



Trans Men's Health Screening Guidelines

Trans men who have not used cross-sex hormones or gender-affirming surgery may follow recommendations of their birth sex.

Health Item	< Age 29	Age 30-39	Age 40-49	Age 50-64	Age 65+
General Health Care Considerations:					
Physical Exam (No hormones)	2 physical exams in 20s and 30s		Every 1-2 years	Every 1-2 years	Yearly
Physical Exam (Hormone use)	Every 2 to 3 months in the first year and then one to two times per year.				
Vision Exam	Every 1-3 years if you have vision problems or glaucoma risk.				
Dental Exam	Yearly	Yearly	Yearly	Yearly	Yearly
Hearing Exam					Yearly
Skin (mole) Exam	American Cancer Society recommends skin exams as part of periodic provider exam. Self-exams optional.				
Vaccinations:					
HPV	One time vaccination to decrease risk of cancer from HPV virus.				
Hep A & B	One time vaccination, especially if sexually active.				
Influenza	Yearly	Yearly	Yearly	Yearly	Yearly
Pneumonia	Patients with compromised immune system				Once
Tetanus-Diphtheria	Every 10 years	Every 10 years	Every 10 years	Every 10 years	Every 10 years
Sexual Health:					
STD Screening	Syphilis should be tested in at risk populations. Gonorrhea and Chlamydia tested if sexually active and should be screened orally, genitally, and anally.				
HIV Testing	Everyone over age 15 should be tested at least once a year, more frequently if at increased risk. If pregnant, must be tested.				
Pre-Exposure Prophylaxis (PrEP) Use	If you are 1) in an ongoing relationship with an HIV-positive sexual partner, 2) not in a mutually monogamous relationship with a partner who recently tested HIV-negative, 3) have a history of not using condoms during sexual intercourse and/or 4) injected illicit drugs or shared injection equipment in the past 6 months. You may want to discuss with provider.				
Hepatitis Screening	Screen for Hep A and B in those with increased risk. One time screening for Hep C in those born between 1945-1965.				

Gastrointestinal & Colorectal Health:

Fecal occult blood	Yearly	Yearly until 75
Flexible Sigmoidoscopy	Every 5 years with Fecal occult blood test every 3	
Colonoscopy	Once every 10 years Until age 75	

Mental Health & Wellbeing:

Mental Health

Stress Analysis

Screening provided at each visit by health provider

Preventative Counseling:

Domestic violence

Tobacco, Alcohol, & Drug Use

Screening and counseling should be provided with each visit by your health care provider

Health Item

No cross-sex hormone or gender-affirming surgery

Past or current hormone use or gender affirming surgery

Reproductive Health:

Pelvic (GYN) Exam

Every 5 years w/ HPV test

Cervical Cancer: Following hysterectomy do annual Pap smear of vaginal cuff until 3 normal tests. If ovaries removed but uterus/cervix intact follow natal female Pap guidelines.

Uterine Cancer: Monitor sporadic bleeding if not due to missed/excessive testosterone dose and consider hysterectomy in post-menopausal natal females.

Cardiovascular/Heart Health:

Blood pressure

At least every 2 years if normal. Yearly if BP 120/80 to 139/89. Discuss treatment if BP <140/90.

If taking hormonal therapy check every 1-3 months. Monitor for cardiac symptoms.

Cholesterol

Every 5 years for >34 or Regularly for >20 with increased risk for heart disease

Lipid profile

>20 Regularly test if at increased risk

Annual fasting lipid profile

Endocrine Health:

Bone Mineral Density Testing

People of all ages should maintain appropriate calcium intake. Patients can talk to their providers about a one time test for >65.

Test if risk factors for osteoporotic fracture are present (i.e., previous fracture, family history, glucocorticoid use, etc.). In individuals at low risk, screening for osteoporosis should be conducted at age 60 and in those who are not compliant with hormone therapy.

Blood Sugar Testing for Diabetes	Screen if blood pressure is higher than 135/80 or if you take medicine for high blood pressure. Screen if BMI exceeds 25, overweight.
Thyroid Function Test	Maintain a high index of suspicion for thyroid disorders as use of sex hormone replacement may cause endocrine imbalances.
Other lab monitoring	If on testosterone: serum testosterone every 2 to 3 months until levels are in the normal. Estradiol levels during the first 6 months of testosterone treatment or until there has been no uterine bleeding for 6 months. Complete blood count and liver function tests every 3 months for the first year and then 1 to 2 times a year.

Breast Health:

Self Exam	Self-exams are optional and not recommended by USPSTF.	
Provider Exam	Provider exams can optionally be done every 3 years.	Annual chest/wall axillary exam.
Mammogram	-ACS recommends yearly -USPSTF recommends every 2 years ages 50-74	Not necessary following reconstruction, but consider if only reduction performed

1. <http://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations-by-date/>
2. <http://www.cancer.org/healthy/findcancerearly/cancerscreeningguidelines/american-cancer-society-guidelines-for-the-early-detection-of-cancer>
3. <http://www.nlm.nih.gov/medlineplus/ency/article/002125.htm>
4. <http://transhealth.ucsf.edu/trans?page=protocol-screening#S6X>