

June 2024

**workbook for penis
construction surgeries in BC**

Trans Care BC
Provincial Health Services Authority

**Got any questions?
We're here to help!
Visit transcarebc.ca**

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A message from the TRANS CARE BC TEAM

Dear Reader,

Thanks for picking up this workbook! It was put together by a team of trans folks and allies at Trans Care BC. Many of us have gone through metoidioplasty or phalloplasty surgery, and we know it can sometimes feel like a long and confusing journey. We hope this book will be a source of help and comfort along the way.

The following information is intended to give you a basic understanding of procedures that create a penis. The techniques will vary depending on each person's body.

Phalloplasty, also called “phallo,” this procedure creates a penis using tissue from the forearm or thigh (including arteries, veins and nerves). As part of phalloplasty, it's common, but not necessary, to undergo several related procedures including urethral lengthening, vagina removal, scrotum construction, construction of the penis head (glans) and implants (for the testes or penis).

Metoidioplasty, also called “meta,” this procedure creates a penis by cutting ligaments around the erectile tissue (clitoris) to release it from the pubis and give the shaft length. Skin from the external genitals (labia or outer labia) is wrapped around the penis to add girth. As part of metoidioplasty, it's common, but not necessary, to undergo several related procedures including urethral lengthening, vagina removal, scrotum construction and implants (for the testes).

Erectile tissue release, also called “clitoral release” or “simple meta,” this procedure creates a penis by cutting the ligaments around the erectile tissue (clitoris). With the ligaments cut, the penis is able to fall away from the body, thus giving it a more pronounced appearance. As

part of erectile tissue release, it's common, but not necessary, to undergo several related procedures including vagina removal, scrotum construction and implants (for the testes).

Phalloplasty and metoidioplasty surgeries are publicly funded for trans, Two-Spirit, and non-binary individuals in British Columbia. This workbook contains a summary of how to access these procedures. For more in-depth information, please visit our [website](#). The workbook you are holding is a companion to this website, with extra worksheets, exercises, and checklists.

If you have surgery at the [Gender Surgery Program BC \(GSP BC\)](#), you will be given an “Enhanced Recovery After Surgery” booklet about your surgery, closer to the time of surgery.

This workbook is meant to be a resource for keeping track of information related to your surgery. Some parts may not apply to you, and there may be some sections you don't want to fill in. That's ok! What you do with this workbook is up to you.

A note on privacy and confidentiality: If you enter personal information that you wouldn't want other people to know, it may be helpful to treat this workbook as you would your travel passport or BC Services Card.

Please remember this workbook does not replace the information you receive from your surgeon. If there are any differences, you should always follow the advice provided by your surgeon.

Finally, Trans Care BC's Health Navigation Team is available to help you at any point in this process. We wish you all the best!

Sincerely,

The Team at Trans Care BC

Health Navigation Team
Phone: 1-866-999-1514
Email: transcareteam@phsa.ca

Accessing surgery

DECISION-MAKING

Should I get surgery? Which procedures are right for me? These are big decisions. Below is a list of strategies that can help you make a decision you feel confident about. Choose any strategies you like. Copy them into the stepping stones to create a map of your decision-making path.

my decision-making path

<p>Be clear about my options: Identify what surgeries are available and who can perform them. (Genital surgeries comparison - pg 49)</p>	<p>Talk with trusted friends, family, Elders, knowledge keepers, or counsellors: Be clear about whether you want them to be a supportive listener or give advice.</p>
<p>Identify what matters most to me: What surgical outcomes are most important to me? How much risk am I willing to tolerate? What other factors will influence my decision? (What matters most to me? - pg 48)</p>	<p>Use my skills for managing stress: Draw on my positive coping strategies for dealing with uncertainty or unexpected news. (Self-care activities - pg 28, My circle of influence - pg 33)</p>
<p>Make a list of questions: Write down the questions I need answered in order to choose the best options for me. (My questions for the surgeon - pg 13)</p>	<p>Make a pros and cons list: Consider the advantages and disadvantages of each option. (Genital surgery comparison - pg 48)</p>

<p>Gather the facts: Get answers to my questions from trustworthy health care providers, websites, and people with lived experience.</p>	<p>Visualize each option: Look at pictures of surgical results. Imagine what my life might be like with each option. (Visualizing life after surgery - pg 51)</p>
<p>Name my emotions: Check in with myself around my feelings throughout my decision-making process. This helps me take care of my needs. (Naming my feelings - pg 54)</p>	<p>Listen to my intuition: Some people refer to this as listening to a gut feeling, a hunch, or the heart. It's about sensing what feels right.</p>
<p>Talk to myself like a trusted friend: Use positive self-talk. Be patient with myself while I make these big decisions.</p>	<p>Journal: Writing in a journal can help clarify our thoughts, questions, hopes, and fears.</p>
<p>Consult with healthcare providers: Share my hopes. Find out what surgeries are recommended for me. Ask questions. Share concerns. Listen to information and advice based on medical expertise.</p>	<p>Meditate: Meditation is a way to feel calm and focused. It can involve quieting the mind by focusing on the breath or listening to guided imagery. A calm mind can help us feel grounded when making decisions.</p>
<p>Talk with people who've faced similar decisions: Seek out people who've had gender surgeries and are willing to share their experience and knowledge. Trans Care BC's Health Navigation Team can refer you to peer groups and share tips on how to ask respectful questions.</p>	<p>Other:</p>



As you move through your journey, you may find that you have to make some difficult decisions. You can find some other helpful decision-making strategies and resources in the section, including:

- ▽ What are some surgical options?
- ▽ What matters most to me?
- ▽ Genital surgery comparison
- ▽ Visualizing life after surgery
- ▽ Naming my feelings



CONNECT WITH A PRIMARY CARE PROVIDER

The first step to accessing phalloplasty, metoidioplasty or erectile tissue release surgery is to connect with a doctor (GP) or nurse practitioner (NP). The role of the GP or NP is to support you in accessing the care you need. This includes:

- ▽ providing or referring you for a Surgical Readiness Assessment,
- ▽ helping you meet surgical requirements, and
- ▽ assisting with things you need after surgery.

