

**EXHIBIT 174**  
**REDACTED**

**Name of the Chapter Committee**

Institution

**Statements of recommendations with possible direct evidence requiring systematic reviews by [REDACTED]'s team**

1. Our committee has submitted all potential systematic review questions to [REDACTED].

Yes       No       N/A (no systematic review needed)

2. Our committee is working to finalize potential systematic review questions to [REDACTED].

Yes       No       N/A (no systematic review needed)

3. If no, please explain and indicate when you will be able to finalize and submit to [REDACTED] these?

3.a. Expected date to finalize:

3.b. Expected date to send the review questions to [REDACTED]:

3.c. Reason why statements have not been finalized or sent:

**Statements of recommendation with no direct evidence (not requiring systematic reviews by [REDACTED]'s team)**

4. Our committee has reached consensus and finalized all other best practice recommendations

Yes       No

5. If your committee is still working on reaching consensus and finalizing your best practice recommendations.

Estimate time of completion:

6. Have you used the list of publications sent by [REDACTED]'s team for your chapter?

Yes       No

Comment:

**7. Have you started writing explanatory paragraphs to your recommendations?**

Yes  No

Comment:

**8. Have you used the statements from the SOC-7 as sent by [REDACTED]'s team?**

Yes  No

Comment:

**9. What kind of support do you feel you need to complete your tasks?**

**10. Would a face-to-face meeting of some or all of your committee members be helpful to you in completing your tasks?**

Yes  No  Maybe Comment

**11. Are you planning to publish a "background paper" in IJT related to your chapter?**

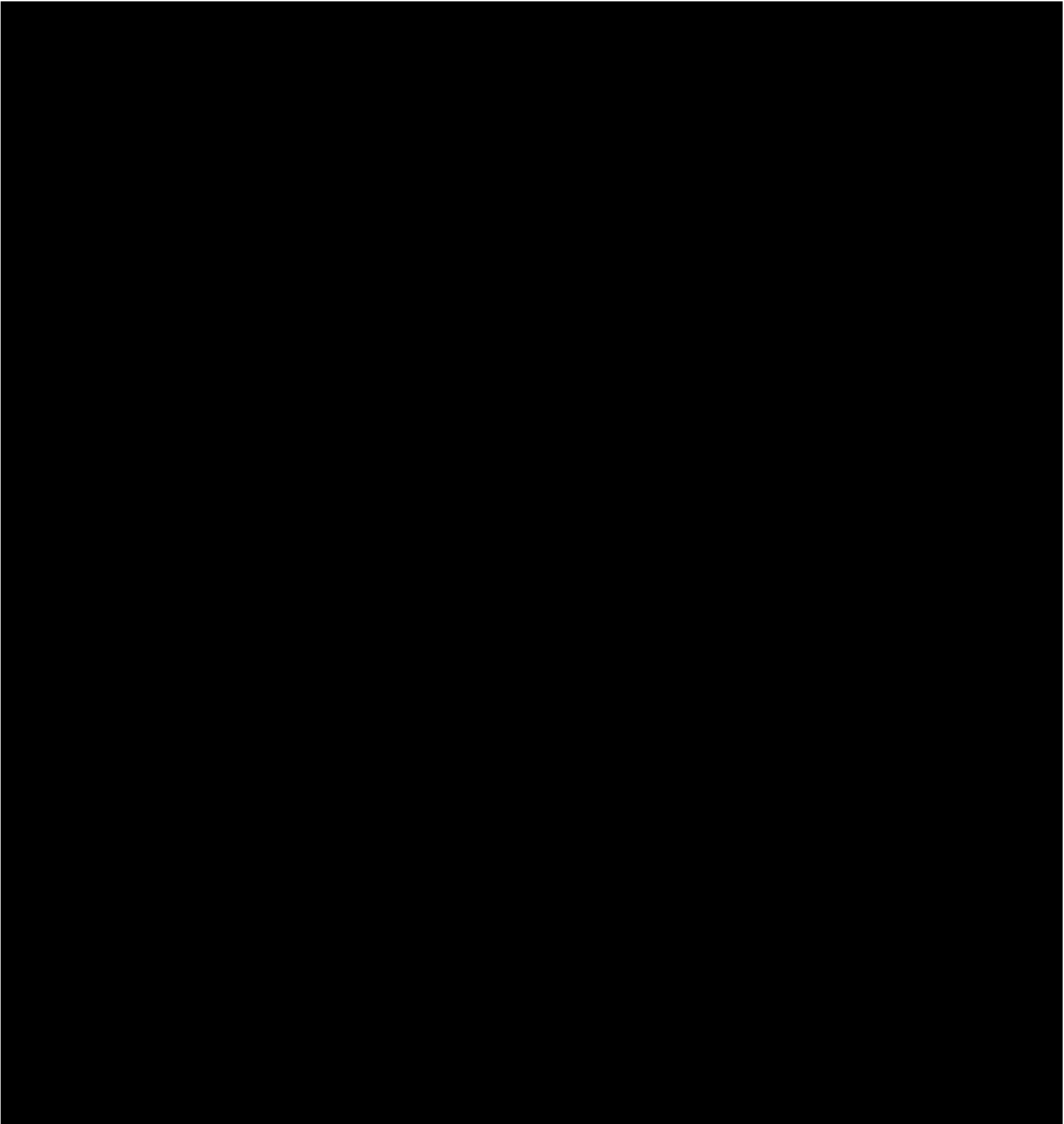
Yes  No Comment

**12. Please provide any other comments or suggestions for moving forward.**

**13. Please add any particular concern that you have about the content of your chapter:**

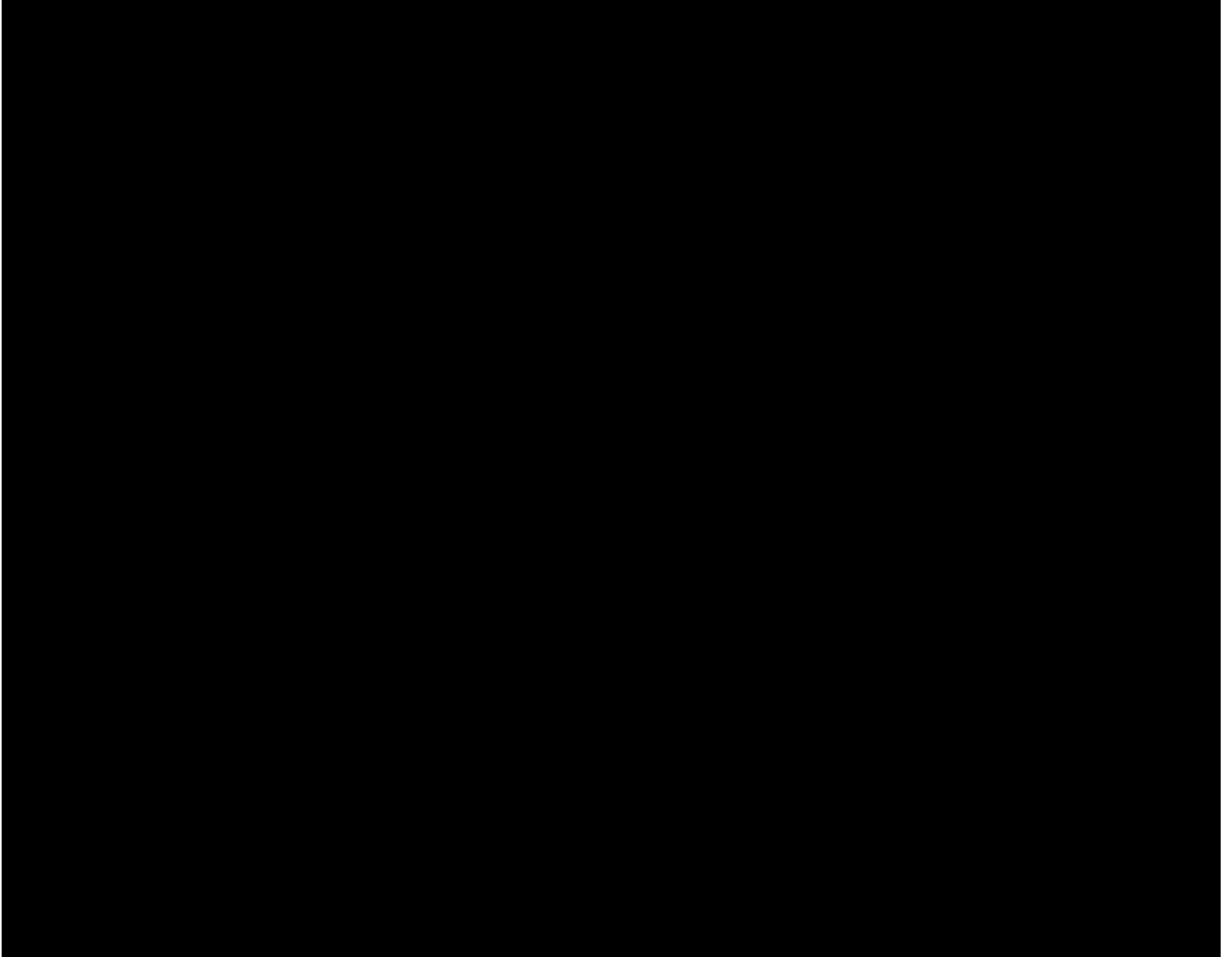
Our concerns, echoed by the social justice lawyers we spoke with, is that evidence-based review reveals little or no evidence and puts us in an untenable position in terms of affecting policy or winning lawsuits.

