Gender Affirming Care

2023 Welcome Packet

Virginia League for Planned Parenthood
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Acknowledgements: This guide is the product of the time, effort, and hard work of both staff and interns. We’d like to thank the various team members and interns who have spent countless hours formatting, editing, and making this a robust resource.
INTAKE APPOINTMENT
CONVERSE WITH ONE OF OUR NAVIGATORS
We’ll discuss your personal desires for gender affirming care, basic health history, and navigating health care through informed consent. You’ll be able to ask any questions about the process!

FIRST APPOINTMENT
MEET YOUR CLINICIANS
We’ll discuss your detailed individual and family health history, do a basic routine exam, and discuss your care plan at greater length. You’ll be able to ask any medical questions you may have!

LABWORK
WE’LL GET SOME LABS
We’ll take labs at the end of your first appointment to monitor your health.

PICK UP PRESCRIPTIONS
WE OFFER FREE INJECTION TRAINING
If you’re receiving hormones, we’ll send your prescription into your pharmacy of choice. In most cases, you’ll get your medication the same day, or within a few days of meeting with one of our clinicians!

FOLLOW-UP APPOINTMENTS
WE’LL SEE YOU SOON
We’ll call you if something needs to be communicated regarding your health. Otherwise, we’ll see you again in 3 months to check in with how you’re feeling and check labs.

SURGERY INFORMATION
WE RECOMMEND TRUSTED DOCTORS
We know finding a trusted doctor for gender affirming procedures can be overwhelming. We’re happy to share our regularly updated lists of doctors, surgeons, and facilities that provide care with quality bedside manner.

OTHER GENDER-RELATED HEALTH RESOURCES
Our priority is the health of the whole Self. We offer primary care, and can recommend local mental health resources, community groups, name/gender marker change guidance, and much more!

Richmond: 804.255.4758
Virginia Beach: 757.498.7526
Please reference your Welcone Packet for additional information.
The Basics

We have proudly served the trans and nonbinary community since 2016. Our Gender Affirming Hormone Therapy program was developed and implemented by trans and nonbinary individuals and we follow the informed consent model. As of late 2022, we have seen over 4,000 patients who are trans and/or nonbinary.

You can find more information about our program on our website: https://tinyurl.com/GAHTVLPP

1. Call Us
   Let us know you’re seeking Gender Affirming Hormone Therapy and our scheduling team will help make an appointment.

2. Schedule a Preliminary Appointment
   We’ll discuss your desires and goals for Gender Affirming Hormone Therapy, basic health history, and discuss options for establishing care.

3. Meet Your Clinician
   We’ll discuss your detailed health history, do a basic routine exam, discuss your care plan at greater length. We may finish your appointment off with labs.

4. Pick Up Your First Prescription
   If you are prescribed injectable medication, we can also schedule you for self-injection training. Please tell your provider if you are interested in training so we can get you scheduled! Most patients perform their own injections at home. It's important to us that you can inject correctly and safely.

5. Come back every three months during your first year
   These appointments are very important to renew prescriptions, monitor lab work, and make sure everything is going well for you and your medical transition. Prescriptions are only for three months at a time, in the first year, so it's important that we see you regularly.
## Locations

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<th>Hampton Roads</th>
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<tr>
<td><strong>Hamilton Clinic</strong></td>
<td><strong>Virginia Beach Clinic</strong></td>
</tr>
<tr>
<td>201 N. Hamilton St</td>
<td>515 Newtown Road</td>
</tr>
<tr>
<td>Richmond, VA 23221</td>
<td>Virginia Beach, VA 23456</td>
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<tr>
<td><strong>East End Clinic</strong></td>
<td><strong>Hampton Clinic</strong></td>
</tr>
<tr>
<td>1122 25th St</td>
<td>403 Yale Drive</td>
</tr>
<tr>
<td>Richmond, VA 23223</td>
<td>Hampton, VA 23666</td>
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**Direct line to program staff: 757-238-5461**

## Telehealth Options

In addition to our physical locations, many of our appointments can be conducted over telehealth when necessary or preferred. However, if it’s the first time you’re seeing us, whether you’re brand-new to hormone care or transferring from another care provider, we will likely need to see you in person to get started.

There may also be intervals where we need to see you in person in order to comply with certain laws and policies (ex: once annually). Policy is rapidly changing in 2023 and our team is following this topic closely.
## Care We Offer

### Gender-Affirming Hormone Therapy
Sometimes called hormone replacement therapy (HRT) or gender-affirming hormone therapy (GAHT), this is an essential part of transition for many people. We follow guidelines from both the Endocrine Society and WPATH. We can also help you navigate other transition-related goals, like pursuing gender-affirming surgeries, making legal changes, and more!

### Primary and Preventative Care
Trans care isn’t just hormones - it’s healthcare for trans people! We know that many patients worry about finding a gender-affirming care provider. We’re proud to offer comprehensive primary care, including annual check-ups, wellness exams, pap smears, gynecology visits, and more. Our team can also assist you with a referral if you need to see a specialist.

### Other Services
We also offer birth control options, testing and treatment for sexually transmitted infections (STI’s), preventing unwanted pregnancy, and abortion care. Within the scope of primary care, we are also able to provide some services for managing medications related to mental health needs such as anxiety and depression. If it’s beyond our expertise, we’ll do our best to help with a referral.
Contact Outside of Appointments

Tips for Getting in Touch With Us

*When reaching out to our staff, please leave your name, date of birth and good phone number to reach you. This is important so that we can respond promptly to your request.

What can be answered via phone vs. what needs an appointment:

**Phone**
Verify, Reschedule/Cancel Appointments
Prescription refills (unless you are due for a follow-up)
Pharmacy/Insurance Issues
Surgery/Legal ID Support

*We cannot receive text messages. Although patients may sometimes receive reminder texts from VLPP, please do not text any numbers for the clinic.*

**Requires An Appointment**
Changing dose/method of medication or adding medications

**Email Communication**
*Please note that our clinicians are not available by email.*

The GAHT Navigator team can sometimes correspond by email, but patients should be aware that email is not HIPAA compliant and may not be appropriate for all communication. If you initiate contact with the team, we may reach out by phone in response. Please include your name and phone number in any communications with the clinic!

You can reach out to tgnbservices@vlpp.org
Your First Medical Appointment—What to Expect!

Pre-Appointment
1. For blood draws, it’s important to be hydrated! Drink plenty of water, starting 72 hours in advance. Make sure you have a meal or snack beforehand, too.
2. Plan to arrive approx. 15 minutes early to complete registration.

Appointment
When your appointment begins, a health care assistant will call you back by your last name, take your vitals, and confirm some of your medical history. Once that’s done, you’ll meet with your provider to discuss health and safety in relation to starting hormones.

The first medical appointment is the soonest you may receive a prescription, but there is no guarantee that you will receive hormones at this appointment. If we have concerns about your health or safety, we will talk to you about these concerns and collaborate with you to help you move forward as safely as possible.

Historically, the field of transgender health has been associated with gatekeeping. While there are certain things we need to do to ensure both your safety and to work with insurance, it is important to us that we minimize barriers. That is why we use an informed consent model and will do everything we can to support your transition.

What does informed consent mean? Informed Consent is a model of care in which patients are able to access hormones during a visit with their provider, where they’ll discuss the risks and benefits of care. No visit with a mental health professional is required to schedule an appointment.

Post Appointment
1. Make your three month follow-up appointment with a health care assistant or front desk employee before you leaving your appointment. If you forget to make an appt., call our main line as soon as you realize!
2. If prescribed injectable medication, talk to our team to schedule self-injection training.
3. Pick up your medication! Take your first dose when you are ready *or if you are scheduled for a Self Injection Training visit, bring your needles, syringes, and medicine to that appointment to take your first dose! If you have any questions or concerns about your medication after starting, please reach out to us.
Checklist for Your Follow Up Appointments

Here are some ideas of the things that you can discuss during your follow up appointments with us. Please take a look at the progress sheet that you can use to track progress/concerns/ things you would like to discuss with your clinician during follow up visits.