Surgical assessments for genital surgery may only be conducted by medical providers (physicians, nurse practitioners and registered nurses) who have received the training outlined in the WPATH Standards of Care (Version 8) and are on the list of qualified assessors maintained by Trans Care BC.

Your GP or NP may be able to provide a surgical readiness assessment. If they cannot, ask them to refer you to a surgical readiness assessor. If they don't know one, they can refer you to Trans Care BC to provide an assessment or you can contact the health navigation team for more options.

If your GP or NP would like information about how to support you during your post-operative healing period, they can call the [Trans Care BC Health Navigation Team](#).



APPOINTMENT INFORMATION

My Doctor or Nurse Practitioner

Name: _____

Appointment Date and Time: _____

Appointment Address: _____

Phone: _____

My Surgical Readiness Assessor

Name: _____

Appointment Date and Time: _____

Appointment Address: _____

Phone: _____

My Urologist

Name: _____

Appointment Date and Time: _____

Appointment Address: _____

Phone: _____

PRO-TIP You might want to store this information in your phone or calendar, too.

GET A SURGICAL READINESS ASSESSMENT

You will meet with a qualified surgical assessor for Surgical Readiness Assessment.

The Surgical Readiness Assessment confirms that you meet the criteria for phalloplasty, metoidioplasty or erectile tissue release surgery. It also helps ensure you are prepared and supported before, during, and after your surgery.

See Trans Care BC's [website](#) to learn more about what to expect during a Surgical Readiness Assessment and other frequently asked questions.

BE REFERRED TO THE SURGICAL CENTRE(S)

In BC, publicly-funded gender-affirming phalloplasty, and metoidioplasty can be done at the [Gender Surgery Program BC](#).

See Trans Care BC's [website](#) to learn more about how to send referrals to a clinic, and other frequently asked questions



DATE OF SURGERY

HAVE A SURGICAL CONSULT

A surgical consult is an appointment with your surgeon to talk about your goals for surgery and your options in terms of procedures. It's also an opportunity for you to ask questions.

See Trans Care BC's [website](#) to learn more about what to expect in a consult visit and what to bring.

Here are some tips on how to prepare for this appointment:

- Attend a **GSP BC** Surgery Education Class.
- Read up on the surgery you are interested in and do some reflective exercises- some resources include:
 - Rainbow Health Ontario's **Transition-Related Surgery Surgical Summary Sheets**
 - phallo.net and
 - metoidioplasty.net
- Search online for before-and-after photos, including photos of people who have a body similar to your own.
- Have a list of your current medications and supplements (including traditional medicines, such as herbs and teas; vitamins; minerals; amino acids; and probiotics). Include the dose and how often you take them. Your surgeon may recommend changes.
- Have a list of questions for the surgeon. You can find common questions on pages 13 & 14.
- Have a pen for taking notes.
- If there are any updates on your health since your initial referral was made, ask your GP or NP to send any relevant information the surgical centre.

DATE(S) OF SURGICAL CONSULTS

GET HAIR REMOVAL FROM DONOR SITE

For patients having phalloplasty with urethral lengthening, medically-necessary hair removal may be required. Hair is removed from the part of the donor tissue that will become the new urethra. See Trans Care BC's [website](#) for more information about this.

current medications

Medications or Supplements	Dose	How often	Need to stop before surgery? (Y / N / When)

MY QUESTIONS FOR THE SURGEON

Make a list of questions to ask your surgeon during your consult. Some sample questions are listed below. Don't forget to have a pen handy so you can record the answers. You may also want to have a friend take notes so you can focus on the conversation.



FAQS

When should I arrive in Gender Surgery Program BC for surgery?

When can I return home?

Can I see photos of surgical outcomes of your other patients who had this surgery?

What are the complications that could occur after the surgery?

How common are these complications?

Will I be able to pee while standing up?

What are the chances that I will need a revision with this type of surgery?

How long will the swelling last?

What happens during the time I spend at VGH?

What should I do if I experience a new symptom after I return home?

Can I take [medication/vitamin/supplement] before surgery?

When can I return to work?



other questions

SELF ADVOCACY IN HEALTH CARE: REFERRALS

The healthcare system is complex – this means that despite everyone’s best efforts, sometimes things will happen (like a technology glitch where a fax doesn’t go through) that could slow down or stall a referral to a specialist. Understanding how the referral process works and taking steps to self-advocate can help you to catch these potential mistakes and keep your referral moving forward.

Generally speaking, there are three main steps in a referral process:

1. Speak with your primary care provider about the referral or service you need,
2. Primary care provider sends referral (and referral package if needed) to the specialist (or centralized waitlist),
3. Specialist’s office (or centralized waitlist) will contact either you or your primary care provider with appointment details.

Here are some tips to help your referral move forward smoothly:

- ▼ Confirm the following with your primary care provider’s office:
 - Has the referral been sent?
 - What is the name of the clinic and physician I was referred to?
 - What is the clinic’s contact information?
 - Did you receive a confirmation that the referral was received?
 - Was a timeline provided for when I could expect to hear from the clinic?
 - Is there anything I need to do before my appointment with the clinic?
- ▼ Contact the specialist’s office (or centralized waitlist) and ask about the following:
 - Tip: Have your PHN ready before you call.
 - Was the referral received?
 - Was the referral complete or is anything missing?
 - Is there anything I need to do while I wait to hear about an appointment?
 - Is there a timeframe in which I could expect to hear from you by?

