

HOW TO SELF-ADVOCATE FOR A BRIDGING PRESCRIPTION

This guide is for trans adults in the UK who want to start hormones. It helps you understand what a bridging prescription is, how to ask for one and what your rights are.

This guide was made by experienced trans health advocates to help trans people know their rights, counter misinformation, and provide their GPs with resources to give them competent, timely care.

This information in this guide does not apply to trans people who are aged under 18.

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1. What is a bridging prescription?

A bridging prescription is a temporary prescription of **hormone replacement therapy** issued by a **GP, endocrinologist or Advanced Nurse Practitioner (ANP)** for a patient on the **waiting list** for an **NHS Gender Identity Clinic (GIC)**.

Bridging prescriptions are described as temporary because they last until someone has their first appointment with an NHS GIC.

Bridging prescriptions are a '[harm reduction strategy](#)' recommended by the NHS, General Medical Council, Royal College of Psychiatrists, and World Professional Association of Transgender Health in response to the mental and physical health risks posed by gender clinic wait times and unsupervised self-medication. For more information about bridging prescriptions, including why they're necessary and what the conditions are, see TransActual's [comprehensive guide](#).

While trans patients have the right to ask for a bridging prescription, a [2020 GenderGP survey](#) found that 80% of GPs asked to issue a bridging prescription refused. This is often due to lack of confidence, ignorance of trans healthcare pathways, or heightened media anxiety about transition-related healthcare.

2. Who can get a bridging prescription?

Anyone who is looking to take hormones for gender-related reasons can ask for a bridging prescription.

According to [GMC guidance](#), bridging prescriptions should be considered where:

- Someone is **self-medicating** hormones or seems highly likely to self-medicate from an unregulated source (over the internet or otherwise on the black market)
- OR, The bridging prescription is intended to mitigate a risk of **self-harm** or **suicide**
- AND, The doctor has sought **specialist advice** and prescribes the **lowest acceptable dose** in the circumstances

In practice, whether or not you will be able to get a bridging prescription primarily depends on how supportive and understanding your GP is. Some GPs understand bridging prescriptions and will prescribe to any trans person, others will only prescribe to some trans people, and others refuse to prescribe altogether.

3. How to ask for a bridging prescription

1. **Get referred to an NHS Gender Identity Clinic (GIC), if you're not already.** You technically need to be on a GIC waiting list in order to get a bridging prescription. You can ask for a GIC referral and a bridging prescription in the **same appointment**. You have the right to be referred to a GIC of your choice by your GP.
2. **Make an appointment with your GP.**
3. **Have a baseline blood test.** Baseline blood tests check what your hormone levels are before you start taking hormones and check that your organs are working correctly.

You can make a separate appointment with your **GP surgery** for your baseline blood test, or get it done at a **trans health clinic** if you have one in your area. If you want to have your blood test at your GP surgery, it's easiest to ask for this in your bridging prescription appointment.

A list of trans health clinics and information on the blood tests you need is in the **list of resources** at the end of this guide.

4. **Prepare for the bridging prescription appointment.** Most people find it helpful to plan what they're going to say in advance. In the appointment you will need to:
 - a. Explain what a bridging prescription is.
 - b. Explain why you need a bridging prescription.
 - c. Give your GP resources to help them understand bridging prescriptions.

The resources you need to give your GP are:

- a. Information about where your GP can ask for specialist advice (see the list of resources at the end of this guide).
- b. Prescribing guidance (see the list of resources at the end of this guide).
- c. Results of your baseline blood tests, if you've already done them.
- d. *Optional:* A copy of the letter for GPs at the end of this guide.
- e. *Optional:* Evidence of your social transition (such as a deed poll).

You can also email these to your GP before your appointment.

5. **Go to the appointment.** You may want to take a friend or advocate with you.
6. **Do the appointment.** You need to:
 - a. Say that you are trans and briefly explain how this impacts your life.
 - b. Ask for a GIC referral, if you haven't already been referred.
 - c. Explain what a bridging prescription is (eg. 'A bridging prescription is when a GP prescribes hormones for a trans person who is on the waiting list for a Gender Identity Clinic.')
 - d. Explain why you need a bridging prescription. Explain how hormones would improve your life and how the waiting list for the GIC is too long for you to wait.
 - e. Show the GP the resources you have for them.
 - f. Ask for baseline blood tests if you have not already had them.

