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**ADMINISTRATIVE REGULATION
NUMBER**

637

OPR: HEALTH SERVICES

GENDER DYSPHORIA

I. GENERAL

This Alabama Department of Corrections (ADOC) Administrative Regulation (AR) establishes the policies, procedures, and responsibilities for providing accommodations and services to inmates within ADOC custody with a confirmed diagnosis of Gender Dysphoria.

II. POLICY

It is the policy of the ADOC to ensure that inmates within ADOC custody with a confirmed diagnosis of Gender Dysphoria are provided the necessary and individualized accommodations, medical services, and mental health services.

III. DEFINITIONS AND ACRONYMS

- A. **Gender**: The term “gender” differs from “sex” in that it is a concept that describes socially influenced identity, experiences, roles, and expectations of persons of a given sex as assigned at birth based on physical characteristics.
- B. **Gender Dysphoria**: A diagnosis defined in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR) describing discomfort or distress caused by a discrepancy between a person’s gender identity and their sex assigned at birth (and the associated gender role and/or primary and secondary sex characteristics).
- C. **Gender Dysphoria Management Committee (GDMC)**: A team comprised of ADOC staff from its Office of Health Services (OHS) Division and Men’s and Women’s Services Division as well as Vendor medical and mental health staff who is responsible for policy development, oversight, and coordination of accommodations and services for inmates with a confirmed diagnosed of Gender Dysphoria.

- D. **Gender Identity**: Refers to an individual's deeply felt, internal experience of their gender, which may or may not correspond to the person's physiology or designated sex at birth.
- E. **Gender Nonconforming**: Describes an individual whose gender identity, role, or expression differs from what is typical for their assigned sex in a given culture.
- F. **Hormonal Treatment (HT)**: Treatment in which masculinizing or feminizing sex hormones are prescribed under the direction of a physician to an individual for the purpose of transitioning an individual's secondary sexual characteristics to align with their gender identity.
- G. **Sex**: Individual physical characteristics (e.g., chromosome makeup, reproductive organs, etc.) initially assigned at birth.
- H. **Transgender**: An individual whose gender identity differs from socially or culturally defined categories of gender assigned at birth.
 - 1. Trans Female: Trans Male to Female (MTF).
 - 2. Trans Male: Trans Female to Male (FTM).
- I. **Transition**: The time during which an individual changes from the gender role and expression associated with their assigned sex at birth to a different gender role and expression more comfortable for them, which may include feminization or masculinization of the body through hormones or other medical procedures, of which the nature and duration of this period varies between individuals.
- J. **Transsexual**: An individual who seeks, or has undergone, a social transition from male-to-female (MTF) or female-to-male (FTM) and may also seek a bodily transition through feminizing or masculinizing medical interventions (i.e., hormones and/or surgery).

IV. **RESPONSIBILITIES**

- A. The ADOC Director of Mental Health Services is responsible for ensuring oversight of the development of this AR.
- B. The ADOC Director of Psychiatry is responsible for ensuring this AR is consistent with relevant professional standards.
- C. The Warden (or designee) at each facility is responsible for ensuring that all ADOC security staff at that facility receive training on the implementation of this AR.

- D. The Vendor Mental Health Program Director is responsible for ensuring that all Vendor staff receives training on the implementation of this AR.
- E. The Vendor Health Services Administrator and the Vendor Mental Health Site Administrator at each facility are jointly responsible for ensuring that all Vendor staff at that facility receiving training on the implementation of the AR.

V. **PROCEDURES**

A. Identification and Referral:

- 1. The Vendor mental health staff will identify an inmate with either a historical or current presentation of Gender Dysphoria during Reception Mental Health Screenings in accordance with AR 610, *Reception Mental Health Screening*.
- 2. An inmate with either a historical or current presentation of Gender Dysphoria may self-initiate a referral for mental health services in accordance with AR 609, *Referral to Mental Health Services*.
- 3. Any ADOC staff and Vendor staff may initiate a referral for mental health services for an inmate who that staff believes to have a current presentation of Gender Dysphoria in accordance with AR 609, *Referral to Mental Health Services*.

B. Mental Health Assessments:

- 1. The Vendor QMHP will complete ADOC Form MH-079-A, *Gender Dysphoria Evaluation Questionnaire*, on an inmate who either:
 - a. Is identified with a historical or current presentation of Gender Dysphoria during Reception Mental Health Screenings in accordance with AR 610, *Reception Mental Health Screening*.
 - b. Receives a referral for mental health services for either a historical or current presentation of Gender Dysphoria in accordance with AR 609, *Referral to Mental Health Services*.
- 2. The Vendor QMHP will forward the completed ADOC Form MH-079-A, *Gender Dysphoria Evaluation Questionnaire*, to the Vendor psychiatrist or the Vendor psychologist to conduct a mental health evaluation on that inmate.

C. Mental Health Evaluations:

- 1. The Vendor psychiatrist or the Vendor psychologist will conduct a mental health evaluation on an inmate with a historical or current presentation of Gender Dysphoria to determine whether that inmate meets diagnostic criteria

for a provisional diagnosis of Gender Dysphoria pending confirmation by the GDMC.

