

TRANSGENDER SURGICAL PROGRAM

AT MGH

WELCOME

Table of Contents

Welcome	3
Who We Are	3
Required Steps	4
Checklist.....	5
Vaginoplasty (full Depth) Overview	6
Preparing for vaginoplasty (full Depth)	7
What You Should Bring to the Hospital.....	7
What the Hospital Will Provide to You	7
What You Should Have Ready at Home.....	7
Post-Operative Instructions for Vaginoplasty (full Depth)	8
Hospital Stay	8
Dressings, Packing, and Wound Care	8
Movement and Use.....	9
Vaginal Irrigation	9
Mental Health.....	10
Pain Control and Medication	10
Follow-up Routine Care	10
Smoking Cessation	10
Questions and Concerns	11
Hair Removal	12

WELCOME

At the Massachusetts General Hospital, the Division of Plastic and Reconstructive Surgery works with the Transgender Health Program to provide gender-affirming surgical care. Our program offers several gender-affirming surgical procedures, and the Transgender Health Program also offers primary care services and gender-affirming hormone therapy. We will work with you to develop a safe and comprehensive surgical plan that aligns with your goals. Please keep in mind that, depending on your procedure, the process can be lengthy. We ask for your patience while we work with you to ensure that, together, we complete all pre-operative and insurance-related requirements. You can contact the MGH Transgender Health Program at 617-643-7210. If you have questions regarding the surgical process, you may talk to us on the phone or send us a message via patient gateway. We will help you navigate through this process and look forward to meeting and working with you!

WHO WE ARE

Clinical Staff

Leah, RN – Dedicated Gender-Affirming Surgery Program Surgical Nurse

Candace Nguyen – Surgical Program Coordinator

Heather Parker, NP – Nurse Practitioner with Plastics and Reconstructive Surgery

Surgeons

William “Jay” Austen, Jr. MD, FACS - Top Surgery

Branko Bojovic, MD - Facial Feminization, Facial Masculinization

Eric Fjeld – Scheduler for Dr. Bojovic

Curtis Cetrulo, MD - Phalloplasty, Metoidioplasty, Top Surgery

Ariella Bernkopf – Scheduler for Dr. Cetrulo

Richard Ehrlichman, MD - Top Surgery

Mary Little – Scheduler for Dr. Ehrlichman

Milena Weinstein, MD –Vaginoplasty, Vaginectomy, Hysterectomy

Jonathan Winograd, MD - Vaginoplasty, Top surgery

Jenn McGonagle – Scheduler for Dr. Winograd

Anton Wintner, MD – Phalloplasty, Orchiectomy, Vaginoplasty

REQUIRED STEPS

1. Consultation with the Transgender Health Program

Before we schedule a consult with your surgeons, we have new patients meet with a general provider in the Transgender Health Program. In this visit, the doctor will ask about your medical and surgical history, answer any questions you may have about the surgical process, and ensure that documentation, such as letters of support, are in place. This visit helps us ensure that no issues arise farther down the line, either medically or with your health insurance. If the doctor identifies any concerns, they may refer you for testing or to another specialist or have your follow-up with your primary care provider. They can also connect you to resources you may need, such as letter writing or smoking cessation.

2. Letters of Support

Before proceeding with a surgical consult, we need two letters of support written by licensed behavioral health providers (Therapists, social workers, psychiatrists, psychologists, etc.) to be on file per WPATH standards of care and insurance requirements. You can fax us your letters at 617-724-7126 or email them to us at MGHTransHealth@mgh.harvard.edu. If you have patient gateway, you can also send letters to us that way. If your letter-writers have any questions about writing these letters, let us know – we can make sure the letters will meet all requirements. Please also let us know if you need help finding a provider to write a letter for you – we may be able to help.

3. Surgical Consultation

Once a Transgender Health Program provider has determined you're ready for a surgical consultation and we've received your letter(s) of support, the Transgender Health Program will refer you to the surgeons' office. Then they will reach out to schedule an appointment. You will likely meet with multiple surgeons, including from Urology and Gynecology.

4. Hair Removal

To prevent complications, genital hair removal, via laser hair removal or electrolysis, is mandatory prior to full depth vaginoplasty. The process can take several months, so you may want to begin before your surgical consult. Make sure to confirm if your insurance plan will cover or reimburse these services and what that process will require for your respective insurance company. Let us know when you've completed the genital hair removal requirement and if you have any questions or need any documentation from us.

5. Schedule Surgery Date

Once you and your surgical team have developed a safe surgical plan that aligns with your goals and you've completed all other requirements, it is time to schedule an OR date! It is important to note that due to the complexity of this type of surgery, we will ensure you are medically stable and the whole team agrees with a safe and detailed plan before proceeding with surgery.