**14. Any other comments:**



[Redacted]

[Redacted]



[Redacted]

[Redacted]



## WPATH Policy for Disclosures of Interests and Management of Conflicts Standards of Care 8

The World Professional Association for Transgender Health (WPATH) develops the Standards of Care (SOC) for the health of Transsexual, Transgender and Gender Nonconforming People. Appointment to the SOC8 Committee as a Chair, Methodologist, Chapter Lead or Chapter Member is subject to approval of the WPATH Board.

Interests must be disclosed using the WPATH Disclosure Form. The Disclosure Form collects information about financial relationships with entities with direct interest in the SOC8 as well as any non-financial interests such as previously published opinions, institutional relationships, advocacy or policy positions, or specialty practice that may relate to the topics in SOC8.

### Management of Conflicts of Interest

The WPATH Board reviews and assesses disclosure forms. Management of conflicts may include prohibiting membership in SOC8, open discussion with other chapter or SOC8 members, and/or recusal from decisions specific to disclosed interests.

Completed and signed forms should be submitted for review of the WPATH Board to [REDACTED]  
Please complete and sign by December 22, 2018.

### Part 1. Identifying Information

Name: [REDACTED]

Complete Mailing Address: [REDACTED]

Email Address: [REDACTED]

Telephone Number (Daytime): [REDACTED]

Current Employer/Affiliation: UCSF

Chapter(s): USPATH

### Complete All Parts of this Disclosure Form

- Check "No" if no disclosure exists.
- Check "Yes" – please provide the requested information next to each item where "Yes" was checked.

### Part 2. Financial Activities Related to SOC8

*For each of the items listed in Section 2, consider stocks, bonds, and other financial activities and investments including partnerships (but excluding broadly diversified mutual funds and any investment or financial interest valued at less than \$5,000 USD).*



Item	No	Yes	Describe relationship, including name of entity and amount.
<b>2.1 Do you or your partner/spouse or minor children or dependents</b> own directly or indirectly (e.g., through a trust or an individual account in a pension or profit-sharing plan) any stocks, bonds or other financial investments that may in any way gain or lose financially from SOC8?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>2.2 Do you or your partner/spouse or minor children or dependents hold or are you currently</b> applying for any patents related to the content of SOC8?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>2.3 Have you or your partner/spouse or minor children or dependents received research grants or contracts (restricted or unrestricted)</b> from an organization that has interests or activities related to the content of SOC8?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NIH California HIV/AIDS Research Program PCORI HRSA
<b>2.4 Have you or your partner/spouse or minor children or dependents received reimbursements, fees or salary from an organization</b> that has interests or activities related to the content of SOC8? (e.g., as a board member, advisor, consultant, payment for manuscript, speakers' bureaus, travel, expert testimony)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Planned Parenthood Inland Empire Health Plan
<b>2.5 Do you or your partner/spouse or minor children or dependents have any other financial</b> interests related to SOC8?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

### Part 3. Non-Financial Activities Related to SOC8

Item	No	Yes	Describe Interest
<b>3.1 Have you or your partner/spouse or minor children or dependents ever authored, coauthored, or publicly provided an opinion</b> related to the topics in SOC8?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	I have over 30 peer-reviewed publications in the field of transgender health, and most if not
<b>3.2 To the best of your knowledge, do you or your partner/spouse or minor children or dependents work</b> for, or are you a member of an organization with a stated position (e.g., position statement,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

# WPATH

WORLD PROFESSIONAL ASSOCIATION FOR TRANSGENDER HEALTH

Item	No	Yes	Describe Interest
blog, editorial, legislature or legal testimony, or related document) related to SOC8?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>3.3 Could recommendations in SOC8 conflict</b> with policies you have promoted or are obliged to follow?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>3.4 Do you have a primary specialty or subspecialty?</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Primary Care
<b>3.5 Do you prescribe or otherwise recommend</b> a test, therapy, treatment or program to be considered in SOC8?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	I am the Medical Director for an academic transgender medicine
<b>3.6 Do you or your partner/spouse or minor children or dependents have any other non-financial</b> interests related to SOC8?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	I do not understand this question. Everyone involved in the SOC process has a non-financial interest
<b>3.7 Are you or your partner/spouse or minor children or dependents</b> employed by an organization/company or work in a field that is likely to be directly influenced by content in SOC8?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[REDACTED]

## Part 4. Certification

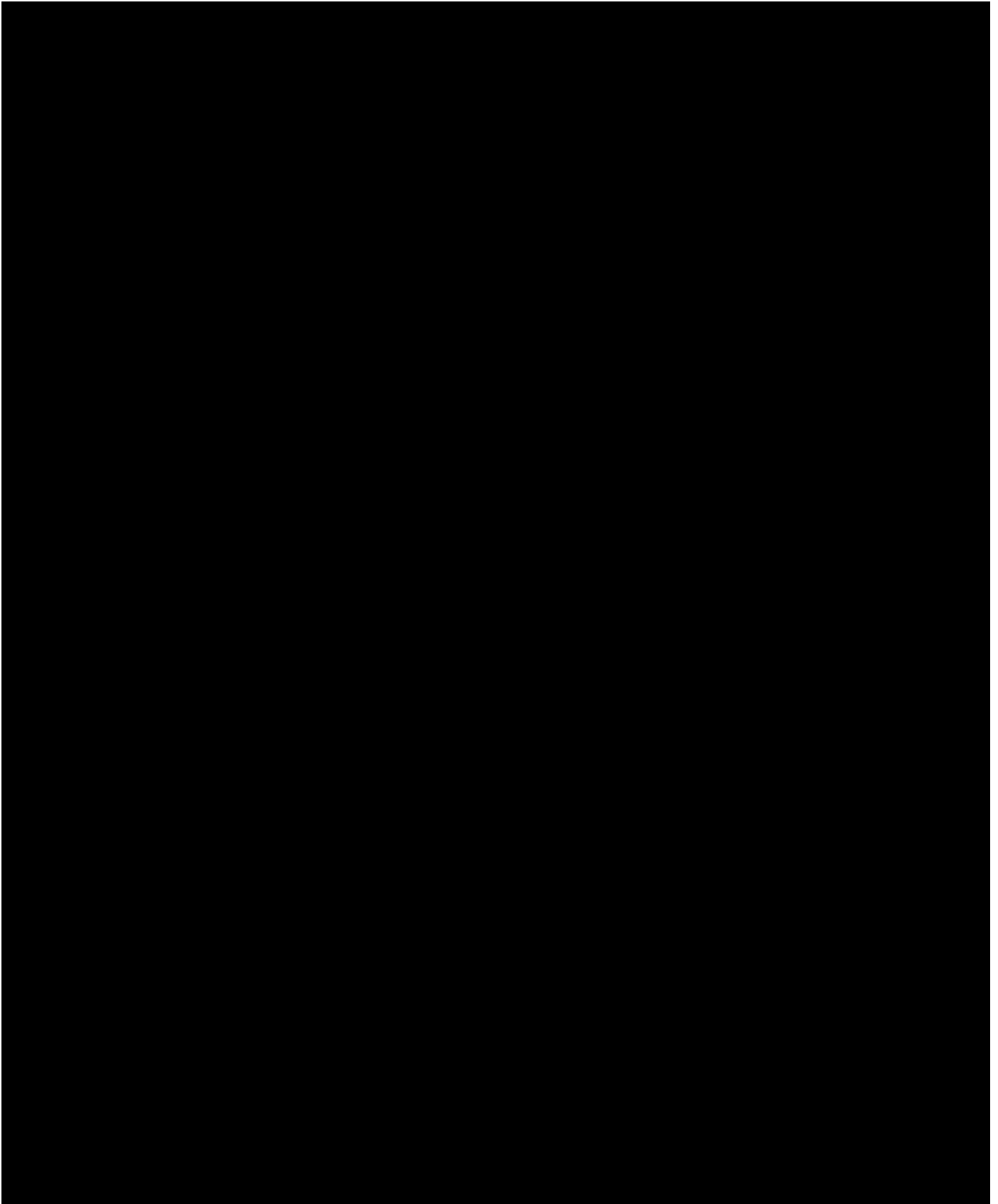
***I certify that the information above is true and complete. Further, I agree to update and resubmit this form if I enter into any new financial or non-financial relationships/roles related to SOC8.***