Your GP will then probably ask you some questions. If the questions make you uncomfortable, you don't have to answer them.

There is **no requirement** for your GP to refer you to a mental health service or physically examine you before giving you a bridging prescription.

7. **Do something for yourself after the appointment.** Whether or not your GP gives you a bridging prescription, the appointment itself can often be draining and stressful. If possible, it's a good idea to plan something that you enjoy doing after the appointment, to give you space to decompress.

4. What to do if your GP refuses to give you a bridging prescription

If your GP refuses to give you a bridging prescription, you have a few options for next steps. You can try as many of these options as you want.

1. **Option 1: Change GP.** If you feel like you're not getting anywhere with your current GP, you can ask to be seen by another GP at your surgery or switch to a different surgery. To switch to a different surgery, go to the website of the GP surgery you want to switch to and fill out their 'New Patient' form. You don't have to tell your old GP that you're switching - your information will be carried across automatically.
2. **Option 2: Check if you are eligible for a trans health pilot scheme (England only).** Trans health pilot schemes are NHS gender clinics that combine transition-related healthcare with other health services. They offer the same services as the traditional GICs, but faster, with much shorter waiting lists.

The trans health pilot schemes are:

- [TransPlus](#): Anyone registered with [56 Dean Street](#) sexual health services in London
- [CMagic](#): Merseyside and Cheshire
- [Indigo](#): Greater Manchester
- [East of England](#): Essex, Bedfordshire, Cambridgeshire, Suffolk, Hertfordshire, East Anglia

Each trans health pilot scheme has their own eligibility criteria. To find out if you are eligible for a pilot scheme, check their website.

3. **Option 3: Ask for a referral to an endocrinologist.** Endocrinologists can prescribe bridging prescriptions. To ask for an endocrinologist referral, make a GP appointment and ask for this referral.

Harrogate, Wirral, Bradford and Haverford West NHS Endocrinology teams are trans-friendly and accept referrals from anywhere in the UK. They have an 8-12 month waiting list for an appointment.

You can also be referred to your local endocrinology team, who may have a far shorter waiting list, but may not be trans-friendly.

4. **Option 4: Make a complaint.** Your GP is allowed to refuse to give you a bridging prescription, but you're still within your rights to complain about them.

You can make a complaint to the manager of your GP surgery, who is effectively

your GP's boss. The information on how to contact them will be on the website of your GP surgery.

You can also make a complaint to the Patient Advice and Liaison Service (PALS).

You may want to use an [NHS complaints advocate](#) or a trans health advocate to help you make a complaint.

5. Self-advocacy tips

Bridging prescriptions can be life-saving tools for many trans people. However, getting one usually involves some planning, educating, and emotional energy. Here are a few things to consider when you're planning to ask for a bridging prescription.

- **Consider what resources you have available.** Do you have an existing good relationship with a GP at your surgery? Do any GPs advertise that they're LGBTQ-friendly? Is your GP surgery registered with Pride in Practice? What guidance and information can you give your GP? Are there any trans support groups/organisations in the area who can help advocate on your behalf or come to an appointment with you? What can support your mental health during this process? Who can answer questions you have?
- **Be realistic about what will happen.** It's important to understand that unfortunately, most GPs will not offer bridging prescriptions. Some may refuse outright. Others might say they need to do more research before they give you an answer, and then you might need to chase them. GPs who say yes will usually not give you the prescription on the day – they will often want to speak to a specialist or get you to do blood tests before they prescribe. Consider possible next steps and the potential emotional impact of an appointment.
- **Make a plan for best and worst case scenarios.** In a best case scenario, your GP will agree to give you a bridging prescription. In the worst case, they will say no, speak over you, and/or give you information that is incorrect or upsetting. It's a good idea to go in with plans for both possibilities so you can support yourself either way.
- **Bring someone with you.** A health advocate or a friend can be a huge help in a stressful appointment. You might ask them to take notes for you, work out a way to check in with you during the appointment, or debrief with you afterwards.
- **Start simple and direct.** It's best to start with a simple request for a bridging prescription. Speaking about your entire trans history or giving a GP lots of technical information before they've asked for it can dilute the message or take away from your appointment time.
- **Focus on a GP's responsibilities.** GPs who don't have good information about trans care often respond best to medical guidance, specialist

resources, and your awareness of accountability systems within the NHS (like complaints or talking to the practice manager). These are often more effective when trying to counter a GP's refusal than going into detail about your personal experience.

