

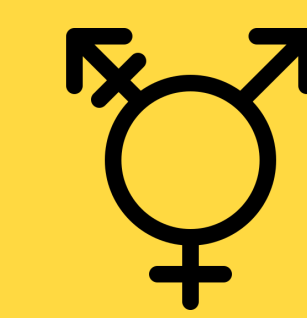
Introduction

- **Background:**
 - Incorrect pronoun or name usage, "misgendering," endangers trust with the health care system and providers for gender-diverse individuals.
 - Anecdotal experiences of misgendering in the context of gender-affirming surgery (GAS) have been reported, however, there is little literature on the incidence of misgendering on the day of GAS.
- **Objective:**
 - To describe baseline data on misgendering of gender-diverse patients presenting for GAS at a single institution as a first step toward quality improvement.

Results



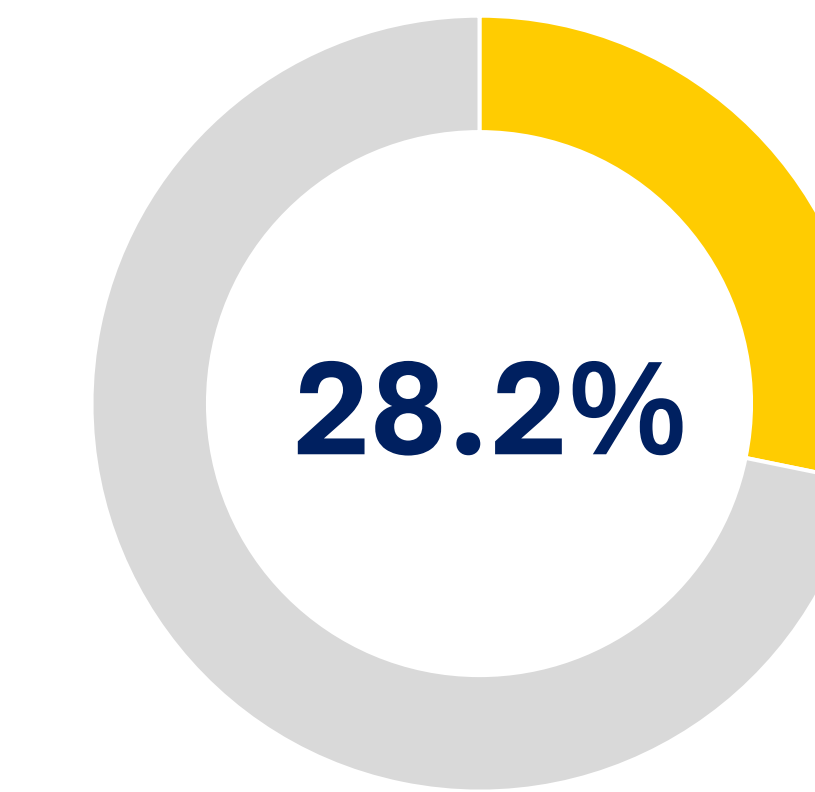
Response rate
78/116 (67.2%)



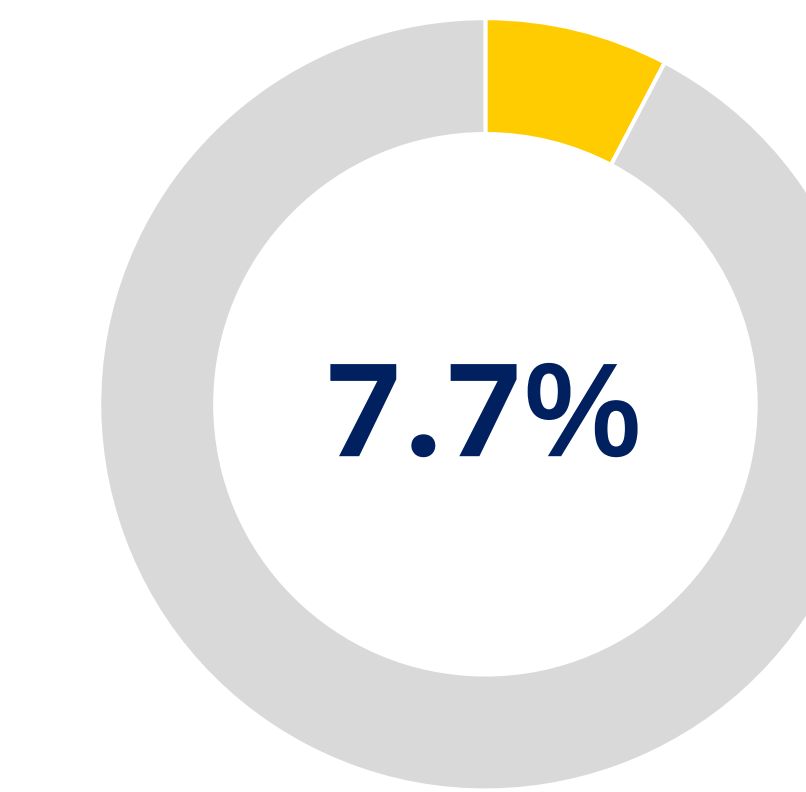
52.6% identifying as transgender male
33.3% identifying as nonbinary
57.7% using he/him pronouns
28.2% using they/them pronouns