Print Name: [REDACTED]

Signature: [REDACTED]

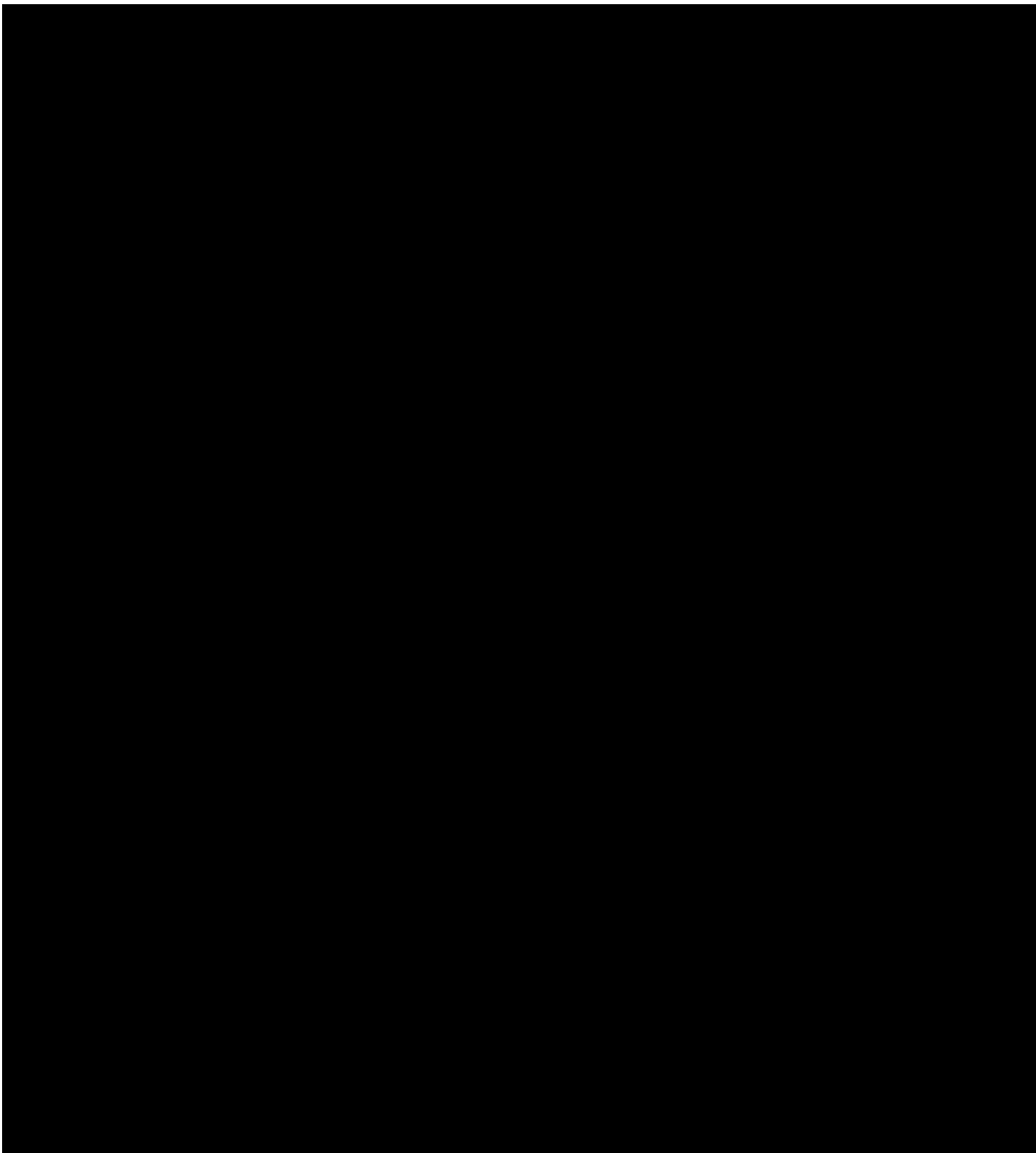
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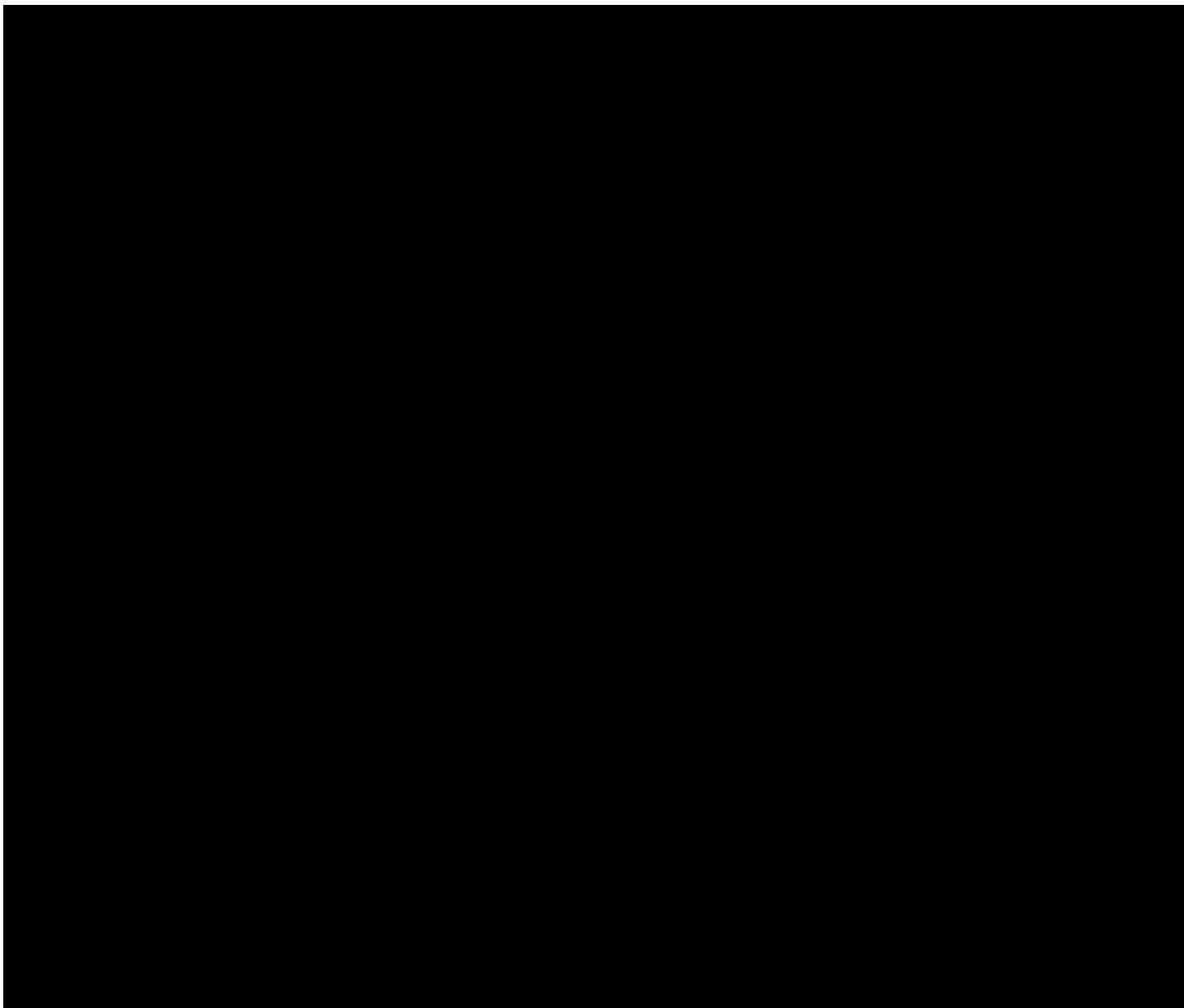