- Medication concerns including changing method/dose
- Sex and Sexuality
- Name/Gender Marker changes
- Gender Affirming Surgery
- Concerns around Genitals
- Concerns about tucking/binding
- The way you feel including mental health concerns/referrals
- Connecting to support groups
- Housing Resources
- Substance use
- Relationship with food/weight
- Something else ________________________

Sometimes it’s helpful to keep a list of questions, observations, or concerns for your next visit!
Lab Work

**When Do We Look?**
The first time is typically at the end of your first appointment. Please hydrate before coming to your appointments as it helps with having your blood drawn. We need to draw blood work every time we see you.

**Where Do We Do Labs?**
Labs are usually done at Planned Parenthood and can also be done at a LabCorp location. You and your clinician will discuss which option is best for you.

**How Often Will Labs Be Drawn?**
Lab work is usually done more frequently in the first year of hormone therapy and then less frequently as time passes. You can expect labs as frequently as every 3 months, or at some point, only annually. Some health conditions and circumstances require more frequent bloodwork.

**How Do I Know the Results of My Labs?**
No news is good news! Unless there is an abnormal result, *we will not be calling you with lab results*. We will discuss lab results during follow up appointments. But, if desired, you can view your labs by registering for an account on the LabCorp website, found at this address: www.labcorp.com/patients/results

You will need to use your legal name (or the name associated with your insurance) to make your LabCorp account and see your lab results.
Pharmacy & Insurance Information

**Check Your Prescriptions!**
Before leaving the pharmacy, ensure your medication quantity, type, refill count, and size are accurate to you. For those who use syringes and needles, please ensure the needle length, gauge, and syringe volume are accurate to you. The pharmacist will be the most helpful person in resolving any issues with this.

If you are prescribed two different needle sizes for one syringe, it is important that you are able to attach and detach each of the needles to the syringe. Syringes should measure in milliliters (ml), NOT units. If your syringes are in units, please ask the pharmacist for the correct syringes (1ml preferred, 3ml otherwise).

Please be sure to check your prescriptions before leaving the pharmacy to see if these are the needles and syringes provided to you.

**Prescription Authorization**
When you first start hormones, it may take us some time to get the medication covered by your insurance. If you have any issues with insurance coverage that can’t be resolved at the pharmacy, please call us 804-500-5797. Please make sure you Leave a voicemail or we don't know you called! We will do everything we can to get your medication covered. Due to the nature of collaboration with insurance, this can sometimes take up to 5-7 business days. We appreciate your patience.
**Refills**

Hormone prescriptions require regular appointments and lab work with a clinician. To put it simply, remaining diligent with follow-up visits (every three months on your first year on hormones) on the provided timeline will ensure you will always have your medication. We have a precise understanding of how often each patient will need a refill, and have designed the program to meet every patients’ needs.

*Please note that we can not send refills if we have not seen you before at one of our four clinics, even if you have been seen at another Planned Parenthood out of state.*

**TIP:** Ask your pharmacist if you need refill authorization or clarification from your provider or if you need a prior authorization for your insurance

**Syringes/needles.** Contact your pharmacy for a refill on syringes and needles. Syringes/needles are not a controlled substance but if you are having issues obtaining them, please call us. Most pharmacies dispense an individualized amount based on your dose, mainly out of caution. Syringes and needles are not a controlled substance, therefore if you have issues refilling them at your pharmacy, you may order them online from a trusted medical supply company (be sure you double check your needle gauges and syringe size!)

*Needle kits of 12 needles/syringes are available for purchase at the Planned Parenthood on 201 N. Hamilton St. Currently we aren’t able to sell them through our other locations, but hope to in the future.*

*Please see page 29 for information on syringes/needles as well as resources to purchase them online if interested.*

**Broken/Leaking Vials**

Please be careful with vials! On rare occasions, a vial breaks or a punctured seal leaks. We understand this. If this happens to you, please call us and request to speak with someone about a refill, and we’ll get that passed on to your clinician. Please do not dispose of the broken vial, as we may need to see the broken vial or present it to the pharmacy.

To whom it may apply: Since Testosterone is a DEA schedule III controlled substance, replacing a broken/leaking vial may be challenging. Please be patient as this request is processed. *If you are having issues with your pharmacy please contact us so that we can assist you. This may take two business days to resolve.*
Surgery Information

“I am interested in getting gender affirming surgery. What do I need to do?”

1. **Call your insurance (if applicable)** to plan and find out what they need from you to cover partial or full cost.

2. **Research surgeons** and find out if they take your insurance. If you are interested in the list* we have compiled, please call or email tgnbservices@vlpp.org.

3. **Schedule consultations** with surgeons. Often, but not always, consultations cost money and are a down payment toward your surgery, so do thorough research before scheduling!

4. **If needed, get a surgery referral letter(s).** This often requires a medical provider referral letter (which we can provide) and at least one mental health provider referral letter (which VLPP cannot provide). Let us know if you need a surgery referral letter from or need help finding a medical health provider to write your second letter. *Please give us 2-3 weeks to process this letter.* We will need to call and talk with you about this letter request before writing it.

5. **Have a consultation** to decide if this surgeon is right for you and your body. Be sure to ask about preparing for surgery and follow-up care.

*We do not endorse nor rebuke any surgeons who provide these services. Surgeon decisions are the sole responsibility of you, as the patient, and are determined by your research to select a surgeon who can best meet your needs. Our list is made up of surgeons our patients have used in the past or are known to work with trans and non-binary patients. VLPP is not liable for any adverse experiences or unsatisfactory surgical outcomes, which would be the sole responsibility of the surgeon and/or their own practice.*
Gender Affirming Surgery Glossary

Common terms in this patient population include 'top surgery' and 'bottom surgery.' Top surgery most commonly refers to the removal of breast tissue. Bottom surgery typically refers to any gender-affirming surgery 'below the belt' (top and bottom, get it??). It may also be referred to as ‘SRS’ (sex-reassignment surgery) or ‘GCS’ (gender confirmation surgery).

Here are some common names and brief descriptions of gender-affirming surgeries that patients sometimes seek as part of their transition or gender affirmation process:

For trans men, trans masculine and nonbinary AFAB people:
- **Chest Reconstruction (top surgery):** removal of breast tissue to help construct a more typically masculine appearance
- **Chest wall contouring:** reshaping of the chest wall to have a more typically masculine appearance
- **Hysterectomy:** removal of the uterus. May also involve removal of ovaries, fallopian tubes, and cervix
- **Metoidioplasty:** bottom surgery that involved increasing the length of the clitoris
- **Oophorectomy:** removal of ovary(s), which may or may not include the removal of the Fallopian tube(s)
- **Phalloplasty:** bottom surgery involving a skin and tissue graft from a larger area to create a penis
- **Scrotoplasty:** bottom surgery involving creation of a scrotum
- **Vaginectomy:** removal of all or parts of the vagina
- **Vulvectomy:** total or partial removal of the vulva

For trans women, trans feminine and nonbinary AMAB people:
- **Augmentation mammoplasty (breast augmentation):** surgery to increase the size of breasts
- **Clitoroplasty:** bottom surgery involving creation of a clitoris, typically as part of a vaginoplasty
- **Facial feminization surgery (FFS):** refers to a variety of facial reconstruction procedures to have a more typically feminine appearance
- **Labiaplasty:** bottom surgery involving creation or revision of labia
- **Orchiectomy:** bottom surgery involving removal of the testicles
- **Penectomy:** bottom surgery involving removal of the penis without the construction of a vagina
- **Vaginoplasty:** bottom surgery involving creation of a vagina and vulva
Disclaimer: this information was produced by clinic staff who assist patients with making these changes. We are not lawyers, and cannot offer legal advice. The tips outlined here are based on experience in engaging legal and government systems for making these changes. It is possible that future changes in state or federal policy will change the requirements for updating your information.

