

Gender Affirming Hormone Therapy Patient Handbook



Welcome to gender-affirming hormone therapy at Planned Parenthood! You don't need to read this whole reference guide cover to cover right away—use it if you can't remember something, or you're not sure how something works.

You're also welcome to contact one of our LGBTQ Care Coordinators or Patient Services with any questions. We are here for you!

Contacting Care Coordinators

By Email:

Minnesota: minnesota.lgbtqcare@ppncs.org

Iowa: iowa.lgbtqcare@ppncs.org

Nebraska: nebraska.lgbtqcare@ppncs.org

North Dakota: northdakota.lgbtqcare@ppncs.org

South Dakota: southdakota.lgbtqcare@ppncs.org

By Phone:

Minnesota, North Dakota, South Dakota:
651.359.2557

Iowa:
515.235.0430

Nebraska:
515.309.1525

Patient Services: 1.800.230.PLAN (7526)

Contents

Our Approach to Care.....	3
Your First Appointment.....	7
Ongoing Care & Labs.....	10
Billing & Insurance.....	12
Pharmacies & Refills.....	13
Estrogen Patients.....	15
Testosterone Patients.....	18
Injections/Injection Training.....	21
Transition Help.....	23
Online Resources.....	25

Our Approach to Care

The Care We Provide

We believe everyone deserves access to high-quality, supportive care.

You deserve health care providers who make you feel accepted, heard, and empowered. You can trust us to provide honest, unbiased information in a safe, supportive environment.

Our gender-affirming hormone therapy services include both estrogen hormone therapy and testosterone hormone therapy.

We work with all patients, regardless of gender or identity. We work with your individual goals instead of putting you into “box.”

Informed Consent

Our hormone therapy uses an informed consent model. You do not need a diagnosis or therapist’s referral to receive care. We will inform you about the effects and discuss risks. You decide what’s best for you and your body.

Minors

You must be at least 16 years old and post-puberty. Bring a parent or guardian to your first visit if you are under the age of:

- 18 in Iowa, Minnesota, or South Dakota
- 19 in Nebraska

Questions?

Our **LGBTQ Care Coordinators** can help you connect with resources in your community, help find answers to your questions, get care at our health centers, or try to smooth out any bumps in the road you encounter along the way.

We are happy to provide information, resource recommendations, and guidance on all steps of medical, legal, and social transition. Please don’t hesitate to ask about anything, big or small. We’ll do our best to help you.

Locations

You can visit any health center in our region. You can also have your appointment by a telehealth video call. You do not need to visit the

same health center or see the same provider for each appointment.

If you move between a health center/telehealth in Iowa/Nebraska and Minnesota/South Dakota, you may need to complete an additional intake process.

Your Name and Gender Marker

We get that names can be complicated. We will do our best to affirm you and minimize the distress that can arise from deadnaming and misgendering.

However, we need to have you entered in our system under your current legal name. This ensures there aren't any problems billing your insurance or filling your prescriptions.

Please provide us with a chosen name if you prefer, and we will use this name in all interactions with you. We can find you in our system under your chosen name. You never need to tell us your legal name once your chart is created unless you want to.

Because of insurance requirements and certain limitations in our software, you may see your legal name used on occasion. These may include:

- Bills
- Prescriptions
- Patient Portal messages

We understand that seeing your legal name may be distressing, and we apologize. We are working to reduce the use of legal names whenever possible.

Also, strictly for insurance purposes, your sex in our system must match what's listed with your insurance company. This may result in you seeing the wrong sex or gender listed in medical records.

If you change your legal name and/or gender marker with your insurance company, please let us know as soon as possible so we can update our system.

Names and Pronouns in Public Areas: We want you to feel comfortable when you visit us. We will default to using your chosen name and the pronouns you provide in all areas of the health center. If you would prefer us to use one set of names and pronouns in the public waiting area and another in the private exam room, please let us know.

