



Dear Primary Healthcare Provider,

Thank you for your interest in the Connecticut Children's Medical Center Gender Dysphoria Program. Please note if there are any concerns regarding pubertal disorders or a disorder of sexual development, please include that in your referral. The referral process follows our typical endocrinology referral process; however, please direct the referral to my attention and include "gender dysphoria" as the diagnosis.

For patients at any age with gender dysphoria, the Endocrine Society guidelines recommend that the diagnosis be confirmed by a mental health provider (MHP) with experience in this area. Whenever possible, please refer your patient to an MHP listed on our website. If your patient is already seeing another MHP, please give your patient the qualifications list to pass along to their MHP.

For pre-pubertal Tanner 1 patients, there is no need for an endocrine referral, as there are no medical interventions; please refer to a MHP. PLEASE refer to me at first sign of puberty or age 10 (whichever comes first). The rate of depression and suicide attempts are higher in this population once puberty begins.

For those who are Tanner 2 up to around age 16, puberty suppression hormones (GnRH agonists) should be started SOON if indicated, so my staff will schedule the appointment with me in endocrinology. Please also ask them to at least set up an appointment with an MHP.* I will see them to discuss meds/options, but I will only prescribe after the MHP feels family is ready and writes a letter to me indicating the same. For those close to age 16 or older, estrogen/testosterone is prescribed AFTER being in an MHP's care for 6 months.

Please inform your patient to be prepared for a full physical exam with me, including genitals and chest exam. They may elect not to have my trainees be present during part, or all, of the exam. I may recommend blood work or X-rays.

Sincerely,

Priya Phulwani, MD

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