This guide outlines the steps for updating both legal names and gender markers in the state of Virginia, as well as federal documents and records. We understand that not everyone changes both, but the information here is still relevant. Gender marker (or sex marker) refers to the gender designated on a license, passport, or other government ID. It is separate from your birth certificate.

Changing Both Legal Name and Gender Markers

Legal Name Change in Virginia: If you are updating both your name and gender marker, then you must change your legal name prior to updating your gender with the DMV or Social Security Administration.

Virginia has a simple process for legally changing your name; however certain circumstances may require additional documentation or appearing before a judge. These circumstances may include being a minor, prior felony conviction, current probation status, or other conditions where the court may be concerned in relation to fraud or other legal implications.

In these circumstances, there are additional considerations, and existing patients may request support documentation regarding hormone treatment to advocate for a name change. If none of these circumstances apply to you, the courts are unlikely to request medical letters for a name change.

To change your name, go to the website for your city or county for vital records and look up the local requirements for name changes. These vary by locality, and may have specific applications, or they may use one provided by the state. Fill out the application, and take it in person to the clerk’s office, usually located in the courthouse. If you do not have access to the internet, you can also go in person to your local circuit court clerk’s office (contd on next page).
(contd) While there, you will fill out an order for the judge and pay a fee, and once the order has been processed (this may take a week, a month, or longer) the court will mail you documentation confirming your legal name has been changed through the court system. If you cannot afford this fee, we may have resources or referrals to assist you so please let us know.

Once you have obtained the court order for your name change, please call the clinic (804-482-6154) to request documents to assist in updating your gender marker. If the court mails you a different document stating you need to appear in court, please contact us so we can assist with support documentation.

**Gender Marker Changes (DMV-issued ID and Social Security)**

Updating your gender marker in VA is not difficult, but requires multiple steps. If you change your gender marker on your license, you must also update it with the Social Security Administration. If you are not changing your legal name, these steps are still the same.

**Social Security:** As of October 2022 you no longer need a letter from a clinician to update your gender with the Social Security Administration. This means you can update your gender by selecting your correct gender when updating your social security card. Currently the gender options are M or F, with hopes to include a X option in the future.

**Department of Motor Vehicles:** As of July 1, 2020, the DMV allows self-identification of gender with no age restriction. This means the DMV does not require a signature from a medical or mental health provider. They also have a non-binary option which will appear as an ‘X’ on your license or photo ID. **Note:** as of November 2022, this option is not available for other state-issued documents, such as birth certificates or Medicaid plans, which still require ‘M’ or ‘F.’ This may change in the future.

To change your gender marker with the DMV, fill out the application to request a replacement license. This is the same form you would fill out to process a name change, so they can be done simultaneously. A replacement license has a $20 fee as of July 2020. If you are only changing your gender marker, it’s possible you can do it by mail. If you are also changing your name, you need to be present in person to do this AND will need to have already received a new Social Security card with your new name.

Please note that the DMV requires your name be changed with Social Security first. You can read more here: https://www.dmv.org/va-virginia/changing-your-name.php
Name & Gender Marker Change

Passports: As of October 2021, it is no longer necessary to obtain a letter in order to update your gender on a passport. As of 4/2022 you may self-select M, F, or X.

You can read more at https://transequality.org/know-your-rights/passports

Birth Certificates: As of September 2020, updating a birth certificate in Virginia will no longer require a court order. To update the gender marker on a birth certificate, visit the Virginia Department of Health’s website for instructions and what is needed including the application. You will need a Changing Sex Designation form (called the VS42) completed by your healthcare provider. This form needs to be signed in ink and cannot be signed or submitted electronically. Currently there is no non-binary ‘X’ marker for VA-issued birth certificates.

What if I was born in another state?

You can go to https://transequality.org/documents and enter the state you were born in to look up information on what is required to update birth certificates in states other than Virginia. If you need any supporting documentation/letters please let us know so we can assist.

Immigration Documents

Please visit https://transequality.org/know-your-rights/immigration-documents for more information on updating your immigration documents. In most cases a provider certification letter is required so please contact us so we can process this for you.

Other Federal IDs and Records

Please visit https://transequality.org/documents for more information on updating other IDs such as Military Records and Consular Birth Certificates. If you need supporting documentation please contact us so we can assist you.
Troubleshooting

The pharmacy said they need a pre-authorization, can you help? These are sent electronically from the pharmacy to the clinic, and our team will submit them on your behalf. Please allow up to five business days for processing pre-authorizations. If you have been waiting over seven days please call us!

The pharmacy has questions about my prescription. Please call us so we can speak to your pharmacy on your behalf.

I didn’t get enough needles. How do I get more? Our clinicians write prescriptions for a year’s supply of syringes and needles. Pharmacies fill what they estimate is a proper number for you before your next refill. If it’s not enough, call your pharmacy to refill this prescription using the Rx number provided. You may also purchase a 12 count supply from reception at the 201 N. Hamilton Planned Parenthood location by walking in during open hours. Additionally, you can order medical supplies in bulk from a medical supply store.

I need to schedule a follow-up or verify an appointment time. Please call the main number (804-355-4358) and follow the prompts for the respective need. During business hours, our Patient Services team can schedule follow-ups, verify appointment times, or cancel appointments if needed. You can also schedule online, but calling is recommended to make sure you see the same provider each time.
General FAQ

How do I get a refill? Oftentimes, a follow-up visit with your clinician is required for a refill. Please call the main number and leave a message with the prescription line. If more than 72 hours have passed and you have not been assisted, please contact the clinic. Please include the name that appears in your chart, and phone number so we can easily identify your medical record.

Routine refills can not be done via email. If you are overdue for a visit, you may not be able to get a refill until you are seen.

If you are not yet due for a visit and you have run out of medicine, please call your pharmacy to confirm if you still have refills available.

How often will I need to come in for follow up visits? New patients need to be seen every three months for the first year after the first time you were prescribed hormones. This is so we can assess how you’re feeling on the hormones and optimize your medications for safety and desired effect, following best practice guidelines.

How do I make my appointments? Please call the main number 804-355-4358 and follow the prompts for your respective needs. During business hours, our Patient Services team can schedule follow-ups, verify appointment times, or cancel appointments if needed. You can also schedule online, but calling is recommended to make sure you see the same provider each time.

Please note: It is your responsibility to make these follow up appointments. They are not automatically scheduled. We recommend making follow up appointments at the end of your appointments.
I want to ask for an increase or change to my prescription, how do I do that? Changes to dosage in medication can only be done during an appointment by a clinician. If you feel it is necessary for health reasons (i.e. you don’t feel good on your current dose), please call and schedule an appointment with your clinician, and make sure to mention why you’re coming in. Please note, changes in medication dosage may require additional lab work. You will need to have a follow up visit to change your medications and this request can not be made via email or over the phone.

If you desire a change in dose for other reasons, it is best to discuss this with your clinician at your next appointment. Our clinicians greatly value patient preferences and will prescribe based on your needs and preferences, with consideration to existing medical guidelines, research, and consensus opinion, and as safe for your unique health circumstances. We support whatever goals and desires you have for yourself with various aspects of gender affirming care.

What about lab results? No news is good news! For many patients, labs are routine and you will not be notified if everything is within safe / typical / healthy ranges. This includes negative results for STI testing as well as hormone labs. If you are interested in seeing your lab results or need to access them, you can go to www.labcorp.com/patient/results and register an account. Any labs processed by Labcorp will be attached to your legal name, DOB, and other demographic information.