- **Document and know your rights.** You do not have to answer questions that feel inappropriate or uncomfortable. You can ask your GP to provide you proof of referrals and to document their refusal in your notes. When possible, write down what happens in an appointment and make a note of what's said.

6. Bridging prescriptions and patient rights

This list explains what GPs have a responsibility to do and links to the NHS guidance where this is specified. If your GP is confused or refusing to do something they should do, it can help to show them the relevant guidance.

1. Your GP is always the main person responsible for prescribing and monitoring your hormones, even if you were first prescribed hormones by a gender clinic.

Some GPs are worried about whether they are allowed to prescribe hormones at all. You can remind them that they are responsible for prescribing and monitoring hormones no matter who first prescribes them. It can be useful to remind your GP that you're asking them to do exactly the same things (prescribing and monitoring) they will be doing after you're seen by the gender clinic.

Guidance for GPs:

- 'GPs are usually at the centre of treatment for trans people, often in a shared care arrangement with other clinicians. GPs may prescribe hormones and make referrals to other clinicians or services, depending on the needs of the particular service user. Sometimes a GP has, or may develop, a special interest in gender treatment and may be able to initiate treatment, making such local referrals as necessary.' - Page 5, [NHS Guidance for GPs, other clinicians and health professionals on the care of gender variant people](#).

2. If your GP doesn't know how to prescribe and monitor your hormones, they have an obligation to learn, and they can ask experts for help.

Guidance for GPs:

- 'You must keep your skills and knowledge up to date in all areas of your work, whether in a clinical or non-clinical setting.... You must be familiar with the relevant guidelines and developments that affect your work and use them to help you with your practice.' - Pages 39-40, [GMC Ethical Guidance, 'Leadership and Management For All Doctors'](#)
- [Hormone prescribing guide for transfeminine people](#)
- [Hormone prescribing guide for transmasculine people](#)
- If your GP wants **advice from another doctor**, they can contact the Tavistock and Portman GIC at gic.endocrine@nhs.net or the TransPlus pilot scheme at caw-tr.transplus@nhs.net.

3. You have the right to a clear, informed treatment plan.

Guidance for GPs:

- 'You should identify the likely cause of the patient's condition and which treatments are likely to meet their needs. You should reach agreement with the patient on the proposed treatment, explaining:
 - the likely benefits, risks and impact, including serious and common side effects
 - what to do in the event of a side effect or recurrence of the condition
 - how and when to take the medicine and how to adjust the dose if necessary,
 - how to use a medical device
 - the likely duration of treatment
 - any relevant arrangements for monitoring, follow-up and review, including further consultation, blood tests or other investigations, processes for adjusting the type or dose of medicine, and for issuing repeat prescriptions' - Pages 39-40, [GMC Good Practice in Managing and Prescribing Medications and Devices](#)

4. Your GP can refuse you a bridging prescription, but they should be able to demonstrate that refusing bridging is in your best interest.

Guidance for GPs:

- 'A harm reduction approach is advocated by the Royal College of Psychiatrist's current guidelines and it would be in line with our guidance if judged to be of overall benefit to your patient.' - [GMC Ethical Guidance for Trans Healthcare, 'Bridging Prescriptions'](#)
- 'Our advice should reassure doctors who wish to prescribe for their trans patients that it wouldn't be against GMC guidance to do so, without forcing doctors who do not feel that prescribing would be in their patient's best interests down a particular treatment route.' - [GMC Ethical Guidance for Trans Healthcare, 'Bridging Prescriptions'](#)
- 'Decisions about who should take responsibility for continuing care or treatment after initial diagnosis or assessment should be based on the patient's best interests, rather than on convenience or the cost of the medicine and associated monitoring or follow-up.' - Page 74, [GMC Ethical Guidance, 'Good Practice in Prescribing and Managing Medicines and Devices'](#)

5. Your GP can prescribe 'unlicensed' medication (which most hormone replacement therapy is) and will need to do so anyway once recommended by a gender clinic.