- a. The Vendor psychiatrist or the Vendor psychologist conducting the mental health evaluation will request and review an inmate's medical and mental health records relevant to any accommodations and services related to Gender Dysphoria provided to that inmate prior to incarceration.
 - b. The Vendor psychiatrist or the Vendor psychologist will conduct an evaluation on an inmate with a previously confirmed diagnosis of Gender Dysphoria upon return to ADOC custody.
2. The Vendor psychiatrist or the Vendor psychologist determining that an inmate meets diagnostic criteria for Gender Dysphoria for a provisional diagnosis will both:
- a. Indicate on ADOC OHS Form H-1-a, *Health Record—Master Problem List*, that inmate is to be placed on the Mental Health Caseload with an appropriate MH Code and SMI designation.
 - b. Submit the mental health evaluation with the provisional diagnosis to the GDMC for a determination whether to update that provisional diagnosis to a confirmed diagnosis.
3. If the Vendor psychiatrist or the Vendor psychologist determines that an inmate, who self-initiates a referral for mental health services for Gender Dysphoria, does not meet diagnostic criteria for Gender Dysphoria for a provisional diagnosis will submit that determination to the Vendor Psychiatric Director.
- a. The Vendor Psychiatric Director (or designee) will conduct a follow-up mental health evaluation on that inmate within (30) working days from the date the Vendor psychiatrist or the Vendor psychologist makes that determination.

D. Reviews by the GDMC:

1. The GDMC will be composed of the following individuals (or designees):
 - a. ADOC staff:
 - (1) ADOC Director of Mental Health Services.
 - (2) ADOC Director of Psychiatry.

- (3) ADOC Regional Psychologist.
 - (4) ADOC Director of Medical Services.
 - (5) ADOC Associate Director of Health Services.
 - (6) ADOC PREA Director.
 - (7) ADOC Deputy Commissioner of Operations (or designee).
- b. Vendor staff:
- (1) Vendor Psychiatric Director (chair).
 - (2) Vendor Mental Health Program Director.
 - (3) Vendor Medical Director.
- c. Additional ADOC staff and Vendor staff at the facility housing an inmate with a provisional diagnosis of Gender Dysphoria that the GDMC requests to participate for consultation on individual cases.
2. The GDMC will meet at least quarterly and may appoint subcommittees that meet more frequently to ensure it timely addresses the needs of an inmate with a provisional diagnosis of Gender Dysphoria.
 3. The GDMC will require a quorum (i.e., a majority of all members of the GDMC) present at the GDMC meetings to present and finalize any proposed changes to the GD services.
 - a. The ADOC Form MH-079-A, *Gender Dysphoria Evaluation Questionnaire*.
 - b. The mental health evaluation with the provisional diagnostic.
 - c. Any mental health progress notes (i.e., either ADOC Form MH-025, *Psychiatrist/CRNP Progress Note*; ADOC Form MH-040, *Progress Notes*, or ADOC Form MH-040N, *Nursing Progress Note*).
 - d. Any medical progress notes and relevant laboratory data.
 - e. The most recent chronic care note.
 - f. The current Medication Administration Record (MAR).

- g. The current ADOC Form MH-032, *Mental Health: Multidisciplinary Treatment Plan*.
 - h. The current ADOC OHS Form H-1-a, *Health Record—Master Problem List*.
- E. Final Decisions of the GDMC:
- 1. The GDMC will determine whether the reviewed background and clinical information substantiates updating an inmate’s provisional diagnosis of Gender Dysphoria to a confirmed diagnosis.
 - 2. The GDMC will notify the Vendor Mental Health Site Administrator at each facility of the final determination whether to update the provisional diagnosis of an inmate at that facility along with recommendations regarding both:
 - a. Accommodations requested by an inmate with a confirmed diagnosis of Gender Dysphoria on ADOC Form MH-079-C, *Gender Dysphoria Management Committee (GDMC) Notification of Accommodations Decision*.
 - b. Hormonal Treatment (HT) requested by an inmate with a confirmed diagnosis of Gender Dysphoria on ADOC Form MH-079-D, *Gender Dysphoria Management Committee (GDMC) Notification of Treatment Decision*.
 - 3. The Vendor Mental Health Site Administrator at each facility will:
 - a. File the original of both ADOC Form MH-079-C, *Gender Dysphoria Management Committee (GDMC) Notification of Accommodations Decision*, and ADOC Form MH-079-D, *Gender Dysphoria Management Committee (GDMC) Notification of Treatment Decision*, in the mental health section of that inmate’s medical record.
 - b. Provide a copy of both ADOC Form MH-079-C, *Gender Dysphoria Management Committee (GDMC) Notification of Accommodations Decision*, and ADOC Form MH-079-D, *Gender Dysphoria Management Committee (GDMC) Notification of Treatment Decision*, to that inmate.
 - c. Forward a copy of ADOC Form MH-079-C, *Gender Dysphoria Management Committee (GDMC) Notification of Accommodations Decision*, to the following individuals at that facility:
 - (1) The Warden;
 - (2) The ADOC Institutional PREA Compliance Manager;