How will I learn to inject my hormones if I am prescribed injectable hormones? At any point in time, as our patient, you may call and request a free self-injection training (SIT) appointment at one of our clinics. Additionally, the internet (Youtube, Google) is a rich resource for injection training--both intramuscular and subcutaneous. We also have materials that you can request at any time! If you have any friends or family who inject medications, they may also be a valuable resource for assistance your first few times.
How much will things cost if I do not have insurance? Please do not let cost bar you from access to care. If cost is a concern, please call or email the patient navigation team (contact info located at the beginning of this packet!) and let them know. Or, bring it up during one of your appointments. We may be able to help identify financial resources and/or other community organizations that can help out!

Since early 2022, VLPP is part of Title X, a federal program designed to help make healthcare affordable. If you don’t have insurance OR you can’t use your insurance at VLPP, you are probably eligible for a sliding scale rate based on income.

Please do not let cost discourage you from remaining consistent with your care appointments, as they are necessary to receive prescriptions. Patients who are concerned about being able to pay for their next visit or medication should contact the Trans Health Team, as we may have some options available to help make cost more affordable. This varies case by case but we welcome the communication. It's important to us that you are able to continue your care with us.

How much do prescriptions usually cost without insurance  Prescription costs may vary, but usually they are around $50 for a 3-month supply. We recommend using GoodRx with your chosen pharmacy in order to get these prices. If you are having a hard time finding a pharmacy with low enough medication costs, please call or email us and we will assist you in finding a better pharmacy for your needs.

How much does all of this cost with insurance? Planned Parenthood takes most insurances, including Medicaid, Medicare, and Tricare. Our team does everything in its power to get your care covered. However, some insurances can be harder to work with than others and we can’t guarantee your insurance will approve your care. If you have any issues please call our main line and follow the instructions to speak to the insurance/billing department.

I need a trans affirming referral i.e. therapist/psychiatrist/surgery letter/voice therapy. Please contact the clinic or discuss this with your clinician during one of your follow up visits. Section 3 also details some of this.

I have questions about updating my legal name or gender marker. There is detailed information on how to do this earlier in Section 3!
Telehealth FAQ

What will I need for a remote visit via telehealth?
Ideally you will need a computer or laptop with a webcam and access to a private room where we can speak without interruption for the duration of your appointment. If you are using a phone or tablet (iPad, Android, etc.) it may work fine, as long as you are on Wi-Fi. Mobile (4g, etc.) connections do not work well. If you’re having trouble connecting, try a different web browser. Please note that video is necessary for telehealth.

How will I do labs or give my blood pressure if I am doing telehealth visits?
You can check your blood pressure at a pharmacy when you pick up your prescription, make a note of it, and tell us at your next telehealth visit. You can also schedule an appointment to come in. It is important that if you are doing follow up visits telehealth with us that you check this anytime you get a chance and to inform your clinician the next time you see them. Labs can be done at a LabCorp location close to you. You and your clinician will discuss this. Please note that your initial appointment to meet with the clinician will most likely be in person where labs/blood pressure will be checked unless discussed otherwise with the Social Work team.

I prefer telehealth, why do I need to come in person?
In-person requirements may be present for initiating care or at a specific interval depending on changes to state or federal policies. For example, testosterone is a controlled substance (more about this on the next page!) and requires an in-person visit to initiate as of 2023. We will also need to see you in person every so often to satisfy certain legal requirements.
Testosterone Fact Sheet

Controlled Substance
Testosterone is a DEA schedule III controlled substance. If your insurance requires a pre-authorization (and it probably does!), this authorization is usually renewed every 12 months. We are only able to write the prescription for a maximum of 120 days of refills, and some insurance plans will only pay for one month of medication at a time.

Method of Injection
The pharmacist may have questions about how the testosterone is administered. Many of our patients take the testosterone through Subcutaneous injection (under the skin) or Intramuscular injection (into the muscle). Though the medication is labeled for intramuscular use only, subcutaneous injection is a safe and common off-label administration method.* If necessary, you can let the pharmacist know that the subcutaneous route--and related needle type--is not a mistake.

*This only applies to testosterone. Estrogen by injection is not prescribed for subcutaneous use.

Refill Lead Time
Contact us when you have two weeks of medication remaining, so we can refill your prescription in a timely manner. This lead time also allows us to ensure you’ve had recent labs/appointments so the clinician can confidently refill your prescription. If you are due for a follow up *you need to make your follow up appointment in order to discuss refills. During the first year, your prescriptions will only last for approximately three months, so if you are out of refills, that means it’s time to come back and see us!

Prescription Authorization
When you first start testosterone, it may take us some time to get the medication covered by your insurance. If you have any issues with insurance coverage that can’t be resolved at the pharmacy, please call us. We will do everything we can to get your medication covered. Sometimes this can take a few days. We appreciate your patience.

Labels
If your prescription directions are different from what you discussed with your provider, please take the medication the way your provider explained it to you. You can always call or email a care coordinator for any clarification.

*If you are having issues with your pharmacy, please call us so we can speak to someone on your behalf to authorize this. The label may have your legal name on it, so that insurance will cover it. We can help with a legal name change process if desired.
Estrogen Fact Sheet

Administration Method
Estrogen medications are often called estradiol and can be prescribed as a daily tablet, weekly injection, or patch. Estradiol is most commonly prescribed as an oral tablet, meaning to dissolve the tablet under the tongue. Please note that this medication can be taken sublingually or orally (swallowed). Pharmacists sometimes need clarification from us that the medication is written correctly as sublingual use. Please contact us if you are having issues with your pharmacy and we will reach out to them on your behalf.

Injectable Estradiol and other options
Patients sometimes request switching to an injectable form of estradiol after they have been on other methods of estrogen. This is a discussion we encourage you to have with your clinician. Also, injectable estrogen requires a yearly insurance authorization process, injection training, and supplies. Please note that injectable estradiol often has shortages throughout the country and you may not be able to fill this prescription. We can work with you to change to a different formulation of the injectable estradiol, a different method of estrogen, and/or you can call other pharmacies in your area and ask if they can source it.

Sometimes patients are prescribed estrogen patches, known as a transdermal patch. These go on your skin, under your clothes, and are usually changed at set intervals determined by your provider.

For each method of dosing (tablets, injections, or patches), insurance or out of pocket cost may influence what is accessible to you. Estradiol tablets tend to be the most affordable and the most widely available. There are also certain medical conditions which may determine which method of dosing is the best fit for you.
Estrogen Fact Sheet

**Refill Lead Time**
Contact us when you have about two weeks of medication remaining so we can refill your prescription in a timely manner. This lead time also allows us to ensure you’ve had recent labs so the clinician can confidently refill your prescription. Please note if you are due for an appointment for a refill, we may not be able to refill your medication until you have an appointment.

**Labels**
If your prescription directions are different from what you discussed with your provider, please take the medication the way your provider explained it to you. You can always call or email a care coordinator for any clarification. Vials may be used more than once, when sanitized before use. Due to insurance and billing requirements, the prescription label may have your legal name on it. We can help with a legal name change process if desired.