SELF ADVOCACY IN HEALTH CARE: REFERRALS

- ▼ Here are some other ways you can advocate for yourself:
 - ▼ If your contact information changes, contact the clinic(s) you were referred to and update them.
 - ▼ If a timeframe is given:
 - Put a reminder in your calendar
 - If that time passes and you haven't heard from the clinic, call and request an update for wait times
 - Repeat if needed
 - ▼ If timeframe is not given:
 - Ask if they can estimate a timeframe
 - If they are not able to, choose a timeframe that works for you to follow up (ie: 3 months)
 - Put a reminder in your calendar to call and check back about an appointment or wait times
 - ▼ If you leave a message but don't hear back
 - It is not uncommon for clinics to have a slow turn-around time for phone or email messages
 - Speak slowly and leave a message with your name (and the name on your BC Services Card if different), date of birth, PHN and phone number, with your request
 - If you do not hear back in 3-5 business days, try calling again
 - ▼ If you have difficulty following up with the specialist office at any point:
 - Ask your primary care provider for help with following up

For tips on how to communicate your needs and requests, check out Trans Rights BC's 'Self Advocacy Guide': transrightsbc.ca

Preparing for surgery



Please note!

This information does not replace the information you receive from your surgeon. If there are any differences, you should follow the information from your surgeon.

BUY, BORROW, AND DO

CLOTHING & BEDDING

- Loose comfortable clothing
- A bathrobe
- Easy-to-slip-on skirt, pants and socks
- Easy-to-slip-on shoes
- Two weeks' worth of clean clothes
- Pillows to keep you comfortable and supported
- Put fresh sheets on the bed
- A cane if you are having an ALT procedure
- Mesh underwear (5-7 pairs or 10 or 20?)
- Face Towels

FOOD & HOME

- Prepare and freeze a week's worth of meals
- Stock up on groceries

PERSONAL CARE (AS NEEDED)

- Get a hair cut
- Clip finger nails/toe nails/pedicure
- Pay your bills

WORK (IF RELEVANT)

- Apply for a leave of absence from work (usually 6-8 weeks)
- Apply for Medical Employment Insurance
- Create a return-to-work plan with your employer

MEDICAL CONSIDERATIONS

- Follow your surgeon's instructions about stopping medications
- Buy any post-op supplies your surgeon recommended (such as rolls of gauze)
- Stock up on your usual prescriptions and post-op medications
- Get Gravol or ginger to help with nausea (optional)
- Get prune juice or stool softeners to help prevent constipation (optional)
- Get the tests your surgeon requested (bloodwork, Electrocardiogram if you are 40+ or have heart problems, chest x-ray)
- Book post-op appointments with your GP or NP based on your surgeon's recommendations. Record on page 46 of this workbook.
- Consider filling out a Representation Agreement to name someone you trust to make healthcare decisions for you in case you are not able to make them yourself
- Register for **Fair PharmaCare** (you may be eligible to get your discharge prescriptions at a reduced cost with Fair PharmaCare Plan)
- Some providers charge fees for filling out paperwork (ie: for time off work or travel forms). Set aside some money (\$30-\$60) just in case it is needed

EMOTIONAL AND SPIRITUAL CONSIDERATIONS

- Find meaningful activities you can participate in during the healing process (e.g. mindfulness, spiritual gatherings, meditation, support groups, sharing time with others)
- Stock up on items you use for ceremonial practices (e.g. smudge or brushing items)
- Stock up on art supplies (e.g. beading, cedar weaving, watercolor paints, sketchbook, etc.)
- Make appointments for before and after surgery with your counsellor, mentor, elder, knowledge-holder or mental health worker, if applicable
- Connect with others who have had this surgery
- Make a list of things you are looking forward to after surgery
- Write yourself a letter with words of encouragement for when you feel down

PACK YOUR BAG

- Leave valuables, including jewelry, at home
- A place, such as a large ziplock bag, to keep the prescriptions and instructions you'll be given
- Photo ID, including BC Services Card
- Debit or credit card
- Plane tickets
- Shorts, pants, shoes & socks that easily slide on and off
- Phone and charger
- A copy of your Representative Agreement if you made one
- Toiletries
- Small hand mirror
- Inflatable donut (sometimes called a hemorrhoid cushion)
- A pen
- Your ERAS booklet if you are having surgery with the [GSP BC](#)
- Outer clothing (jackets, boots) appropriate for the season

Before you leave the hospital, check that you:

KNOW

- What to do or who to call if you have a problem
- How to care for your surgical site(s)
- How to manage your pain
- How to prevent constipation
- What activity levels and activity restrictions are recommended
- What equipment you might need at home (if any)
- When you need to make a follow-up appointment

HAVE

- All your personal belongings, including medicines
- Your house keys
- Your phone and charger
- Your new prescriptions
- Your discharge summary sheet, if you get one
- Any information booklets given to you
- Someone to stay with you the first few days at home for help

Arrange Help!

You'll need some support after surgery. If you find it hard to ask for help, you aren't alone. Many people have a hard time with this. Fortunately, lots of people like to help. It gives the helper a chance to feel good about themselves and a meaningful way to show they care. People often feel flattered and happy to pitch in, especially if you ask for help with something specific.

Keep in mind that if someone is not able to give the help you are asking for, they are not rejecting you. Thank them for being honest and then honour yourself for being so brave!



important:

You may want someone to travel with you. Keep in mind that this person's travel and accommodations will not be covered by MSP.

When having a major surgery, it's important to know that you aren't alone. You can use this worksheet to remember all the people and places you can turn to when you need support.

My circle of support

Spiritual Supports	
Community Services & Supports	
Health Care Workers	
Loved Ones	
Nature based Supports	
Fiancial Supports	
Online Supports	
Other	

Asking for help can take some practice. Here is an activity to help you get started.

- 1 Make a list of everything you need help with after surgery (eg. escort, meal preparation, child care, elder care, dishes, laundry, vacuuming, pet care, social visits, taking out the trash, rides to appointments, etc.).
- 2 Write down the names of people who have offered to help, or who you think would like to help. Don't forget the young people and elders in your life.
- 3 Match people based on their interests, strengths, time, flexibility and how comfortable you are with them.
- 4 Be courageous and ask for help. It's a good idea to schedule people for specific times. You may need support for up to six weeks after surgery.

