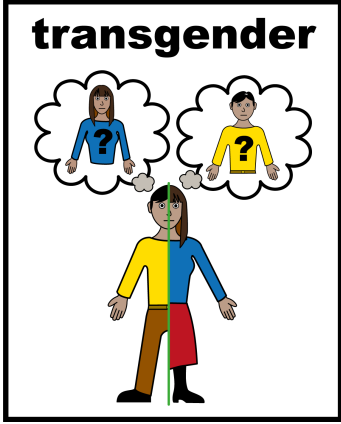
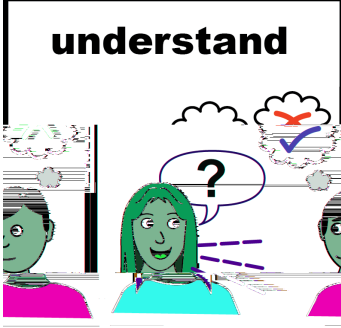







## HOW TO SELF-ADVOCATE FOR A BRIDGING PRESCRIPTION: EASY READ

 <p><b>transgender</b></p>	<p>This guide is for <b>trans adults</b> in the <b>UK</b> who <b>want to start hormones</b>.</p>
 <p><b>understand</b></p>	<p>This guide helps you understand what a <b>bridging prescription</b> is and what your <b>rights</b> are.</p>
 <p><b>i advocate</b></p>	<p>This guide was written by <b>trans health advocates</b> who are experienced at helping people access bridging prescriptions.</p> <p><i>Trans health advocates: Advocates who support trans people to make their voice heard in healthcare settings.</i></p>

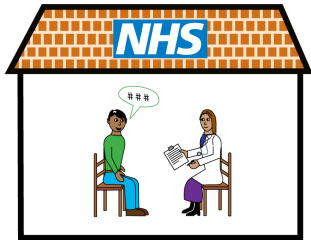
### Contents

1. What is a bridging prescription?
2. Who can get a bridging prescription?
3. How to ask for a bridging prescription
4. What to do if your GP refuses to give you a bridging prescription
5. Bridging prescriptions and patient rights
6. List of resources

## 1. What is a bridging prescription?

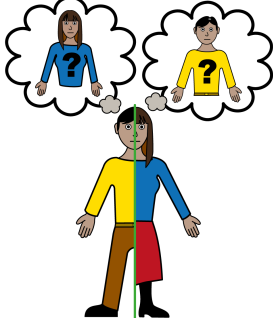



	<p>A bridging prescription is a temporary <b>hormone prescription</b> for trans people.</p>
<div data-bbox="207 653 540 1031"><p><b>waiting list</b></p></div> <div data-bbox="207 1052 540 1375"><p><b>clinic</b></p></div>	<p>Bridging prescriptions are prescribed to people who are on a <b>waiting list</b> for an NHS <b>Gender Identity Clinic</b>.</p> <p><i>Gender Identity Clinic (GIC): NHS clinics for transition-related healthcare.</i></p>
<div data-bbox="207 1417 540 1753"><p><b>doctors</b></p></div>	<p><b>GPs, endocrinologists</b> and <b>Advanced Nurse Practitioners (APNs)</b> can prescribe bridging prescriptions.</p> <p><i>Endocrinologists: Doctors who specialise in hormones.</i></p> <p><i>Advanced Nurse Practitioners (APNs): Nurses who have extra training and qualifications which means they are allowed to assess, diagnose and prescribe medications to people.</i></p>





**clinic**

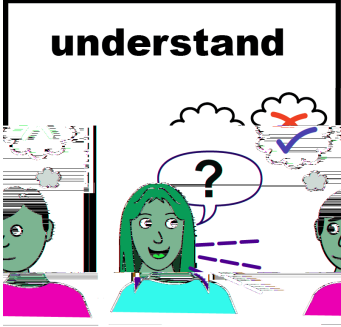
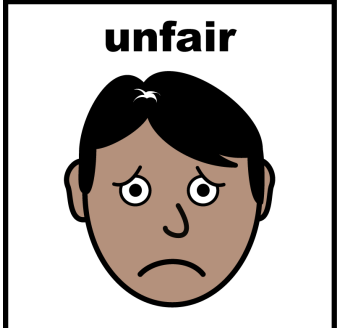
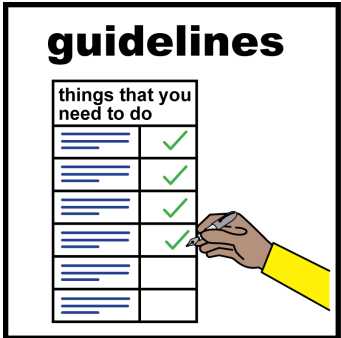








Bridging prescriptions are **temporary** because they last until you have an appointment at a **Gender Identity Clinic (GIC)**.