**Prescription Authorization**
Topical forms of estradiol, injectable estradiol and micronized progesterone often require yearly authorization from your insurance, and some plans won’t cover progesterone. If you have any issues with insurance coverage that can’t be resolved at the pharmacy, please call our directory. We will do everything we can to get your medication covered. Sometimes this can take a few days. We appreciate your patience.
Injection Tips

- See our detailed injection guides in the Appendix!
- Gently massage the injection site after administering medication. This can help disperse the oil.
- Check out this link for hormone self injection videos: https://www.familytreeclinic.org/info-center/hormone-self-injection-resources/
- Store your vial upright and in a dry, dark place at room temperature between 68°F and 77°F (20°C and 25°C).
  - If your vial forms crystals, warm it by rubbing it between your palms quickly but gently, or placing it between your legs for 10-15 minutes.
  - If your vial gets too hot or is left in sunlight, it may denature.
- You can purchase a needle kit at the 201 N. Hamilton location only as of 9/15/21. These are $20 for a set of 12 needles/syringes. You can purchase them by walking in during any open hours. You can buy up to two packs at once.
- For ease, and in some cases money saving, you can order bulk needles and syringes from a medical supply company online. Provided below is an in-exhaustive list of suppliers that our patients have used.
  1. ADW Diabetes
  2. Allegro Medical
  3. Amazon
  4. Bulk Syringes
  5. Drug Supply Store
  6. GPZ Med Lab
  7. Health Warehouse
  8. Healthy Kin
  9. Mainland Medical Supply
  10. Med Vet International
  11. Trans Needles (Offers 1-month free supplies via Google Form)
  12. Vitality Medical
- Please be sure to check your prescriptions before leaving the pharmacy to see if these are the needles and syringes provided to you (you can refer to chart on page 9)
  - 1mL syringe
  - 18, 20, or 22 gauge 1” needle for drawing up medication
  - 25 or 27 gauge 5/8” needle with safety for injecting medication subcutaneously
  - 21-23 gauge 1” or 1.5” needle with safety for injecting medication intramuscularly
**Fear of Sharps**
If you have any issues preventing you from administering your shots, please call us to set up an appointment. Sometimes it will get easier with practice, watching training videos on the internet, or observing others. If you’re still having trouble, bring it up with your clinician and together you can discuss alternative methods of administration, such as topical testosterone. Some insurance plans are more likely to cover different formulations if you’ve tried the standard approach first.

**Potential 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. In this case, we will switch you to a different formulation. If you are concerned you’re having an anaphylactic reaction (swelling, difficulty breathing, nausea/vomiting), please call 911.
**Safe Needle Disposal**

<table>
<thead>
<tr>
<th><strong>DO NOT</strong></th>
<th><strong>DO NOT</strong></th>
<th><strong>DO NOT</strong></th>
<th><strong>KEEP OUT</strong></th>
<th><strong>DO NOT</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>throw loose sharps in trash</td>
<td>put sharps in recycling</td>
<td>flush sharps down toilet</td>
<td>of reach of children</td>
<td>force sharps into container</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>DO NOT</strong></th>
<th><strong>DO NOT</strong></th>
<th><strong>DO NOT</strong></th>
<th><strong>DO NOT</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>put fingers inside container</td>
<td>remove needle</td>
<td>bend or break needle</td>
<td>recap needle</td>
</tr>
</tbody>
</table>

(Image obtained from Monroe, IN Health Department)

Please refer to the CDC website for more sharps safety information.

*You are not required to spend extra on sharps containers. Oftentimes patients will use rigid containers (i.e. milk jug, laundry detergent bottle) and then tape it shut. You should label it on the side as "sharp" and can be placed in regular trash.*
Safe Needle Disposal

What to Do with Used Sharps in Virginia

Put used sharps in a strong, plastic container

When the container is 3/4 full, put the lid on, seal it with duct tape, and label. DO NOT RECYCLE.

Have a needle clipper? When the needle clipper is full, it can be disposed of according to your state or local regulations. More information can be found here.

Link to more information on cleared sharps containers: https://safeneedledisposal.org/sharps-management/fda-cleared-sharps-containers/
Safe Needle Disposal

Put the plastic container in the household trash – don’t recycle!

If a trash collector is reluctant to collect a red sharps container, refer them to your state waste agency.

Sharps should never be thrown loosely into the trash or toilet

Sharps that retract after use, or are very small, should be disposed of like all other sharps.

If you would like to bring your sealed container to a community sharps disposal program, there are drop-off locations in Chesterfield County, Fauquier County, Frederick County, Henrico County, Loudoun County, Mathews County, Prince William County, Rockingham County, Shenandoah County, and Warren County.

Images from https://safeneedledisposal.org/states/virginia/
Find disposal locations here: https://safeneedledisposal.org/states/virginia/#showTable
Welcome to the appendix! Here you’ll find resources which are aimed to help educate and inform patients and their allies on a variety of topics.

All About Medicaid .................................................................................................................. B-E
Terms to Know Glossary .......................................................................................................... F-G
Effects of Estrogen Hormone Therapy .................................................................................... H
Effects of Testosterone Hormone Therapy ................................................................................ I
Self-Injection Guide (Intramuscular) ....................................................................................... J-L
Self-Injection Guide (Subcutaneous) ....................................................................................... M-O
All About Medicaid

What is Medicaid?

Medicaid is a form of health insurance which exists in all 50 states. Each state is responsible for issuing and managing its own Medicaid plans and has different requirements for eligibility. For example, someone who qualifies for Medicaid in New York state may not qualify for it in North Carolina.

Since 2019, Medicaid in Virginia is based on income. It is designed to provide medical coverage to low-income individuals and families. Its purpose is to improve the health of the people who might otherwise go without medical coverage.

Does Medicaid cover gender-affirming care?

Most people in Virginia seeking gender-affirming care are able to use their Medicaid benefits towards this care after satisfying certain conditions. Certain things, like surgeries, will require documentation and support letters in order to be approved (see Section 3 of this guide for more information). The Virginia League for Planned Parenthood accepts Virginia Medicaid for all patients.

How is this different from Medicare?

**Medicaid** is a partnership between the federal government and individual state governments. In Virginia, eligibility is based on income. To qualify, applicants *must* meet income requirements. Once someone gets on Medicaid, they are assigned a Managed Care Organization, or MCO, to administer the plan.

**Medicare** is different. Medicare is a national health insurance model most commonly available to senior citizens in retirement. There are other circumstances where someone might qualify for Medicare.
All About Medicaid

How to know if you’re eligible for Medicaid?

Cover Virginia has an online eligibility screening tool to verify if you are eligible for Medicaid. You can also submit your application to find out if you are eligible for Medicaid. Check this link for the tool: https://www.coverva.org/en/screening-tool

Here are the income guidelines* for Medicaid for 2023:

<table>
<thead>
<tr>
<th>Household size</th>
<th>Yearly</th>
<th>Monthly</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$20,121</td>
<td>$1,677</td>
</tr>
<tr>
<td>2</td>
<td>$27,214</td>
<td>$2,268</td>
</tr>
<tr>
<td>3</td>
<td>$34,307</td>
<td>$2,859</td>
</tr>
<tr>
<td>4</td>
<td>$41,400</td>
<td>$3,450</td>
</tr>
<tr>
<td>5</td>
<td>$48,494</td>
<td>$4,042</td>
</tr>
<tr>
<td>6</td>
<td>$55,587</td>
<td>$4,633</td>
</tr>
<tr>
<td>7</td>
<td>$62,680</td>
<td>$5,224</td>
</tr>
<tr>
<td>8</td>
<td>$69,773</td>
<td>$5,815</td>
</tr>
<tr>
<td>Each additional</td>
<td>$7,094</td>
<td>$592</td>
</tr>
</tbody>
</table>

*subject to change - check CoverVA for the most current figures.
Eligibility (contd)

Do you make less than $18,755 per year AND reside in Virginia? If the answer is yes, then you may qualify for Medicaid (aka free insurance through the state)!

Other considerations:

Green Card holders with five years or more of residency in the United States may be eligible for free or low-cost Virginia Medicaid health coverage. Visit https://coverva.org/en/health-coverage-for-non-citizens for more information.

Former Foster Care Individuals: If you are between the ages of 18 and 26 and were previously in foster care, you might be eligible for Medicaid regardless of income. The best way to confirm eligibility is to apply via the methods below.