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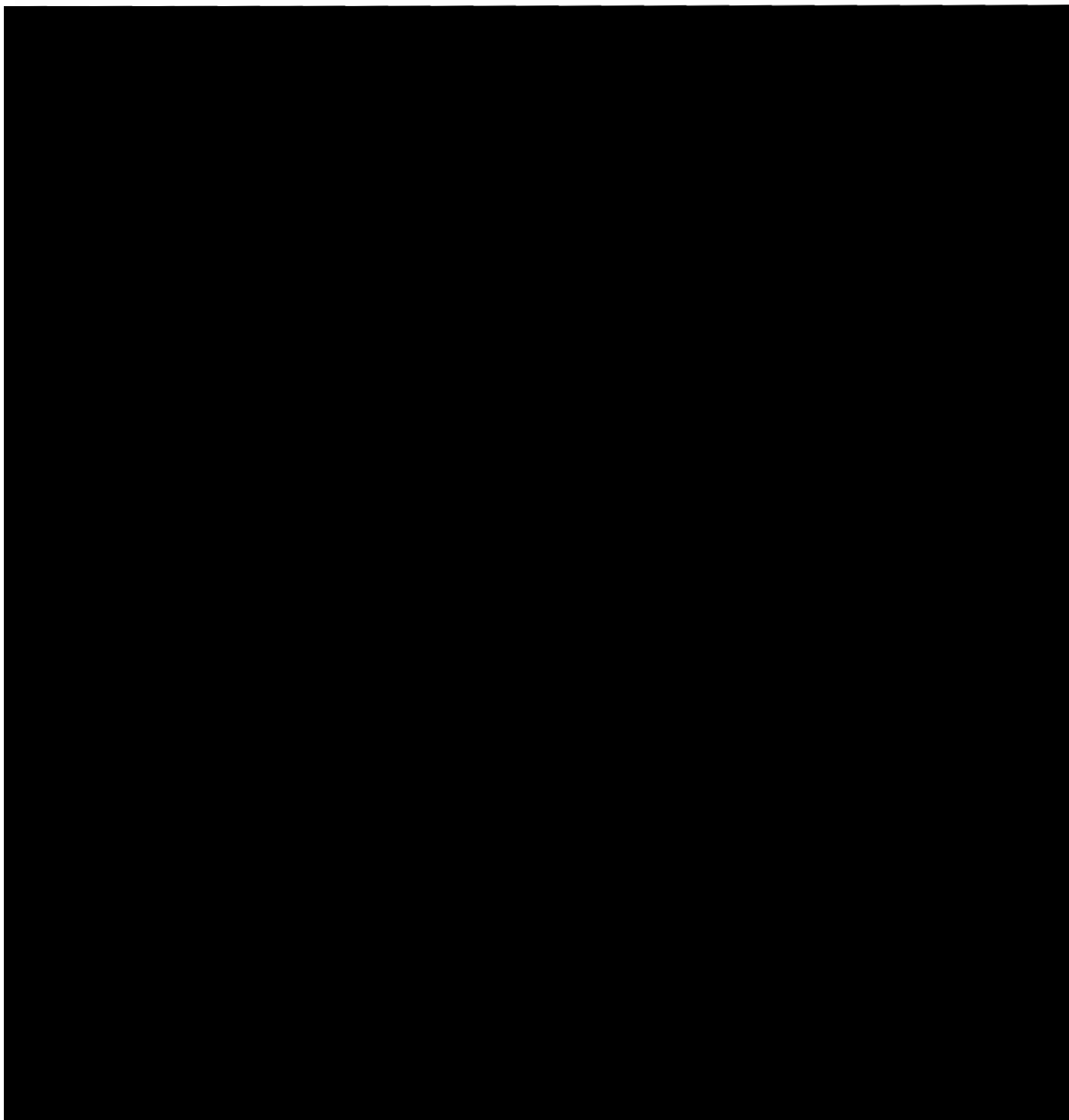
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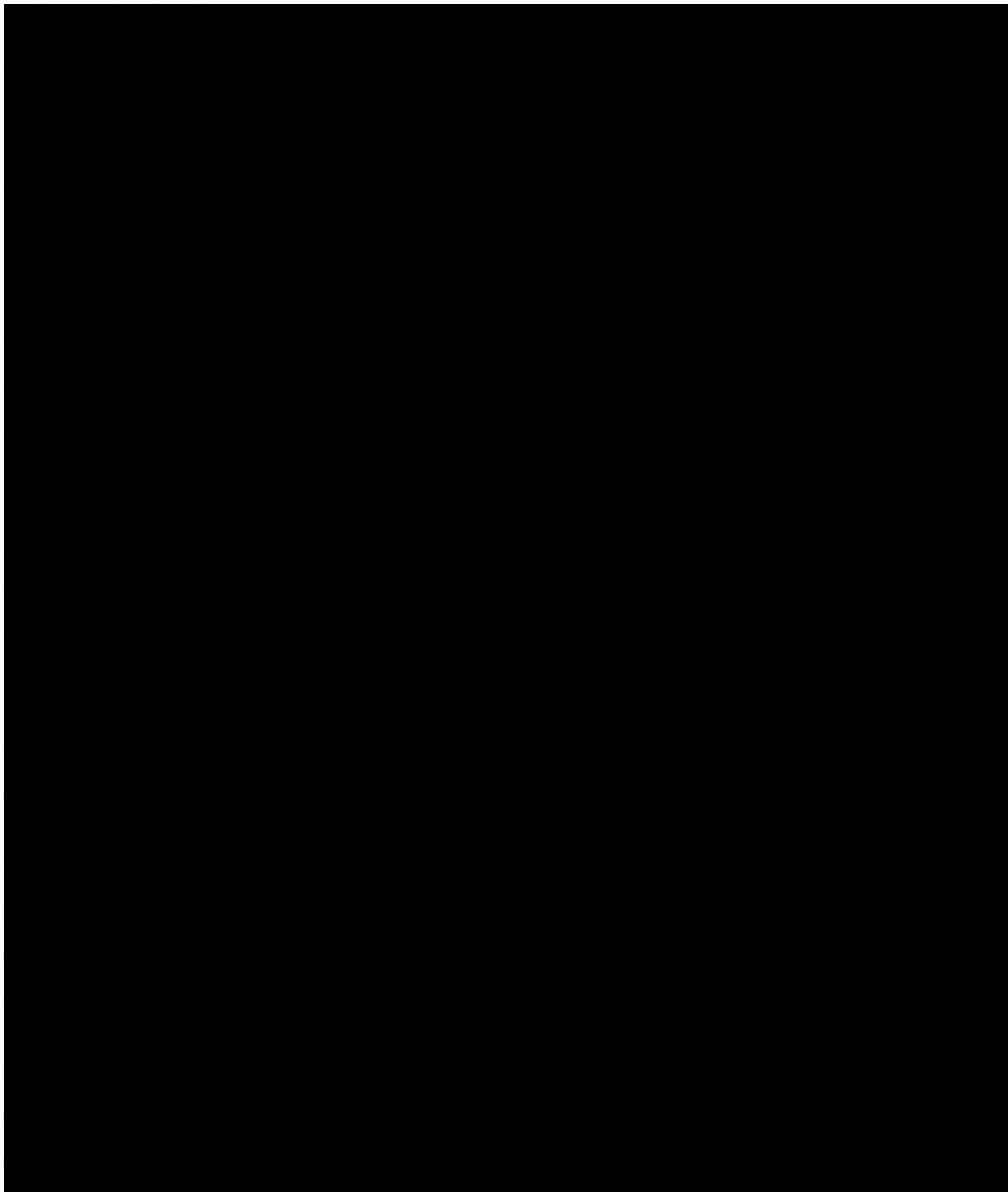
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