .

- Be sensitive during patient discussions. Can consider referring to the Canadian Public Health Association resource, Language Matters: useful respectful language in relation to sexual health, substance use, sexually transmitted blood-borne infections and intersecting sources of origin (<https://www.cpha.ca/sites/default/files/uploads/resources/stbbi/language-tool-e.pdf>), for helpful ways to phrase things respectfully and avoid using out-of-date or offensive terminology.

Users of this resource are cautioned to use their own professional judgment and consult any other necessary or appropriate sources prior to making clinical judgments based on the content of this document. Our editors have researched the information with input from experts, government agencies, and national organizations. Information and internet links in this article were current as of the date of publication.

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