Guidance for GPs:

- 'Most recommendations will be for medications to be used outside the indications approved by the Medicines and Healthcare Products Regulatory Agency; the General Medical Council advises GPs that they may prescribe 'unlicensed medicines' where this is necessary to meet the specific needs of the patient and where there is no suitably licensed medicine that will meet the patient's need.' - Page 30, [NHS England Gender Identity Services for Adults \(Non-Surgical Interventions\) Service Specifications Schedule 2](#)

6. All UK GICs have longer waiting lists than the NHS maximum waiting times for treatment. This means the NHS is required to offer you alternatives for treatment.

Guidance for GPs:

- **England:** 'You have the right to start your consultant-led treatment within a maximum of 18 weeks from referral for non-urgent conditions.... If this is not possible, the CCG or NHS England, which commissions and funds your treatment, must take all reasonable steps to offer a suitable alternative provider.' - [Handbook to the NHS Constitution for England](#)
- **Scotland:** 'An eligible patient is to start to receive an agreed treatment within the maximum waiting time...[which] is the period of 12 weeks beginning with the date on which the patient agrees to the agreed treatment.' - [Patient Rights \(Scotland\) Act 2011](#)
- **Wales:** 'Welsh Assembly Government waiting times target for December 2009 [is] that no patient should wait more than 26 weeks from referral to treatment.' - [Wales Rules for Managing Referral to Treatment Waiting Times](#)
- **Northern Ireland:** 'By March 2022, 50% of patients should wait no longer than 9 weeks for a first outpatient appointment, and no patient should wait longer than 52 weeks.' - [Northern Ireland 2021/22 Ministerial Targets for Outpatient Waiting Times](#)

7. If you are neurodivergent and/or have a mental illness, this is not in itself a reason for a GP to refuse to give you a bridging prescription.

Guidance for GPs:

- 'The following may all co-exist with Gender Dysphoria, and are not considered contraindications: disorders of mental or physical health, disorders of learning, development (including autistic spectrum) or personality, dependence on alcohol or other substances... It is recognised, that some health concerns arise from the stress of dysphoria

or transition and commonly diminish or disappear altogether with successful addressing and management of the Gender Dysphoria itself.’ - Page 4, [GIC Guidance on gender dysphoria service for General Practitioners and other healthcare staff](#)

- ‘Often, co-existing difficulties are a direct result of suppressed transgender feelings, and they will start to improve once the gender conflicts are addressed.’ - Page 35, [NHS Guidance for GPs, other clinicians and health professionals on the care of gender variant people](#)

8. If you are suicidal, this isn’t a reason for a GP to refuse to give you a bridging prescription - if hormones would help you feel less suicidal, this is more reason for your GP to give you a bridging prescription.

Guidance for GPs:

- ‘Patients may face a long wait before their first appointment with a gender specialist. This can be very distressing and their mental health may suffer as a consequence. The risk of self-harm and suicide for trans people is much greater than in the general population, and delay in accessing medical care substantially increases these risks... a GP should consider issuing a bridging prescription in cases where all the following criteria are met:
 - the patient is already self-prescribing, or seems highly to self-prescribe, with hormones obtained from an unregulated source (over the internet or otherwise on the black market)
 - the bridging prescription is intended to mitigate a risk of self-harm or suicide
 - the doctor has sought the advice of a gender specialist, and prescribes the lowest acceptable dose in the circumstances.’ - [GMC Guidance ‘Tackling the risk of harm: bridging prescriptions’](#)

9. Your GP does not need to refer you to a mental health service before starting any kind of transition-related healthcare.

