

Welcome to Planned Parenthood Metropolitan New Jersey!

*680 Broadway, Suite 001
Paterson, NJ 07505
973-345-3833*

Planned Parenthood League of Metropolitan NJ (PPMNJ) offers quality, compassionate, and confidential Gender Affirming Hormone Therapy (GAHT) for our transgender and non-binary patients using a model of informed consent. We are committed to improving the way transgender people receive health care in our region and we proudly work together with our transgender community to lead the way in eliminating barriers to care. By providing comprehensive education around hormones and general health, we can enhance a patient's ability to make informed decisions about all aspects of their health and transition. We believe true affirming care honors a patient's autonomy and self-determination in that process.

For more information, contact us at 973-345-3883 or visit us online at www.ppmnj.org. You can set up appointments and ask to speak with clinicians by using our main number. If you would like to speak with Avery Heimann, our Patient Navigator for Gender Affirming Services, you can reach them using extension 1532. We are located on the lowest level of the Barnert Medical Arts Complex in the rear of the building with a blue awning and outdoor stairwell leading to the back entrance.

About GAHT:

Gender Affirming Hormone Therapy (GAHT) is when a medical provider prescribes hormones to someone whose body doesn't generate enough to affirm their gender identity and/or when they require medication to block the hormones which their body does make. PPMNJ cannot change what hormones will do to your body, but we can work with you to help you get as close as you can to the changes you want.

Additional Services Offered:

In addition to offering GAHT, we also aim to provide other services in an inclusive and affirming environment. Our services include:

- Annual gynecological exams, including Pap tests and breast cancer screenings
- Cervical cancer screenings, including colposcopy and LEEP
- UTI testing and treatment
- Birth control
- Emergency contraception
- Pregnancy testing
- HPV vaccinations
- Abortion services
- Sexually transmitted infection (STI) screening and treatment
- PrEP and PEP

What to Expect When You Arrive:

When you visit our PPMNJ facility you will be greeted at reception by our Clinical Assistant. After you are checked in, you will meet with a second Clinical Assistant inside the office. Next you will meet with a Physician Assistant, followed by one or two nurses. Finally, you will meet with Patient Navigator for Gender Affirming Services, Avery Heimann, MA, MEd, LSW (*they/them*). Feel free to ask us any questions at any time; we are here to assist you in any way possible!

Our Process:

- We conduct appointments in-person at our Paterson location, reviewing a patient's medical history through the informed consent model, performing on-site lab work, discussing lab results, and finally prescribing hormones with regular check-ups to ensure patient satisfaction during their transition.
- Patients are also able to transfer their GAHT from other providers to our center by making an appointment so we may outline our informed consent model with them.
- We see patients ages 18 and older, and for youth we are able to refer to other local providers who can offer Gender Affirming Care.
- Our Patient Navigator for Gender Affirming Services provides referrals to all our GAHT patients for trans-competent providers and community resources.
- We extend Gender Affirming Care to every person regardless of financial circumstance.

Initial Visit:

During your first consultation, your provider will:

- Assess for pre-existing medical and mental health conditions.
- Discuss the informed consent model.
- Take your history, asking you about your story, journey, how you relate to your gender identity, your support networks, your personal goals for GAHT, and whether you have future plans for Gender Affirming Surgery.
- Review irreversible and reversible changes of GAHT with timeframe estimates.
- Disclose potential risks of GAHT.
- Discuss reproductive life plan and hormone effects on fertility; assess need for contraception.
- Outline schedule of follow-ups with 3 month, 6 month, and 1 year appointments.
- Address tobacco use.
- Take vitals including blood pressure.
- Draw labs on site.
- Provide additional resources through our Patient Navigator for Gender Affirming Services.
- Prescribe hormones.
- Offer injection training if needed.
- Initiate treatment if/when appropriate.
- Remind you when to schedule your next follow-up appointment, typically in one month.

Next Steps:

- Once we have determined it is safe for you to begin GAHT, you will see us for follow-up appointments at 1, 3, 6, and 12 months during your initial year. Hormone therapy is different for every patient, so individual doses, adjustments, types of medications, medication administration, and other factors may vary based on your needs.
- Follow-up appointments for established patients will include taking vitals and blood pressure, lab work, prescribing renewals of medications, and checking in on your transition experience.
- You can prepare questions for your appointments which can be answered by a clinician or by the Patient Navigator for Gender Affirming Services. Some questions might include name and gender marker changes, medication concerns, mental health resources, information about safe tucking or binding, or options for vocal training.