## 2. Who can get a bridging prescription?


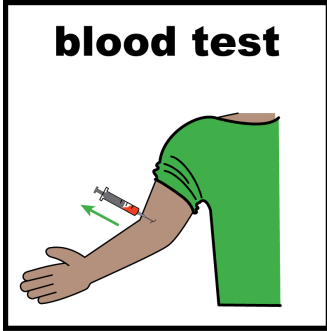

<p><b>transgender</b></p>  An illustration of a transgender person with a thought bubble above their head. The thought bubble contains two smaller figures, one with a question mark, representing gender identity.	<p>Anyone who wants to take hormones for gender reasons can ask for a bridging prescription.</p>
<p><b>doctor</b></p>  An illustration of a doctor in a white lab coat, holding a stethoscope.	<p>Whether or not you will be able to get a bridging prescription depends on your <b>GP</b>.</p>
<p><b>doctor</b></p>  An illustration of a doctor in a white lab coat, holding a stethoscope.	<p>Some GPs understand trans healthcare and will provide bridging prescriptions to <b>any</b> trans person.</p>
<p><b>yes</b></p>  A large green checkmark indicating a positive answer.	

<div data-bbox="209 210 534 535"><p><b>doctor</b></p></div> <div data-bbox="209 546 534 871"><p><b>sometimes</b></p></div>	<p>Other GPs do not have a good understanding of trans health and will only prescribe bridging prescriptions to <b>some</b> trans people.</p>
<div data-bbox="209 913 534 1239"><p><b>doctor</b></p></div> <div data-bbox="209 1249 534 1575"><p><b>no</b></p></div>	<p>Other GPs <b>refuse</b> to prescribe them altogether.</p>

<p><b>understand</b></p> 	<p>This means your chances of getting a bridging prescription depend on how <b>supportive</b> and <b>understanding</b> your GP is.</p>
<p><b>unfair</b></p> 	<p>This system is <b>not fair</b>. Unfortunately it is the current situation in the UK.</p>
<p><b>guidelines</b></p> 	<p>According to NHS <b>guidelines</b>, you can get a bridging prescription if:</p>
	<ul style="list-style-type: none"> <li>You are <b>self-medicating</b> or <b>likely to self-med.</b></li> </ul> <p><i>Self-medicating: Taking hormones which you have sourced without a doctor.</i></p>
	<ul style="list-style-type: none"> <li>Or you are at risk of <b>self-harm</b> or <b>suicide</b> if you are not prescribed hormones.</li> </ul>

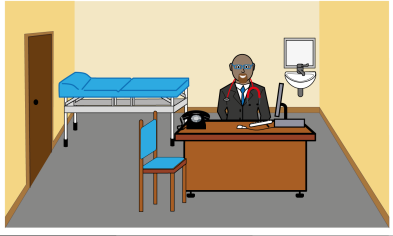
<p><b>doctors</b></p> 	<ul style="list-style-type: none"><li>• And your GP is seeking <b>specialist advice</b>.</li></ul>
<p><b>doctor</b></p>  <p><b>no</b></p> 	<p>In practice, <b>not all GPs follow these guidelines</b>.</p>
<p><b>explain</b></p> 	<p>However, it is still useful to know the guidelines, so you can <b>show</b> them to your GP.</p>

### 3. How to ask for a bridging prescription

	<p>1. Make an <b>appointment</b> with your <b>GP</b>.</p> <p>To make an appointment, fill out a form on your GP's <b>website</b> or <b>call</b> your GP surgery.</p>
	<p>2. Have a <b>baseline blood test</b>.</p> <p>Baseline blood tests check what your <b>hormone levels</b> are before you start taking hormones.</p> <p>They also check that your <b>organs</b> are <b>working correctly</b>.</p> <p>A list of blood tests you need before starting hormones is at the end of this guide.</p>
	<p>To have a baseline blood test, you can:</p> <ul style="list-style-type: none"><li>• Go to a <b>trans healthcare clinic</b>, like CliniQ or 56T in London.</li></ul> <p>A <b>list</b> of trans healthcare clinics is at the end of this guide.</p>



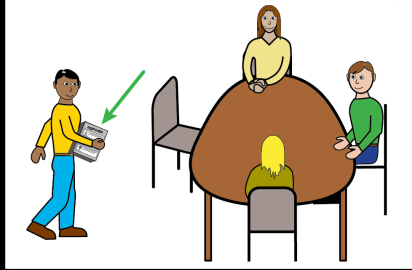
## GP practice



- Or you can have a blood test at your **GP surgery**.

