



EQUALITY LOUDOUN

ADVOCACY | COMMUNITY | EDUCATION | DEFENSE

Equality Allies Survey Forms

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INDUSTRY SURVEY: MEDICAL

Please feel free to be as descriptive or brief with these answers as you feel is needed.

Your answers will be included in your business profile for the public to view.

1. What percentage of your/your practice's patients do you estimate are LGBTQ+?

- 0% (none)
- 1-33%
- 34-66%
- 67-99%
- 100% (all)
- Unknown

2. How would you describe your/your practice's medical focus?

(Primary Care, Pediatrics, Gynecology, etc.)

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3. Are your/your practice's intake forms LGBTQ+ friendly (use inclusive and not gendered language)?

- Yes
- No
- Not Sure

4. Are you interested in receiving resources/education for yourself and/or your practice regarding Affirming LGBTQ+ Care?

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5. Does your/your practice's medical record system have a way to capture a patient's:

(indicate yes, no, or not sure)

- Sex assigned at birth (including intersex)
- Gender identity
- Sexual orientation

6. Does your/your practice's medical record system have a way to: *(indicate yes, no, or not sure)*

- Change a patient's gender identity
- Display the patient's affirmed name for all users
- Display the patient's affirmed pronouns for all users

7. Do you/your practice provide or refer patients for any of the following services for adults? *(Provide, Refer, Do Not Offer or Address)*

- Genital exams for transgender people
- Counseling/resources regarding gender confirming therapies
- Hormone therapy to affirm gender identity
- Pre-Exposure Prophylaxis for HIV
- Assessment and treatment of sexually transmitted infections

8. Do you/your practice provide or refer patients for any of the following services for teens (14-18)? *(Provide, Refer, Do Not Offer or Address)*

- Genital exams for transgender people
- Counseling/resources regarding gender confirming therapies
- Puberty inhibitors or blockers
- Hormone therapy to affirm gender identity
- Assessment and treatment of sexually transmitted infections
- Pre-Exposure Prophylaxis for HIV