How much will this cost?:

Payment is due at time of service. We have affordable self-pay options or you may use your insurance if in network. We accept Aetna Health Plan, Amerihealth, Cigna, Emblem Health, Horizon BCBSNJ, Empire BCBS, Anthem/First Health, Meritain Health, Oxford Health Plans, Qualcare, Oscar, UMR, United Healthcare, UHC Student Insurance, 1199 National Benefit Fund, and GreatWest. We do not take Medicaid plans H, I, D, or E and we do not take Medicare.

Insurance and Prescription Information:

- When initiating a hormone prescription, it may take a little time to get the medication covered by your insurance through a process called Prior Authorization. Prior Authorizations take roughly a week to be approved through your insurance.
- Make sure to check with your pharmacist to see if there are any refills left on your medications. If no refills are left, call our office so we can schedule a follow-up with labs to renew your prescription.
- If you would like to transfer medications between pharmacies, you can sometimes do this with a simple phone call to the pharmacist. For controlled substances like testosterone, we may need to speak with the pharmacy directly.
- Many pharmacies offer free shipping or delivery to your home. There are several pharmacies we recommend for their familiarity with Gender Affirming Care and ensuring these medications are in stock. Recommended pharmacies are included in our resource packet, including Middle Village Pharmacy in Clifton (973-478-0600), Walgreens in Newark (973-849-9386), and Walgreens at Robert Wood Johnson Somerset Hospital (908-947-2667). These pharmacies work exceptionally well with prescription discount cards.
- Prescription costs for GAHT vary, but can range from \$15 to \$60 depending on the medication, dosage, frequency, and supply when using a GoodRx card. It is important to know that even when your insurance covers a medication, it still may be cheaper to pay with a discount card instead.

- For prescription renewals, we ask that you contact us at least 2 weeks in advance of your final dose to ensure completion of any required labs, follow-ups, or Prior Authorizations.
- For appointments and prescriptions, we will need to use your legal name to make sure your insurance bills and covers you accurately. We will communicate with you using your affirming name, but there may be some times when speaking with insurances and pharmacies where this is not possible. If you have legally changed your name and it is reflected on your insurance policy, please let us know so we may update it in our system.

Gender Affirming Hormone Therapy (GAHT) Estimated Costs for Self Pay Patients (as of 2022):

Service	Lowest Cost	Highest Cost
New Patient Consultation	\$92	\$206
Established Patient Follow-Up	\$65	\$173
Labs BUN	\$10	\$22
Labs CMP	\$10	\$22
Labs Estradiol	\$22	\$34
Labs A1c, Hgb	\$10	\$22
Labs Lipid Panel	\$12	\$32
Labs Potassium	\$10	\$22
Labs Prolactin	\$12	\$24
Labs Total Testosterone	\$20	\$32
Pregnancy Test	\$12	\$24

Total Costs Assigned Female at Birth (AFAB) / Assigned Male at Birth (AMAB) Patients (as of 2022):

Service	Lowest Cost	Highest Cost
AFAB Full Panel Lab Total	\$96	\$200
AMAB Full Panel Lab Total	\$86	\$178
AFAB New Patient Consultation + Labs Total	\$188	\$406
AMAB New Patient Consultation + Labs Total	\$178	\$384
AFAB Established Patient + Labs Total	\$161	\$373
AMAB Established Patient + Labs Total	\$151	\$351

GAHT services can be determined at \$0 cost depending on proof of income. Contact Sandra Mercorelli at 973-902-1920 or Sandra.Mercorelli@ppmnj.org to inquire about eligibility.

Informed Consent:

- Informed Consent is a model of care in which patients are able to access hormones during a visit with their provider, where they will discuss the risks and benefits of care. No visit with a mental health professional is required. True Informed Consent does not gatekeep a patient's access to care and focuses more on a multidisciplinary, well-communicated, harm-reducing, decision-making process.
- PPMNJ believes that people have a right to make decisions about their gender, gender identity, and whether they wish to establish or continue Gender Affirming Hormone Therapy. This means that we provide complete, accurate information about GAHT to help you make an informed decision. Some doctors modify the World Professional Association for Transgender Health (WPATH) Standards of Care model, which can require Letters of Support from a mental health professional. However, we recognize that this can create a barrier for many people. Our informed consent model does not typically require a referral letter.
- Although we try our best to make GAHT as accessible as possible, there are instances in which hormone prescription is not 100% guaranteed. Prior to prescribing hormones, we have to do an intake with each person to make sure there are no major health concerns and that you are making an informed decision. Our practice believes in self-determination, and it is our goal to work with you to meet your needs to the extent that we are able. We work hard for each person to verify that hormones will be safe, and if we do have concerns we will discuss them with you.