How to Apply to Medicaid:

Medicaid applications are accepted throughout the year. There are multiple ways to apply:


2. Call the Cover Virginia Call Center at 1-833-5CALLVS. Call center hours are Monday-Friday: 8:00am-7:00pm and Saturday: 9:00am-12:00pm

3. Mail or drop off a paper application to your local Department of Social Services. Mailing may take longer than other application methods. According to the website, paper applications are available in English and Spanish.

4. Through www.healthcare.gov (see next page for details).
All About Medicaid

Applying for Medicaid Through healthcare.gov

Virginia residents can also apply through the healthcare.gov Marketplace, the insurance marketplace that was created by the 2012 Affordable Care Act. Note: do NOT apply this way if you have already applied through the Cover Virginia website or it may void your application.

When screening for insurance coverage, if you meet the income requirements you will receive an Eligibility Results Letter at the end of the application stating either “you are eligible for Medicaid” or “we think you may be eligible for Medicaid.”

If the Marketplace application states “you are eligible for Medicaid,” enrollment should be automated and registration information will be mailed to you.

If the application states “we think you may be eligible,” there may be a conflict with past records. For example, if your income in 2022 is very low but was very high in 2021.

The Eligibility Results Letter will have an application number – write this down! This number will be very helpful if you need to follow up by phone to the Dept. of Social Services. This letter also has contact numbers for the correct offices. If it’s been more than a week since your Marketplace application confirmed eligibility and you haven’t heard anything, you should call DSS and inquire with your application number.
Here’s a glossary of terms you may come across as you are navigating your care.

- **Gender**: A social construct referring to attitudes, feelings and behaviors associated with a person’s biological sex.

- **Gender-Affirmation Surgery**: Surgery to change primary and/or secondary sex characteristics to affirm a person’s gender identity.

- **Gender Dysphoria**: Distress caused by a discrepancy between a person’s gender identity and that person’s sex assigned at birth (and associated with gender role and/or primary and secondary sex characteristics).

- **Gender Identity**: A person’s deeply held knowledge of their own gender, which can include being a man, woman, both, another gender, or no gender.

- **Non-Binary**: Term used to refer to people whose gender identity is not exclusively male or female, including those who identify with a different gender, a combination or genders, or no gender. It may encompass identities such as agender, bigender, genderqueer or gender-fluid.

- **Primary Sex Characteristics**: Any of the body structures directly concerned with reproduction, including the testes, ovaries, and external genitalia.
Secondary Sex Characteristics: Characteristics that develop during puberty and are specific to each sex, but they are not directly related to reproduction. This includes development of breasts, beard, muscularity, fat distribution, and change in voice pitch.

Sex: A construct usually assigned at birth based on the appearance of external genitalia. When external genitalia are ambiguous, internal genitalia, chromosomal status, and hormonal sex are considered when assigning sex.

Sexual Orientation: The sexual attraction toward other people or no people. While sexual activity involves the choices one makes regarding behavior, one’s sexual activity does not define one’s sexual orientation. Sexual orientation is part of the human condition, and all people have one. Typically, it is attraction that helps determine orientation. (via PFLAG)

Sex-assigned-at-birth: A helpful phrase to refer to someone’s assigned sex which acknowledges that someone’s gender may not correlate. This phrasing is sometimes useful in healthcare settings when evaluating someone’s health needs without referring to them as ‘male’ or ‘female.’ These are often abbreviated as AMAB (assigned male at birth) and AFAB (assigned female at birth). For example, you might say, "she is a woman who was AMAB and transitioned 10 years ago."

Trans male/Transmasculine: Term used to describe transgender or non-binary people who were assigned female at birth (AFAB), but identify with masculinity to a greater extent than with femininity. They could be either trans men or nonbinary.

Trans female/Transfeminine: Term used to describe transgender or non-binary people who were assigned male at birth (AMAB), but identify with femininity to a greater extent than with masculinity. They could be either trans women or non-binary.
**Effects of Estrogen Hormone Therapy for Trans Women, Transfeminine People, and AMAB Nonbinary People**

Estrogen and anti-androgen hormone therapy is medicine to make your body look more feminine. Some of the changes may be permanent while others may be reversible and go away when medication(s) are stopped.

<table>
<thead>
<tr>
<th>Effect</th>
<th>Expected Onset</th>
<th>Expected Maximum Effect</th>
<th>Reversibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast Growth</td>
<td>3-6 months</td>
<td>2-3 years</td>
<td>Permanent</td>
</tr>
<tr>
<td>Decreased Sperm Production/Maturation, Reduced Fertility</td>
<td>Variable</td>
<td>Variable</td>
<td>Possibly Permanent</td>
</tr>
<tr>
<td>Decreased Testicular Volume (By 25-50%)</td>
<td>3-6 months</td>
<td>2-3 years</td>
<td>Likely Permanent</td>
</tr>
<tr>
<td>Body Fat Redistribution to Feminine Pattern</td>
<td>3-6 months</td>
<td>2-5 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>Decrease Muscle Mass and Strength</td>
<td>3-6 months</td>
<td>1-2 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>Decreased Libido (Sex Drive)</td>
<td>1-3 months</td>
<td>1-2 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>Decreased Spontaneous / Morning Erections</td>
<td>1-3 months</td>
<td>3-6 months</td>
<td>Reversible</td>
</tr>
<tr>
<td>Less Firm Erections</td>
<td>Variable</td>
<td>Variable</td>
<td>Reversible</td>
</tr>
<tr>
<td>Thinning/Slowed Hair Growth: Face and Body</td>
<td>6-12 months</td>
<td>&gt;3 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>Softening of Skin and Decreased Oiliness</td>
<td>3-6 months</td>
<td>Unknown</td>
<td>Reversible</td>
</tr>
<tr>
<td>Cessation of Testosterone Pattern Balding</td>
<td>No Regrowth, Loss stops 1-3 months</td>
<td>1-2 years</td>
<td>Reversible</td>
</tr>
</tbody>
</table>
Effects of Testosterone Hormone Therapy for Trans Men, Transmasculine People, and AFAB Nonbinary People

Testosterone hormone therapy is medicine to make your body look more masculine. Some of the changes may be permanent while others may be reversible and go away when medication(s) are stopped.

<table>
<thead>
<tr>
<th>Effect</th>
<th>Expected Onset</th>
<th>Expected Maximum Effect</th>
<th>Reversibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facial and Body Hair growth</td>
<td>3-6 months</td>
<td>3-5 years</td>
<td>Permanent</td>
</tr>
<tr>
<td>Deepened Voice</td>
<td>3-12 months</td>
<td>1-2 years</td>
<td>Permanent</td>
</tr>
<tr>
<td>Clitoral Enlargement (By 1-3 cm)</td>
<td>3-6 months</td>
<td>1-2 years</td>
<td>Permanent</td>
</tr>
<tr>
<td>AMAB Pattern Baldness</td>
<td>&gt;12 months</td>
<td>Variable</td>
<td>Permanent</td>
</tr>
<tr>
<td>Clitoral Enlargement (By 1-3 cm)</td>
<td>3-6 months</td>
<td>1-2 years</td>
<td>Permanent</td>
</tr>
<tr>
<td>Body Fat Redistribution to Masculine Pattern</td>
<td>1-3 months</td>
<td>3-6 months</td>
<td>Reversible</td>
</tr>
<tr>
<td>Skin Oiliness/ Acne (May be Severe)</td>
<td>1-6 months</td>
<td>1-2 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>Cessation of Menstrual Periods</td>
<td>2-6 months</td>
<td>N/A</td>
<td>Reversible</td>
</tr>
<tr>
<td>Increased Libido (Sex Drive)</td>
<td>Variable</td>
<td>Variable</td>
<td>Reversible</td>
</tr>
<tr>
<td>Vaginal Atrophy</td>
<td>3-6 months</td>
<td>1-2 years</td>
<td></td>
</tr>
</tbody>
</table>
Intramuscular (IM) Injection Tips

<table>
<thead>
<tr>
<th>Dose you have been prescribed</th>
<th>Amount you should draw up into the syringe</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>mL/cc</td>
</tr>
</tbody>
</table>

**Video guide**

Folx Health has also developed video guides and tips for self-injection instruction. These videos are available in English and instructions can be accessed at https://www.folxhealth.com/library/how-to-self-inject-hrt-intramuscular

**What is an intramuscular (IM) injection?**

An intramuscular injection is a way of injecting medication deep into the muscle tissue. This allows the medication to be quickly absorbed into the bloodstream. Intramuscular shots are given at a 90° angle with the needle going straight through the skin into the muscle.

