



INFORMED CONSENT FOR TESTOSTERONE THERAPY

- The use of hormone therapy for gender transition/affirmation is based on many years of experience treating trans persons.
- Research on hormone therapy is providing us with more and more information on the safety and efficacy of hormone therapy, but all of the long-term consequences and effects of hormone therapy may not be fully understood.
- This handout is given to you to help you consider the expected benefits and the possible side effects of hormone therapy so that you can decide, with your health care provider, if hormone therapy is right for you.
- Testosterone is used to masculinize the body, to reduce the female features and increase masculine features.
- You and your health care provider will determine the form of testosterone (shots, gels or creams, patches, implanted pellets) and the dose that is best for you based on your personal needs and wishes as well as any medical or mental health conditions you might have.
- Each individual person responds to testosterone differently, and it is difficult to predict how each person will respond.

The Expected Effects of Testosterone Therapy

The masculine changes in your body may take several months to become noticeable and usually take 3 to 5 years to be complete.

Expected timeline of PERMANENT effects of testosterone therapy **these will not go away, even if you decide to stop testosterone treatment**

<i>Effect</i>	<i>Onset in months</i>	<i>Maximum in years</i>
Bottom/clitoris/phallus growth • This varies greatly between individuals	3-6 mo	1-2 yr
Facial/body hair growth • Growth, thickening, and darkening of hair on the face and body increases to look more like men in your family	6-12 mo	4-5 yr
Scalp hair loss • <u>Possible</u> hair loss at the temples and crown of the head (male pattern baldness) with possible complete baldness. A lot depends on heredity. This can be partially controlled/prevented by the use of medications called finasteride.	6-12 mo	-
Deepening of voice	6-12 mo	1-2 yr

Expected timeline of TEMPORARY effects of testosterone therapy **Changes that are NOT PERMANENT and will likely reverse if hormone therapy is stopped**

<i>Effect</i>	<i>Onset in months</i>	<i>Maximum in years</i>
Fat redistribution • Changes in where fat is stored in the body: Fat will tend to go to the stomach and mid-section, rather than the buttocks, hips and thighs.	1-6 mo	2-5 yr
Skin oiliness/increased acne • Many people experience skin changes including a lot of acne on the face and back that may need medical treatment to manage. This may last for months to a few years like in puberty.	1-6 mo	1-2 yr

Effect	Onset in months	Maximum in years
Periods stop (usually within a few months of starting testosterone) <ul style="list-style-type: none"> • Possible loss of fertility; you may or may not be able to get pregnant after being on testosterone therapy for some time; Although some people taking testosterone can get pregnant after stopping testosterone, not all can. If you want to have a biological child, consider choosing to harvest and bank eggs before starting on testosterone therapy. • Testosterone is not reliable birth control. Even if your periods stop, you could get pregnant. If you are having penetrative sex with someone who can get you pregnant, please discuss using some form of birth control with us. • If you do get pregnant while taking testosterone, the high levels of testosterone in your system may cause harm and even death to the developing fetus 	2-6 mo	
Vaginal/front hole dryness <ul style="list-style-type: none"> • Testosterone can thin the tissue of your genitals and front hole which can lead to tears, dryness, and discomfort during sex play. • Regardless of the gender of your partner(s), this can raise your risk of getting a sexually transmitted infection, including HIV. • There are estrogen products that can be used in the front hole to help with this and this will not affect your transition at all. 	3-6 mo	1-2 yr
Increased muscle mass/strength & upper body strength	6-12 mo	2-5 yr
Mood & energy changes <ul style="list-style-type: none"> • You may find that you have a decreased emotional reaction to things and possible increased feelings of anger or aggression. • Many persons find that their mental health improves after starting hormone therapy. • People on T therapy often report feeling of more physical energy 	variable	
Increased sex drive	variable	
<ul style="list-style-type: none"> • Most people experience a big increase in their sex drive or interest in sexual activity. • Some people experience changes in who they are attracted to physically. 		

Other Possible Risks and Side Effects of Testosterone Therapy

- Some people, after being on testosterone for a number of months, may develop pelvic pain. The cause of this pain is unknown.
 - Some experience this pain with sexual arousal and orgasm and some for no apparent reason.
 - The level of pain varies in the people who experience this effect. For some the pain goes away after some time. For others the pain may persist.
 - For a few the pain seems to go away only with removal of the uterus (hysterectomy).
- Possible changes in cholesterol, higher blood pressure and other changes to the body that might lead to an increased risk of cardiovascular disease (heart attacks, strokes and blockages in the arteries)
- Increased appetite and increased weight gain from both muscle and fat
- Substantial weight gain can increase the risk of developing diabetes
- Increased risk of sleep apnea (breathing problems while you are sleeping)
- An increase in the hemoglobin and hematocrit (the number of red blood cells- kind of like the opposite of being anemic); if this increases to levels higher than is normal in males, it may cause problems with circulation, such as blood clots, strokes and heart attacks
- Increased sweating

- Possible increase in frustration, irritability or anger; possible increased aggression and worsened impulse control
- Possible worsening of bipolar disorder, schizophrenia and psychotic disorders or other unstable moods

Your responsibilities for your health care. You agree to:

- Take your testosterone only at the dosage and in the form that your health care provider prescribes.
 - Taking testosterone in doses that are higher than recommended will increase any risks from testosterone.
 - Higher doses than prescribed will not work better or faster to masculinize the body.
 - The body may convert (aromatize) high amounts of testosterone to estrogen through the fat in the body. This conversion of extra testosterone to estrogen may interfere with masculinization or may cause other problems.
- Inform your health care provider if you develop any new physical symptoms, new medical conditions, or if you feel like you are having any negative side effects from your medications.
- Keep regular follow up appointments. **We may refuse to refill your meds if you are not getting regular visits as we had agreed upon.**
- Get other testing done as recommended such as pap tests and mammograms if you still have the body parts in question.
- Have regular monitoring blood testing done; your provider will discuss with you what tests are necessary in order to monitor for potential harmful effects and to make sure that your hormone therapy is safe and effective.
- Please contact us at least 48 hours before you need a medication refill (more if it is over a weekend). **We cannot guarantee refills will be granted before you run out if refills are requested with less notice.**

VERBAL CONSENT TO BEGIN TESTOSTERONE THERAPY

By verbally consenting to start therapy, you are saying that:

- During a telehealth visit, my provider has talked with me about:
 - the benefits and risks of taking testosterone
 - the possible or likely physical changes related to hormone therapy
 - potential additional treatments
- I understand the known risks that may be involved. I also understand that there may be unknown long-term effects and risks.
- I have had enough of an opportunity to discuss treatment options with my provider.
- All of my questions have been answered to my satisfaction.
- I believe I know enough to give informed consent to begin or continue therapy with testosterone.

The patient gives their verbal consent to begin HRT.

Reviewing clinician _____

 Provider signature Date