Patient Portal

Our online Patient Portal is a secure and convenient way to manage your hormone care with us. You can use it to:

- Securely message health center staff and our LGBTQ Care Coordinators with any questions or concerns.
- View your lab results.
- Retrieve your medical records.
- View paperless statements and pay bills.

You'll receive an enrollment email when you have your appointment.

Visit ppncs.org/portal to learn more.

Confidentiality

All services are confidential (except in cases of abuse). Please be open with the provider to ensure that you receive the best health care.

Phone Calls: We care about your safety. You can choose how you want us to identify when we call. We can use "Planned Parenthood" or something more discrete ("Doctor's Office"). If you have any preferences about what name and/or pronouns we should use when calling, please let us know.

Mailings: We do send you mail, both bills and occasional communications.

To stop receiving mailed bills, you can choose to receive your statements electronically. Set up a Patient Portal account, go to 'Settings,' uncheck the 'Send Paper Statements Box,' and hit 'Submit.' You'll get your statements through the Portal.

If you are concerned about receiving any mail at all, you may consider providing us with an alternate address. This way, correspondence is not sent to your home. These could include:

- The home of a trusted friend or family member
- A P.O. box
- General delivery service at a post office

Please contact Patient Services with any changes. We will put notes in your chart indicating your communication preferences.

Feedback and Concerns

We want to make your health care experience the best it can be, and your feedback is critical in making that happen.

Anonymous: You may receive surveys that ask about your experience at your appointment or as a patient. We appreciate you taking the time to respond. We review all feedback. These surveys help us to focus on areas where we can grow and serve you better.

Direct: If you have a negative experience or want to talk to us about anything, please reach out however you feel comfortable:

- LGBTQ Care Coordinators (contact info on p. 2)
- Patient Services (contact info on p. 2)
- Ask to be connected to a manager at the health center where you were seen.

Your First Appointment

How to Prepare

You don't need to bring much to your first appointment:

- A photo ID
- Your medical insurance information, or proof of income if you do not have insurance.
- If you are or have ever been on hormone therapy, please bring any medical records or information you have.

It may help things go easier if you can come prepared to talk about:

- Your medical history and those of close family members (parents and siblings).
- Specific goals you're hoping to achieve.
- Questions or concerns you have about hormone therapy.

At the Front Desk

When you arrive, we'll ask you for your ID. You'll confirm your last name and date of birth on your ID. We will not ask for a first name.

If we don't have your demographic information, we'll hand you a sheet to fill out:

- Chosen name
- Gender identity
- Assigned sex at birth
- Pronouns
- Income information

In the Exam Room

We'll do a quick physical assessment:

- Height
- Weight
- Blood pressure

We will collect some information:

- Physical/medical history
- Sexual history

- Surgical history
- Mental health history
- Current health practices

These inform us about potential risks and help us monitor your health during treatment.

We understand that it can be hard or awkward to answer questions like these. We ask that you share as openly as you can. Please let us know how we can make the conversation easier and more comfortable for you.

We will draw blood for lab tests: These are done to monitor possible side effects of hormones. If needles are a problem for you, please let us know. We'll see what we can do to make you feel more comfortable.

Baseline Hormone Levels: We do not usually take these when starting hormone therapy. We will check your hormone levels when you come in for follow-up appointments.

We'll ask you about your transition goals: We like to learn about your journey with gender, how your transition is going, and where you want to end up. This helps us to not make assumptions and create a care plan that fits your needs.

We'll talk about hormone therapy:

- What the effects and risks are.
- How you will take them.
- Answer any questions you might have.

You'll review our informed consent form, which includes:

- Risks
- Benefits
- Expected physical changes
- Expected time frame for changes
- Possible emotional changes

We'll go through the document together. You can ask any questions you have before signing it.

Receiving Your Prescription

Most of our patients can get a hormone prescription at the end of their first visit with us. However, sometimes it makes sense to wait for

lab results or to consult with another provider.

Once the provider has determined that you are medically ready to begin transgender hormone therapy, you will sign the consent form. Then they will prescribe hormones.

