

CT Children's CLASP Guideline

Gender Incongruence/Gender Dysphoria/Gender Identity Disorder

INTRODUCTION	Gender Incongruence/Gender Dysphoria Gender incongruence occurs when one has a gender identity that does not correspond to one's sex assigned at birth. This may lead to Gender Dysphoria (previously referred to as Gender Identity Disorder). Studies to date report that about 20% of pre-pubertal children with Gender Incongruence will persist in experiencing dysphoria with their gender into adulthood (see separate References document). In contrast, for those adolescents whose dysphoria continues once they enter puberty, most will continue to have Gender Incongruence into adulthood. For these reasons, current guidelines only recommend medical options on a case-by-case basis after puberty has started However, mental health services to provide support can be very useful at any time.
INITIAL EVALUATION AND MANAGEMENT	INITIAL EVALUATION: <ul style="list-style-type: none">Obtain targeted history and physical exam<ul style="list-style-type: none">The history should confirm that the patient has a strong desire to be of another gender.The targeted history and/or physical should include documentation of the pubertal Tanner stage INITIAL MANAGEMENT: <ul style="list-style-type: none">If suggestive of Gender Incongruence, provide family with overview of the condition and counselingPre-pubertal children should be monitored closely for signs of puberty
WHEN TO REFER	ROUTINE REFERRAL: <ul style="list-style-type: none">Pre-pubertal:<ul style="list-style-type: none">For <i>pre-pubertal</i> children, consider referral to a therapist with experience in gender dysphoria.Reassure family, for pre-pubertal children no labs are needed and no hormone interventions are offeredPubertal:<ul style="list-style-type: none">Refer to Gender Program at the first sign of puberty<ul style="list-style-type: none">Pediatric providers must review the Gender Program website, and if possible, do so with the patientStrongly encourage the family to visit the Gender Program website, which has very useful information on what to expect at the visit and also what the family might need to do as next steps prior to the Gender Program appointment. Although the patient may be scheduled in the Gender Program clinic without a therapist letter, PLEASE inform the family that in keeping with current medical guidelines the evaluation letter is needed before prescription of hormones under age 18.
HOW TO REFER	Referral to The Gender Program in Endocrinology via CT Children's One Call Access Center Phone: 833.733.7669 Fax: 833.226.2329 For more information on how to place referrals to Connecticut Children's, click here . <i>For adolescents ≥ 19 years old or nearing 19 years old, please give your patient the following website – they can self-refer:</i> https://hartfordhealthcare.org/services/gender-health Information to be included with the referral: <ul style="list-style-type: none">Specify that you wish to have an appointment for Gender Incongruence, Attn: Dr. PhulwaniPlease include the patient's Tanner stage as it pertains to breast or testicular growthRelevant medical history/physical/diagnostics and growth chartPlease include the name and pronouns that the patient is currently usingIf legal joint custody, please send that information in the referralIf making a referral, please provide patients/families with the following website www.connecticutchildrens.org/gender

**WHAT TO
EXPECT**

What to expect from CT Children’s Visit:

- First visit is typically informational
- History and full physical
- Evaluation of prior labs (if any)
- Additional labs and imaging if appropriate