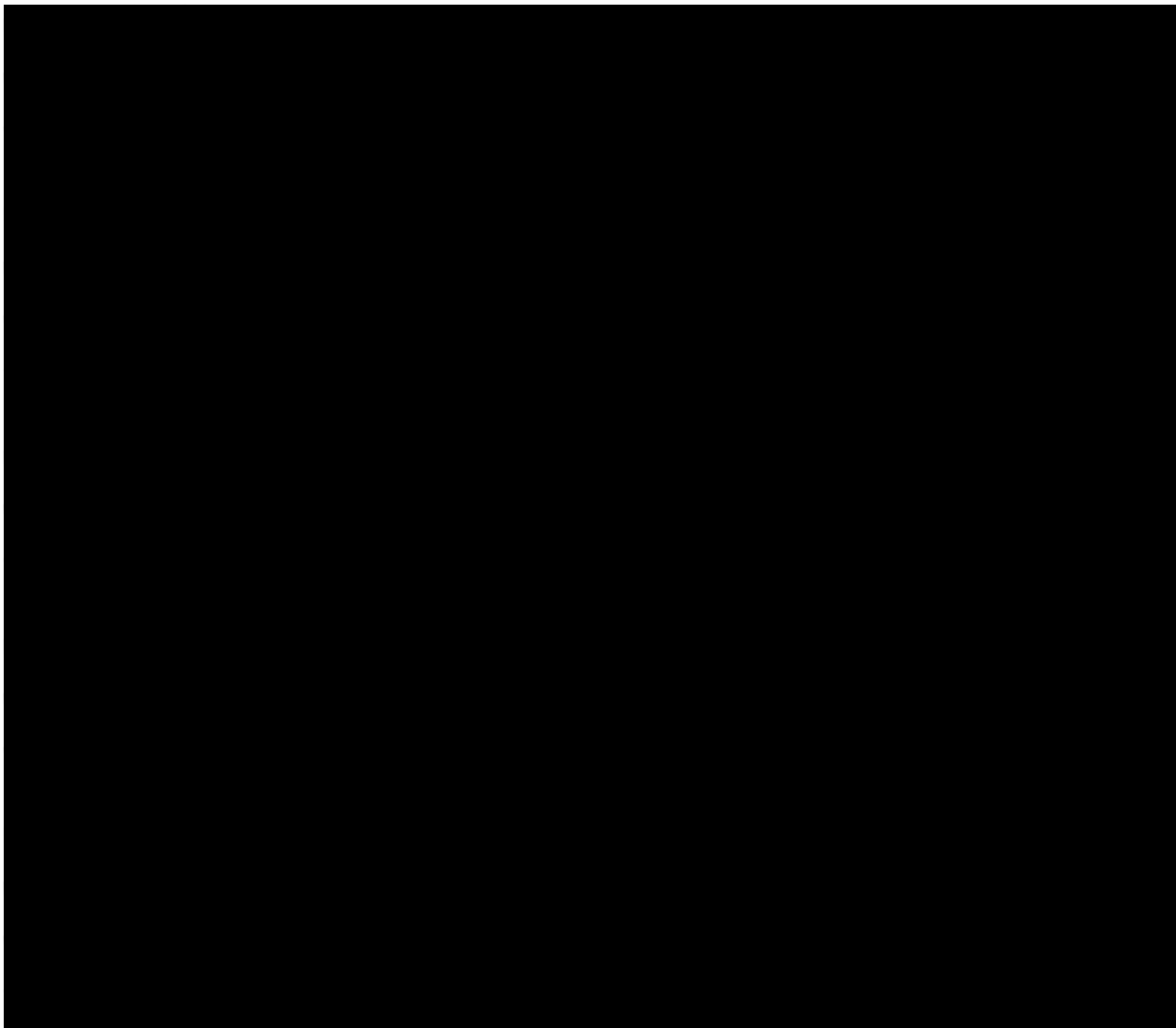
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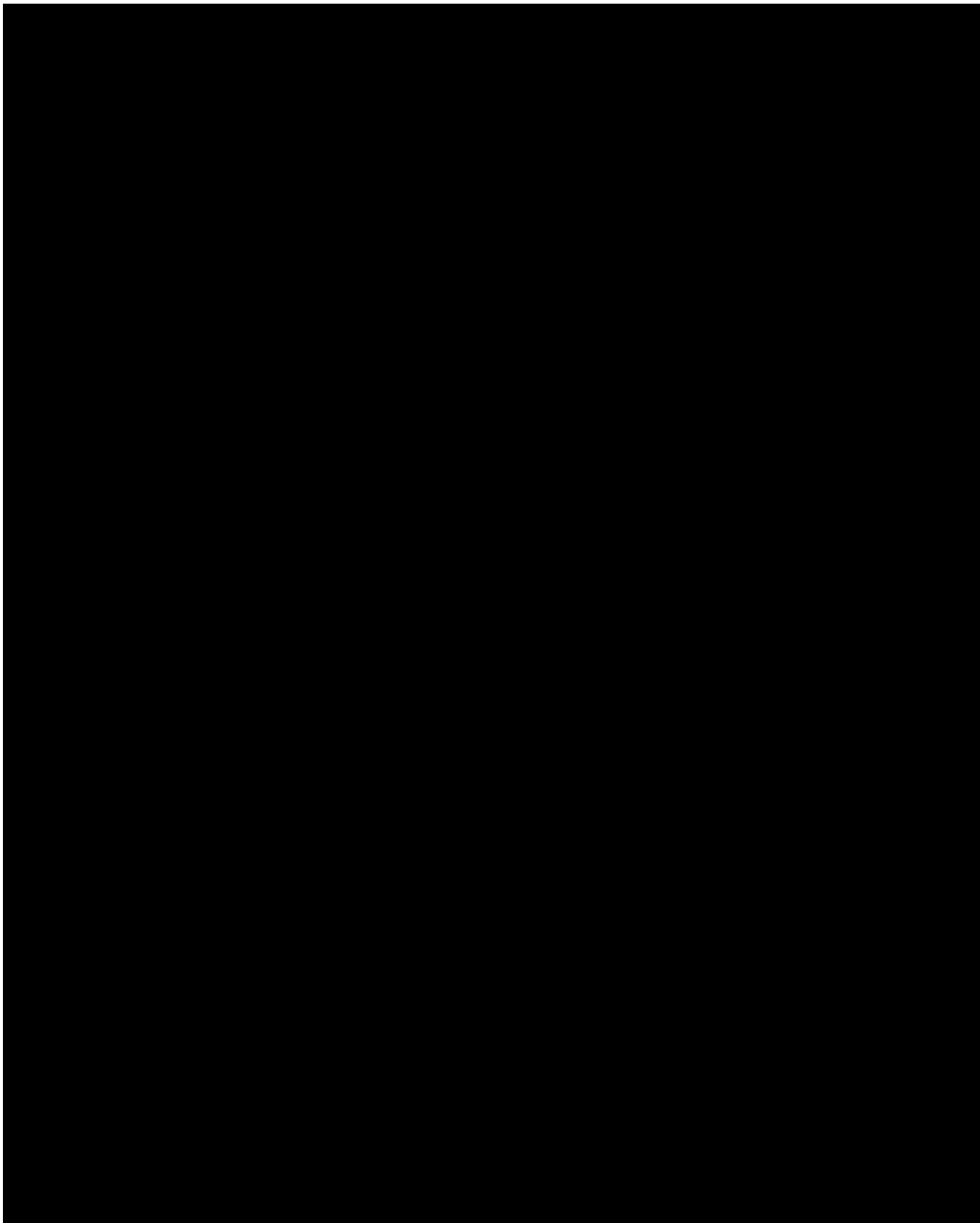
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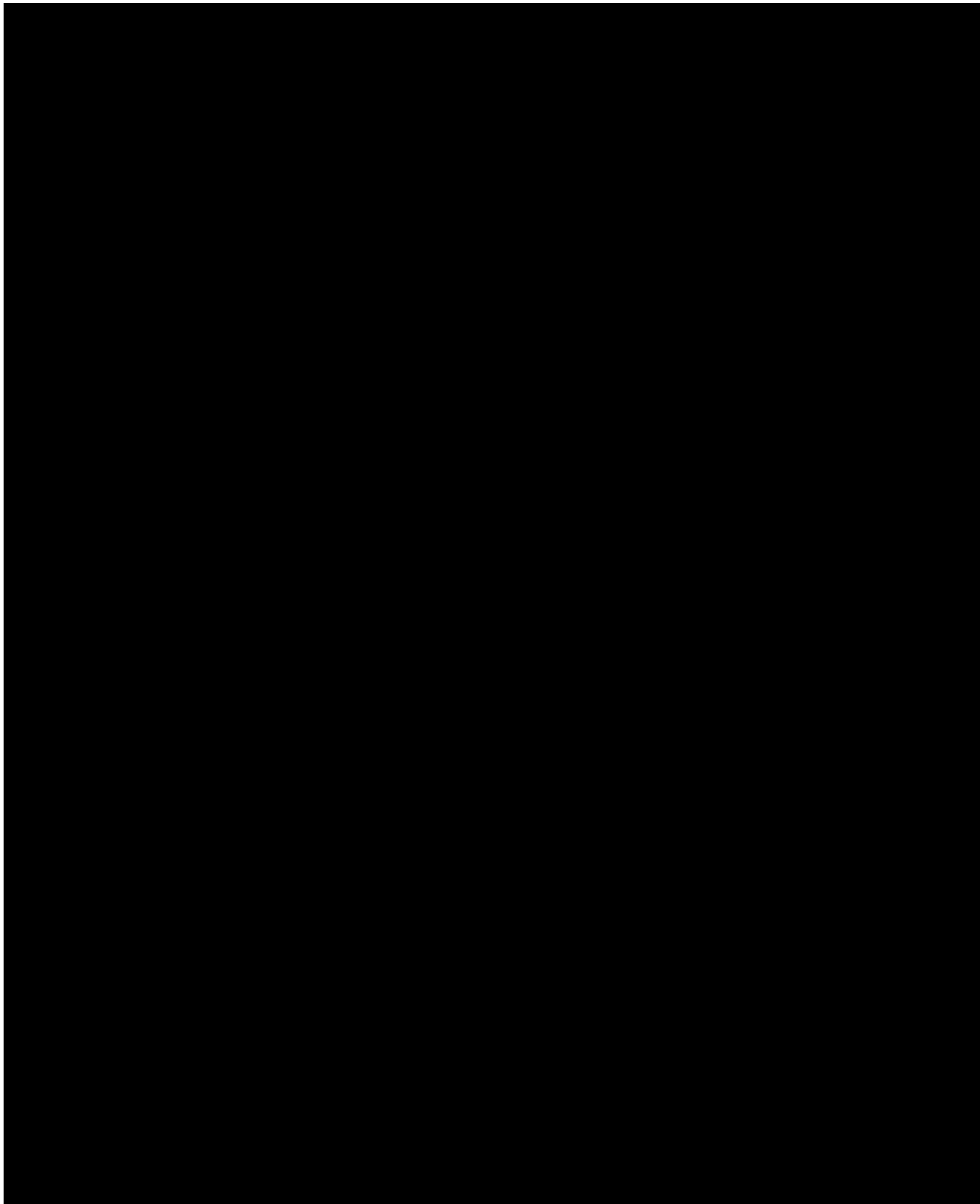