We'll send your prescription electronically to your pharmacy. It may be available immediately, but supply issues or prior authorizations may cause delays.

If your prescription directions are different than what your provider told you, please follow your provider's instructions. For example, your dosage may have changed. Please contact us if you have any questions.

The label may have your legal name on it so insurance will cover it. We can help you with the legal name change process if desired.

Telehealth

Telehealth appointments work the same way as visits to our health centers, except:

- You will self-report your height and weight.
- We will not check your blood pressure.
- We will not draw initial labs.

If you need labs, you may be asked to come in for a quick lab appointment. If you live too far away, we may be able to work with a non-Planned Parenthood lab close to you for the necessary tests.

Key Things to Remember

Be Patient: Everyone's body is different. The extent of change and rate of change experienced by you may be different from others. Like a "second puberty," the full effects of these hormones may take years. Everyone changes at their own rate.

More is not always better: Higher doses do not necessarily make things move quicker. It could endanger your health.

Other Commonly Reported Effects: Estrogen and testosterone control a lot of things about our bodies. They affect everyone in different ways. Some people experience things beyond the usual physical changes the hormones will cause. You may notice changes in things like:

- **Sexual Orientation:** You may find who you are attracted to changes.

- **Sexual Experience:** You may experience changes in what arouses you. Changes in how it feels to be aroused or what feels good. The feel of your orgasms may change.
- **Emotions:** You may feel emotions more strongly or less strongly. You may notice a difference in what emotions you feel more often.
- **Temperature Regulation:** You may find your tolerance for heat or cold may change.

If you have any questions or concerns,

- Bring them up at your next follow-up appointment.
- Contact our care team.
- Contact an LGBTQ Care Coordinator (contact info on p. 2)

Ongoing Care & Labs

Follow-Up Appointments

During your first year, we like to see you at 3 months, 6 months, and 12 months for follow-ups so we can:

- Do lab work to see how things are going.
- Check in with you about the changes you're experiencing.
- Check that your hormone levels are in a therapeutic range for your desired effects.

We may make dosage adjustments based on your feedback and lab results.

If your levels are stable and you're happy with your protocol, after your 12-month visit we'll want to see you once yearly for a follow-up appointment and labs. You are always welcome to come in sooner if you'd like, and we may require more frequent follow-ups if you are not on a stable dose.

It is your responsibility to schedule these appointments.

Lab Work

You will need periodic blood draws so we can monitor your hormone levels. We want to make sure you're staying healthy on the medications we're prescribing.

We do labs in our own health centers during your appointment. If you

are seen by telehealth and require labs, you can call 1-800-230-7526 and schedule a brief appointment for lab work.

If you live too far from one of our health centers, or have other special circumstances, sometimes we can arrange for you to get your labs from an outside provider.

Lab Timing: Your hormone levels will fluctuate throughout the course of each dose. We prefer that you schedule your labs during the middle of a dose cycle, so that we can interpret them properly. See the “Estrogen Patients” and “Testosterone Patients” sections for more detailed information.

Dosage or Medication Changes

If you want to change your dosage, switch to a different method of administration, or add/remove a medication, you’ll likely need a visit and labs first.

At this visit, the provider will educate you about the medication and how to take it. Three months after changes to your medication, we’ll often need another visit and a set of labs to see how it’s going.

Stopping Hormones

If you choose to stop taking your hormones for any reason, this is generally okay. Just let us know that you’re stopping, the reason why, and if you have any plans for resuming in the future.

Stopping hormones is safe, and there is no need to taper your dose. You may experience mood swings and other emotional and physical affects as your body adjusts. Over time, some of the temporary changes you experienced on hormone therapy will revert to the way your body was before, but permanent changes will remain.

If you have had your ovaries/testes removed and your body no longer produces its own hormones, you will need to remain on some form of hormone therapy to maintain your health. Please contact us and set up an appointment to discuss your options.

Transferring Care to Planned Parenthood from Another Provider

If you are currently on hormone therapy and are transferring care from another provider, you will still need to have an initial appointment so you can sign our consent form and complete any additional paperwork.