**What do I need for an IM injection?**

To give yourself an IM injection, you will need:
- Medication in a vial
- 1 disposable syringe
- 2 needles
  - 1 18 or 20 gauge needle to draw up medication
  - 1 21-23 gauge needle for the injection
  - Note: The needle size is described in units called gauge numbers. The smaller the needle gauge, the bigger the needle.
- 2 alcohol swabs (1 for vial & 1 for skin)
- Cotton ball or gauze
- A special, puncture-proof container to throw out the used needles and syringe (sharps container).

**How do I get the needles and syringes for an IM injection?**

You can get needles and syringes from VLPP during your visit or from a local pharmacy.

**NEVER REUSE OR SHARE SYRINGES OR NEEDLES.** If you need needles or syringes and cannot afford to get them from VLPP or your pharmacy, please visit a local syringe access program.

**Step 1: Set up your injection work area**

1. Find a comfortable, well-lit place to give yourself your injection.
2. Clean your work area and assemble the supplies listed above.
3. Check the expiration date on the medication. Do not use your medication if it has visible particles, is discolored, or is expired.
4. Wash your hands with soap and warm water or an alcohol-based hand cleaner. Hand washing is one of the most important things you can do to prevent infection.

**Step 2: Prepare your injection dose**

1. If you want, you can warm the vial of medication by rubbing it between your hands before preparing the syringe. This may help with some discomfort during the injection.
2. Take the cap off the vial. Clean the rubber stopper with 1 alcohol swab and let it to air dry.
3. Check the package containing the syringe. If the package has been opened or damaged, do not use the syringe.
4. Hold the 18 or 20 gauge needle by the packaging or the cap and place it securely on the syringe. Do not touch the base of the needle that attaches to the syringe.
5. Pull the 18 or 20 gauge needle cover straight off the syringe.
6. Pull back the plunger and draw air into the syringe. The amount of air drawn into the syringe should be the same amount (mL or cc) as the dose of medication that your clinician prescribed. **Do not let the needle touch any surfaces!**
7. Set the vial on your working space, with the rubber stopper facing up, and insert the needle straight down through the center of the rubber stopper into the bottle (see Figure 1).
8. Push the plunger of the syringe down and push the air from the syringe into the vial.
9. Keeping the needle in the vial, use your other hand to turn the vial upside-down. Do not let go of the vial!
10. Position the needle so the liquid is covering the tip of the needle.
11. Keep the vial upside-down and slowly pull back on the plunger until the syringe is filled with the number (mL or cc) that matches the dose your clinician prescribed you. As you remove the medication from the vial, the level in the bottle decreases. You may have to lower the needle below the fluid level to draw up as much medication as you need (see Figure 3).
12. Keeping the needle in the vial, check for air bubbles in the syringe. If there are air bubbles, gently tap the syringe with your fingers until the air bubbles rise to the top of the syringe. Then, slowly push the plunger up to force the air bubbles out of the syringe without removing the needle from the bottle (see Figure 3).
13. After air bubbles are gone, pull the plunger slightly past the number (mL or cc) on the syringe that matches your dose.
14. Pull the syringe with needle out of the bottle.
15. Remove the 18 or 20 gauge needle and put it into the sharps container without recapping it.
16. Hold the 22-23 gauge needle by the packaging or the cap and place it securely on the syringe.
   a. Do not touch the base of the needle that attaches to the syringe.
   b. Do not remove the protective cap from the needle until you are ready to inject.
17. Gently push the plunger to the number (mL or cc) matching your dose, making sure that you have the correct dose in the syringe. It is very important that you use the exact dose prescribed by your clinician.

**Step 3: Select and prepare injection site**

1. There are two areas you can pick for your injection site:
   a. Thigh muscle, also known as the vastus lateralis (see Figure 4)
   b. Hip muscle, also known as the ventrogluteal muscle (see Figure 5)
2. The upper thigh is a good site if you are injecting yourself. **If you want to use the hip muscle, you will need to get help from someone else.**
3. If you want, you can apply ice or an over-the-counter numbing cream to the injection site before cleaning it. This may help with discomfort.
4. Wipe the area where you plan to give the injection with a new alcohol swab and let air dry. If you do not let it air dry, it might cause stinging during the injection.
5. Do not touch this area again until you give the injection.

**Step 4: Administer the injection**

1. Remove the protective cap from the injecting needle and check one more time that the correct dose is in the syringe.
2. With your other hand, use your thumb and index finger to push/spread and hold the skin taut around the injection site (see Figure 6).
   a. Leave about 2 inches of space between your fingers.
   b. The skin between your fingers will be the injection site.
3. Hold the syringe barrel tightly and use your wrist to insert the needle all the way through the skin and into the muscle...
Injection Tips

at a 90° angle.

a. Try to keep your muscles warm and relaxed during the injection. This may help with any discomfort.
b. Push the needle through the skin in a smooth, single motion. Try not to hesitate.
c. Do not push the needle into the skin slowly or thrust the needle into the skin with a lot of force.
d. Do not press down on the top of the plunger while piercing the skin.

4. To inject the medicine, push down on the plunger slowly.
   a. Do not force the medicine by pushing too hard.
   b. You may feel some burning or pressure as the medication enters the muscle.

5. After injecting the medication, pull the syringe at the same angle it went in to remove the needle from your skin.

6. Put the used needle and syringe into the sharps container to dispose of it (see Figure 7 & Figure 8).

7. Gently press a cotton ball or gauze on the injection site.
   a. Hold pressure on the site until the bleeding is done.
   b. You can use a band aid if necessary.

---

Step 5: Dispose of the needles and syringe

1. All sharps (needles and syringes) should be disposed of in a sealable, puncture-resistant container.
   a. You can get a home sharps container from most drugstores (see Figure 7).
   b. You can also use a plastic container, like a laundry detergent bottle or milk jug (see Figure 8). If you do, the bottle or jug you use must have a lid.

2. You can use the same container for your sharps until it is about ¾ of the way full.

3. When your sharps container is ¾ of the way full, tape it shut and label it “syringes,” “sharps,” or “needles.” Most home sharps containers are pre-labeled, but if you use a detergent bottle or milk jug you will need to label it yourself.

4. After your sharps container is taped and labeled, you can put it in the regular trash. Do not put it in the recycling.

5. If you need more information about how to dispose of your syringes, visit deq.virginia.gov, or give them a call at 1-800-592-5482.

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Contact information

If you have any questions, concerns, or would like to speak with a staff member, please call the health center directly.

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Dose you have been prescribed | Amount you should draw up into the syringe
--- | ---
 | mL/cc

### Video guide
Folx health has also developed video guides and tips for self-injection instruction. These videos are available in English and instructions can be accessed at [https://www.folxhealth.com/library/how-to-self-inject-hrt-subcutaneous](https://www.folxhealth.com/library/how-to-self-inject-hrt-subcutaneous)

### What is a subcutaneous (SubQ) injection?
A subcutaneous injection is a way of injecting medication into the subcutaneous tissue that is directly under the skin. Medication given this way absorbs into the bloodstream more slowly than medication injected directly into the muscle. Subcutaneous injections can be given at a 45° or 90° angle.

