

Consent for Testosterone for Transgender and Gender Nonbinary Clients

I _____ have requested hormone therapy from Dr Ruth Weinberg and Boulder Valley Women's Health Center for the purpose of beginning or continuing to change my body's appearance from that of a female to that of a male, or maintain changes of my body's appearance that have already been achieved.

Taking testosterone to become more masculinized is considered off-label use of this medication. There is no treatment approved by the FDA for gender confirmation at this time.

Expected Effects of Testosterone:

It can take several months or longer for the effects to become noticeable. No one can predict how fast or how much change will happen.

Deeper voice: this is not reversible

More body hair: this is not reversible. Thicker, coarser and more hairs on abdomen, arms, back, chest and legs.

More facial hair: this is not reversible. Gradual growth of mustache and beard.

Bigger clitoris: this is not reversible.

Coarser skin

Increased muscle mass and strength

No more menstrual periods: 2-6 months after starting T

Increased sex drive

Protection against bone thinning (osteoporosis)

Things that won't change with masculinizing hormone therapy:

Speech patterns

Breast size

Height

Side Effects/Risks

Acne: may permanently scar

Vaginal dryness/irritation: testosterone can thin the vaginal walls and the cervix. This can lead to tears or abrasions during vaginal sex play. This increases the risk of getting a sexually transmitted infection, including HIV. Please be open with your clinician about your sex practices to learn the best ways to prevent and check for infections.

Weight gain

Blood clots

Emotional changes: testosterone could cause you to become more irritable, frustrated or angry. Please discuss this with your clinician and/or therapist if this occurs.

Headaches or migraines

High blood pressure

Sleep apnea

Increased red cell count: testosterone stimulates your body to produce more red blood cells. This can make your blood thicker. If severe, this could lead to heart attack or stroke.

Infertility: testosterone causes the ovaries to stop releasing eggs, so your chances of becoming pregnant are decreased on T and you could become permanently infertile. However, it is still possible to become pregnant even after your periods have stopped, and testosterone can cause abnormalities in a developing fetus. If you are having sex with someone with a penis, contraception is still recommended. It is recommended to consider egg preservation before starting testosterone therapy if you think there is any chance you might want to get pregnant in the future.

Liver damage

Male pattern baldness: hair loss at the temples and crown of the head

More abdominal fat: decreased fat deposition into hips and thighs

Increased risk for heart disease: testosterone can cause your HDL (good cholesterol) to decrease and the LDL (bad cholesterol) to increase. Testosterone can also increase your blood pressure and cause more fat deposits around your internal organs. These changes increase the risk of heart disease. These risks are higher if you have a family history of heart disease, if you are overweight, or if you smoke.

Increased risk for diabetes: testosterone can decrease your body's response to insulin, cause weight gain, and increase fat deposits around your internal organs. These changes increase the risk of diabetes. These risks are higher if you have a family history of diabetes or if you are overweight.

Breast, ovarian or uterine cancer: testosterone can be converted to estrogen in your body. It is not known if that could increase the risk of these cancers.

*Do not take more testosterone or more often than prescribed. It increases health risks. Taking more than prescribed won't make changes happen more quickly or more significantly. Your body can convert excess testosterone to estrogen, and that can slow down or stop the masculinizing effects.

My signature below confirms that:

I agree to notify Dr. Weinberg and Boulder Valley Women's Health Center immediately in the event that I develop severe moodiness or depressive symptoms.

I understand I must submit to periodic blood tests to measure testosterone and to detect asymptomatic problems with the liver, sugar, cholesterol or blood cells.

I have also been informed that regular breast exams, pap smears and pelvic exams are necessary to help screen for cancers that may occur at higher rates due to the testosterone.

I understand that I am solely responsible for any adverse reactions or complications that may arise from self-treatment with hormones obtained from alternative sources such as the internet or overseas pharmacies.

My signature below also confirms that:

My clinician has talked with me about:

- the possible or likely consequences of hormone therapy
- potential alternative treatments
- the benefits and risks of taking masculinizing medication

I understand the risks that may be involved.

I know that the information in this form includes the known effects and risks. I also know that there may be unknown long-term effects or risks.

I have had enough opportunity to discuss treatment options with my clinician.

All of my questions have been answered to my satisfaction.

I believe I know enough to give informed consent to take, refuse, or postpone therapy with masculinizing medications.

I am 18 years old or older.

Based on all this information (initial):

_____ I want to begin taking testosterone.

_____ I do not wish to begin taking testosterone at this time.

Client signature

Date

Prescribing clinician signature

Date