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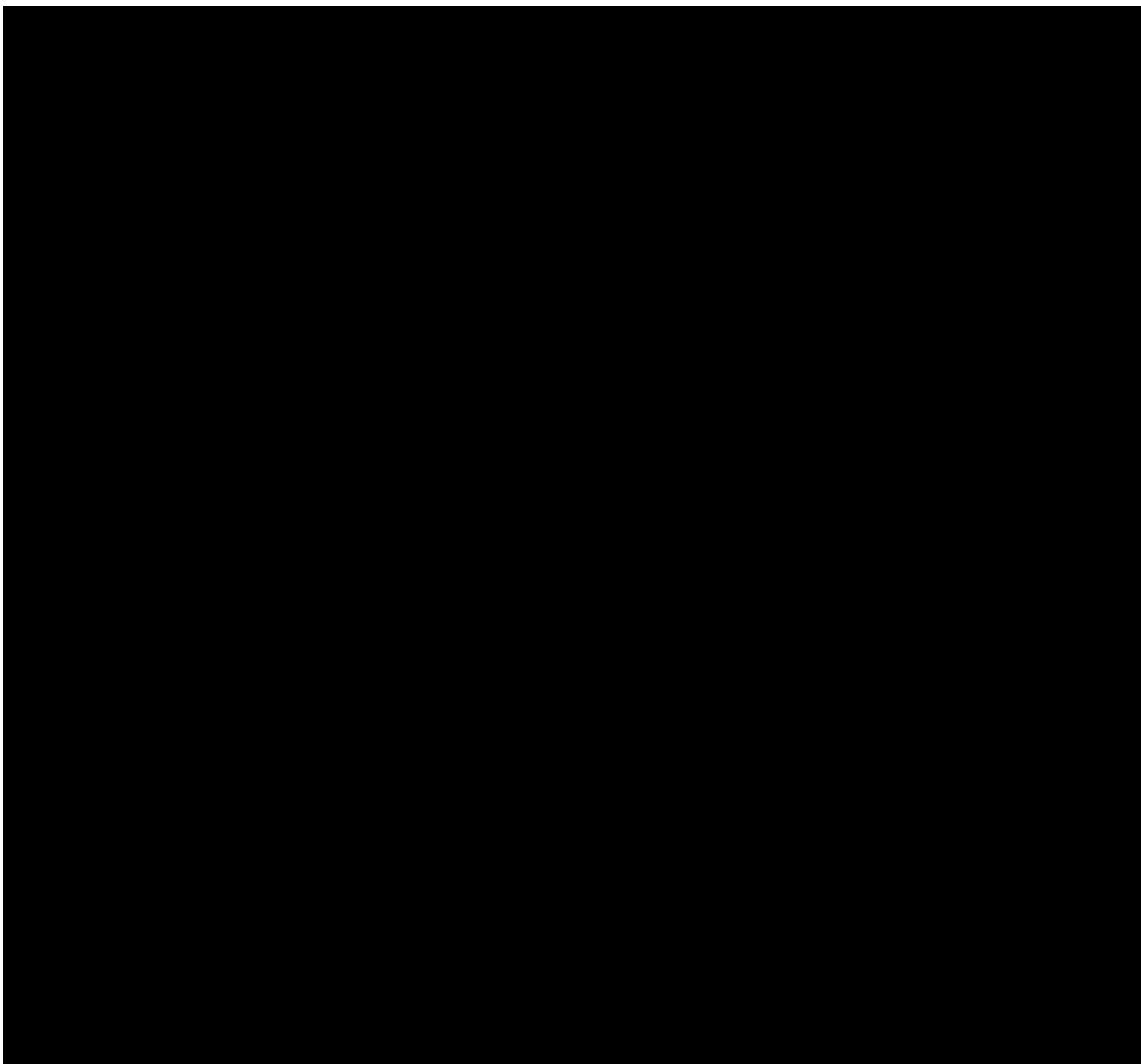
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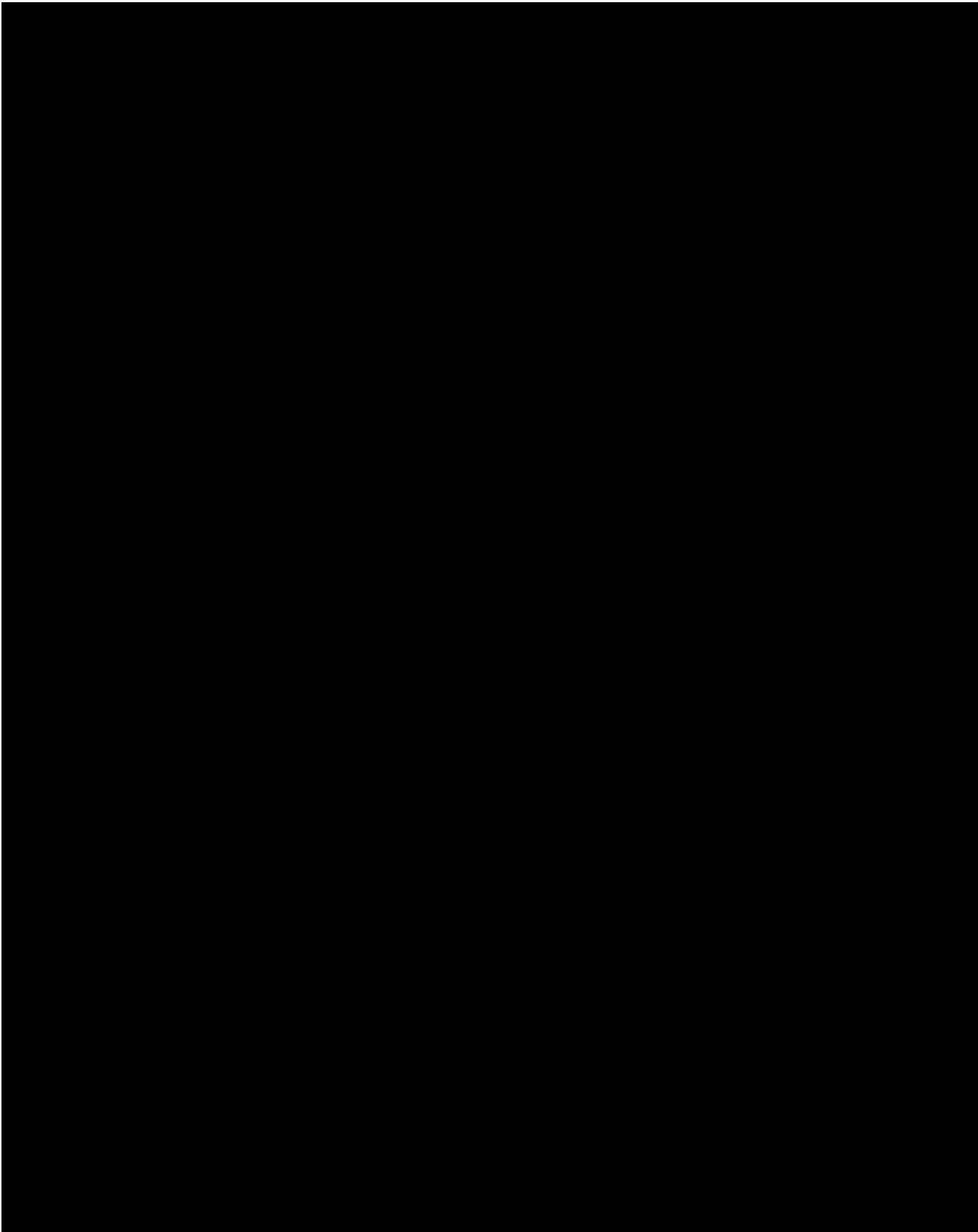
