

# Assigned male at birth

Registered with a GP as female

Automatically invited for:  
Breast & NHS Bowel Cancer Screening

Not routinely invited for:  
AAA Screening,  
but can be requested.

## Key message to be discussed with the patient:

The patient will have the same risk as a man aged 65 and should be encouraged to access screening. The GP can refer the patient to the programme or ask the patient to contact the screening programme directly.

Registered with a GP as male

Automatically invited for:  
AAA & NHS Bowel Cancer Screening

Not routinely invited for:  
Breast Screening,  
but can be requested.

## Key messages to be discussed with the patient:

If the patient has been on long-term hormone therapy, they may be at risk of developing breast cancer and the GP should ask them to consider being referred to the screening programme.

Action  
Required by  
GP

# Assigned female at birth

Registered with a GP as male

Automatically invited for:  
AAA & NHS Bowel Cancer Screening

Not routinely invited:  
Breast & Cervical Screening,  
but can be requested.

## Key message to be discussed with the patient:

Whether or not the patient has had chest reconstruction (top surgery), if they are aged 50 or over, after a discussion with the GP a referral to a breast screening unit can be arranged. If the patient has not had a total hysterectomy and still has a cervix, they should consider screening. If they have had any abnormal cervical screening results in the past screening is especially important.

Registered with a GP as female

Automatically invited for:  
Breast, NHS Bowel Cancer Screening, Cervical Screening