It is easiest to ask for this **in your bridging prescription appointment**. This means you will do your blood test **after** the appointment.

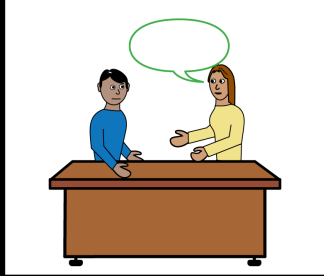
## prepare for meeting



4. **Prepare** for the appointment.

**Plan** what you are going to say.

## explain

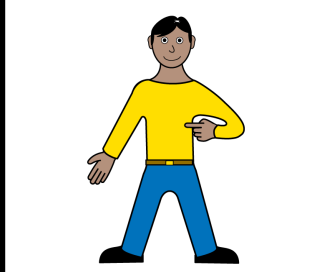


In the appointment, you will:

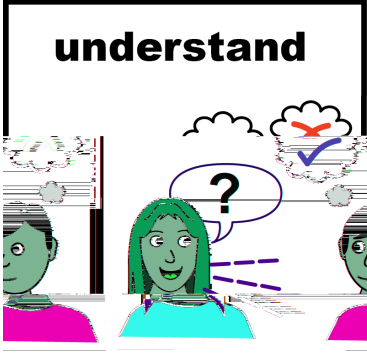
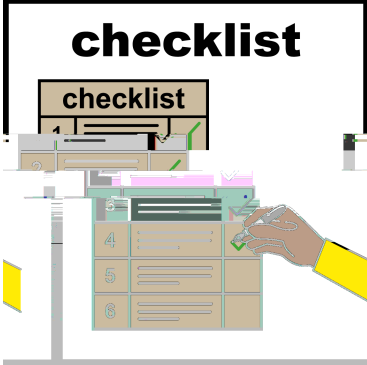
- Explain **what** a bridging prescription is.

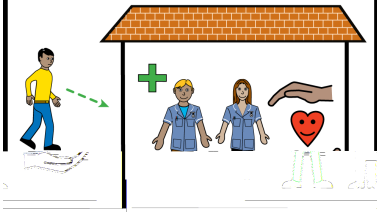
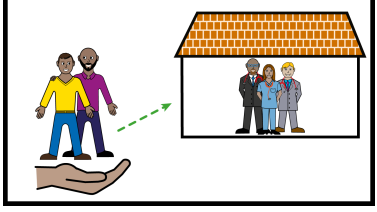
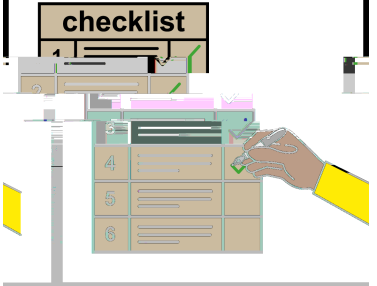
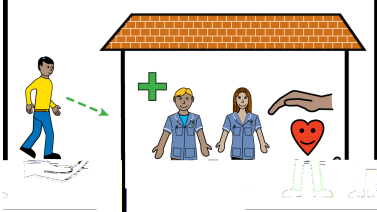
A bridging prescription is when a GP prescribes hormones for trans people who are on the waiting list for a Gender Identity Clinic.


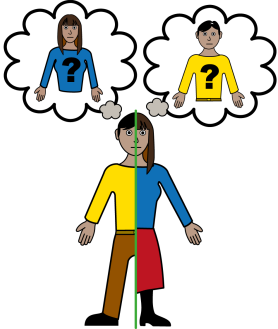
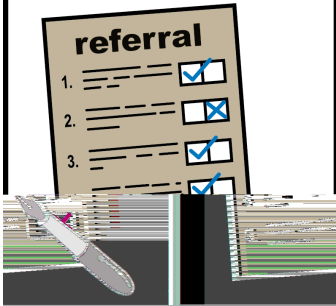
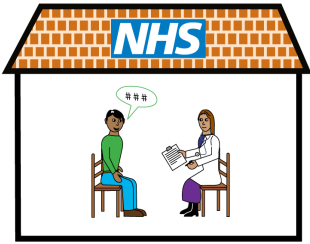
## about me



- Explain **why you need** a bridging prescription.