If you are happy with your current protocol and there are no reasons to change it, then you just need a yearly follow-up as an established patient.

Billing & Insurance

Prior Authorizations

Certain medications may require authorization by your insurance company before they will provide coverage.

We'll handle the paperwork, but please notify us if your pharmacy says an authorization is needed. This can reduce delays since we don't always receive notice automatically.

Prior authorizations can take up to two weeks to process. You are welcome to check in with us for updates while you are waiting for a response.

If your prior authorization is denied, we will work with you to appeal or find an alternative solution. Sometimes a plan will cover an alternative medication if we can show that you tried the preferred formulary medication first and had a problem with it.

Some medications may require a yearly authorization to maintain your prescription. If your prescription needs renewal, please contact us 1-2 weeks before you run out to allow extra time for us to submit for authorization.

Paying Out of Pocket

We accept cash, checks, credit cards (Visa, Mastercard, Discover, and American Express), Flex Spending Account (FSA) cards, and money orders.

If you don't have insurance, you may qualify for reduced cost appointments and lab services. Call our Patient Services team at 1-800-230-7526 for cost estimates and to learn about your options.

Cost of Medicines

If you are using insurance, your cost will be determined by your plan's copay and/or deductible.

If you are uninsured, you will need to cover the cost of your hormones each month.

Prices can vary widely between pharmacies. You can use an online tool like GoodRx to compare prices in your area and take advantage of coupon programs.

Losing Coverage

If you lose insurance coverage, please let us know. We can help you find the most affordable approach to continuing your hormone therapy. We want you to have access to this medically necessary care.

Pharmacies & Refills

How to Fill Your Prescriptions

You can fill and refill your prescriptions at the pharmacy of your choice. We'll send your prescription information directly to the pharmacy that you indicated at your appointment.

If they have your contact information, your pharmacy should notify you when your prescription is ready for pickup, but it's fine to call them and ask them when it will be ready.

If it's your first time filling at a pharmacy, bring your insurance card with you. They also may ask for your prescription number, which is marked "Rx."

The label may have your legal name on it so insurance will cover it. We can help you with the legal name change process if desired.

Refills

You will receive enough refills of your prescription to last until your next follow-up appointment.

When you are running low on medications, contact your pharmacy to have them refill your prescription.

Some pharmacies may offer automatic refill options and/or 90-day supplies.

If you've used your last refill and you wish to continue your prescription, you'll need to schedule a follow-up appointment with us. Please contact us 1-2 weeks before you run out of your last refill. This will allow time for your appointment and for us work out any issues with the pharmacy and insurance.

Please remember to schedule an appointment if you are due for one.

Courtesy Fills: If you have run out of refills but have not been able to come in for your required visit or labs, please let us know. Depending how long it's been, you may be able to get a temporary, 30-day courtesy fill, to give you time to follow up.

Sourcing Issues

Sometimes pharmacies can't get the medication, or the specific injection supplies you need to take your medication. Sometimes a medication is backordered, but will arrive in a week or two, and sometimes a pharmacy will never be able to source a particular medication.

Please make a note of the specific problem in case we need to help.

You can call other pharmacies in your area and ask if they're able to get the medication/supply. It's helpful to try a different chain and/or a locally owned pharmacy. Ask your pharmacy to special order what you need or to check their warehouse.

In the case of injection supplies, there are alternate needle and syringe sizes that can work. However, the injection needle needs to match what we prescribed, unless you are switching to a different administration route.

If you can't source the medication, we may be able to change your prescription and get a new authorization from your insurance. This could take some time and may require a visit to teach you about the medication.

Changing Pharmacies

You can transfer your prescriptions to a different pharmacy yourself. Call your new pharmacy, give them your information and request that your prescriptions are transferred from your old pharmacy.

You can also call us to update your pharmacy in our system.

New Testosterone Prescriptions: If you have a brand-new testosterone prescription that you haven't ever filled, you will not be able to transfer your prescription. You will either need to fill it first at the original pharmacy or contact us to arrange the transfer.