- (3) The Vendor Health Services Administrator.
- d. Forward a copy of ADOC Form MH-079-D, *Gender Dysphoria Management Committee (GDMC) Notification of Treatment Decision*, to the Vendor Health Services Administrator at that facility.
- e. Maintain and update on ADOC Form MH-079-B, *Gender Dysphoria Referral, Evaluation, and Management Log*, a list of cumulative data on all inmates at that facility who the GDMC has confirmed a diagnosis of Gender Dysphoria, including those inmates who are no longer receiving accommodations or services or who are no longer within ADOC custody.
 - (1) The Vendor Mental Health Site Administrator will maintain ADOC Form MH-079-B, *Gender Dysphoria Referral, Evaluation, and Management Log*, in a searchable electronic format.
 - (2) The Vendor Mental Health Site Administrator will update ADOC Form MH-079-B, *Gender Dysphoria Referral, Evaluation, and Management Log*, upon a change in status of an inmate on that log.
 - (3) The Vendor Mental Health Site Administrator will review ADOC Form MH-079-B, *Gender Dysphoria Referral, Evaluation, and Management Log*, at least every ninety (90) days to determine whether that log should be updated.

F. Accommodations and Services:

1. The GDMC will:
 - a. Provide any necessary oversight, review, and coordination of accommodations and services between ADOC staff and Vendor staff.
 - b. Use clinical judgment in reviewing the medical records of an inmate with a confirmed diagnosis of Gender Dysphoria at least every six (6) months to determine whether to continue recommending accommodations and services for that inmate.
 - c. Coordinate with the ADOC Deputy Commissioner of Office of Health Services and the Deputy Commissioner(s) of Men's and Women's Services in reviewing, approving, and updating accommodations for inmates with a confirmed diagnosis of Gender Dysphoria
2. The Vendor Mental Health Site Administrator at each facility will ensure that Vendor mental health staff at that facility:

- a. Maintains an inmate with a confirmed diagnosis of Gender Dysphoria who is receiving accommodations and services on the Mental Health Caseload as long as that inmate has a confirmed diagnosis of Gender Dysphoria.
 - b. Coordinates and implements accommodations approved for an inmate with a confirmed diagnosis of Gender Dysphoria who is receiving accommodations and services with the Warden (or designee) at that facility.
3. The Vendor Health Services Administrator at each facility will ensure that Vendor medical staff at that facility enrolls an inmate with a confirmed diagnosis of with Gender Dysphoria who is being administered HT into a Chronic Care Clinic.
 4. The Vendor Health Services Administrator and the Vendor Mental Health Site Administrator at each facility will jointly ensure that Vendor staff at that facility:
 - a. Coordinates the ordering and management of medical and mental health services approved for an inmate with a confirmed diagnosis of Gender Dysphoria who is receiving accommodations and services.
 - b. Continues administering HT to an inmate who the Vendor mental health staff confirms is receiving HT under the supervision of a physician at the time of reception into ADOC custody.
 5. The Vendor Medical Director at the facility housing an inmate who requests HT will review that inmate's medical record and advise that inmate of any health risks associated with HT.
 6. The Vendor Psychiatric Director (or designee) will use clinical judgment in determining whether to refer an inmate whose needs for medical or mental health services related to Gender Dysphoria exceed those services available within the ADOC for consultation with a medical or mental health specialist.

VI. DISPOSITION

Any forms used will be disposed of and retained according to the Departmental Records Disposition Authority (RDA).

VII. FORMS

- A. ADOC Form MH-025, *Psychiatrist/CRNP Progress Note*.
- B. ADOC Form MH-032, *Mental Health: Multidisciplinary Treatment Plan*.

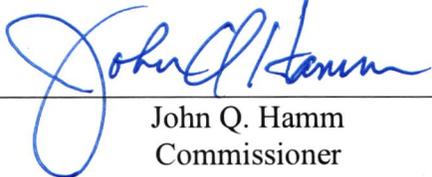
- C. ADOC Form MH-040, *Progress Notes*.
- D. ADOC Form MH-040N, *Nursing Progress Note*.
- E. ADOC Form MH-079-A, *Gender Dysphoria Evaluation Questionnaire*.
- F. ADOC Form MH-079-B, *Gender Dysphoria Referral, Evaluation, and Management Log*.
- G. ADOC Form MH-079-C, *Gender Dysphoria Management Committee (GDMC) Notification of Accommodations Decision*.
- H. ADOC Form MH-079-D, *Gender Dysphoria Management Committee (GDMC) Notification of Treatment Decision*.

VIII. SUPERSEDES

This AR supersedes AR 637, *Gender Dysphoria*, dated May 9, 2018, and any related changes.

IX. PERFORMANCE

- A. Code of Alabama 1975§ 14-1-1.1 *et seq.*
- B. National Commission of Correctional Health Care, *Standards for Mental Health Services in Correctional Facilities* (2015).
- C. National Commission of Correctional Health Care, *Standards for Health Services in Prisons* (2018).



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Commissioner