	<ul style="list-style-type: none"> <li>• Give <b>resources</b> to your GP to help them understand bridging prescriptions.</li> </ul>
	<p>The resources you <b>need to bring</b> are:</p> <ul style="list-style-type: none"> <li>• Information for your GP which says where they can get <b>specialist advice</b>.</li> <li>• <b>Prescribing guidance</b>.</li> <li>• Results from your <b>baseline blood tests</b>, if you have done them.</li> </ul> <p>The information for GPs and the prescribing guidance is at the <b>end of this guide</b>.</p> <p>If you <b>want to</b>, you can also bring:</p> <ul style="list-style-type: none"> <li>• A copy of a <b>letter for GPs</b> that explains what a bridging prescription is.</li> </ul> <p>This letter is at the <b>end of this guide</b>.</p> <p>You can also email this letter to your GP <b>before the appointment</b>.</p> <ul style="list-style-type: none"> <li>• Your <b>deed poll</b> or other evidence of your transition.</li> </ul> <p>These are <b>optional</b>.</p> <p><i>Prescribing guidance: A resource that explains what dosages of a medication doctors should prescribe.</i></p>

<p><b>appointment</b></p> 	<p>5. <b>Go to the appointment.</b></p> <p>The appointment might be <b>in-person</b>, on a <b>video call</b> or on a <b>phone call</b>.</p>
<p><b>bring someone with you</b></p> 	<p>You can bring a <b>friend</b> or <b>advocate</b> to the appointment to support you.</p>
<p><b>checklist</b></p> 	<p>Make sure you bring the <b>resources</b> with you. Or, you can <b>email</b> them to your GP <b>before</b> the appointment.</p>
<p><b>appointment</b></p> 	<p>6. In the appointment:</p>

<p><b>about me</b></p> 	<ul style="list-style-type: none"> <li>• Say that you are trans and briefly explain how this impacts your life.</li> </ul>
<p><b>transgender</b></p> 	
<p><b>referral</b></p> 	<ul style="list-style-type: none"> <li>• Then ask for a <b>Gender Identity Clinic referral</b>, if you have not already been referred.</li> </ul>
<p><b>clinic</b></p> 	<p>Gender Identity Clinics (GICs) are <b>NHS clinics</b> for <b>transition-related healthcare</b>.</p>

## waiting list

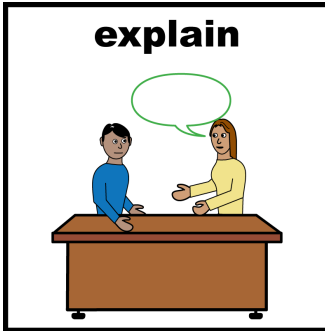


When you are referred to a GIC you are put on a **waiting list**.

You need to be on a GIC waiting list to get a bridging prescription.

The waiting list is very long.

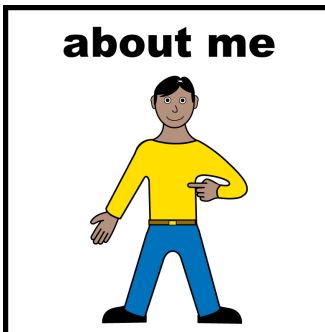
## explain



- Then explain **what** a bridging prescription is.

You can say, 'A bridging prescription is when a GP prescribes hormones for a trans person who is on the waiting list for a Gender Identity Clinic'.

## about me



- Then explain why **you** need a bridging prescription.

Explain how hormones would improve your life.

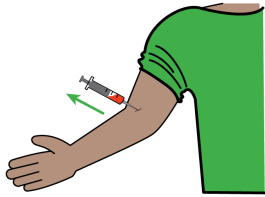
Explain why the waiting list for the Gender Identity Clinic (GIC) is too long for you to wait.

## list



- Then show the GP the **resources** you have for them.

## blood test



- Then ask for **baseline blood tests**, if you have not already had them.

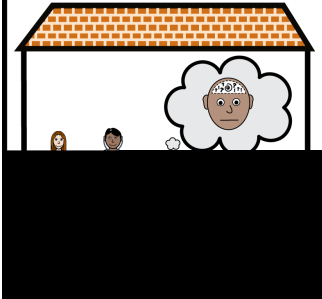
## ask you questions



- Your GP will probably ask you some **questions**.

If the questions make you feel uncomfortable you don't have to answer them.

## mental health services

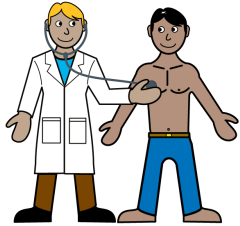


**no**



- If your GP says that you need to be referred to a **mental health service** first, tell them that this is **wrong**. They do not need to refer you to a mental health service before you start hormones.

**examination**







**no**

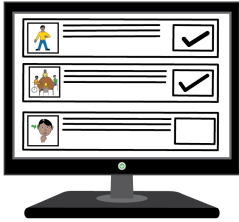
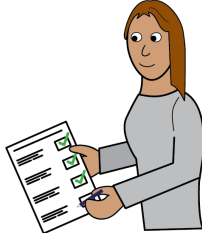
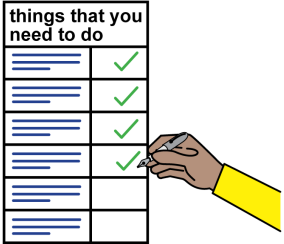


- If the GP says they want to **look at your body**, tell them this is **wrong**. They do not need to examine you.