DRAW A LINE TO MATCH TASKS TO PEOPLE

I could use some help with...

people I can ask

You can give the handout on the next page to people that are looking for ways to support you before and after surgery.

supporting someone having surgery

WAYS TO HELP BEFORE SURGERY:

- ▽ Offer rides to and from appointments
- ▽ Offer to take notes during appointments
- ▽ Pick up supplies
- ▽ Help prepare food and groceries that promote wound healing:
 - Protein: meat, nuts, soy**
 - Zinc: whole grains, spinach, nuts**
 - Vitamin A: carrots, broccoli, eggs**
 - Vitamin C: strawberries, peppers**
- ▽ Coordinate a schedule to help with meals, chores and visits after surgery (check out websites like MealTrain.com)
- ▽ Ask if there are any specific ways you can support them as they get ready for surgery
- ▽ Ask what it looks like when they feel low so you can recognize the signs.

WAYS TO HELP AFTER SURGERY:

- ▽ Help with errands (pharmacy, grocery, pet supplies)
- ▽ Offer rides to and from appointments, events or spiritual gathering spaces
- ▽ Help with household chores:
 - water plants
 - walk pets
 - change litter box
 - laundry
 - vacuum
 - mow or shovel
 - get groceries
 - cook or bring a meal
 - do dishes
 - clean
 - change sheets
 - take out garbage, recycling & compost
- ▽ Schedule visits (for 2 months after surgery):
 - watch a movie
 - have some coffee or tea
 - go for a car-ride together
 - make a little picnic
 - visit a park, botanical or community garden, museum, etc.
 - play videogames
 - have a phone or video-chat hangout
 - play a board game or card game
 - craft
 - walk around the block or neighbourhood
 - plan a short visit just to say hello
 - drop off groceries, a meal or a snack
- ▽ Ask if they need support with childcare or elder care
- ▽ Send an encouraging postcard (even if you live nearby)

It can be hard to ask for help, so check-in regularly to see how they are doing and what they need.

Make Travel Arrangements

If your surgery is taking place outside your home community, you will need to arrange transportation and accommodations.

See Trans Care BC's [website](#) for tips on booking transportation and accommodation (as needed). It includes information about some options that may be available to you if travel and accommodation costs are a barrier.

Take time to review the checklist that is right for your situation with your GP or NP and the people who will be supporting you after surgery.

TRANSPORTATION DETAILS:

To:

Date:

Time:

Travel details:

From:

Date:

Time:

Travel details:

Make a self-care plan

staying healthy before surgery

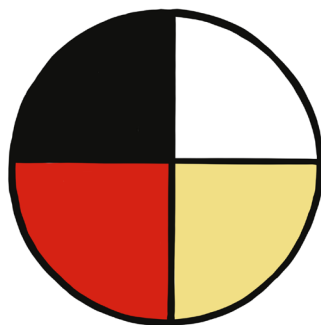
You can reduce complications from surgery by starting the healing process beforehand. Below are some steps you can take before surgery to help your body recover. For most of us, these strategies are easier said than done. Remember that self-care includes doing what is manageable and trying to love ourselves no matter what.

See Trans Care BC's [website](#) for tips on staying healthy before surgery.

A SELF-CARE ACTIVITY

You may find this activity helpful for reflecting on your current self-care practices, and planning ways to adapt or create practices that prepare you for surgery and the healing period that follows.

Dating back thousands of years, many First Nations and Native American nations developed and use Medicine Wheels to draw attention to the importance of nurturing and balancing our physical, emotional, mental, and spiritual well-being, throughout our life journey.



On the next few pages, we've outlined these elements of wellness for you to reflect upon, in order to support your preparation for surgery, and the healing period that follows. Feel free to choose shapes and categories that work for you. Instead of the squares we provide, you may want to use the medicine wheel, a tree, a rainbow, or use categories related to your environment, finances, or job.

self-care: before surgery

Use the boxes on the next page to write down self-care activities that you can do while you prepare for surgery. Here is an example of what could be in your boxes:

social

- Make a big dinner with my friends every Wednesday
- Do crafts, like zines, art projects, etc.
- Go to the movies

spiritual

- Visit temple
- Journal
- Attend sweats
- Write myself encouraging notes to read after surgery
- Meditate while sitting

emotional

- Clean my house Friday night
- Go to counselling
- Play guitar

physical

- Have a hot bath
- Swim
- Hike
- Have a massage

self-care: before surgery

social

emotional

spiritual

physical

self-care: after surgery

Use the boxes on the next page to write down self-care activities that you can do while you are healing from surgery. Be sure to keep activity restrictions in mind. Here is an example of what could be in your boxes:

social

- Book social visits in advance
- Go for a picnic
- Go out for tea/meals with friends
- Do crafts, like zines, art projects, etc.
- Watch movies with friends
- Phone & video chat hangouts

emotional

- Go to counselling
- Read notes I wrote to myself before surgery
- Listen to music, look at art, light candles
- Lie outside & watch clouds
- Ask for help with chores & errands

spiritual

- Visit temple (someone drives me)
- Journal
- Speak with elders
- Smudge
- Sit quietly in nature
- Meditate while reclining or lying down

physical

- Use a hot cloth on my face, neck and shoulders
- Eat meals I made in advance
- Go for a walk every day
- Ask a friend to take me fishing (& carry supplies)
- Diffuse essential oils

self-care: after surgery

social

emotional

spiritual

physical

MY CIRCLE OF INFLUENCE

Surgical results are impacted by many factors. Some factors are within our control, or inside of our circle of influence. Other factors are beyond our control, or outside of our circle of influence.

Being aware of what's inside and outside of our circle of influence can help us be more mindful about what we focus on and how we use our time and energy.

Here's a list of factors that can impact surgical results. Circle any that might impact your surgical results.

