

Am I able to provide NHS prescriptions for ADULT patients seeking transgender care? – a Pragmatic guide for General Practitioners.

The scenarios below may be a helpful guide to determine if it is appropriate to provide a NHS prescription to initiate or continue hormone treatment for patient's seeking transgender care.

The following scenarios consider, Pre-NHS assessment, NHS Gender Identity Clinic (GIC) recommendation, Previous NHS GIC and Private provision wishing to move to NHS.

Note: A checklist is available for prescribing recommended by a private gender identity clinic.

Also: This guidance is aimed at requests for Adult patients over 18 years of age. For guidance regarding request for patients under 18years please refer to NHSE [Guidance to Primary Care About Unregulated Providers Who Supply Hormone Medications to Children And Young People For Gender Incongruence](#). For further information in relation to Children and Young People see NHS England's [interim service specification](#) and the recommendations of the [Cass Review](#).

Scenario	Response	Reason
Pre-NHS assessment		
Pre-NHS assessment Patient not taking anything, wanting GP to prescribe	NO	Patient hasn't had formal NHS level assessment. Refer to NHS GIC if not already done so.
Pre-NHS assessment Patient wanting GP to prescribe – saying that risk of suicide if prescription not done	NO	Patient needs to be referred to Crisis team if thought to be at high risk . Refer to NHS GIC if not already done so.
Pre-NHS assessment Pre NHS assessment and obtaining medicines from the Internet – wanting GP to prescribe	NO unless NHS GIC advise and fulfils other criteria	See GMC and local summary guidance on bridging prescriptions . To date NHS GIC have been unwilling to advise prescribing prior to seeing patient, but GP should write for each case where they think the GMC criteria apply. Refer to NHS GIC if not already done so. Note the GIC are unable to expedite an appointment but may be able to provide advice about hormone treatment. If the patient is at high risk of suicide refer to Crisis team .
Pre-NHS assessment Obtaining or has obtained prescribed medicines from abroad	MAYBE	If the patient has had a gender assessment which appears to the GP to be equivalent to NHS GIC - YES If the GP feels the assessment is not equivalent to NHS GIC - NO. See GMC and local summary guidance on bridging prescriptions . To date NHS GIC have been unwilling to advise prescribing prior to seeing patient, but GP should write for each

Title	Am I able to provide NHS prescriptions for ADULT patients seeking transgender care? – a Pragmatic guide for General Practitioners		
Approved by and Date	TAG – April 2025	Review Date	April 2027

		case where they think the GMC criteria apply. Refer to NHS GIC if not already done so. Note the GIC are unable to expedite an appointment but may be able to provide advice about hormone treatment. If the patient is at high risk of suicide refer to Crisis team.
Pre-NHS assessment Obtaining medicines from private UK GIC after private assessment	MAYBE – Depends on which clinic	Private providers where assessment appears to be equivalent to NHS clinics – YES BUT need to confirm that part of the assessment has included review by a senior medical gender specialist . Private providers where assessment is not equivalent to that obtained through NHS GIC – NO , as assessment not equivalent to that obtained through NHS GIC. Consider GMC advice and local summary guidance on bridging prescriptions but would need to fulfil the 3 criteria including the NHS GIC writing back recommending the lowest appropriate doses. Otherwise, patient will need to continue to obtain their medications from the private clinic until reviewed by NHS GIC. Refer to NHS GIC if not already done so.
NHS Care		
Currently Under NHS GIC Care Undergoing medical transition	YES	The GMC advise that practices must co-operate with GICs and gender specialists in the same way that you would co-operate with other specialists, this includes: <ul style="list-style-type: none"> • prescribing medicines recommended by a gender specialist for the treatment of gender dysphoria. • following recommendations for safety and treatment monitoring • making referrals to NHS services that have been recommended by a specialist.
Previously Under NHS GIC Care After medical transition	YES	Once the patient has been discharged by a GIC or gender specialist, the prescribing and monitoring of hormone therapy can be carried out successfully in primary care without further specialist input. From the patient's perspective, management in primary care is far easier, and