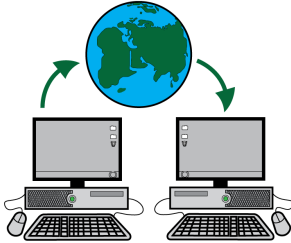

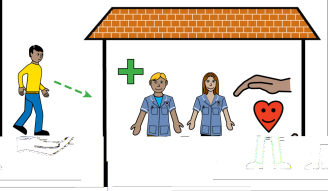
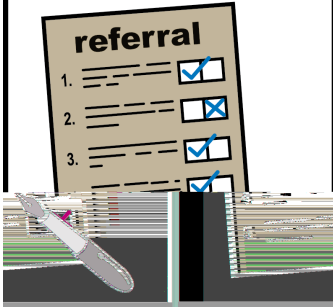
#### 4. What to do if your GP refuses to give you a bridging prescription





<p><b>doctor</b></p> 	<p>If your GP <b>refuses</b> to give you a bridging prescription, you can:</p>
<p><b>no</b></p> 	
<p><b>GP practice</b></p> 	<p>Option 1: <b>Change GP:</b></p>
<p><b>doctor</b></p> 	<ul style="list-style-type: none"><li>• You can ask to have an appointment with a <b>different GP</b> at your GP surgery.</li></ul> <p>You can ask the different GP for a bridging prescription.</p>



<p><b>online form</b></p> 	<ul style="list-style-type: none"> <li>You can switch GPs to a <b>different surgery</b>.</li> </ul> <p>To do this, go to the website of the GP surgery you want to switch to and fill out their 'New Patient' form.</p> <p>You do not have to tell your old GP that you are switching.</p> <p>Make an appointment with the new GP and follow the steps to ask them for a bridging prescription.</p>
<p><b>checking</b></p> 	<p>Option 2: Check if you are eligible for a <b>trans health pilot scheme</b>.</p> <p><i>Trans health pilot scheme: New NHS gender clinics that combine transition-related healthcare with other health services. They have a much shorter waitlist than GICs. They can prescribe hormones and refer for surgery.</i></p>
<p><b>guidelines</b></p> 	<p>To <b>check if you are eligible for a trans health pilot scheme</b>, look at their eligibility criteria.</p> <p>The trans health pilot schemes are called <a href="#">TransPlus</a>, <a href="#">CMagic</a>, <a href="#">Indigo</a> and <a href="#">East of England</a>.</p> <p>They all have <b>different eligibility criteria</b>.</p> <p><i>Eligibility criteria: Guidelines that say who is allowed to use a service.</i></p>
<p><b>TransPlus</b></p>	<p>The eligibility criteria is:</p> <p><b><a href="#">TransPlus</a>:</b></p> <ul style="list-style-type: none"> <li>You are aged 17+</li> <li>You are registered with a GP</li> </ul>

	<ul style="list-style-type: none"> <li>• You were registered with <a href="#">56 Dean Street</a> sexual health services before 31st March 2022</li> <li>• You were referred to a GIC before 31st March 2022</li> <li>• You haven't had a GIC appointment yet</li> </ul>
	<p><a href="#">CMagic</a>:</p> <ul style="list-style-type: none"> <li>• You are aged 17+</li> <li>• You are registered with a GP in <b>Merseyside or Cheshire</b></li> <li>• You were referred to a GIC before 31st October 2020</li> <li>• You haven't had a GIC appointment yet</li> </ul>
	<p><a href="#">Indigo</a>:</p> <ul style="list-style-type: none"> <li>• You are aged 17+</li> <li>• You are registered with a GP in <b>Greater Manchester</b></li> </ul>
	<p><a href="#">East of England</a>:</p> <ul style="list-style-type: none"> <li>• You are aged 17+</li> <li>• You are registered with a GP in the <b>East of England (Essex, Bedfordshire, Cambridgeshire, Suffolk, Hertfordshire, East Anglia)</b></li> <li>• You are on a waitlist for a GIC</li> </ul>