- ▼ Genetics
- ▼ Communicating my hopes or goals for surgery
- ▼ Current shape and size of genitalia
- ▼ Having a disease, mental health, or addiction issue
- ▼ Engagement with treatment for managing a disease, mental health or addiction issue
- ▼ Wait times for assessments
- ▼ Choice of surgeon
- ▼ Expressing my questions and concerns
- ▼ Asking for a second opinion
- ▼ Wait times for surgeries
- ▼ Sleep
- ▼ Reaching out for support
- ▼ Location of my surgery
- ▼ The amount of money I have for surgery-related expenses
- ▼ Requesting financial assistance
- ▼ Cultural competency of my health care providers
- ▼ Ability to provide feedback or submit complaints about my treatment
- ▼ Hygiene
- ▼ Nutrition
- ▼ Procedures a surgeon is willing to perform
- ▼ Rest
- ▼ Physical activity
- ▼ Following post-op instructions
- ▼ Having post-op complications

Look at the factors you've circled. Are they inside or outside of your circle of influence? Sort them into the circles.

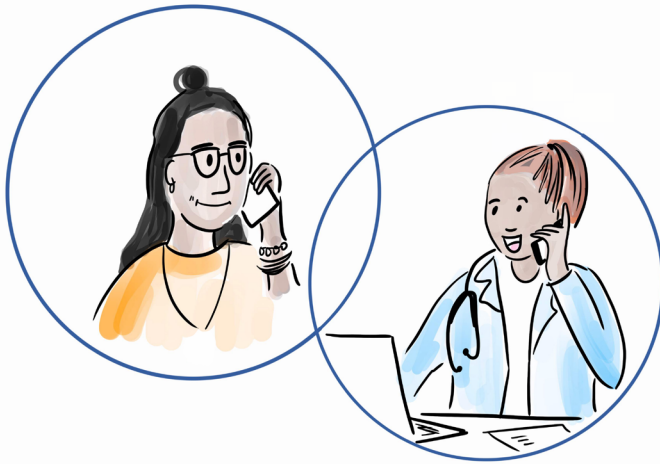
me

my circle of influence

beyond my influence

know what to expect the days before your surgery

It can be helpful to have an idea of what to expect on the days before your surgery. You can ask your surgical team about this and speak with others who have had this procedure.



Trans Care BC's [website](#) also provides some descriptions about what to anticipate during the days before your surgery.



post-surgical care

it is important to follow your surgeon's instructions for aftercare.

The information below does not replace the information you receive from your surgeon. If there are any differences, you should follow your surgeon's instructions.

1. know what to expect after surgery

Each surgical centre is different and your surgical team will provide you with more detailed information about what to expect when you wake up from surgery. See Trans Care BC's [website](#) for some general descriptions of what generally happens when you wake up from phalloplasty, metoidioplasty and erectile tissue release surgery. This information is provided to help you start imagining what the hospital experience could be like. You will be given more detailed and up-to-date information once you have your surgical consult and meet your surgical team.

2. Take good care of your body

It is important to follow your surgeon's post-operative instructions.

The information below is a brief summary and does not replace the information you receive from your surgeon. If there are any differences, you should follow your surgeon's instructions.

Everybody recovers at a different pace and it can take several months before you feel like you have all your energy back.

CARING FOR YOUR INCISIONS

Follow your surgeon's instructions for how to care for your incisions and donor sites. If you have any questions, don't be shy to ask. This is a new skill to learn and your surgical team wants to support you to feel comfortable and knowledgeable.

Generally speaking, you should contact your surgeon (or go to the Emergency Room) if you experience the following:

- ▽ Increased swelling in the penis
- ▽ Worsening or spreading redness around your incisions
- ▽ Your incisions become red, swollen or hot to the touch
- ▽ Foul-smelling yellow or green discharge
- ▽ Cloudy, smelly urine
- ▽ Chills or a fever over 38.5 degrees Celsius (101.3 Fahrenheit) by mouth
- ▽ An increase in pain or pain that does not go away with pain medication
- ▽ Persistent severe diarrhea

TAKE CARE OF YOUR CATHETER

If you had urethral lengthening, you will have a catheter in place to allow urine to drain from your bladder while your new urethra heals. Many people say that having a catheter in place for a prolonged period of time is one of the most challenging aspects of the overall experience. Here are some general tips that can make having a catheter a bit more comfortable:

- ▽ Drink enough water to have clear, light yellow-colored urine. This will likely mean about eight to ten 8-ounce glasses of fluid every day. This will help to reduce bladder spasms and dilute your urine.
- ▽ Avoid spicy, acidic or citrus foods
- ▽ Avoid alcohol
- ▽ Avoid caffeine
- ▽ Follow any other advice from your surgical team

MANAGE PAIN

It is important to manage your pain well so that you can sleep through the night, slowly re-start your usual daily activities, and follow the aftercare instructions from your surgeon.

- ▽ Stick to a pain medication schedule. Don't wait to take medication once the pain is overwhelming, as your pain will be harder to control.
- ▽ You may wish to use the pain medication tracking chart on page 40.
- ▽ Avoid rubbing or scratching your incisions as they heal. Itchiness is a normal part of the healing process.

WASH HANDS FREQUENTLY

Always wash your hands with soap before and after touching your genitals. This will help prevent infection.

GET LOTS OF REST

You may feel very tired after your surgery. Plan to do less activity during the day and allow yourself to nap. Your body needs extra sleep while you are healing. Relaxation techniques can help your body heal from surgery, too. They reduce the effects of stress on your body, letting your body's systems focus on healing.

Many people share that they were surprised by how exhausted and weak they felt after lower surgery. This is a very complex surgery and it can take 6-8 weeks to recover. Remember that your body does its healing while you are resting. Take naps or rest breaks during the day and trust that you will slowly build up your energy and strength again.