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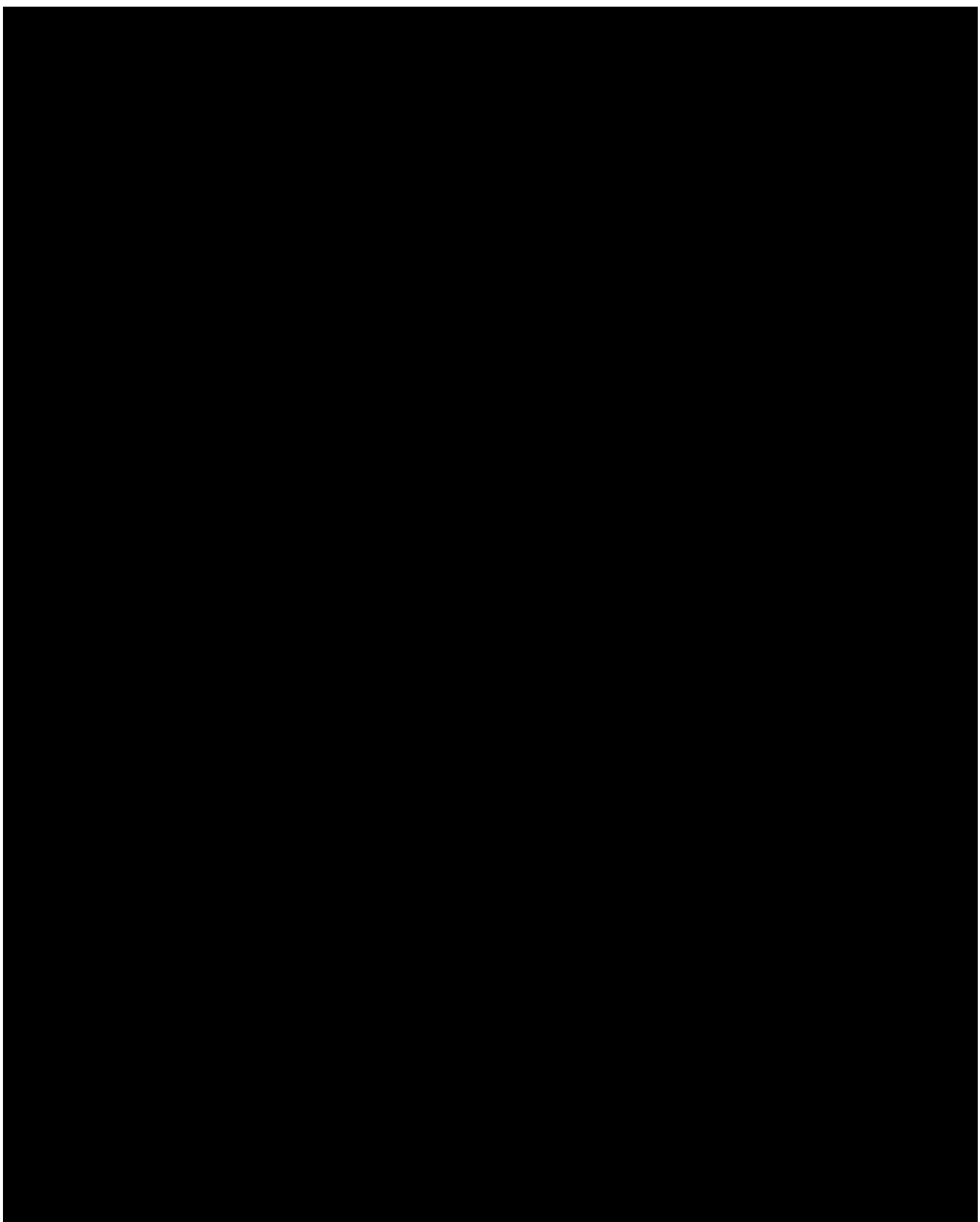
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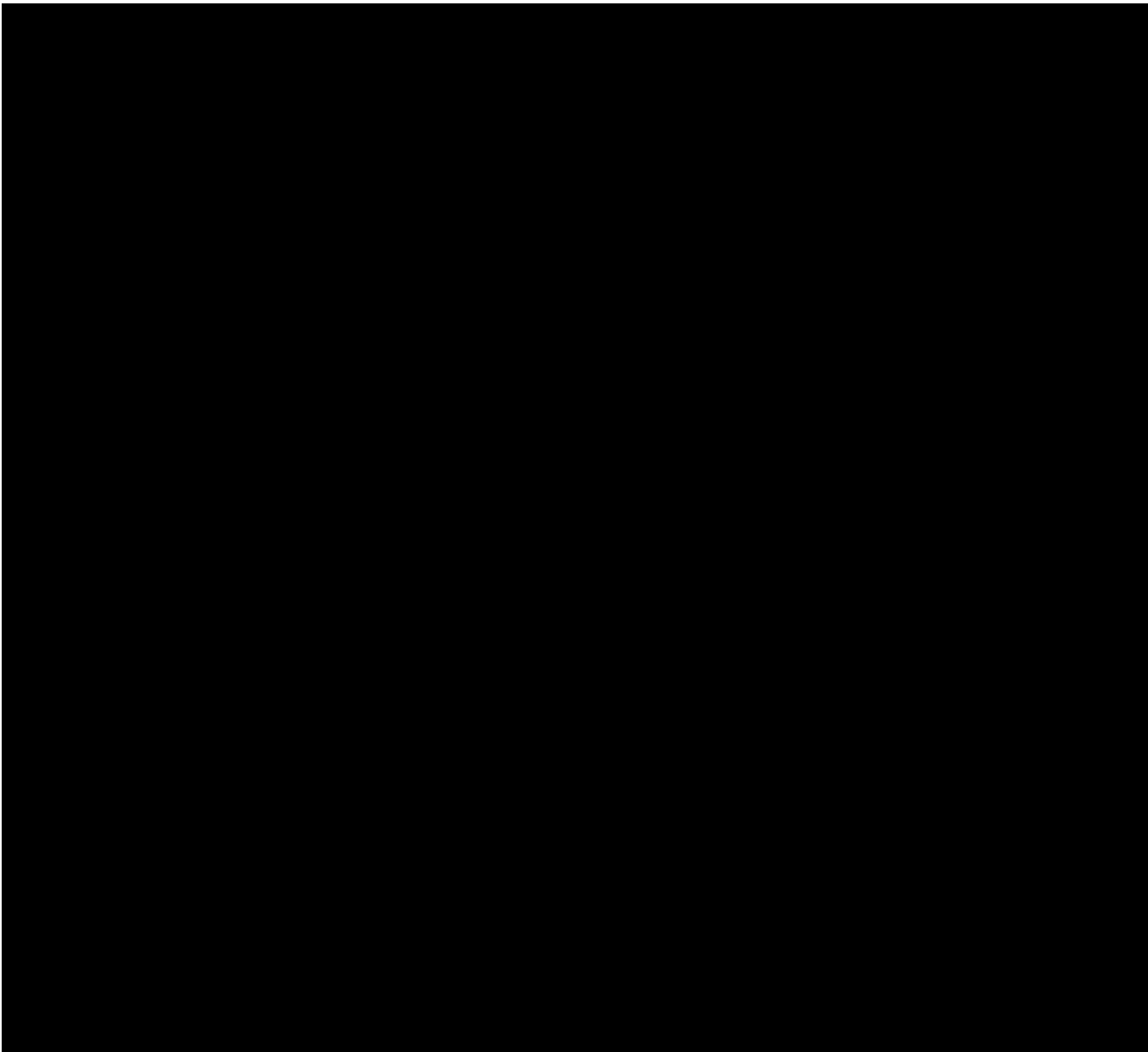