Estrogen Patients

Estrogen Hormone Therapy

Estrogen hormone therapy is medicine that can be used as part of your gender transition process. There are three medicines that you might be given:

Estrogen is the sex hormone that causes the development of feminine characteristics, such as breast growth, feminine fat distribution, reduced body hair, and smoother skin. It may be given as a pill that you swallow or put under your tongue, as a shot, or as a patch you put on your skin.

Testosterone is the sex hormone that causes the development of masculine characteristics. You may be given medicines called **anti-androgens (or testosterone blockers)** that can block and lower the amount of testosterone made by your body. This makes estrogen work better. The most common anti-androgen is called spironolactone, which comes as a pill. You may also be prescribed finasteride, also a pill, which helps prevent the hair loss caused by testosterone.

Progesterone is another female hormone that is sometimes used alongside estrogen. There is no scientific consensus about its effectiveness, but anecdotal reports claim that progesterone helps with breast development. It may also raise libido, and both positively and negatively impact moods. You can discuss progesterone with your provider; however, we often recommend waiting a year before introducing it.

Other medications: Please note that not all options you read about online can be prescribed by PPNCS providers. This is due to lack of scientific evidence to support safe and effective treatment with certain medications. Please come to us with questions and requests.

Planned Parenthood is unable to prescribe bicalutamide at this time.

Expected Changes

Changes can start within 2-3 months and can take 2-3 years or more to take full effect. Some of the changes are temporary and will revert if you discontinue hormone therapy.

Lab Timing and Hormone Levels

We monitor your hormone levels to see how your body is responding to the medication and to help determine your dose.

Lab Timing: Your hormone levels will fluctuate through your dose cycle, rising to a peak and then slowly tapering off. We prefer to take labs during the middle of your cycle, or at least not too soon after your last dose. Since we draw labs during your follow-up appointments, please schedule your follow-up appointments at an appropriate time in your cycle whenever possible.

- **Oral:** Your lab can be drawn at any time, but please note what time you took your dose.
- **Patches:** If you change patches twice a week, draw labs on day 2 (e.g., if you start on Sunday morning, draw labs on Tuesday)
- **Injections:** Your lab should be drawn about halfway through your injection cycle (e.g., day 3 or 4 of a weekly cycle. If you inject on Sunday, have your labs drawn Wednesday or Thursday.)

Target Levels: These can vary depending on your goals and what kinds of changes you experience, but in general we aim for:

- Estradiol: 100-200pg/ml
- Testosterone: <50ng/dL

Fertility

No one can tell you for sure if you'll be able to cause a pregnancy after taking estrogen hormone therapy. You may still be able to cause a pregnancy, or you may become permanently sterile after several months of hormone therapy, even if you stop the medicines.

If you think that you may want to parent a child in the future using your own sperm, you should speak to your provider about sperm preservation in a sperm bank BEFORE beginning hormone therapy.

However, since you are not guaranteed to be sterile, if you are remaining sexually active with a person who can become pregnant, you should always continue to use a birth control method to prevent an unplanned pregnancy.

Other Considerations

Facial and Body Hair: Estrogen may slow and thin out body hair, but it often has little effect on facial hair. You may wish to seek out a permanent hair removal solution, like laser hair removal or electrolysis. This is sometimes covered by insurance, so it is worth checking with your plan. Contact an LGBTQ Care Coordinator for options in your area. (contact info on p. 2)

Voice: Estrogen will not change the pitch or sound of your voice. Speech therapy can be an effective way to train a more feminine voice if you desire it. There are paid and free tools for self-training, but it is safer and more effective to work with a trained speech and language pathologist. Contact an LGBTQ Care Coordinator for options in your area or online. (contact info on p. 2)

Sexual Function: Over time, you may find that your sex drive decreases, and you may find it more difficult to achieve and maintain erections. Less frequent erections can eventually lead to shrinkage and atrophy. Having more frequent erections can slow or prevent this process, and you can also speak to your provider about lowering your anti-androgen dose or taking an erectile dysfunction medication such as Viagra or Cialis.