Title	Am I able to provide NHS prescriptions for ADULT patients seeking transgender care? – a Pragmatic guide for General Practitioners		
Approved by and Date	TAG – April 2025	Review Date	April 2027

		there is no specific expertise necessary to prescribe for and monitor patients on hormone therapy. However, NCTH can offer advice and access to specialised endocrinologists should there be any complications or change.
Private		
<p>ADULT PATIENTS OVER 18 YEARS OF AGE: GPs are advised to consider each request on a case-by-case basis to satisfy themselves that (i) the request is from a reputable company that provides a safe and effective service; and (ii) the circumstances of the request for the particular individual meets the general principles of the General Medical Council's "Good Practice in Prescribing and Managing Medicines and Devices"; and (iii) that the health professional making the request is an appropriate "gender specialist" (the term that is used in the General Medical Council guidance).</p>		
<p>For information: Patients under the age of 18 years:</p> <ul style="list-style-type: none"> • Suppression of pubertal development A GP must refuse to support the private prescribing or supply of GnRH analogues. It is a criminal offence for a healthcare professional to privately prescribe or dispense this drug to patients under the age of 18 as a puberty-suppressing treatment option for gender incongruence or gender dysphoria unless that treatment had begun before 3rd June 2024. A GP should refuse to support an unregulated provider in the prescribing or supply of alternative medications that may be used to suppress pubertal development. • Exogenous Hormones The recommendations of the Cass Review (April 2024) is that exogenous hormones should not be prescribed to children under 16 years of age, and only to young people aged 16 or 17 where the clinician making the prescribing recommendation can demonstrate extreme caution in clinical decision making, such as to justify not waiting until the young person turns 18 years, and where the prescribing recommendation has been approved by a national MDT. Where the prescribing recommendation is made by a healthcare professional working for, or working with, an unregulated provider, the request should be refused. 		
<p>Private GIC Adult patient</p> <p>Undergoing medical transition – UK or abroad</p>	MAYBE	<p>Private providers where assessment appears to be equivalent to NHS clinics – YES BUT need to confirm that part of the assessment has included review by a senior medical gender specialist.</p> <p>Private providers where assessment is not equivalent to that obtained through NHS GIC – NO, as assessment not equivalent to that obtained through NHS GIC. Consider GMC advice on bridging prescriptions but would need to fulfil the 3 criteria including the NHS GIC writing back recommending the lowest appropriate doses. Otherwise, patient will need to continue to obtain their medications from the private clinic until reviewed by NHS GIC. Refer to NHS GIC if not already done so.</p>

Title	Am I able to provide NHS prescriptions for ADULT patients seeking transgender care? – a Pragmatic guide for General Practitioners		
Approved by and Date	TAG – April 2025	Review Date	April 2027

Private GIC Post transition – UK or abroad Adult Patient	MAYBE	<p>Once the patient has been discharged by a GIC or gender specialist, the prescribing and monitoring of hormone therapy can be carried out successfully in primary care without further specialist input. If the GP feels that the patient has been under the care of an appropriate gender specialist and the treatment has been equivalent to that within the NHS, then - YES</p> <p>If the GP feels the assessment was not equivalent to NHS GIC - NO Consider GMC advice on bridging prescriptions but would need to fulfil the 3 criteria including the NHS GIC writing back recommending the lowest appropriate doses. Otherwise, patient will need to continue to obtain their medications from the private clinic until reviewed by NHS GIC.</p>
---	-------	---

NHS Gender Services would be expected to provide the GP with patient-specific ‘prescribing guidance’, as well as advice on the individual’s future need for endocrine and other pharmacological interventions, the anticipated duration of treatment (which may be life-long), the regimen recommended for on-going use, its intended effects and possible side-effects, long-term monitoring recommendations, and how they might access further information in the future.

Additionally, they will obtain written consent to the interventions under consideration from the individual and provide a copy of the consent to the individual and their GP.

Title	Am I able to provide NHS prescriptions for ADULT patients seeking transgender care? – a Pragmatic guide for General Practitioners		
Approved by and Date	TAG – April 2025	Review Date	April 2027

Title	Am I able to provide NHS prescriptions for ADULT patients seeking transgender care? – a Pragmatic guide for General Practitioners
Description of policy	To inform healthcare professionals
Scope	NHS Norfolk & Waveney Integrated Care System
Prepared by	Medicines Optimisation Team. Based on guidance developed by NHS England, specialist commissioning and other government agencies
Evidence base / Legislation	<p>Level of Evidence:</p> <p><i>A. based on national research-based evidence and is considered best evidence</i></p> <p><i>B. mix of national and local consensus</i></p> <p><i>C. based on local good practice and consensus in the absence of national research based information.</i></p> <p><i>D. National Drug Tariff</i></p>
Dissemination	Is there any reason why any part of this document should not be available on the public website? <input type="checkbox"/> Yes / No <input checked="" type="checkbox"/>
Approved by	Therapeutics Advisory Group
Authorised by	<i>Medicines Optimisation Programme Board</i>
Review date and by whom	Medicines Optimisation Team - April 2027
Date of issue	April 2025

Version	Date	Author	Status	Comment
1.0	April 2025	New document	Final	Supported by TAG and ratified by Medicines Optimisation Programme Board

Title	Am I able to provide NHS prescriptions for ADULT patients seeking transgender care? – a Pragmatic guide for General Practitioners		
Approved by and Date	TAG – April 2025	Review Date	April 2027