



South East Essex

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Gender Change on Medical Records Form

Patients may request to change gender on their patient record at any time and do not need to have undergone any form of gender reassignment treatment in order to do so.

Ref: <https://pcse.england.nhs.uk/help/registrations/adoption-and-gender-re-assignment-processes/> 18/11/2020

We have to advise you, the patient, that changing your gender on your records would mean that you will be supplied with a new NHS number which is not reversible and you will be registered as a new patient. Your old NHS number will no longer exist and your existing medical information will be transferred into your new medical record. To revert back to your previous gender, we will need to issue you with a third NHS number and again we will transfer your then existing medical information to your new record. Further information is found at <https://www.southendmedicalcentre.co.uk/>

Please note: Upon changing your gender it is important that you understand that you will not receive automatic invites for screening for certain cancers and conditions. It is important that you read and understand the following information (correct as of 18/11/2020) <https://www.gov.uk/government/publications/nhs-population-screening-information-for-transgender-people/nhs-population-screening-information-for-trans-people> . We suggest you discuss with your consultant or GP future screening that may be relevant to your gender at birth. We as a practice are responsible for inviting you to discuss appropriate screening at the relevant time.

By completing the following information you are agreeing to the above. We aim to complete the process of Gender Change as soon as possible, this is done by Primary Care Support England (PCSE). We will stay in touch until this process is complete.

Your Full Name and Title:

Date of Birth:

Mobile Number:

Are we allowed to text you on this number? Yes / No

Email address:

Are we allowed to email you on this address? Yes / No

Home address:

Post code:

My assigned/current gender: Male / Female

The gender my records to be changed to*: Male / Female

**unfortunately the NHS only accepts a male / female gender for registration and for gender change, if you wish to choose non-binary or other, we can add an alert to your notes, so we as a practice know your preferred gender. Without a male or female gender we cannot register you as PCSE will reject the application. Sadly, this is out of our hands, but we and others across the UK have raised this issue to get the system changed, when will this be, we do not know. We do understand your frustrations. If you wish to change to non-binary or other, please let us know and we can add an alert to your notes but your current gender on your records will stay the same.*

I, (the patient) Name: have read and agreed for Southend Medical Centre to change my gender. I understand that I will be issued a new NHS number, and I will be registered as a new patient and some of my previous medical records will be transferred to my new record.

I confirm that I have received all the information I require for my gender to be changed on my records.

PRINT:

SIGN:

Date:

Please hand this form to reception to start the process of change of gender.

Office Section:

Current NHS No.:

New NHS No.:

- Please scan this form to the patient's OLD and NEW medical record
- Please diary to receive a response from the Sensitive Team at PCSE
- Please keep patient informed of process and outcome