Gender Identity and Pronoun Usage in Standardized Patient
Encounters

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**Introduction**

- SOAP (Subjective, Objective, Assessment, Plan) notes are the standardized document clinicians use to record evaluations of a patient.
- These notes can provide insight into clinicians’ pronoun usage and consistency when interacting with non-cisgender patients.
  - Accurate, consistent pronoun usage is important as it is a primary way of affirming the patient’s gender identity, especially since non-cisgender patients experience significant health disparities linked to medical mistrust.¹

**Methods**

- A sample of SOAP notes (n=286) was taken from two sessions of standardized patient encounters at the University of Louisville School of Medicine in 2017 (n=137) and 2018 (n=149).
- There were five case iterations of the standardized patient based on gender identity:
  - Cisgender men
  - Cisgender women
  - Genderqueer people
  - Transgender men
  - Transgender women
- Each note was coded for themes related to sex assigned at birth as well as pronoun establishment, accuracy, and consistency.

**Results**

- **Case Iterations**
  - Cisgender men: N=45
  - Cisgender women: N=46
  - Genderqueer people: N=85
  - Transgender men: N=46
  - Transgender women: N=46

- **Disregard for Established Pronouns**
  - Over the two years of the project, students disregarded established pronouns in their written documentation 16 times for genderqueer patients and 1 time for a transman patient.

**Discussion**

- These notes demonstrate a lack of rigor in accurately recording pronouns and consistently using the correct pronouns for non-cisgender patients.
- In this study, the pronouns of genderqueer patients were most often disregarded and inconsistently used, pointing to a continued lack of understanding/acknowledgment of non-binary identities.²
- The stark difference in the documentation of SAAB between cisgender and non-cisgender patients displays a clear cisnormative bias on the part of the students.
- Not establishing SAAB for non-cisgender patients can lead to incorrect assumptions by the care team, leading to ineffective and potentially harmful recommendations.
- Based on these findings, we conclude that there exists a need for more education and practice with using and documenting gender-neutral pronouns among medical students.
- Students can also benefit greatly from interacting with non-cisgender patients as part of the medical school curriculum.³

**Future Study**

These findings open the doors for further analysis of pronoun usage in terms of code co-occurrence, common vocabulary, and pronoun usage in relation to other non-cisgender specific documentation needs. These include the documentation of sex assigned at birth and trans-specific healthcare needs.

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