**Current Resident Pre-Survey**

Please indicate your year of training:

- House Officer I
- House Officer II
- House Officer III

I am willing to provide medical care to transgender and non-binary patients.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

How important is providing gender-affirming care in the primary care setting?

- Very important
- Important
- Neutral
- Unimportant
- Very unimportant

How confident do you feel providing gender-affirming care, including hormone therapy?

- Very confident
- Confident
- Neutral
- Unconfident
- Very unconfident

How confident do you feel providing gender-affirming care, excluding hormone therapy?

- Very confident
- Confident
- Neutral
- Unconfident
- Very unconfident

How often do you care for transgender or non-binary individuals, on average?

- Never
- Once per year
- Once per month
- Once per week
Once per day

How many transgender or non-binary individuals have you cared for during residency (best estimate)?

Space to insert number

Have you received any formal training on providing gender-affirming care?

Yes
   ○ If yes, please describe

No

My current training is adequate in order to provide comprehensive gender-affirming care independently upon graduation.

   Strongly agree
   Agree
   Neutral
   Disagree
   Strongly disagree

Which resources do you use to provide gender-affirming care, if any? Please list all that apply.

Space to list resources