WALK

Walking helps to relieve pain, improve blood flow and prevent blood clots. It can also be good for your mood. However, it is important to be gentle and not push yourself. Your surgical team will provide you with instructions about when and how you can start walking. Begin with short walks and slowly increase how far you walk. Many people find that using a walker or a cane at first is helpful. If walking is not an option for you, speak with your health care providers about alternative options, like leg and deep breathing or coughing exercises.

ENJOY FOODS THAT PROMOTE WOUND HEALING

Look for foods with protein (meats, eggs and nuts); zinc (whole grains, spinach, nuts); vitamin A (carrots, broccoli, eggs); & Vitamin C (strawberries, peppers). Your body will need extra calories, proteins and nutrients to heal. If you have questions, you may find it helpful to speak with a dietician. You can contact a dietician by calling 8-1-1 (Health Link BC).

deep breathing exercises

- 1 Sit or lay comfortably & rest your hands on your ribs.
- 2 Take a deep breath in through your nose: imagine filling the bottom of your lungs first, then the middle, then the top. You might feel your ribs push against your hands.
- 3 Hold your breath while you say in your head, “This helps my body heal” or any meaningful word, phrase, sound or count of 3.
- 4 Blow the air out slowly from your mouth, including pushing the last bit of air out from the bottom of your lungs. Pursing your lips can help you control your breath.
- 5 Repeat this 5 more times.

DRINK LOTS OF WATER

It is important to drink lots of water (2-3 litres/day) and empty your bladder regularly. This helps to prevent urinary tract infections.

MANAGE CONSTIPATION

Constipation is a common side-effect of pain medication. If you experience this, try increasing the number of walks you take, drinking more water, eating more fruits and vegetables, eating prunes, or taking a stool softener. Get protein from food sources other than dairy. If constipation continues for several days, speak to your healthcare provider.

AVOID ALCOHOL AND TOBACCO

Avoid consuming alcohol and tobacco. If you have any questions about this, speak with your surgical team.

ATTEND YOUR CHECK-UPS

GSP BC

You will be given your post-operative follow up plan before you go home. If you traveled to Vancouver, you will be expected to stay in the Lower Mainland for 3-4 weeks after discharge so you can attend in-person follow up appointments with your surgical team. All your follow up care will be completed by the surgical team at **GSP BC**.

You may want to arrange to see your NP or GP within a week of going home as well. They will review your post-operative baseline and see how you're feeling.

3. Beat the post-surgery blues

The after-effects of medications, surgery and the activity limitations required during recovery can lead to something called 'post-operative blues.' This can include feelings of low mood, grief, loss of appetite, difficulty concentrating and even self-doubt. This is a temporary and normal part of the healing period. Here are some suggestions for making it easier.



- ▽ Put your self-care plan from page X into action
- ▽ Before surgery, ask yourself:
 - What does it look like when I start to feel low?
 - How will people know that I'm feeling that way?
 - Who can I share this information with in advance?
- ▽ Make lists of things you love and reflect on how you can experience more of what you love while you heal from surgery (eg. lists of activities that bring you joy, ways that you connect with others, ways that you show yourself love, foods you love to eat, smells that calm & refresh you, sounds that inspire you, textures that you love to feel on your skin).
- ▽ Write letters expressing thanks to people who helped you during surgery.
- ▽ Keep a journal.



4. Mindfully return to usual activities

Ask your surgeon when you can resume your usual activities. Common recommendations are listed below.

DRIVING

Avoid driving until you are no longer taking any opiate pain medication or feeling distracted by pain. Only drive if you are able to:

- ▽ Put pressure on the break quickly and without pain
- ▽ Safely do a shoulder check
- ▽ Wear your seat belt

Start with short trips so as not to put too much pressure on your genitals. If you drive long distances, take frequent stops & pee often.

LIFTING, PULLING AND PUSHING

Avoid lifting objects over ten pounds until 4 to 6 weeks after surgery, including carrying children, pets and groceries.

WORK

Plan to take at least 6-8 weeks off work, or longer, depending on type of work and how you are healing.

EXERCISE

A general rule is to wait until 6-8 weeks after your surgery before participating in intense physical activity. Speak with your surgeon about how you can restart any activity, including exercise.

REST

Rest is important for your recovery. Your body does its healing while you rest. Take naps or rest breaks during the day.

SEXUAL ACTIVITY

Lots of people have questions about returning to sexual activity after surgery. This can include, but is not limited to, masturbation and sex with other people. As with all other activities, speak with your surgeon about when it is safe for you to be sexually active after surgery.

Exploring how your body feels and responds after surgery is an important step in your healing process. It stimulates the nerve endings,

helping them heal and reconnect, and allows you to begin the process of finding where and how you enjoy being touched. It also helps your brain to create a new “map” of your body.

FIRST 10 DAYS AFTER SURGERY

Avoid activities that can lead to elevated blood pressure and the risk of internal bleeding (hematoma)

This includes:

- ▽ Having any kind of sex (alone or with a partner).
- ▽ Having an orgasm.
- ▽ Other activities that create risks for bleeding, increase the risk of discomfort or pain or that may disrupt your anatomy while it heals.

8 WEEKS AFTER SURGERY

- ▽ Your genitals will be numb at this time and your incisions are still vulnerable. It is important to follow all the post-operative instructions and be very gentle with your penis.
- ▽ Do not place anything inside your genitals or rectum beyond what has been recommended by your surgeon(s).
- ▽ See Trans Care BC’s [website](#) for some suggested mindfulness activities.

12 WEEKS AFTER SURGERY

If you have had metoidioplasty or erectile tissue release surgery, your surgeons will give you customized information about when it is safe to start using a pump for getting erections.

Once your surgical team tells you that you’re ready to use your genitals for sexual activity, here is some general information for returning to sexual activity after surgery:

- ▽ Follow your surgeons’ recommendations regarding return to sexual and other physical activities.
- ▽ Take time to learn your body’s needs and preferences.
- ▽ Ease back into your sexual activities.