About Feminizing Hormone Therapy:

Each person, regardless of gender or assigned sex at birth, is born with both Estrogen and Testosterone hormones in their body. The goal of Feminizing Hormone Therapy is to help reduce Testosterone and increase Estrogen. Feminizing Hormone Therapy uses different medications and hormones which can assist your gender transition process. There are two main medicines that you might be given, Estradiol and Spironolactone.

Estrogen is the sex hormone that causes the development of feminine characteristics. It may be given as a pill that you put under your tongue, as a shot, or as a cream or patch you put on your skin.

You may be given medicines called anti-androgens that can block and lower the amount of Testosterone made by your body. The most common anti-androgen is called Spironolactone. This makes estrogen work better and comes as a pill. Spironolactone can cause high amounts of potassium in the blood, which can cause changes in your heartbeat that may be life-threatening. It is also a diuretic, which can cause more frequent urination. If you have surgery to remove your testicles, you can stop taking Spironolactone.

Before starting Feminizing Hormone Therapy, you need to know the most common benefits, risks, side effects, and other choices you have. PPMNJ is mindful that benefits for one person may not be benefits for another person, and even some side-effects may be considered benefits. It all depends on your unique experience, goals, and identity.

Estrogen		
Benefits	Risks	Side-Effects
Breast Development	Liver damage	Shrinking of testicles
Slowed growth of body and facial hair	Increased fat and/or cholesterol in the blood	Reduced Testosterone levels
Fat redistribution to butt, hips, and thighs	Increased risk of heart disease	Feeling less sexual
Softer skin	Increased risk of blood clots in legs, lungs, or brain	Difficulty obtaining or maintaining erection
Slowed, but not stopped, hair loss at top of head	Increased risk of stroke	Reduction in semen during ejaculation
	Increase in blood pressure	Less able to cause pregnancy
	Increased risk of diabetes	Decreased muscle and strength of the body
	Increased risk of gallbladder problems	Mood changes
	Migraine headaches	Milky liquid coming from nipples (notify provider if this happens)
	Pituitary tumors	

Estrogen risks are increased for people who:

- Smoke
- Are overweight
- Are older than 40
- Have a history of blood clots
- Have a history of high blood pressure
- Have a family history of breast cancer

No one can tell you for sure if you'll be able to cause a pregnancy after beginning Feminizing Hormone Therapy. You could cause a pregnancy or you may never be able to, even if you stop GAHT. If you have sex with a person who can get pregnant, you will need to use some kind of birth control or barrier method to prevent pregnancy, just in case. Stopping Estrogen and Spironolactone may result in an increase in sperm. If you think you may want a pregnancy in the future, you can talk to your provider or Patient Navigator about storing your sperm and other fertility services before you start GAHT.

In addition to GAHT, there are other ways to transition including surgery, cosmetic products, clothing, wigs, padding, and tucking. If you are interested in other options for transitioning, talk with your provider or Patient Navigator. You can choose to stop Feminizing Hormone Therapy at any time. If you decide to do that, talk to your provider. Remember, only you get to define your transition. Even if you do not use GAHT or have stopped GAHT, this doesn't have to mean you "stopped transitioning" unless you want it to mean that.

Effect	Expected Onset	Expected Maximum Effect	Reversibility
Breast Growth	2-6 months	2-3 years	Permanent
Thinning/Slowed Hair Growth: Face and Body	6-12 months	>3 years	Reversible
Softening of Skin and Decreased Oiliness	3-6 months	Unknown	Reversible
Body Fat Redistribution	3-6 months	2-5 years	Reversible
Decrease Muscle Mass and Strength	3-6 months	1-2 years	Reversible
Decreased Sex Drive	1-3 months	1-2 years	Reversible
Decreased Spontaneous Erections	1-3 months	3-6 months	Reversible
Sexual Dysfunction (Less Firm Erections)	Variable	Variable	Possibly Permanent
Decreased Sperm Production Reduced Fertility	Variable	Variable	Possibly Permanent
Decreased Testicular Volume (By 25-50%)	3-6 months	2-3 years	Likely Permanent
Cessation of Male Pattern Balding	No Regrowth, Loss Stops 1-3 months	1-2 years	Reversible

About Masculinizing Hormone Therapy:

Each person, regardless of gender or assigned sex at birth, is born with both Estrogen and Testosterone hormones in their body. The goal of Masculinizing Hormone Therapy is to help increase Testosterone. Masculinizing Hormone Therapy uses different medications and hormones which can assist your gender transition process.

The main medication is called Testosterone, a hormone that causes the development of masculine characteristics. Testosterone can be given as an intramuscular or subcutaneous injection or put on the skin as a gel, a cream, or a patch.

Some providers will additionally prescribe Finasteride, an anti-androgen that only blocks Dihydrotestosterone (DHT), not Testosterone itself. Some people choose to use Finasteride in conjunction with Testosterone to prevent male-pattern baldness or slow down bottom growth.