CHECKLIST

- ☐ One year on Hormone Replacement Therapy
- ☐ Pre-surgical assessment with the Transgender Health Program (___/___/___)
- ☐ Two letters of support from mental health providers on file
(#1 ___/___/___) (#2 ___/___/___)
- ☐ Once confirmed, surgical consult
 - A. Plastics (___/___/___)
 - B. Urology (___/___/___)
 - C. Gynecology (___/___/___)
- ☐ Hair removal completed and plastic surgery department notified (___/___/___)
- ☐ Schedule surgery date
- ☐ Pre-operative phone call and COVID test (___/___/___)
- ☐ Surgery! (___/___/___)
- ☐ Post-operative visit with the surgical team (___/___/___)

VAGINOPLASTY (FULL DEPTH) OVERVIEW

Full depth vaginoplasty involves rearranging the current tissue in the genital area to create the vulva (clitoris, labia majora, labia minora) and vaginal canal. The urethra is shortened and repositioned just above the new vaginal canal. Our team will use the scrotal skin to make the labia and construct the clitoris using a portion of the glans. Then surgeons will use the skin of the penis to make the new vagina, which sits between the prostate and the rectum. Once the team has created the new vagina, they will place surgical packing to keep the vaginal cavity open while it is healing. The surgery typically lasts 5-6 hours and is done in one stage under general anesthesia. You will have three surgeons (Urology, Gynecology, and Plastic Surgery) assisting with the operation. You will be in the hospital for several days after surgery. For five days, you will have packing in your vagina, a catheter in your bladder, and two JP drains, one from your abdomen and one from your pelvis. Your care team will remove the catheter and packing on the fifth day, and you will begin vaginal dilation with our nurse. You will most likely leave the hospital on day 5, provided you are medically ready. You will need to take at least a month off work for recovery. At home, it will be important to have someone with you to help you take care of chores around the house and grocery shopping for the first few weeks. You will need to adhere to a frequent dilation schedule to prevent stenosis (narrowing or shortening) of your new vaginal canal. We will see you periodically in the plastic surgery clinic to follow up on your recovery process. This packet includes general post-operative instructions to give you an idea of what to expect, but please remember to always listen to your surgeon's specific instructions.

PREPARING FOR VAGINOPLASTY (FULL DEPTH)

What You Should Bring to the Hospital

- Items to keep you entertained (Books, iPad, Laptop, etc.)
- Large comfortable clothing to change into on the day of discharge
- Handheld mirror

What the Hospital Will Provide to You

- Set of dilators
- Water-based lubricant
- Sanitary pads
- Peri bottle for cleansing
- Mesh underwear
- Bacitracin
- Gauze and tape
- Prescription for pain medication and possibly antibiotics

What You Should Have Ready at Home

- Sanitary pads
- Additional water-based lubricant
- Unscented antibacterial soap
- Disposable irrigation bottles (AKA “douche”)
- Mild unscented soap for showering
- Comfortable, large cotton underwear
- Washcloths for cleansing
- Wet wipes
- Protective pads for bed
- Donut cushion or another similar pillow to sit on

POST-OPERATIVE INSTRUCTIONS FOR VAGINOPLASTY (FULL DEPTH)

Hospital Stay

- For the first few days, you will be able to move around the room slowly as you feel able.
- You will have a catheter in your bladder which will be removed five days after surgery.
- You will have vaginal packing, which your care team will remove on day five. Once removed, you will begin walking around more.
- You will have two drains (JP drains), one draining from your abdomen and one from your pelvis. Your care team will remove the drains before they discharge you from the hospital on post-op day 3, 4, or 5.
- You will be given a set of vaginal dilators while in the hospital. A nurse will go over dilation with you in your hospital room after they've removed the packing.
- You will have a compression device on your lower legs while in bed to help prevent blood clots.
- You will receive antibiotics, pain medicine, and blood thinners during your hospitalization. You will be given prescriptions for pain medication upon discharge.

Dressings, Packing, and Wound Care

- You will have light gauze and dressing pads covering your incisions.
- You will replace the dressing pads or feminine pads as needed. Please keep them clean and dry. A small amount of bloody or white drainage is normal.
- After the drains come out, please apply a thin layer of bacitracin and cover with gauze until there is no more drainage.
- You may shower as soon as you get home unless your surgeon instructed you not to. Please direct the clean stream of water directly onto your incisions. You may not take any baths, go in the hot tub or pool, or submerge in water until all your incisions have fully healed, usually six weeks after surgery. Please shower daily.
- Take care to keep incisions as clean and dry as possible. After showering, pat your incisions dry or allow them to air dry.

MGH Transgender Surgical Program

Vaginoplasty (Full Depth)

Movement and Use

- No heavy lifting or strenuous activities for six weeks.
- Walking is encouraged and should be started once you get home.
- Vaginal intercourse usually may begin 8-10 weeks after surgery, once cleared by your surgeon.
- Walk for 10 minutes four times a day, even if it's just up and down the hallway. Listen to your body and your pain level.
- For the first few weeks, you may walk slightly hunched over with a shuffling gait, which will improve with time.
- It may be helpful to purchase a Roho cushion or sit on a pillow for the first few weeks.