Surgeries

Some patients choose to pursue one or more gender-affirming surgeries as part of their transition. These include:

- Vaginoplasty: Creation of a vagina and vulva (clitoris and labia)—commonly referred to as GCS, SRS, or “Bottom Surgery.”
- Vulvoplasty: Creation of a vulva (clitoris and labia) without a vaginal canal. Also known as “zero depth” vaginoplasty. This involves an easier recovery time and fewer long-term commitments but does not allow for penetration.
- Orchiectomy: Removal of the testes/balls.
- Breast augmentation: Increases breast size through implants or fat transfer.
- Tracheal shave, or Adam’s apple reduction.
- Facial feminization surgery.
- Voice feminization surgery.

If you are interested in learning more about surgery options and surgeons in your area, or need advice on working with insurance for coverage, you can contact an LGBTQ Care Coordinator for information. (contact info on p. 2)

Testosterone Patients

Testosterone Hormone Therapy

Testosterone hormone therapy is medicine that can be used as part of your gender transition process. The medicine is called testosterone.

Testosterone is the sex hormone that causes the development of masculine characteristics, such as a deeper voice, facial and body hair growth, clitoral enlargement ("bottom growth"), increased muscle mass, masculine fat distribution, and stopping your period.

Testosterone can be given as a shot or put on the skin as a gel or a patch.

Planned Parenthood is unable to prescribe Testosterone ampoules or pellets at this time.

Expected Changes

Changes can start within 2-3 months (sometimes sooner) and can take 2-3 years or more for their full effects. Some of the changes are temporary and will revert if you discontinue hormone therapy.

Hormone Levels and Lab Timing

We monitor your hormone levels to see how your body is responding to the medication and help determine your dose.

Lab Timing: Your hormone levels will fluctuate through your dose cycle, rising to a peak and then slowly tapering off. We prefer to take labs during the middle of your cycle, or at least not too soon after your last dose. Since we draw labs during your follow-up appointments, please schedule your follow-up appointments at an appropriate time in your cycle whenever possible:

- **Injections:** Your lab should be drawn about halfway through your injection cycle (e.g., day 3 or 4 of a weekly cycle. If you inject on Sunday, have your labs drawn Wednesday or Thursday.)
- **Gel:** Your lab can be drawn at any time, but please note what time you applied your dose.
- **Patches:** Your lab can be drawn at any time, but please note what time you applied your dose.

Target Levels: These can vary depending on your goals and what kinds of changes you experience, but in general we aim for testosterone: 300-1000ng/dL.

Insurance Authorization

Testosterone is a DEA schedule III controlled substance.

You will likely need a prior authorization before your insurance plan will cover your medications.

This authorization is usually renewed once yearly. We are only able to write the prescription for 120 days of refills, and some insurance plans will only pay for one month of medication at a time.

Allergic Reactions

It is common to get a bit of itching at the injection site, or some soreness and mild swelling at the site for a few days. It is rare, but possible, to have a true allergy to the oil in which the testosterone is suspended.

If you have a bothersome reaction to testosterone, please let us know. We can problem-solve with you. In some cases, you might switch to a different formulation.

If you are concerned that you're having an anaphylactic reaction (swelling, difficulty breathing, sometimes nausea/vomiting), please call 911.

Fertility

No one can tell you for sure if taking testosterone will affect your ability to get pregnant. You could get pregnant, or you may never be able to get pregnant in the future, even if you stop the testosterone.

If you have sex with a person who makes sperm, you need to use birth control to prevent pregnancy, just in case. If you do get pregnant, you must stop the testosterone.

If you think you may want to be pregnant in the future, you should talk to your doctor or nurse about your options before you start testosterone.