- ▽ You may find your sex drive is different from before surgery. It might be lower during your healing period or you might find it's higher. Everyone is different. It's important to know that changes to your sex drive are a normal part of your healing journey and will balance out over time.
- ▽ Do not place anything inside your genitals or rectum other than what has been recommended by your surgeon(s).
- ▽ You may find that your endurance or tolerance for different activities and sensations is affected by your surgery or pain medications.
- ▽ Stop or take a break if you feel pain, or you feel anxious or scared.
- ▽ Pay attention to whether your swelling or tenderness increases after sex. If so, you may want to wait until you are a bit further along in your healing before having sex again.
- ▽ Pee before and after sexual activity to reduce the chances of urinary tract infections.
- ▽ Avoid activities that can lead to internal or external bleeding, compromised blood flow, and injury to nerves and healing tissues. This includes:
 - ▼ tiring and repetitive movements
 - ▼ activities that could affect (stretch/tear) incisions (inner or outer) until your surgeon confirms that your incisions have healed
 - ▼ sudden or vigorous movements
 - ▼ lifting more than 10-15 lbs
 - ▼ strenuous activity (including sex)
 - ▼ bondage, suspension, pinching, squeezing, vigorous massage
 - ▼ flogging, spanking, and paddling buttocks, thighs and other non-genital areas
 - ▼ very hot and very cold temperatures until nerves have fully healed
- ▽ It can be helpful to speak with your surgeons before starting any kink activities in the months after surgery. Your surgeon will likely welcome these questions. If you are shy, you can be creative and ask about returning to full contact sports, swinging a tennis racket, receiving vigorous massage, riding a horse, using a heating pad or wearing restrictive or body-shaping clothing.

a note on safer sex and STI screening

Many people find that they are better able to relax and enjoy sex with others if they have spoken with their partner(s) about sexual health and STI screening.

It is possible to get sexually transmitted infections (STIs) after phalloplasty, metoidioplasty or erectile tissue release. The following recommendations can help reduce the chance of getting an STI. These recommendations are general and apply to anyone, whether they have had a genital surgery or not. Not every recommendation will apply to you, but they are helpful to be aware of:

- ▼ Wear a condom during sex.
- ▼ Make a habit of regularly checking that the condom has not torn or fallen off. The shaft of your penis will likely be numb for the first 12 months after surgery, so you may not feel it if this happens.
- ▼ Ask your partner(s) to wear condoms during receptive sex (including genital and anal sex).
- ▼ Ask your partners to have STI screening, including chlamydia, gonorrhoea, HIV and syphilis.
- ▼ Avoid having genital sex (or use condoms) if you have genital irritation or inflammation.
- ▼ Speak with your GP or NP about how often you would benefit from getting STI screening (this is based on your sexual activities).
- ▼ Learn about HIV Pre-Exposure Prophylaxis (HIV PrEP) and speak with your GP or NP if you think this might be a good option for you.

surgeon recommendations

Think of activities that you would like to ask your surgeon about. Here is a list of suggestions:

Going to work

Driving a car

Riding a bike

Swimming

Participating in a sweat

Having a sauna

Lifting more than 10 pounds

Exercising

Sexual activity

Rituals and ceremonies

Dancing

Other

reflection activities

what are my surgical options?

There are three main genital surgeries: Erectile Tissue Release, Metoidioplasty, and Phalloplasty. With each surgery, there may be additional options. These options are shown in the chart below. Circle any of the options you are considering.

Your surgeon will tell you what's possible for your body, as well as what procedures they recommend. What your surgeon tells you may not be what you had hoped for. When this happens, you may want to reach out to your support people for help to work through your disappointment and to come up with a new plan. You can also revisit the conversation with your surgeon to understand your options.

	ERECTICLE TISSUE RELEASE	METOIDIOPLASTY	PHALLOPLASTY
Length	+ 2-4 cm	+ 2-4 cm	~ 13cm
Scrotum	✓ option	✓ option	✓
Testicular Implants	✓ option	✓ option	✓
Close Font Hole (vaginectomy)	✓ option	✓ option	✓ option
Additional Penis Girth	-	✓ option	✓
Urethral Lengthing	-	✓ option	✓ option
Implant for Errections?	-	-	✓ option

what matters most to me?

Lots of factors can influence your decisions about genital surgery. Look at the list below. Sort them into these three groups. Add any factors that are missing.

A longer penis

A scrotum & testicles

Ability to get erections

Number of surgeries

Recovery time

Keeping costs low

Location of surgeon

Ability to have penetrative sex

Surgeons' years of experience

Having more girth

Keeping my front hole

Ability to pee standing up

Minimizing risks & complications

Keeping sensation

Appearance or location of scars

Appearance of my penis

Ability to have receptive sex

very important to me

somewhat important to me

not important to me

genital surgery comparison

	ERECTICLE		
	TISSUE RELEASE	METOIDIOPLASTY	PHALLOPLASTY
Length	A penis that is 2-4cm longer	A penis that is 2-4cm longer	A penis that is about 13cm long
Girth	No change	A thicker penis	A thicker penis
Erections	Ability to get an erection that stands away from the body	Ability to get an erection that stands away from the body	Ability to get an erection with an implant or external device
Penetrative Sex	No significant change	No significant Change	Ability to have penetrative sex (if you get a penile implant or use an external device)
Receptive Sex in Front Hole	Possible unless you have a vaginectomy	Possible unless you have a vaginectomy	Not typically possible
Peeing	No change	Possible ability to stand to pee if you get urethral lengthening. Depends on if you have complications	Possible ability to stand to pee if you get urethral lengthening. Depends on if you have complications
Risks	Risk of complications associated with major surgery (Negative reaction to anesthesia, Abscess formation, Decreased sensation, Hematoma, Scarring, Seroma) Dissatisfaction with size and shape		

