

Response to Royal College of Obstetricians and Gynaecologists consultation: Care of Trans and Gender Diverse Adults in Obstetrics and Gynaecology

August 2022

Our response

Sent via email

As you know, the GMC doesn't set clinical standards – nor do we give clinical advice or comment on clinical matters. It is therefore beyond our remit to provide comment on the large parts of the proposed guideline, which cover specific clinical matters and advice. However, we wanted to provide a brief response focused on some amendments we advise in relation to references to our [trans healthcare ethical hub page](#). We hope these are helpful and we'd be happy to answer any questions and to talk through the information below.

Before proceeding, we want to clarify that the information and advice we signpost to on the ethical hub is not 'guidance' and should not be described as such. The aim of our trans healthcare ethical hub page is to illustrate how the broad principles from our formal [ethical guidance](#) may be applied in practice when treating patients with gender dysphoria, as well as signposting to relevant external information and resources. As with all our ethical hub pages, our trans healthcare page does not set new professional standards and is not intended to replace the formal guidance we provide. This is due to the fact that – as you're aware – our formal guidance sets the standards of good practice that all registered doctors are expected to meet. As such, it has regulatory force and carries the statement 'serious or persistent failure to follow this guidance will put your registration at risk'. We'd therefore be most grateful if you could amend references to our trans healthcare ethical hub page to make clear that it is advice not guidance.

On the recommendation point set out on page 7, you note that, 'Records of name, gender and title should be updated promptly on request of the individual... Addressed in guidance from the GMC'. The information we signpost to on our trans healthcare ethical hub page in relation to medical records is [guidance from Primary Care Support England](#) (PCSE) which explains the process for registering a patient gender re-assignment. Given this, we advise that the

recommendation point signposts directly to PCSE. It may also be useful to note that the process for changing medical records may differ across Wales, Scotland and Northern Ireland.

On page 11, you reference, “an experienced gender specialist (described by the GMC as having, “evidence of relevant training and at least two years' experience working in a specialised gender dysphoria practice such as a National Health Service Gender Identity Clinic”)”. For your information, the wording on our trans healthcare page is drawn from several sources. Whether someone needs to be clinically qualified will depend on the individual circumstances of each case and what the professional is being asked to do.

Given the status of the advice we provide via the ethical hub – and the fact that much of it is signposting to external information and resources – we request that all references throughout the consultation document that cite ‘guidance from the GMC’ are removed as a ‘Rationale for recommendation’, unless you are citing principles from our formal ethical guidance. We believe this will avoid confusion for users and ensure that we aren’t being cited for processes that do not fall within our remit.