Guidance for GPs:

- ‘Gender Dysphoria is not a psychological disorder. However, many people with gender dysphoria do suffer from mental health issues, and these can and should be treated concurrently through referral to local mental health teams. You don’t need to delay referral to the Gender Identity Clinic.’ - [GIC Guidance for GPs](#)
- ‘Gender dysphoria is not, in itself, a mental health condition, reflecting contemporary professional opinion (Diagnostic and Statistical Manual of Mental Disorders (v5, 2013)).’ - Page 2, [NHS England Gender Identity Services for Adults \(Non-Surgical Interventions\) Service Specifications Schedule 2](#)

10. Your GP isn't allowed to refuse to give you a bridging prescription because they believe it's against their religious or political beliefs.

Guidance for GPs:

- 'It is not acceptable for a GP to block or withhold treatment from dysphoric individuals on the basis of their own religious, cultural or other doctrinal beliefs around gender.' - Page 7, [GIC Guidance on gender dysphoria service for General Practitioners and other healthcare staff](#)

7. List of resources

- **Template letter for GPs**
- **Resources for GPs**
- **Baseline blood tests**

Template Letter for GPs

*This is a letter designed for use with your GP and contains guidance that was up-to-date as of November 2022. Using this template letter is not a guarantee that your GP will provide you with a bridging prescription. If you use this letter, make sure to edit the **[bold, bracketed text]**.*

You can email this to your GP in advance of an appointment to discuss starting a bridging prescription, with 'For the attention of [Your GP]' in the subject line. If you don't have your GP or surgery's email address, you can call your GP surgery or submit an e-consult request to ask for advice about how to send material in advance of an appointment.

Dear **[NAME OF GP]**,

My name is **[NAME, (DATE OF BIRTH)]**. I am a patient at **[SURGERY NAME]**.

I'm writing in advance of an appointment with you where I'd like to speak about beginning hormone replacement therapy via a bridging prescription. For your convenience, I wanted to provide you with some resources as I know many GPs do not have straightforward access to up-to-date information and training about transgender healthcare pathways.

A bridging prescription is a temporary prescription of hormone replacement therapy issued by a GP for a patient on the waiting list for an NHS gender clinic. Bridging prescriptions are a 'holding and harm reduction strategy' recommended by the Royal College of Psychiatrists' and GMC's good practice guidelines for the treatment of adults with gender dysphoria.

I am asking for a bridging prescription in part because according to data obtained by recent FOIs, NHS gender clinic wait times for a first appointment at the current referral processing rate are projected to be over 17.5 years, with at least another 1.5 year's wait for a second appointment at which hormones are usually recommended. This wait is

well beyond the NHS' own 18-week referral-to-treatment targets and contravenes the NHS' and World Professional Association for Transgender Health's classification of hormone therapy as 'medically necessary' for trans people who need to access it.

During this wait, the NHS leaves patients with little to no support. This was cited as a leading factor for trans and nonbinary people's disproportionate poor levels of mental and physical health in Stonewall's 2018 LGBT in Britain survey. It has also led to a significant spike in unmonitored self-medicating, with a 2016 survey of patients at the UK's largest gender clinic finding that 40 per cent of patients were already self-medicating upon arrival.

I am seeking a bridging prescription from you as **[GIVE PERSONAL REASONS IN BRIEF. You might mention A) how long you've been waiting, B) how long you're likely to wait, C) the impact this has had on your mental/physical health, and D) if you've considered or are self-medicating. It's recommended you keep this to 2-5 sentences –you can discuss this more in depth with your GP at your appointment].**

Some GPs do not feel confident initiating or monitoring hormone therapy. While I'm understanding of the lack of training on this issue, I'd like to work collaboratively with you on this, as 'GPs are usually at the centre of treatment for trans people' ([NHS guidance for GPs, other clinicians and health professionals on the care of gender variant people](#), p. 5). I am also conscious that 'You must keep your skills and knowledge up to date in all areas of your work, whether in a clinical or non-clinical setting.... You must be familiar with the relevant guidelines and developments that affect your work and use them to help you with your practice.' ([GMC Ethical Guidance, "Leadership and Management For All Doctors"](#), ps. 39-40)

I've therefore attached resources, including detailed instructions about the role of GPs in hormone therapy, how to prescribe and monitor, where to seek free, prompt clinical advice and training from NHS gender specialists, and the GMC's ethical guidance regarding bridging prescriptions.