### What do I need for a SubQ injection?
To give yourself a SubQ injection, you will need:
- Medication in a vial
- 1 disposable syringe
- 2 needles
  - 1 18 or 20 gauge needle to draw up medication
  - 1 25 or 27 gauge, 5/8 inch needle for the injection
- 2 alcohol swabs (1 for vial & 1 for skin)
- Cotton ball or gauze
- A special, puncture-proof container to throw out the used needles and syringe (sharps container).

### How do I get the needles and syringes for a SubQ injection?
You can get needles and syringes from VLPP during your visit or from a local pharmacy.

**NEVER REUSE OR SHARE SYRINGES OR NEEDLES.** If you need needles or syringes and cannot afford to get them from VLPP or your pharmacy, please visit a local syringe access program if available.

### Step 1: Set up your injection work area
1. Find a comfortable, well-lit place to give yourself your injection.
2. Clean your work area and assemble the supplies listed above.
3. Check the expiration date on the medication. Do not use your medication if it has visible particles, is discolored, or is expired.
4. Wash your hands with soap and warm water or an alcohol-based hand cleaner. Hand washing is one of the most important things you can do to prevent infection.

### Step 2: Prepare your injection dose
1. If you want, you can warm the vial of medication by rubbing it between your hands before preparing the syringe. This may help with some discomfort during the injection.
2. Take the cap off the vial. Clean the rubber stopper with 1 alcohol swab and let it to air dry.
3. Check the package containing the syringe. If the package has been opened or damaged, do not use the syringe.
4. Hold the 18 or 20 gauge needle by the packaging or the cap and place it securely on the syringe. Do not touch the base of the needle that attaches to the syringe.
5. Pull the 18 or 20 gauge needle cover straight off the syringe.
6. Pull back the plunger and draw air into the syringe. The amount of air drawn into the syringe should be the same amount (mL or cc) as the dose of medication that your clinician prescribed. **Do not let the needle touch any surfaces!**
7. Set the vial on your working space, with the rubber stopper facing up, and insert the needle straight down through the center of the rubber stopper into the bottle (see Figure 1).
8. Push the plunger of the syringe down and push the air from the syringe into the vial.
9. Keeping the needle in the vial, use your other hand to turn the vial upside-down. Do not let go of the vial!
10. Position the needle so the liquid is covering the tip of the needle.
11. Keep the vial upside-down and slowly pull back on the plunger until the syringe is filled with the number (mL or cc) that matches the dose your clinician prescribed you. As you remove the medication from the vial, the level in the bottle decreases. You may have to lower the needle below the fluid level to draw up as much medication as you need (see Figure 2).
12. Keeping the needle in the vial, check for air bubbles in the syringe. If there are air bubbles, gently tap the syringe with your fingers until the air bubbles rise to the top of the syringe. Then, slowly push the plunger up to force the air bubbles out of the syringe **without** removing the needle from the bottle (see Figure 3).
13. After air bubbles are gone, pull the plunger slightly past the number (mL or cc) on the syringe that matches your dose.
14. Pull the 18 or 20 syringe with needle out of the bottle.
15. Remove the needle and put it into the sharps container without recapping it.
16. Hold the 25 or 27 gauge needle by the packaging or the cap and place it securely on the syringe.
   a. Do not touch the base of the needle that attaches to the syringe.
   b. Do not remove the protective cap from the needle until you are ready to inject.
17. Gently push the plunger to the number (mL or cc) matching your dose, making sure that you have the correct dose in the syringe. It is very important that you use the exact dose prescribed by your clinician.

**Figure 1**

**Figure 2**

**Figure 3**

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### Step 3: Select the injection site

There are three areas you can pick for your injection site (see Figure 4). It is extremely important to rotate sites to keep the skin healthy. Repeated injections in the same spot can cause scarring and hardening of fatty tissue that will interfere with absorption of medication.

1. Abdomen, at or under the level of the belly button.
   a. To find where to inject, place your hands on your lower ribs.
   b. Use the area below your hands for injections. You can use any area you can pinch fatty tissue.
   c. Do not use the area directly around your bellybutton. Make sure your injection is at least 1 inch away from it.

2. Back or side of the upper arm.
   a. To find where to inject, fold one arm across your chest.
   b. Place your other hand on your shoulder and draw an imaginary line below your hand. You can draw this line with a marker if it helps you.
   c. Move your hand to your elbow and draw another imaginary line above your hand. You can draw this line with a marker if it helps you.
   d. Use the area between the imaginary lines on the back of your arm for injections. You can use any area you can pinch fatty tissue.

3. Front of the thigh.
   a. To find where to inject, sit down.
   b. Place your hand above your knee and draw an imaginary line above it. You can draw this line with a marker if it helps you.
   c. Place your hand at the very top of your thigh and draw an imaginary line above it. You can draw this line with a marker if it helps you.

**Figure 4**

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Side (or back) of upper arm
Abdomen
Front of thigh
d. Draw an imaginary line down the center front of your leg and the outer side of your leg. You can draw this line with a marker if it helps you.

e. Use the area between the imaginary lines for injections. You can use any area you can pinch fatty tissue.

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**Step 4: Prepare the injection site**

1. If you want, you can apply ice or an over-the-counter numbing cream to the injection site before cleaning it. This may help with discomfort.
2. Wipe the area where you plan to give the injection with a new alcohol swab and let air dry. If you do not let it air dry, it might cause stinging during the injection.
3. Do not touch this area again until you give the injection.

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**Step 5: Administer the injection**

1. Remove the protective cap from the injecting needle and check one more time that the correct dose is in the syringe.
2. Hold the syringe with your writing hand to give the injection.
3. With your other hand, pinch a fold of skin. You will inject the medicine into the skin between your fingers.
4. Insert the needle all the way into the skin (see Figure 5).
   a. You can hold the needle at a 45° or 90° angle, whichever is easier for you.
   b. Push the needle through the skin in a smooth, single motion. Try not to hesitate.
   c. Do not push the needle into the skin slowly or thrust the needle into the skin with a lot of force.
   d. Do not press down on the top of the plunger while piercing the skin.
5. After you insert the needle, let go of the skin you are pinching.
6. To inject the medicine, push down on the plunger slowly. Do not force the medicine by pushing too hard.
7. Wait 5 seconds, then pull the syringe at the same angle it went in to remove the needle from your skin.
8. Put the used needle and syringe into the sharps container to dispose of it (see Figure 6 & Figure 7).
9. Gently press a cotton ball or gauze on the injection site.
   a. Hold pressure on the site until the bleeding is done.
   b. You can use a band aid if necessary.

---

**Figure 5**

**Figure 6**

**Figure 7**

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**Step 6: Dispose of the needles and syringe**

1. All sharps (needles and syringes) should be disposed of in a sealable, puncture-resistant container.
   a. You can get a home sharps container from most drugstores (see Figure 6).
   b. You can also use a plastic container, like a laundry detergent bottle or milk jug (see Figure 7). If you do, the bottle or jug you use must have a lid.
2. You can use the same container for your sharps until it is about ¾ of the way full.
3. When your sharps container is ¾ of the way full, tape it shut and label it “syringes,” “sharps,” or “needles.” Most home sharps containers are pre-labeled, but if you use a detergent bottle or milk jug you will need to label it yourself.
4. After your sharps container is taped and labeled, you can put it in the regular trash. Do not put it in the recycling.
5. If you need more information about how to dispose of your syringes, visit deq.virginia.gov, or give them a call at 1-800-692-5482.

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