Before starting Masculinizing Hormone Therapy, you need to know the most common benefits, risks, side effects, and other choices you have. PPMNJ is mindful that benefits for one person may not be benefits for another person, and even some side-effects may be considered benefits. It all depends on your unique experience, goals, and identity.

Testosterone		
Benefits	Risks	Side-Effects
Deeper voice, thickening of vocal chords	Increased red blood cell count	Acne
Facial hair thickening, such as moustache and beard	Increased fat and/or cholesterol in blood	Thicker, more oily skin
Body hair grows faster and thicker	Increased risk of diabetes	Hair thinning on head, male pattern baldness
Clitoral enlargement (bottom growth)	Liver damage	Mood changes
Increased strength and muscle mass		Increased sex drive
Cessation of menstruation		Vaginal dryness
Fat redistribution from buttocks, hips, and thighs to belly		Menstrual spotting

The risks of testosterone may be higher for people who:

- Smoke
- Are overweight
- Have a family history of heart disease

No one can tell you for sure if taking Testosterone will affect your ability to get pregnant. You could become pregnant or you may never be able to get pregnant in the future, even if you stop Testosterone. If you have sex with a person who produces sperm, you need to use birth control or barrier methods to prevent pregnancy, just in case. If you do get pregnant, you must stop Testosterone. If you think you may want a pregnancy in the future, you can talk to your provider or Patient Navigator about different fertility services before you start GAHT.

In addition to GAHT, there are other ways to transition including surgery, over-the-counter hair growth products, clothing, packing, and binding. If you are interested in other options for transitioning, talk with your provider or Patient Navigator. You can choose to stop Masculinizing Hormone Therapy at any time. If you decide to do that, talk to your provider. Remember, only you get to define your transition. Even if you do not use GAHT or have stopped GAHT, this doesn't have to mean you "stopped transitioning" unless you want it to mean that.

Effect	Expected Onset	Expected Maximum Effect	Reversibility
Facial and Body Hair Growth	1-6 months	1-2 years	Permanent
Increased Muscle Mass and Strength	6-12 months, dependent on amount and type of exercise	2-5 years	Reversible
Deepened Voice	3-12 months	1-2 years	Permanent
Cessation of Menstrual Periods	2-6 months	N/A	Reversible
Clitoral Enlargement	3-6 months	1-2 years	Permanent
Body Fat Redistribution	3-6 months	2-5 years	Permanent
Skin Oiliness/Acne	1-6 months	1-2 years	Reversible
Male Pattern Baldness	>12 months	Variable	Permanent
Increased Sex Drive	Variable	Variable	Reversible

Other Medications for GAHT:

Some other medications that may be prescribed in tandem with Estradiol or Testosterone GAHT include Finasteride, Dutasteride, Minoxidil, Spironolactone, or Progesterone. The function of these medications varies from reducing unwanted side effects or enhancing desired results. For example, Minoxidil can be prescribed or purchased over-the-counter as Rogaine to help prevent hair loss, and Progesterone can help decrease the likelihood of spotting or breakthrough bleeding during a menstrual cycle.

Legal Documentation Changes:

Several legal advocacy programs, both nationally and within New Jersey, offer How-To Guides on changing your license, state ID, birth certificate, social security, passport, and much more. We recommend first visiting Garden State Equality's page on "Updating Identification Documents," where they also provide personal assistance for the process if you would like an advocate to help you along the way. The website is <https://www.gardenstateequality.org/take-action/update-id/>

Additional Resources:

If you are seeking additional information, our Patient Navigator for Gender Affirming Services has created an ever-growing [resource document](#) for providers such as endocrinologists, therapists, psychiatrists, support groups of all kinds, hotlines, STI testing, fertility and reproductive services, voice and speech clinicians, surgeons, hair removal and electrolysis, salons, employment assistance, legal assistance, housing assistance, education and advocacy organizations, recommended pharmacies, and online websites. Please feel free to scan the QR code below to access this document, as it is frequently updated. Additionally, if you have a resource you would like to recommend, please email our Patient Navigator at Avery.Heimann@ppmnj.org and they can put it on the list!



Frequently Asked Questions:

What if I run out of prescriptions?

- Pharmacists may tell you that 1 ml vials can only be used as single use or you may see instructions to use the vial as single use. Please note that these vials can be used for multi-use and it is safe to do so with new syringes/needles each time as instructed by your clinician during your initial appointment. Often times pharmacists are not trained about GAHT and do not know this. If you have already thrown away a vial please let us know and we will pass it along to your clinician.

What if I want to increase my dosage or change the prescription?