ERECTICLE

	TISSUE RELEASE	METOIDIOPLASTY	PHALLOPLASTY
Risks (cont.)	-	<ul style="list-style-type: none"> ▼ Implant complications ▼ Numbness and reduced function at donor site ▼ Tissue transfer complications (rejection, stitches opening) ▼ Likely urological complications (fistula, stricture, bladder spasms) ▼ Infection (bladder, urethra, penile tissue, donor site) 	
Number of surgeries typically required	One surgery or two (if you opt for testicular implants)	One to three surgeries (if you opt for testicular implants and urethral lengthening) or more if revisions are needed	Three surgeries (if you opt for testicular implants and urethral lengthening) or more if revisions are needed
Recovery Time	About 4 to 6 weeks	About 6 to 8 weeks	Variable Generally 3 to 4 months for the first surgery, and less for following surgeries unless you have complications
Scars	Minimal	Minimal	Scars to donor sites, skin graft and at penile incisions
Possible Costs	<ul style="list-style-type: none"> ▼ Missing work for a period of time ▼ Travel and accommodation costs 	<ul style="list-style-type: none"> ▼ Missing work for multiple periods of time ▼ Travel and accommodation costs 	<ul style="list-style-type: none"> ▼ Missing work for multiple periods of time ▼ Travel and accommodation costs

visualizing life after surgery

When you visualize, you make a picture in your mind of how something might look and feel. Visualizing can help with thinking through decisions about surgeries. Imagine how you might feel for each of the procedures you are considering. Imagine what life might be like. How do the options compare?

Here are some scenarios you may want to visualize for each of the procedures you're considering:

- ▽ The travel required
- ▽ Visits to the surgical centre
- ▽ Recovering from surgery in the first 3 months
- ▽ The size and shape of my penis as it heals
- ▽ Having complications related to peeing as I heal
- ▽ Managing a catheter during healing
- ▽ Having complications related to peeing that don't resolve on their own
- ▽ Managing a long-term catheter due to complications from urethral lengthening
- ▽ Numbness in my donor hand or wrist
- ▽ Difficulty walking during recovery
- ▽ Having less energy during recovery
- ▽ Feeling satisfied with the size and shape of my penis
- ▽ Feeling dissatisfied with the size and shape of my penis
- ▽ Needing unexpected revision surgeries
- ▽ Managing the post-operative blues
- ▽ How I'll feel in my underwear
- ▽ How I'll feel naked
- ▽ Using washrooms
- ▽ Being in changerooms
- ▽ Being physically active (running, riding a bike, playing sports, etc.)
- ▽ Feeling aroused
- ▽ Masturbating
- ▽ Being sexually active with others
- ▽ Adjusting a penile implant or external device

After visualizing different scenarios and comparing them, which procedures feel right for you?

practice breathwork

“Connection breath” is an activity you may want to practice as you prepare for surgery.

There are four groups of muscles that protect our backs and internal organs. These muscles are especially important after surgery when we do things like bending down to put on our shoes. They also help prevent us from leaking urine when we cough, sneeze or exercise.

These muscles are the:

- ▽ diaphragm,
- ▽ abdominal muscles,
- ▽ back muscles along the spine
- ▽ pelvic floor muscles

For many of us, the muscles work but they are not well coordinated. Gentle activities can help them work together more efficiently. Doing these practice breathwork exercises on a daily basis is an excellent way to prepare for surgeries that affect these muscle groups. They help reduce back and pelvic pain and release tension.

“Connection Breath” is an exercise that helps connect these four muscle groups:

- ▽ Lie on your back with your knees bent and feet on the floor.
- ▽ Place your Left hand on the side of your ribcage and your Right hand low on your belly, below your belly button.
- ▽ Inhale and relax:
 - ▶ Imagine the air inflating your belly and pelvic floor
 - ▶ Breathe in so that both your hands feel movement - your ribs expand sideways and your belly expands upwards
 - ▶ Imagine your pelvic floor muscles relaxing
 - ▶ It may take some practice until your ribs and your belly can expand at the same time. You can start with a long, slow breath that starts by inflating your chest and then try to add belly breathing partway through the inhalation

- ▽ Exhale and engage your muscles:
 - ▽ Blow the air out through your lips (like you are blowing out a candle)
 - ▽ While you breathe out, let your belly and rib cage come down and in slightly
 - ▽ While you are still exhaling, gently contract your deep pelvic floor muscles, which feels like you are trying to stop yourself from urinating or passing gas.
 - ▽ Your Right hand may feel a slight increase in tension in your lower abdominal muscles. If you don't feel this at first, keep practising and see if you can feel it over time.
- ▽ Try to do this for 10 breaths in a row, several times a day

For most people, the trickiest part of practising Connection Breath is developing a new habit. This includes remembering to do it at a time when you can actually do it. The best solution for this is to build a new habit - something that you just do every day without having to think about it. And the easiest way to build a new habit is to connect the new activity you want to do to something else that you already do, every day.

naming my feelings

Making decisions around genital surgery can bring up all kinds of emotions. Feelings are information from your heart and your body that can help you decide what to do. Naming emotions can make them feel less overwhelming. Talking to other people about what you're feeling can also bring relief.

Reflect on the emotions you're experiencing as you explore genital surgeries.

Anger	Fear/Scared	Judgment
Anxious	Frustrated	Lonely
Belonging	Gratitude	Love
Blame	Grief	Overwhelmed
Curious	Guilt	Regret
Disappointed	Happy	Sad
Disgust	Humiliation	Shame
Embarrassment	Hurt	Surprised
Empathy	Jealous	Vulnerable
Excited	Joy	Worried

This list is based on the List of Core Emotions by Brene Brown (2020)
Available from: <https://brenebrown.com/downloads/>

Pick a feeling that's hard for you. Consider the following questions in relation to genital surgery.

When I feel _____:

- ▼ Where am I physically feeling this?

- ▼ Is there a thought that's constantly looping through my mind?

- ▼ What's the first thing I want to do when I feel this way?

- ▼ How can I show myself empathy and compassion when I feel this emotion?

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