<p><b>website</b></p> 	<p>If you think you are eligible for a pilot scheme, visit the scheme's website and <b>contact them directly</b>.</p>
<p><b>doctor</b></p> 	<p>Option 3: Ask for a referral to an <b>endocrinologist</b>.</p> <p><i>Endocrinologist: Doctors who specialise in hormones. They can give bridging prescriptions.</i></p>
<p><b>appointment</b></p> 	<p>To ask for a <b>referral to an endocrinologist</b>, make an appointment with your GP.</p>
<p><b>referral</b></p> 	<p>At the appointment, ask your GP to refer you to an endocrinology team.</p> <p><b>Harrogate, Wirral, Bradford or Haverford West</b> NHS Endocrinology teams accept referrals from anywhere in the UK. These endocrinologists are trans-friendly.</p> <p>You can also ask for a referral to your local endocrinology team. They might have a shorter waiting list, but they might not be trans-friendly.</p>

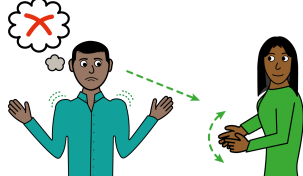


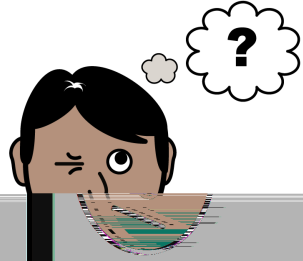
	<p>You will have to wait for an endocrinology appointment.</p> <p>You will have to wait <b>8-12 months</b> for an appointment with <b>Harrogate, Wirral, Bradford or Haverford West</b> NHS Endocrinology teams.</p> <p>You might have a shorter waiting time for an appointment with your local endocrinology team.</p>
	<p>Option 4: Make a <b>complaint</b>.</p> <p>Your GP is allowed to <b>refuse</b> to give you a bridging prescription. But you can still <b>complain</b> about them not helping you.</p>
	<p>You can make a complaint to the <b>manager of your GP surgery</b>. They are effectively your GP's boss.</p> <p>The information on how to contact them will be on the <b>website</b> of your GP surgery.</p>
	<p>You can also make a complaint to the Patient Advice and Liaison Service (<b>PALS</b>).</p> <p>PALS is a team in the NHS that helps people who have <b>questions</b> or <b>problems</b> with NHS services.</p>



You can ask an [NHS complaints advocate](#) or a trans health advocate to help you.

*NHS complaints advocate: Someone who helps you make a complaint about an NHS service. Every part of the UK is required to have an NHS complaints advocacy service.*

## 5. Bridging prescriptions and patient rights

<p><b>I don't understand</b></p> 	<p>Often, GPs do not have a good understanding of trans healthcare.</p>
<p><b>list</b></p> 	<p>This list explains what GPs have a responsibility to do.</p>
<p><b>explain</b></p> 	<p>It also links to the <b>NHS guidance</b> that explains this for GPs.</p>
<p><b>confused</b></p> 	<p>If your GP is <b>confused</b> or <b>refusing</b> to do something for you that they should do, <b>show</b> them the guidance.</p>

## prescription



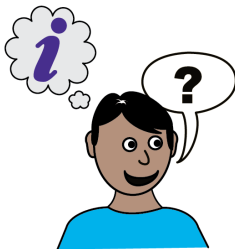
**Your GP is always the main person responsible for prescribing and monitoring your hormones, even if you were first prescribed hormones by a gender clinic.**

Some GPs are worried about whether they are allowed to prescribe hormones. You can remind them that they are responsible for prescribing and monitoring hormones no matter who first prescribes them.

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](#).

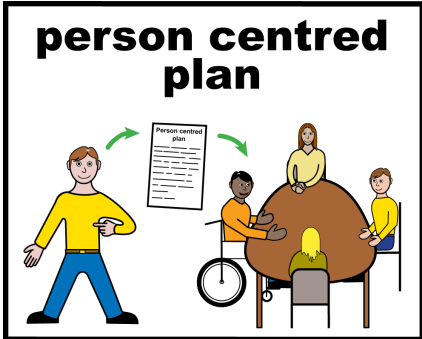
## ask for information



**If your GP does not know how to prescribe and monitor your hormones, they have to learn. 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

	<p>affect your work and use them to help you with your practice.’ - Pages 39-40, <a href="#">GMC Ethical Guidance. ‘Leadership and Management For All Doctors’</a></p> <ul style="list-style-type: none"> <li>• <a href="#">Hormone prescribing guide for transfeminine people</a></li> <li>• <a href="#">Hormone prescribing guide for transmasculine people</a></li> <li>• If your GP wants <b>advice from another doctor</b>, they can contact the Tavistock and Portman GIC at <a href="mailto:gic.endocrine@nhs.net">gic.endocrine@nhs.net</a> or the TransPlus pilot scheme at <a href="mailto:caw-tr.transplus@nhs.net">caw-tr.transplus@nhs.net</a>.</li> </ul>
	<p><b>You have the right to a clear, informed treatment plan.</b></p> <p>Guidance for GPs:</p> <ul style="list-style-type: none"> <li>• ‘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: <ul style="list-style-type: none"> <li>○ the likely benefits, risks and impact, including serious and common side effects</li> <li>○ what to do in the event of a side effect or recurrence of the condition</li> <li>○ how and when to take the medicine and how to adjust the dose if necessary,</li> <li>○ how to use a medical device</li> <li>○ the likely duration of treatment</li> <li>○ any relevant arrangements for monitoring, follow-up and review, including further</li> </ul> </li> </ul>