Vaginal Irrigation

- Once home, you should begin vaginal irrigation and perform it daily for one week and more frequently, as needed. In the first few weeks after surgery, you will notice yellowish-brown and sometimes bloody discharge and other debris in the discharge, including some sutures. That is normal. You should expect the amount and consistency to get lighter over time.
- Over the next 2-3 weeks, you may perform vaginal irrigation 2-3 times per week or more frequently as needed.
- After three weeks, you will only do irrigation on an as-needed basis.
- Irrigation Instructions (typically performed in the shower or squatting over the toilet):
 1. Place a drop of antibacterial soap in the irrigation bottle along with warm tap water.
 2. Place the tip of the irrigation bottle a couple of inches into the vaginal canal and gently squeeze the bottle. Vaginal irrigation may be difficult during the first few weeks. Until swelling improves, you can gently cleanse the external genitalia if insertion is not possible.
 3. Repeat the is process with clear warm water to remove soap residue.
- Wash the irrigation bottle thoroughly with antibacterial soap and warm water before and after each use.

MGH Transgender Surgical Program

Vaginoplasty (Full Depth)

Mental Health

- It is difficult to predict the way that surgery will affect an individual's mental health.
- It can take time for you to adjust to your new body after surgery, which may lead to some emotional distress and confusing feelings.
- It is important to have a support system in place, consisting of people who are aware that you are undergoing surgery, including any mental health providers you may be working with.
- While you are in the hospital, a social worker may come speak with you to address any psychosocial needs that may arise.
- If you experience a decline in your mental health or any emotional distress throughout the process, please let your surgeon know as we may be able to connect you with resources within the community.

Pain Control and Medication

- Pain is most intense in the first 2-3 days after surgery. Your care team will help manage your pain with an epidural and oral pain medications. The pain team may see you in the hospital.
- While at home, use pain medication as necessary. Do not take pain medications on an empty stomach, as this can cause nausea and vomiting. We recommend using Tylenol along with your prescription pain medications.
- Narcotic medications often make people constipated. Please take a stool softener (Colace) while taking narcotic medications. You may also use other over-the-counter stool softeners. **DO NOT USE ANY LAXATIVES** unless approved by your surgeon first.
- Do not drive or operate machinery while taking prescription pain medication.
- Unless approved by your surgeons, do not take Ibuprofen, Aspirin, Aleve, Naproxen, or Motrin for two weeks after surgery, as it may lead to bleeding.

Follow-up Routine Care

- We will see you in the plastic surgery clinic for your follow-up appointments. Unless otherwise specified, these typically occur one week, one month, three months, and six months after surgery. After that, we will likely see you yearly for follow-up appointments.
- Your Primary Care Provider should do yearly prostate exams through the Neo-Vagina.
- We recommend annual pelvic exams.

Smoking Cessation

- Nicotine and cigarette smoking interfere with wound healing. Secondhand smoke exposure also exposes you to nicotine. Therefore, we highly recommended that you remain nicotine/smoke-free for six months after surgery.

MGH Transgender Surgical Program

Vaginoplasty (Full Depth)

Questions and Concerns

- If you experience fever greater than 100.4 degrees, inability to keep down fluids for >24 hours, foul-smelling drainage from your wounds, uncontrollable pain, or any other concerning symptoms, call our office at 617-726-1915.
- If it is an evening or weekend, call our office at 617-726-2000 and ask to speak with the on-call Plastic Surgery resident.
- If you are unable to reach us, please come to Massachusetts General Hospital Emergency Room if feasible otherwise, please go to your nearest hospital.

HAIR REMOVAL

Before you undergo vaginoplasty, you will need to have all hair removed from your perineum, the shaft of the penis, and the scrotum. You can taper hair removal to a point one inch above the anus. You can choose to remove your hair either laser hair removal or electrolysis. Hair removal will likely take multiple sessions over four to eight months. You should leave the hair that is above your penile shaft. Hair in this location will help contribute to a more natural appearance of your vagina. Please reach out to your insurance to find out about being reimbursed for these procedures. You can find a list of trans-affirming hair removal providers in your area at transcaresite.org.

Electrolysis removes individual hairs, one by one, using electrical currents that destroy the hair follicles. Typically, you will need 5-8 treatments over six months.

Laser hair removal uses an intense, pulsating beam of light to remove unwanted hair. A laser beam passes through the skin to an individual hair follicle. The intense heat of the laser damages the hair follicle, which inhibits future hair growth. Laser hair removal works best for dark, coarse hair. Typically, you will need six treatments over six months. Even if it appears the hair is gone after only a few treatments, you need to follow through with as many sessions as recommended to ensure there is no regrowth in the future. MGH Dermatology offers laser hair removal.