- For prescription changes, please call our Patient Navigator and they can connect you with a practitioner to discuss options. We may need lab work and a follow-up to make sure your hormone levels are within a safe range to raise or lower your dosage. If you are changing the method of administration such as an injection to pill or gel, we will need to work with your pharmacy and insurance to make sure this switch is possible.

How do I learn to inject hormones and what if I get confused?

- In addition to the injection guide provided in this packet with supplemental videos, we also provide an injection training after your first visit. We know that this can be a lot of information to take in and you may feel a little overwhelmed during your first few injections. If this happens, please call our facility and we can schedule a follow-up for you to come in for a second training. We will also ask you during your regular scheduled follow-up if you need any additional assistance with injections.

Can someone come to my appointment with me?

- Due to COVID-19 policies during the pandemic, we are not able to allow any visitors at this time. If you require accompaniment for special needs, please let us know so we are able to accommodate you.

Can I document memorable moments on my phone during my appointment?

- While we celebrate your experiences at PPMNJ, especially during an initiation or continuation of GAHT, according to HIPAA privacy policies we ask that you refrain from using your phone, social media, live streaming, taking pictures, or recording videos during your time in our facility.

Will you ever do pediatrics?

- We are currently not providing GAHT services to anyone under the age of 18, but have a list of providers who are able to do so. Please contact our Patient Navigator or visit the “Pediatric Endocrinology” section of our resource packet for further information.

Why would I need a Letter of Support?

- Letters of Support are typically used in modified WPATH versions of “Informed Consent” with regards to the mental health status of a patient. PPMNJ’s use of the true Informed Consent model means we do not require these letters unless it is related to extenuating circumstances such as physical conditions which may adversely interact with GAHT and put you at a higher

risk of medical complications. In these cases, our Patient Navigator will assist you in finding resources for practitioners who can help with these referrals. If you are seeking Gender Affirming Surgery, some practices and insurances will require a Letter of Support. Sometimes this will solely be from your prescribing GAHT clinician and sometimes it will also require a letter from a mental health professional. Avery can assist you in finding the most cost-effective and accessible routes to acquire these materials.

How can I get insurance coverage for Gender Affirming Care?

- Many insurances will cover GAHT and some other Gender Affirming procedures, and some practitioners will offer things like reduced out-of-pocket expenses or sliding scale fees. This guide from TransEquality.org can assist you with determining insurance coverage: <https://transequality.org/health-coverage-guide>

What if I miss a dose or stop taking GAHT?

- In the interest of your physical and mental well-being, please contact us if you miss a dose, take the wrong dosage, change your dosage schedule, or stop taking your medications.

Can I travel with GAHT medications?

- Legally, you are able to travel with all of your medications and supplies. Keep them in your hand luggage or carry-ons just in case your checked bags get lost. You should bring them in their original packaging with some documentation of the prescription. This can be a doctor's note, a hard copy of your prescription history, a printout of your appointment information from the NextGen Patient Portal, a receipt from your pharmacy, or even one of our brochures. Some people choose to travel with injection kits from Transguy Supply, Stealth Bros., or from Amazon when searching for an "Insulin Travel Case," but you might want to swap your medications from a kit to a clear plastic ziploc bag before running them through security. Make sure you have enough medications to cover the duration of your trip, as pharmacies out of state and internationally may not have the supplies you need or honor a prescription for a controlled substance from our clinic.

Do I need to take GAHT medications with food?

- It isn't necessary, but it can't hurt. Some people find pills easier to swallow if they have a little food in their stomach. Some people prefer to eat before injections to help raise their blood sugar and reduce their chances of fainting. There are no formulary guidelines that mandate taking your medications with food, so it's all personal preference.

Can hormone patches fall off and do I have to shave for them?

- Patches can fall off, and if you have a lot of hair in the location you intend to apply them, shaving can help them stay put. Also make sure your skin is clean and free of all lotions before applying a patch. If a patch falls off but is still tacky, you may be able to reapply it back to the original site. If the adhesive has worn off completely, you will need to apply a fresh patch, but call our clinicians first to make sure it doesn't alter your dosage levels. Applying a new patch when one falls off also means your prescription will be short a patch, so calling the clinic to notify us will help with future refills and communications with your insurance and pharmacy.

Will hormone gel rub off?

- Yes, gel can rub off, so we recommend you wait at least 15 minutes after applying the gel to your skin before putting on clothing or any other covers like bedding. Gel can also rub off onto anyone you make physical contact with, which in turn can transfer your hormones into their system. Make sure you have waited a full 15 minutes for the gel to dry before touching anyone else.

Are there any medication interactions with GAHT?

- Some GAHT medications can interact with other prescription medications, and our clinicians will discuss this with you prior to prescribing. Contact our practice first before taking any new medications to make sure there are no negative interactions, and if you are comfortable, you can also ask your prescribing physician about these interactions as well.

