

Gender Affirming Surgeries: An Overview

General Points

- If patients have questions about surgery (e.g. will it be covered by insurance?), you can send them to the Trans Health Program. You don't need to formally consult the THP virtual clinic. You can route the chart to the THP social worker (p THP team pool).
- Start referral process early – wait list typically years
- Once a surgical referral is placed, a scheduler will reach out to the patient. Patients can expect a call 4-6 weeks from the time of the referral is placed from a surgery scheduler
- While waiting, can refer to our behavioral health team, as patients will need behavioral assessment and at least one letter of support for surgery before the surgeon will schedule an appointment to see them.

Refer the following procedures to UROLOGY:

- Orchiectomy – removal of the testes
- Vulvoplasty: penectomy and construction of external vulva/labia/urethral meatus
- Vaginoplasty: w/wo penectomy, construction of external vulva/labia/urethral meatus, creation of neovaginal canal
- Metoidioplasty: construction of a microphallus that allows pt to void while standing

Refer the following procedures to PLASTIC SURGERY:

- Phalloplasty: construction of neophallus +/- scrotum and testes
- Chest Reconstruction: removal of breast/chest tissue
- Breast Augmentation: implantation of breast implants
- Gender Affirming Facial Surgeries*: multiple procedures (*note that Medicaid does not currently cover this benefit)

Refer the following procedures to GYNECOLOGY: patient will be seen in Dr. Lishiana Shaffer's gender neutral clinic in CHH

- Hysterectomy +/- Oophorectomy: removal of uterus +/- ovaries

Refer the following therapy to ENT:

- Voice Coaching/Therapy
- Vocal Chord Shave: shaving of the vocal chords to raise vocal pitch

Taken from the presentation titled "Overview of Gender Care", which was given by Amy Penkin from OHSU's Transgender Health Program

Top Surgeries		
Surgery	Surgery Information	Recovery/Support Needs
Mastectomy/Chest reconstruction	<ul style="list-style-type: none"> Typically done as outpatient Techniques (double incision, periaerolar, etc) based on chest size, patient goals, surgeon recommendation 	<ul style="list-style-type: none"> Caregiver present for 24/7 for at least the first 1-3 days Return to regular activities in about 4-6 weeks
Chest/breast reduction	<ul style="list-style-type: none"> Typically done as outpatient For some, a desirable alternative to mastectomy Retains some chest tissue 	<ul style="list-style-type: none"> Similar to “top surgery” above
Breast augmentation	<ul style="list-style-type: none"> Typically done as outpatient Maximizing breast growth through hormones is desirable prior to surgery Uses silicone or saline implants Fat grafting sometimes an alternative 	<ul style="list-style-type: none"> Similar to “top surgery” above

Taken from the presentation titled “Overview of Gender Care”, which was given by Amy Penkin from OHSU’s Transgender Health Program

Facial and Vocal Surgeries

Surgery	Surgery Information	Recovery/Support Needs
Facial Surgery	<ul style="list-style-type: none"> Highly customized and can include hairline, forehead, eyebrows, cheeks, nose, lips, jaw, and/or Adam's apple Can be staged or done at one time 	<ul style="list-style-type: none"> Depending on surgery can be done as outpatient procedure (Adam's apple removal), outpatient surgery, or inpatient surgery with hospital recovery Caregiver present for 24/7 for at least the first 5-7 days depending on procedure Return to regular activities can be up to 4-6 weeks depending on procedure
Vocal Surgery	<ul style="list-style-type: none"> Typically requires voice therapy prior to surgery Typically done to raise pitch 	<ul style="list-style-type: none"> Caregiver present for 24/7 for at least the first 1-3 days Limits on use of voice for up to several weeks post operatively Return to regular activities in up to 4-6 weeks

Taken from the presentation titled "Overview of Gender Care", which was given by Amy Penkin from OHSU's Transgender Health Program

Reproductive Surgeries

Surgery	Surgery Information	Recovery/Support Needs
Orchiectomy	<ul style="list-style-type: none"> Can be stand alone or completed as part of vaginoplasty or vulvoplasty surgery 	<ul style="list-style-type: none"> Completed as outpatient/day surgery Caregiver present for 24/7 for at least the first 1-3 days Return to regular activities in about 4-6 weeks
Hysterectomy and Oophorectomy	<ul style="list-style-type: none"> Can be stand alone or completed as pre-requisite to metoidioplasty or phalloplasty surgery Can retain 1 or both ovaries 	<ul style="list-style-type: none"> Typically performed as inpatient surgery with overnight hospital stay Caregiver present for 24/7 for at least the first 1-3 days Return to regular activities in about 4-6 weeks

Taken from the presentation titled "Overview of Gender Care", which was given by Amy Penkin from OHSU's Transgender Health Program

Genital Surgeries

Surgery	Surgery Information	Recovery/Support Needs
Metoidioplasty	<ul style="list-style-type: none"> Highly customized and individualized surgery that can include multiple stages based on surgeon's practice and patient goals Consideration include appearance (implants), urinary function (stand to pee), removal of natal tissues (vaginectomy) Requires history of GAHT Can be followed by phalloplasty 	<ul style="list-style-type: none"> Performed as an inpatient surgery with hospitalization Requires up to 3-4 weeks recovery within proximity of surgeon in order to attend post operative appointments Limits on activity for at least 4 weeks Return to full range of some activities may be up to 4 months Caregiver present for 24/7 for at least the first 5-7 days Staged surgeries require up to several months for healing before progressing to next stage
Phalloplasty	<ul style="list-style-type: none"> Highly customized and individualized surgery that can include multiple stages based on surgeon's practice and patient goals Options for consideration include appearance, sensation, ability to have sexual intercourse, and urinary function (stand to pee) 	<ul style="list-style-type: none"> Performed as an inpatient surgery with hospitalization Requires up to 6 weeks of recovery within proximity of surgeon in order to attend post operative appointments Limits on activity for up to 10-12 weeks depending on which stage of surgery Return to full range of some activities may be up to 4+ months Caregiver present for 24/7 for up to 4-6 weeks depending on which stage of surgery Progressing through all stages can take up to several years

Taken from the presentation titled "Overview of Gender Care", which was given by Amy Penkin from OHSU's Transgender Health Program

Genital Surgeries

Surgery	Surgery Information	Recovery/Support Needs
Vaginoplasty	<ul style="list-style-type: none"> • Various techniques available. Can be offered through robotic approach or traditional/open approach • Requires hair removal at surgical site prior to surgery • Can include 2nd stage surgery to reduce size of labia 	<ul style="list-style-type: none"> • Requires up to 4 weeks recovery within proximity of surgeon in order to attend post operative appointments • Limits on activity for at least 4 weeks • Return to full range of some activities may be up to 4+ months • Caregiver present for 24/7 for at least the first 5-7 days • Requires lifelong dilation to retain vaginal canal • Staged surgeries require up to several months for healing before progressing to next stage
Vulvoplasty	<ul style="list-style-type: none"> • Alternative to vaginoplasty that does not include creation of canal • Carries less surgical risk and does not require dilation 	<ul style="list-style-type: none"> • Requires up to 2-3 weeks recovery within proximity of surgeon in order to attend post operative appointments • Limits on activity for at least 4 weeks • Return to full range of some activities may be up to 4+ months • Caregiver present for 24/7 for at least the first 5-7 days • Staged surgeries require up to several months for healing before progressing to next stage

Taken from the presentation titled “Overview of Gender Care”, which was given by Amy Penkin from OHSU’s Transgender Health Program