	<p>consultation, blood tests or other investigations, processes for adjusting the type or dose of medicine, and for issuing repeat prescriptions’ - Pages 39-40, <a href="#">GMC Good Practice in Managing and Prescribing Medications and Devices</a></p>
<div data-bbox="207 642 625 974" data-label="Image"> <p>The illustration is titled "best interest" in bold black text. It depicts a person in a yellow long-sleeved shirt standing and pointing towards a doctor. The doctor, a woman with blonde hair wearing a black coat and white shirt, is seated behind a brown wooden desk. On the desk, there is a small white sign that says "legal" and a pair of black scales of justice. The entire scene is enclosed in a black rectangular border.</p> </div>	<p><b>Your GP can refuse you a bridging prescription. But they need to show that refusing bridging is in your best interest.</b></p> <p>Guidance for GPs:</p> <ul style="list-style-type: none"> <li>• ‘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.’ - <a href="#">GMC Ethical Guidance for Trans Healthcare. ‘Bridging Prescriptions’</a></li> <li>• ‘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.’ - <a href="#">GMC Ethical Guidance for Trans Healthcare. ‘Bridging Prescriptions’</a></li> <li>• ‘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</li> </ul>

	<p>monitoring or follow-up.’ - Page 74, <a href="#">GMC Ethical Guidance, ‘Good Practice in Prescribing and Managing Medicines and Devices’</a></p>
	<p><b>Most hormones are ‘unlicensed’. This means they are completely safe to use but were originally developed to treat other conditions.</b></p> <p><b>GPs are allowed to prescribe ‘unlicensed’ medications.</b></p> <p><b>When someone is prescribed hormones by a gender clinic, GPs have responsibility for the ongoing prescription. For a GP, there is no difference between this and prescribing hormones directly.</b></p> <p>Guidance for GPs:</p> <ul style="list-style-type: none"> <li>• ‘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, <a href="#">NHS England Gender Identity Services for Adults (Non-Surgical Interventions) Service Specifications Schedule 2</a></li> </ul>

## waiting list

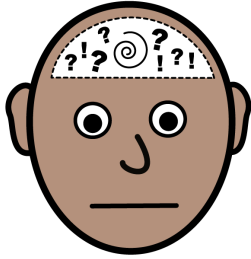


All UK GICs have longer waiting lists than is allowed by the NHS. This means the NHS is required to offer you alternatives for treatment.

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](#)

## mental health



**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.**


- '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](#)




**If you are suicidal, this is not a reason for a GP to refuse to give you a bridging prescription.**


**If you think hormones would help you feel less suicidal, this is more reason for your GP to give you a bridging prescription.**

Guidance for GPs:


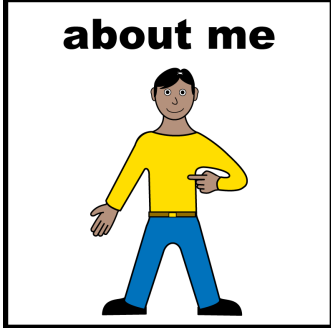
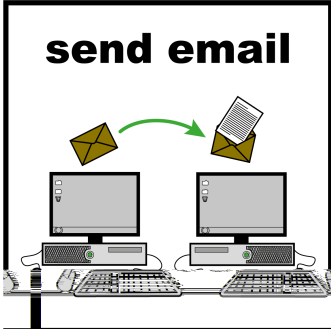
	<ul style="list-style-type: none"> <li>• ‘Patients may face a long wait before their first appointment with a gender specialist. This can be very distressing and their mental health may suffer as a consequence. The risk of self-harm and suicide for trans people is much greater than in the general population, 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: <ul style="list-style-type: none"> <li>a. 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)</li> <li>b. the bridging prescription is intended to mitigate a risk of self-harm or suicide</li> <li>c. the doctor has sought the advice of a gender specialist, and prescribes the lowest acceptable dose in the circumstances.’ - <a href="#">GMC Guidance ‘Tackling the risk of harm: bridging prescriptions’</a></li> </ul> </li> </ul>
	<p><b>Your GP does not need to refer you to a mental health service before starting any kind of transition-related healthcare.</b></p> <p>Guidance for GPs:</p> <ul style="list-style-type: none"> <li>• ‘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</li> </ul>