What about substance usage?

- Tobacco, alcohol, and caffeine consumption can negatively affect your body with GAHT. These substances can either raise or lower your hormone levels and how you metabolize your medications in potentially harmful ways. It is best to be as honest as possible during your consultation about the frequency and quantity of usage or let us know once you are an established patient if you have begun or increased your intakes of these substances. We offer information on tobacco cessation programs as well as alcohol reduction programs if you are interested.

Will my Sexual Orientation change during GAHT?

- Some patients on GAHT report changes in their Sexual Orientation over the course of their transition. Although Sexual Orientation, Gender Identity, and Gender Expression are all different, it is not uncommon for you to experience a shift in Sexual Orientation, meaning who you love or are attracted to. Some transmen, for example, report being mostly attracted to cisgender women prior to GAHT and then more attracted to cis and other transmen after beginning GAHT. Some patients may also identify as Asexual and shift to more of a [Gray Ace](#) identity after initiating hormones. The possibilities are endless, and there is no singular right way to identify. While your Sexual Orientation can change and is something only you get to define or claim, if you are experiencing distress please contact our Patient Navigator. In addition to navigation services, Avery is also an advocate and member of transgender and queer communities. They can refer you to educational, therapeutic, or other supportive resources to assist you.

Can I donate blood if I am on GAHT?

- Absolutely! Initiation of GAHT may affect your Hemoglobin levels, but you are still eligible for blood donation. The FDA and Red Cross still have a very gendered MSM (“Men who have sex with men”) policy, which requires a 3 month deferral period for people assigned male at birth who have sex with other people who are assigned male at birth. This means you will have to wait 3 months after your last sexual encounter before donating blood.

How to Give Yourself a Hormone Injection

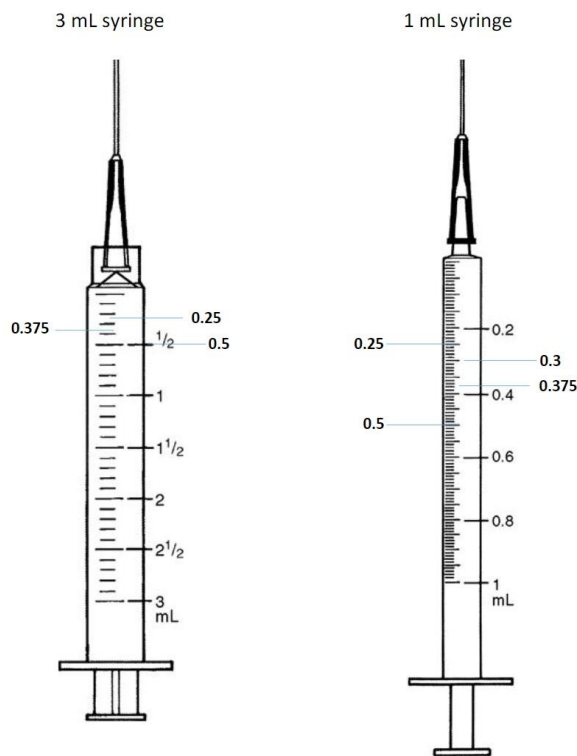
Video tutorials (English and Spanish):

<https://www.plannedparenthood.org/planned-parenthood-greater-texas/self-injection-videos>

Supplies:

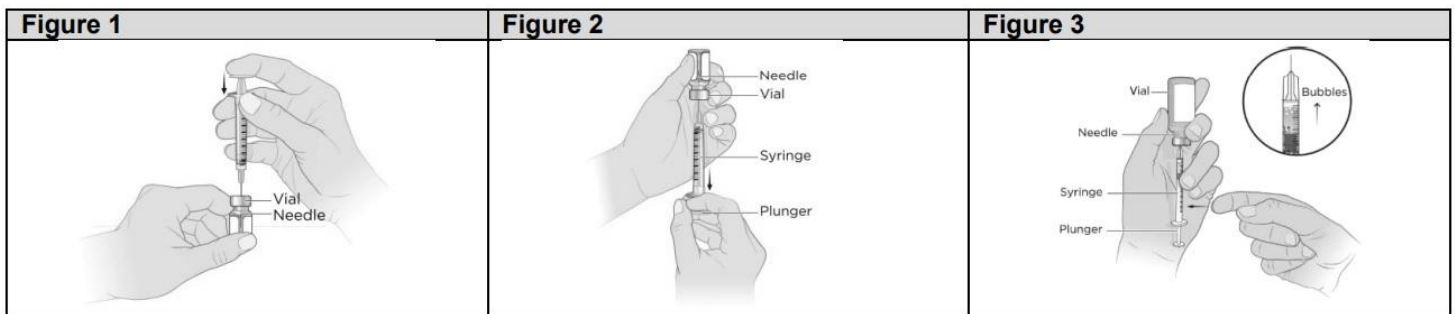
- One 1-ml syringe
- One 18 or 20 gauge, 1 or 1 ½ inch needle for drawing up the medication
- One 21, 22, or 23 gauge, 1 or 1 ½ inch needle for injecting the medication intramuscularly, or one 25 or 26 gauge ⅝ inch needle for injecting subcutaneously
- Vial of Testosterone or Estrogen
- Alcohol wipes or cotton balls/pads with a bottle of rubbing alcohol for cleaning your vial and your injection site
- Cotton or gauze to put apply pressure after injecting
- Bandage
- Sharps container or other appropriate container for disposal of needles and syringe

