

MEDICAL CENTER PLAZA 580 WEST 8TH STREET JACKSONVILLE, FLORIDA 32209 TELEPHONE 904/355-0561

Judy Jennings Executive Secretary

May 12, 1989

Lou Sullivan Haight St., # San Francisco, CA 94117

Dear Mr. Sullivan,

Thank you for requesting information about the Gender Identity Association (GIA) of Jacksonville, FL, and surgical sex reassignment. The GIA is one of the original twelve teams in the country devoted to the diagnosis, gender rehabilitation and surgical sex reassignment for patients with gender dysphoria syndrome (commonly known as transsexualism). The team is composed of many professionals, including many psychiatrists, psychologists, etc.

In terms of surgical sex reassignment to the male role, the GIA is one of the few teams that has always performed phaloplasty and has continued to improve the operation and results over theyears. Surgery for the female transsexual consists of breast removal and reconstruction of a male appearing chest, hysterectomy and ovary removal at the same time as penile reconstruction and where required, construction of a cosmetic scrotum. The penile reconstruction is based upon advanced flap techniques developed by the GIA surgeons, best performed un an unscarred abdomen. As a consequence, we do not recommend hysterectomy separately from the penile reconstruction, since the blood supply to the skin used for th epenis may be damaged. However, since we are one of the few teams in the country actively involved in construction of a functioning penis, our surgeons have learned to modify and adapt the basic operations to the individual patient's circumstance.

In order to provide you with help as quickly as possible, we need some specific information about you. As a consequence, I am enclosing a list of questions. Please provide complete but brief typewritten or printed answers to these questions. Make sure that you send some current pictures as well as your measurements and infomration about the various physicians who have seen you and treated you.

As soon as we have this information, we will be able to develop an individualized treatment program, specifically tailored to your needs and capabilities. At that point, we will contact you with recommendations as to how to proceed. We look forward to helping you reach your goal as quickly as possible. If I can supply you with any further information, please do not hesitate to contact me.

Cordially yours, Judy O. Luningto J/hkd Judy O. Jennings Transcribed: 5/15,	
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Enclosures



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Print or type answers to the following questions briefly, addressed to Judy O. Jennings, Executve Secretary, Gender Identity Association:

- 1. Full original name
- 2. New name
- 3. Original sex
- 4. Age
- 5. Educational level
- 6. Job status
- 7. Marital status
- 8. Provide information about hormones you are taking
- 9. Provide information about legal changes you have made
- 10. Information about any psychiatric and/or psychologist testing which has been done
- 11. Any cross dressing experience
- 12. Experience with men and women
- 13. Report addressed to Ira M. Dushoff, M. D., for any psychiatric or psychologic testing from the person who did it
- 14. Current statistics (height, weight, etc.)
- 15. Current picture in usual clothes
- 16. Picture in cross dressed clothes
- 17. Significant medical history (allergies, operations, etc.)