Other Considerations

Voice: Testosterone will likely cause your voice to drop in pitch. The results vary, and not everyone achieves their desired results through hormones alone. In addition, a masculine-sounding voice depends on many factors besides pitch. Speech therapy can be an effective way to train a more masculine voice if you desire it. There are paid and free tools for self-training, but it is safer and more effective to work with a trained speech and language pathologist. Contact an LGBTQ Care

Coordinator for options in your area or online. (contact info on p. 2)

Acne: Some patients experience acne within the first few months. It tends to peak around one year and then subside. Talk to your provider about your options, which could include adjusting your testosterone dose or standard acne treatments.

Hair Loss: You may experience some degree of “male pattern baldness,” especially if you have a family history of hair loss. This will vary from person to person but can sometimes begin very soon after starting testosterone. You can talk with your provider about treatment options, which include minoxidil (Rogaine) and finasteride.

Note: Finasteride blocks DHT, a form of testosterone that has masculinizing effects. Taking it will help prevent hair loss but may also impact other changes as well.

Vaginal Atrophy: You may experience itching, burning, or irritation. The lining may become thinner and more prone to tearing. You can talk to your provider about treatment options, including topical estrogen cream, which is localized and should not impact overall masculinization

Binding

Chest binding is a technique used to create the appearance of a flatter chest. Binding is generally safe, but there are risks and it is important to do it carefully and responsibly.

You can find more information on binding, including safety tips, a list of popular commercial binders, and links to low/no-cost binder programs on the Online Resources page (p. 25).

Surgeries

Some patients choose to pursue one or more gender-affirming surgeries as part of their transition. These include:

- Top surgery: Removal of the breasts (double mastectomy) and creation of a masculine chest.
- Phalloplasty: Creation of a penis using tissue from a donor site on your body.
- Metoidioplasty: Creation of a penis using your existing genital tissue.
- Hysterectomy/Oophorectomy: Removal of the uterus and/or ovaries.

- Facial masculinization surgery, including Adam’s apple implantation.

If you are interested in learning more about surgery options and surgeons in your area, or need advice on working with insurance for coverage, you can contact an LGBTQ Care Coordinator for information. (contact info on p. 2)

Injections/Injection Training

Planned Parenthood cannot administer your hormones for you. We will instruct you on how to self-administer your shots.

Once you have your prescription and injection supplies, you are welcome to come in for an injection training appointment. Bring your hormones and your supplies to the appointment. Our staff will teach you how to self-inject and walk you through giving yourself your first injection. You will also receive an injection brochure with step-by-step instructions.

Accessing Injection Supplies

You’ll receive a prescription for needles and syringes which should cover your injection needs.

If you find that you need additional supplies, you can:

- **Order them online:** Make sure you order the exact size/gauge needles and syringes you were prescribed. Your supplies should be sterile, individually sealed, and use Luer Lock tips. Needles should not be blunt tipped. Ordering online may be the easiest and least expensive option.
- **Purchase them from a local pharmacy:** It is legal to purchase syringes and needles from pharmacies in MN, SD, and ND. However, the pharmacist may decline to sell you syringes or needles, and they may also not have the supplies in stock, so you may need to shop around. It is recommended that you have your prescriptions with you as proof of need. Minnesota’s pharmacies must participate in the MN Syringe/Needle Access Initiative to sell supplies.
- **Obtain them from a syringe exchange:** Syringe exchange programs are legal in MN and ND.

Medication Expiration

Every vial of injectable medication has an expiration date. Do not use this medication past its printed expiration date.

Manufacturers and pharmacists recommend multi-use vials be discarded 28 days after opening, and we will prescribe enough refills for you to get a new vial each month. However, it is safe to continue using a vial past 28 days so long as:

- It is still within the printed expiration date on the packaging.
- The rubber stopper is still able to seal.
- The medication is not cloudy or discolored and does not have any material floating in it.

Medication shortages do occur on a periodic basis. Keeping a small stockpile of extra medication on hand can help ensure you do not run out if the pharmacy does not have your next refill in stock.

Subcutaneous (SubQ) Administration

Your medication vial will likely be labelled for intramuscular use, but SubQ is a safe and common off-label administration method. Use whichever delivery method was prescribed to you at your appointment.