Syringe Guide



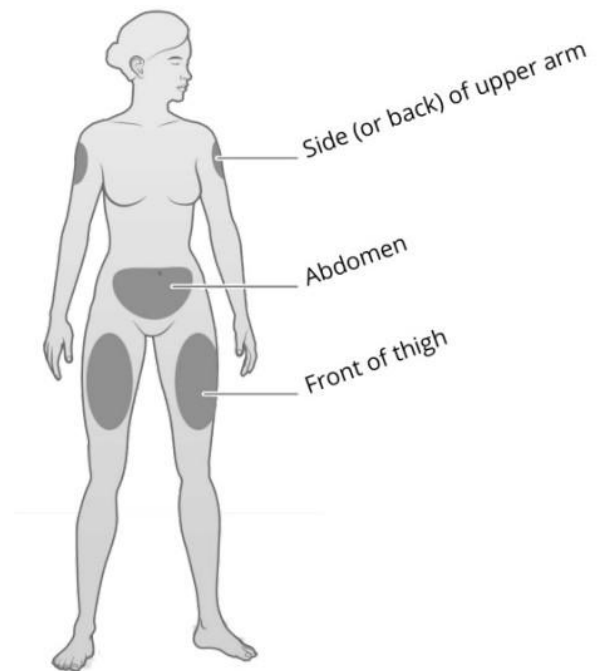
Preparing the medication:

- Find a comfortable, well-lit location with a clean work area to set out your supplies.
- Wash your hands with soap and warm water.
- Make sure you have the correct medication and dosage according to your prescription; it should be clearly shown on vial with name and strength.
- Check the expiration date of your medication.
- Hold medication vial up to the light to check for floaters or other contaminants.



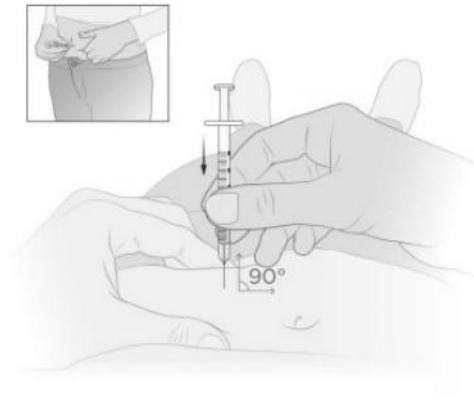
Preparing the syringe:

- Pop the top off of your vial. Once the top is off, it never goes back on, and the rubber stopper in the vial will keep the medication from leaking.
- Before each use, clean the top of your vial off with an alcohol pad in a circular motion starting from the middle.
- Prepare your syringe for drawing up your medication. Make sure not to touch the tips of your supplies, and when twisting the needles make sure to twist from the base and not the top so you do not accidentally poke yourself.
- Draw air into the syringe that is equal to the dose of your medication. When you put this air from the syringe into your medication vial, it helps keep pressure in the vial and makes it easier to draw up more medication in the future. For example, if you are drawing up .2mL into the syringe, you will pull air into it at the .2mL mark before pushing it into the vial.
- Pull off the top of your needle and hold your vial on a flat surface. Poke the needle directly into the middle of the rubber stopper of the vial at a 90 degree angle. Inject the air into your vial while holding it. Make sure the needle is positioned so your medication is covering the tip of the needle.
- Flip the vial upside down, keeping the needle in the medication liquid and pulling back on the syringe slowly. You may see bubbles of air with the medication in your syringe which can be pushed back into the vial as you lightly tap the syringe chamber so the bubbles rise to the top. You may need to repeat this step several times to get rid of all the bubbles. Do not remove your needle from the vial when tapping the bubbles out.
- Return the vial right side up to your flat surface and pull your needle straight out, capping it, and twist the needle from the base off of the syringe. Dispose of drawing needle in your sharps container.
- Attach your injection needle to the syringe by twisting it on at the base. Keep needle capped and once attached, place the syringe down on a clean, flat surface while you prepare your injection site.