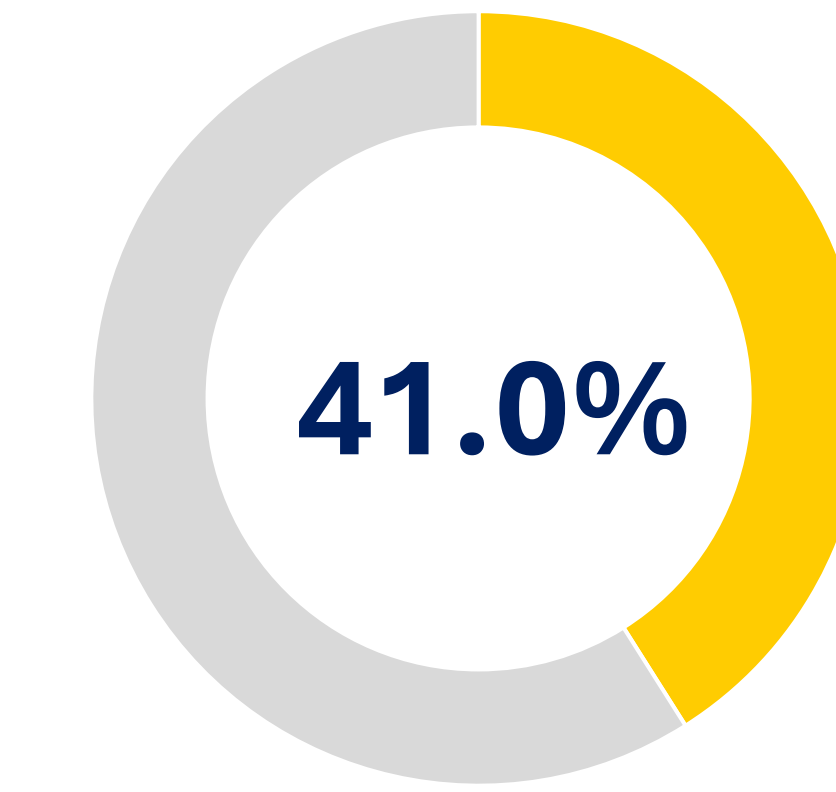
Preoperative area was most common location for misgendering (**77.3%**)



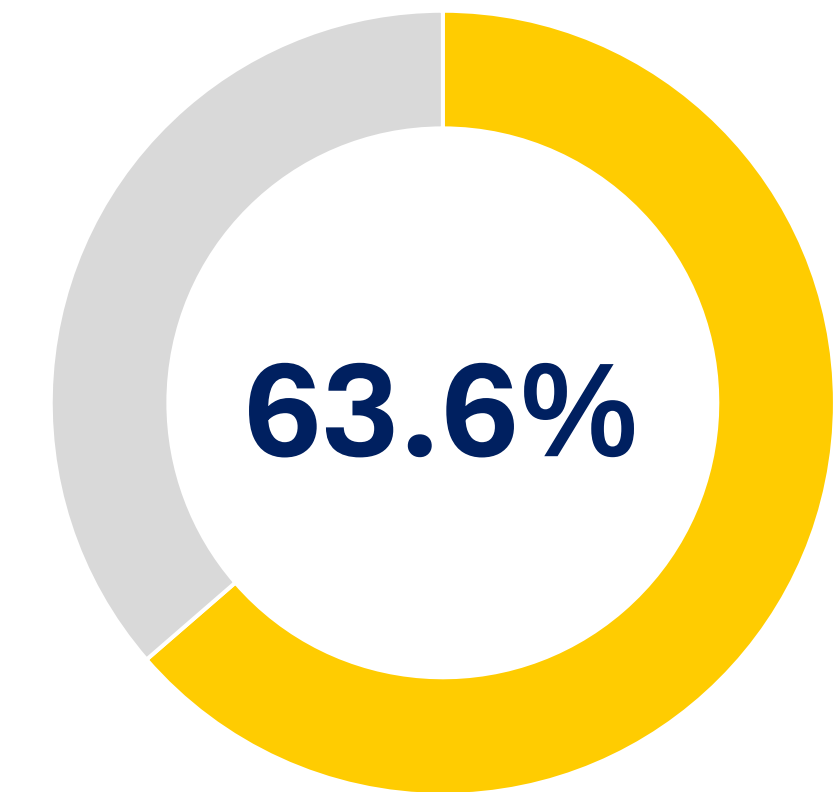
Patients misgendered



Patients misnamed



Patients asked about name and pronouns during visit



Misgendered patients identifying as genderqueer or nonbinary

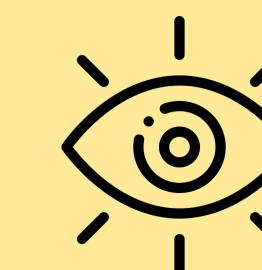
Methods

- **Study Population:**
 - Patients undergoing gender-affirming chest surgery at a university hospital and two outpatient surgical centers
 - Data collected from August through December 2022
- **Data Collection:**
 - Telephone survey administered to patients 1-2 weeks post-operation
 - Survey included questions regarding:
 - Inquiry about the patient's gender identity, chosen pronouns, and chosen name
 - Instances and locations of incorrect pronoun and name usage

Conclusions

- Over one-quarter of patients experienced misgendering on the day of gender-affirming chest surgery
- Nonbinary and genderqueer individuals were most susceptible to misgendering
- Less than half of patients were explicitly asked about their name and pronouns on the day of surgery
- Insights gained can inform the development of effective systems-based initiatives to enhance the quality of gender-affirming care

Current Implementations



Improving visibility of pronouns on patient files and in preoperative/recovery areas



Providing an opt-out option for preoperative pregnancy tests



Displaying patients' chosen names and pronouns on operating room boards



Using colored markers to indicate pronouns at the foot of patient stretchers



Conducting staff education sessions on gender identification errors