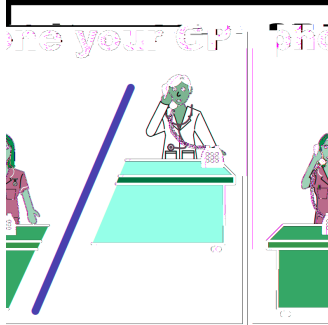
	<p>through referral to local mental health teams. You don't need to delay referral to the Gender Identity Clinic.' - <a href="#">GIC Guidance for GPs</a></p> <ul style="list-style-type: none"> <li>• 'Gender dysphoria is not, in itself, a mental health condition, reflecting contemporary professional opinion (Diagnostic and Statistical Manual of Mental Disorders (v5, 2013)).' - Page 2, <a href="#">NHS England Gender Identity Services for Adults (Non-Surgical Interventions) Service Specifications Schedule 2</a></li> </ul>
<p><b>get it wrong</b></p> 	<p><b>Your GP is not allowed to refuse to give you a bridging prescription because they believe it is against their religious or political beliefs.</b></p> <p>Guidance for GPs:</p> <ul style="list-style-type: none"> <li>• '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, <a href="#">GIC Guidance on gender dysphoria service for General Practitioners and other healthcare staff</a></li> </ul>

## 6. List of resources

	<p>This is a list of resources that might be helpful for you.</p> <p>The resources are:</p> <ul style="list-style-type: none"><li>• <b>Template letter for GPs</b></li><li>• <b>Resources for GPs</b></li><li>• <b>Information about baseline blood tests</b></li></ul>
---	---

### Template Letter for GPs

	<p>This is a <b>template letter</b> for you to <b>send to your GP</b>. It explains bridging prescriptions.</p>
	<p>You need to edit the <b>[bold, bracketed text]</b> to include information about you.</p>
	<p>You can <b>email</b> this letter to your GP before your bridging prescription appointment.</p> <p>Write 'For the attention of' and the name of your GP in the <b>subject line</b> of the email.</p>



If you do not know your GP's email address, look on the **website** of your GP surgery.

If there is not an email address listed, **call** your GP or fill out the **online form** and ask how you should send information to your GP.



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.


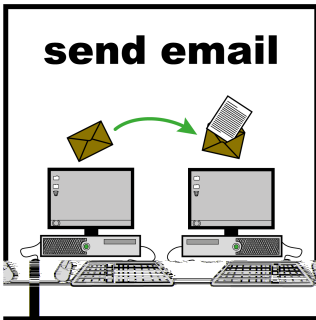
In brief, bridging prescriptions:

- 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**

	<p>This is a list of <b>helpful information for your GP</b>.</p>
	<p>You can <b>email this list to your GP</b> to help them understand transgender healthcare.</p>

### ***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](#)

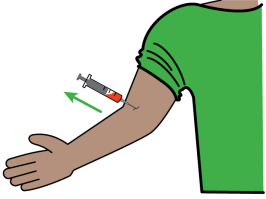



**Where to Learn More and Get Advice:**

- [TransPlus London NHS pilot gender clinic FAQ for healthcare professionals](#) (including options to ask clinical questions via [caw-tr.transplus@nhs.net](mailto: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](mailto: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](mailto: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](mailto: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

<p><b>blood test</b></p> 	<p>You need to have a <b>baseline blood test</b> before you start hormones.</p> <p>Baseline blood tests check what your <b>hormone levels</b> are. They also check that your <b>organs</b> are <b>working correctly</b></p>
<p><b>guidelines</b></p> 	<p>If you are <b>transfeminine/a trans woman/male-to-female</b>, information on what blood tests you need is on Page 7 of this <a href="#">NHS Prescribing Guidance</a>.</p> <p>If you are <b>transmasculine/a trans man/female-to-male</b>, information on what blood tests you need is on Page 8 of this <a href="#">NHS Prescribing Guidance</a>.</p>
<p><b>GP practice</b></p> 	<p>You can have your baseline blood test at your <b>GP surgery</b>.</p>
<p><b>clinic</b></p> 	<p>You can also have your baseline blood test at a <b>trans health clinic</b>. There are trans health clinics in <b>London</b> and <b>Brighton</b>.</p> <p>In London, the trans health clinics are <a href="#">56T</a> and <a href="#">CliniQ</a>.</p> <p>In Brighton, the trans health clinics are the <a href="#">Trans Health Hub</a> and <a href="#">Clinic T</a>.</p> <p><i>Trans health clinic: Health clinics that are just for trans people.</i></p>

All images copyright © LYPFT