*This is a template for people having difficulty accessing hormones from their GPs. This email is often most effective when marked urgent, sent to the GP surgery's main email marked for the attention of a specific GP, and with the practice manager copied in. Most NHS staff emails are 'name.surname@nhs.net'.*

Dear [Practice Manager and/or GP],

I'm writing in my capacity as [a patient at this practice/the advocate for PATIENT'S NAME AND DATE OF BIRTH] regarding the issue of their hormone therapy being interrupted.

I'm a transgender [man/woman/person] and have been taking [medication name] since [date] via [the NHS/previous doctor/private clinic name]. I registered at this practice in [date], and am now struggling to access my hormones due to [briefly describe circumstances].

I want to bring the following urgently to the attention of [GP name]: [Apply/delete as relevant]

- Stopping hormones abruptly for any reason other than a 'serious individual health condition' is a serious violation of clinical responsibility and contradicts all relevant guidance. (World Professional Association for Transgender Health Standards of Care v.7, pg. 34, NHS 2019 guidance, pg. 6, NHS gender identity clinic guidance for GPs, pg. 11)

- GPs do commonly refer to a local endocrinologist or consult with a trans and/or sexual health clinic to assist with monitoring trans patients' routine blood tests if they feel they do not have the relevant experience and knowledge (see NHS guidance for GPs on the care of gender variant people, pg. 18). A local NHS endocrinology referral is often desirable for trans patients who do not want to pay/travel for private endocrinology appointments. However, the General Medical Council's ethical guidance on shared care (paragraphs 35-6) makes clear that, should a GP want to refer their trans patient to an endocrinologist, changes to a shared care agreement should be clearly communicated to a patient. That patient's health and 'best interests' should be prioritised in decisions about continuing care over the GP's convenience or logistics/cost of 'associated monitoring or follow-up'. **Patients' care should not be stopped while waiting for a referral.**

- Bridging prescriptions are a legal, NHS-approved method of responding to the NHS gender services' current disproportionate wait times. The relevant GMC guidance is available in this guide, pgs. 11-17.

- Endocrinology referrals typically take several months, email replies from NHS gender services and private clinics often take several weeks, and waitlists for a first assessment at an NHS gender clinic are currently estimated to be over 20+ years. It is unacceptable and dangerous to require a transgender person who has been on hormones for [period of time], bar a serious health emergency, to discontinue medically necessary treatment for those or any lengths of time. **If pausing hormones, GPs should take advice from a gender specialist and provide clear clinical justification to the patient.**

- Whilst trans patients understand most GPs have not had training in trans-specific healthcare, this does not change the medical necessity of hormone provision. GPs have an ethical obligation to 'keep your skills and knowledge up to date in all areas of your work' and to 'be familiar with the relevant guidelines and developments that affect your work'. (GMC Ethical Guidance, "Leadership and Management For All Doctors", 39-40).

- [Patient's name] is currently experiencing [symptoms] as a result of the delay in accessing treatment.

I've enclosed the following resources for [GP name] to help clarify primary care involvement in transition-related healthcare and assist with monitoring.

- Royal College of Psychiatrists' good practice guidelines for GPs of the assessment and treatment of adults with gender dysphoria (especially pgs. 37-41 on monitoring and blood tests)

- TransLeeds' guidance for GPs about trans patients (slightly more user-friendly and detailed monitoring information than above)

- Latest NHS guidance on prescribing hormone therapy during Covid-19, including information about the risks of hormone withdrawal and monitoring blood tests if changes in dosage or medication type are required.

- GPs and other medical providers can seek specialist advice from the Tavistock & Portman NHS Gender Identity Clinic endocrinology team's hotline/email for medical providers, pilot NHS gender service TransPlus, and trans specialist health clinic CliniQ. This fulfills a GP's obligation to seek specialist guidance when providing a bridging prescription.

I request the following courses of action be taken:

- [Edit as needed; be specific]

I appreciate you taking the time to read this through carefully. I know this is a lot of information, especially in the current situation, and that GPs do not always have good access to trans-related healthcare resources. I ask, too, that you consider that transgender people are disproportionately responsible for being self-advocates and teachers about our own healthcare. In this stressful and uncertain time, it would be a huge reassurance to know that [surgery name] is able to pre-empt such issues in the future.

Best,
[Your name]