In brief, bridging prescriptions:

- Are a legal, recommended fulfilment of the NHS' obligation to offer alternatives to care if patients are unable to access consultant-led care within the maximum waiting times
- Reduce the risk of unsupervised self-medicating or the health toll of the projected 19+ year wait for hormones via any UK gender clinic

- Require the same skills and knowledge from a GP as they will be obligated to use after a patient is diagnosed with gender dysphoria at a gender clinic

I appreciate you taking the time to read this through carefully. I know this is a lot of information, especially in the current situation, and that GPs do not always have good access to trans-related healthcare resources. I ask, too, that you consider that transgender people are disproportionately responsible for being self-advocates and teachers about our own healthcare. In this stressful and uncertain time, it would be a huge reassurance to know that **[SURGERY NAME]** is able to support me in seeking this vital treatment and relevant specialist guidance.

Best wishes,
[NAME]

Resources for GPs

Prescribing & Monitoring Trans-Related Hormone Replacement Therapy:

- [Endocrine Management of Gender Dysphoria in Adults: Prescribing Guidance for Non-Specialist Practitioners](#)
- [NHS prescribing guidance for transfeminine \(male-to-female\) people \(current protocols as of July 2022\)](#)
- [NHS prescribing guidance for transmasculine \(female-to-male\) people \(current protocols as of July 2022\)](#)

Medical Guidance for Trans-Related Care:

- [GMC Ethical Guidance for Trans Healthcare](#)
- [Adult trans care pathway: what CQC expects from GP practices](#)
- [The Clare Project's Guide for Primary Care Practitioners in Supporting Transgender Adults](#)
- [Supporting Patients Accessing Gender Identity Services](#)
- [NHS Guidance for GPs on the Care of Gender Variant People](#)
- [BMA Guidance on Managing Patients with Gender Dysphoria](#)
- [World Professional Association for Transgender Health Standards of Care](#)

Administrative Support for Surgeries with Trans Patients:

- [Primary Care Support England guide to registering change of gender](#)
- [GenderKit guide to updating medical details as a trans patient](#)

Where to Learn More and Get Advice:

- [TransPlus London NHS pilot gender clinic FAQ for healthcare professionals](#) (including options to ask clinical questions via caw-tr.transplus@nhs.net) <https://www.wearetransplus.co.uk/faqs/>
- TransPlus London free and low-cost e-learning for primary care professionals (contact caw-tr.transplus@nhs.net with subject line “TransPlus Learning”)
- Tavistock & Portman Gender Identity Clinic’s 48-hour response medical professional endocrinology queries email (gic.endocrine@nhs.net) and helpline (020 8938 7369)
- Harrogate District Hospital Endocrinology Department (clinical lead Dr Peter Hammond, 01423 553747 Ext: 3747)
- [GIRES CPD-accredited Gender Diversity Training for Primary Care Teams](#) <https://www.gires.org.uk/e-learning/>
- Ruth Pearce, *Understanding Trans Health: Discourse, Power, and Possibility* (London, 2018)
- Spectra Trans Health Advocacy Service, advocacy@spectra-london.org.uk

Further Reading About UK Trans Healthcare:

- [2019 RCGP Position Statement on the Role of the GP in Caring for Gender-Questioning and Transgender Patients](#)
- TransActual [Guide to Bridging Prescriptions](#) & 2021 [Trans Lives Survey](#)
- [“Trans in the UK: What the Hell Are We Going to Do?”](#), Josephine Giles

Baseline Blood Tests

Required baseline blood tests for starting and monitoring hormones

- Transfeminine people/trans women/male-to-female: Page 7, [NHS Prescribing Guidance](#)
- Transmasculine people/trans men/female-to-male: Page 8, [NHS Prescribing Guidance](#)

Trans Health Clinics

London:

- [56T](#)
- [CliniQ](#)

Brighton:

- [Trans Health Hub](#)
- [Clinic T](#)