Intramuscular injections typically use a 1"-1 ½" injecting needle. SubQ injections use a shorter, 5/8" needle.

Sharps Disposal

Improper disposal of syringes, needles, and other sharp objects can pose a health risk. It can also damage the environment.

You'll be provided information and instructions on using sharps containers or other acceptable receptacles.

Needle Phobia

If you have a needle phobia, or any other issue that is preventing you from administering your shots, please let us know. Sometimes it will get easier with practice, but if it doesn't, we can work with you to find an alternate method of administration.

Some insurance plans may require that you try injections before they will cover an alternative method.

Transition Help

LGBTQ Care Coordinators

Our LGBTQ Care Coordinator Team (contact info on p. 2) is here to be advocates for you at Planned Parenthood. They are a dedicated point of contact for any questions, concerns, or needs that you have with your care with us.

We are happy to provide information, resource recommendations, and guidance on all steps of medical, legal, and social transition. Many of the common requests are listed here, but please don't hesitate to ask about anything, big or small. We'll do our best to help you.

Name/Gender Marker Changes

Contact us for help navigating the legal name and gender marker change process.

We can point you to relevant forms, information, and websites, and help you get professional (and often free) legal advice if you need it.

For general help, please see the links on the Online Resources page (p. 25) for:

- NCTE ID Documents Center
- TransLifeline ID Change Library

Letters of Support

We can provide you with letters of appropriate clinical treatment for gender marker changes, medical referrals for surgery, and any other forms you need completed by your hormone provider.

Depending on the letter requirements, it can take us one to two weeks to mail them out to you.

Mental Health Providers

We maintain lists of gender therapists and other trans-affirming providers for a variety of insurance plans and sliding- scale payment options.

We can work with you to help you find a mental health professional who will meet your needs for mental and emotional healthcare, diagnoses, testing, and medication management.

Help With Gender-Affirming Surgery

We can help you with many steps in the process towards surgery:

- Information on surgeons, techniques, and patient experiences.
- Figuring out insurance coverage and appealing denials.
- Mental health professionals who can write required letters of support.
- Medical referral requests.
- Making plans for logistics and post-op care.

Fertility Resources

Fertility preservation is not usually covered by insurance at this time, but we can discuss fertility with you. We can share options for fertility preservation and provide a list of providers in your area.

Support Groups & Community Resources

We can help connect you with support groups and other community-based resources, like free binder programs, food pantries, LGBTQ shelters, crisis lines, microgrants, and the nearest LGBTQ centers and trans-specific events.

Feel free to share community resources with us if you feel comfortable. It may help another one of our patients!

Support for Your Loved Ones

If your loved ones need education about trans issues, support in their learning process, or to build community, we can connect them with support circles and educational resources.

We can also answer questions (with respect for your privacy) if they come with you to a visit.

Online Resources

Planned Parenthood North Central States Health Center

Locations: ppnccs.org/locations

Patient Portal Information: plannedparenthood.org/planned-parenthood-north-central-states/get-care/patient-portal

Concerns About Receiving Mail: faq.usps.com/s/article/What-is-General-Delivery

Comparing Medication Costs: goodrx.com/

Information About Filling Prescriptions: medlineplus.gov/ency/article/001956.html

Binding Information: fenwayhealth.org/wp-content/uploads/Binding_Resource_Guide.pdf

Injection Training Videos: plannedparenthood.org/planned-parenthood-greater-texas/self-injection-videos

MN Syringe/Needle Access Initiative: health.state.mn.us/people/syringe/counties/index.html

Syringe Exchange Information: nasen.org/map

Sharps Disposal Information: safeneedledisposal.org

National Center for Transgender Equality ID Documents Center: transequality.org/documents

TransLifeline ID Change Library: translifeline.org/resource/id-change-library/

Support for Your Loved Ones: pflag.org/ourtranslovedones

Notes



1.800.230.PLAN (7526)
PPNCS.ORG