Selecting your injection site:

- Intramuscular injections can be performed on your vastus lateralis muscle on the side of your upper thigh.
- To find this muscle, place the outside edge of your nondominant hand at the top of your kneecap sideways, then your dominant hand sideways right above that one, then your nondominant hand again sideways above the dominant hand to determine the distance from your kneecap to your muscle.
- Rotate your hand out to the upper side of the thigh, pinch the muscle, and that 2 inch area is where you will inject.
- Subcutaneous injections can be performed in your abdomen, the fatty part at the front of your thigh, or the fatty part of the back of your arm. For your abdomen, be sure to inject at least an inch away from your belly button and never above your belly button.



Injecting your medication:

- Open your alcohol prep pad and clean your injection site in a circular motion away from the center outwards. Allow the skin to air dry.
- Pull the cap off your needle. Pinch the muscle or fat of the injection site.
- When you insert the needle intramuscularly, you will want it at a 90 degree angle to your site, ideally parallel to the floor.
- When injecting subcutaneously, insert the needle at a 45 degree angle to the site. You can also inject subcutaneously at a 90 degree angle if that is more comfortable.
- Holding the syringe like a pencil, insert the needle $\frac{3}{4}$ to 1 inch in a smooth, single motion through the skin and into the muscle.
- For subcutaneous injections, insert it $\frac{3}{8}$ to $\frac{5}{8}$ of the way in to the fat. Hold the needle steady.
- Once the needle is fully in, push the plunger all the way down on a count of 5 seconds.
- When finished, pull the needle straight out at the same angle you injected and immediately cap it and dispose in the sharps bin.
- Lightly press a cotton ball or sterile gauze pad on the injection site until any bleeding has stopped.
- Apply your bandage.

Disposing of your injection supplies:

- To discard your injection supplies, you can purchase a sharps bin at the pharmacy.
- You can also use a laundry detergent bottle or a milk carton as long as it is made with a thick plastic material.
- Clearly write 'sharps' on the container with tape and marker. Affix label to container and securely fasten the top each time you use it. Once the container is $\frac{3}{4}$ filled, cap it and secure the lid with tape. You can dispose of it in your regular trash.
- All of your injection supplies are meant for single use, which means you use them once and then you immediately put them in your sharps container.

Injection tips:

- Make this process your own! Some people listen to music or have special setup kits, some people light aromatherapy candles or ask for a loved one to be in the room with them. A comfortable environment can make injections much easier.
- Storage and organization is helpful to make sure all your supplies are in order. [Stealth Bros.](#) makes doppel kit containers and you can also find a portable hard case kit from [Transguy Supply](#).
- Relax and keep your muscles warm; being tense means the injection is more likely to be painful.
- Use your dominant hand to inject on the opposite side for your first time.
- Make sure your feet are flat on the ground if injecting into the thigh.
- Rotate your injection sites weekly.
- Make sure to shake your medication well and keep at room temperature to prevent crystallization and help check for contaminants
- Never use medication that has expired or looks contaminated.
- Never forget hygiene at any step of the process; it helps prevent infection.
- Needle sizes are measured in gauges. The smaller the number for the gauge, the thicker the diameter of the needle. For example, a 21 gauge needle is thicker than a 26 gauge needle. Intramuscular needles will be thicker than subcutaneous needles.
- Never let your needles touch any surfaces and keep the caps on until you are about to draw or inject.
- Never let go of the vial during air insertion and drawing up medication.
- The needle can be inserted more quickly with a darting action or slowly, depending on your level of comfort
- For intramuscular injections, you may feel some burning, tingling, or pressure as your medication enters your muscle. You also may feel a bit of soreness or mild swelling for a few days at the injection site.
- Some medications are suspended in a thick oil, so make sure they are at room temperature to make the oil more comfortable to inject.
- If you develop signs of infection such as a fever above 101 degrees Fahrenheit or see redness or drainage from injection site, call a medical professional.
- Some people can be allergic to the oil suspension for Testosterone, with Testosterone Cypionate suspended in Cottonseed Oil and Testosterone Enanthate suspended in Sesame Oil.
- Never dispose of sharps containers in recycling, only trash or a medical facility that accepts sharps containers.

Works Cited

- Callen-Lorde Protocols for the Provision of Hormone Therapy, 2022.
- Planned Parenthood of Greater Texas, Inc. Hormone Therapy Self Injection Guide, 2018.
- Planned Parenthood South Atlantic Gender-Affirming Welcome Packet, 2021.
- Virginia League for Planned Parenthood Gender-Affirming Welcome Packet, 2021.