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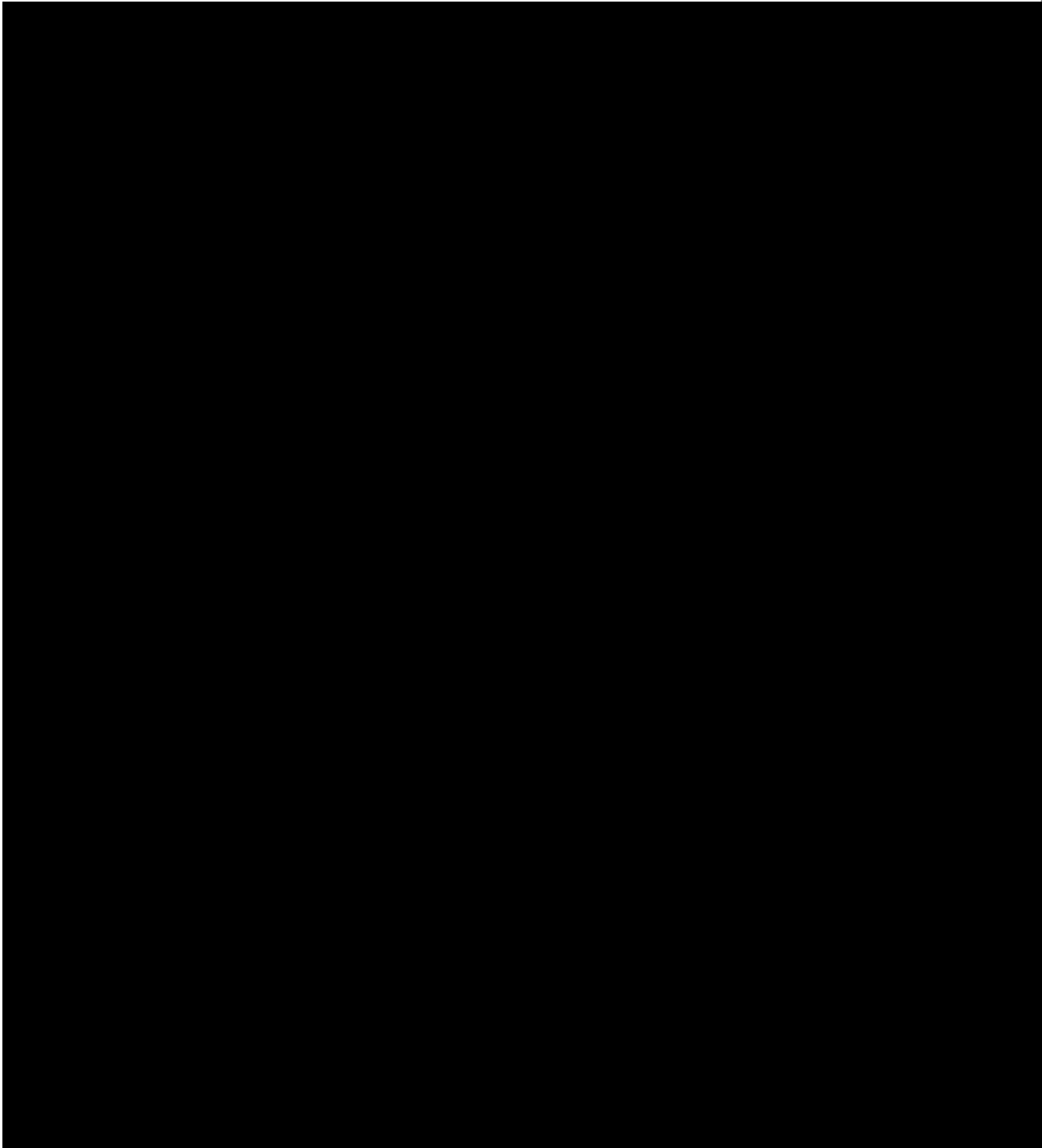
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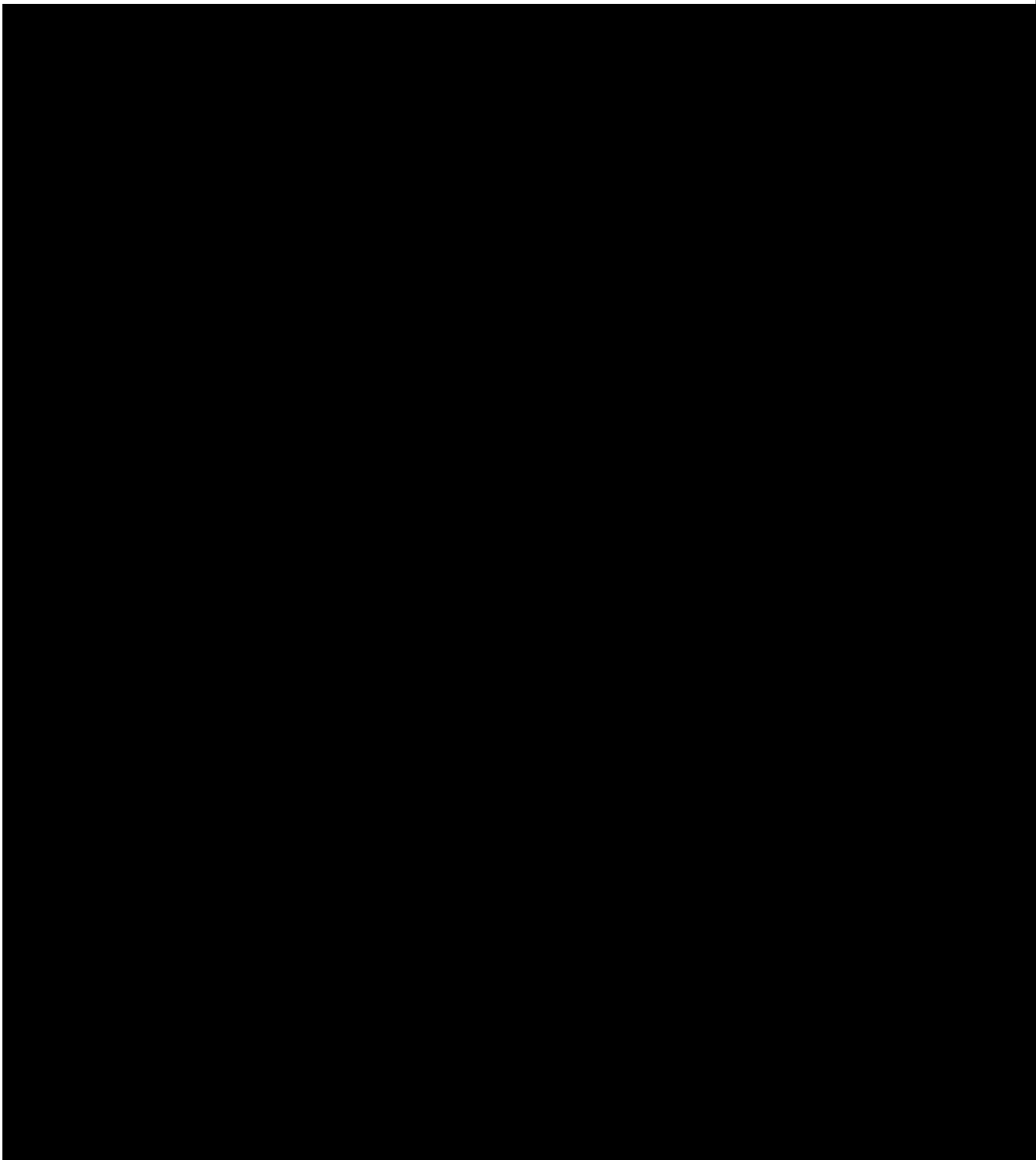
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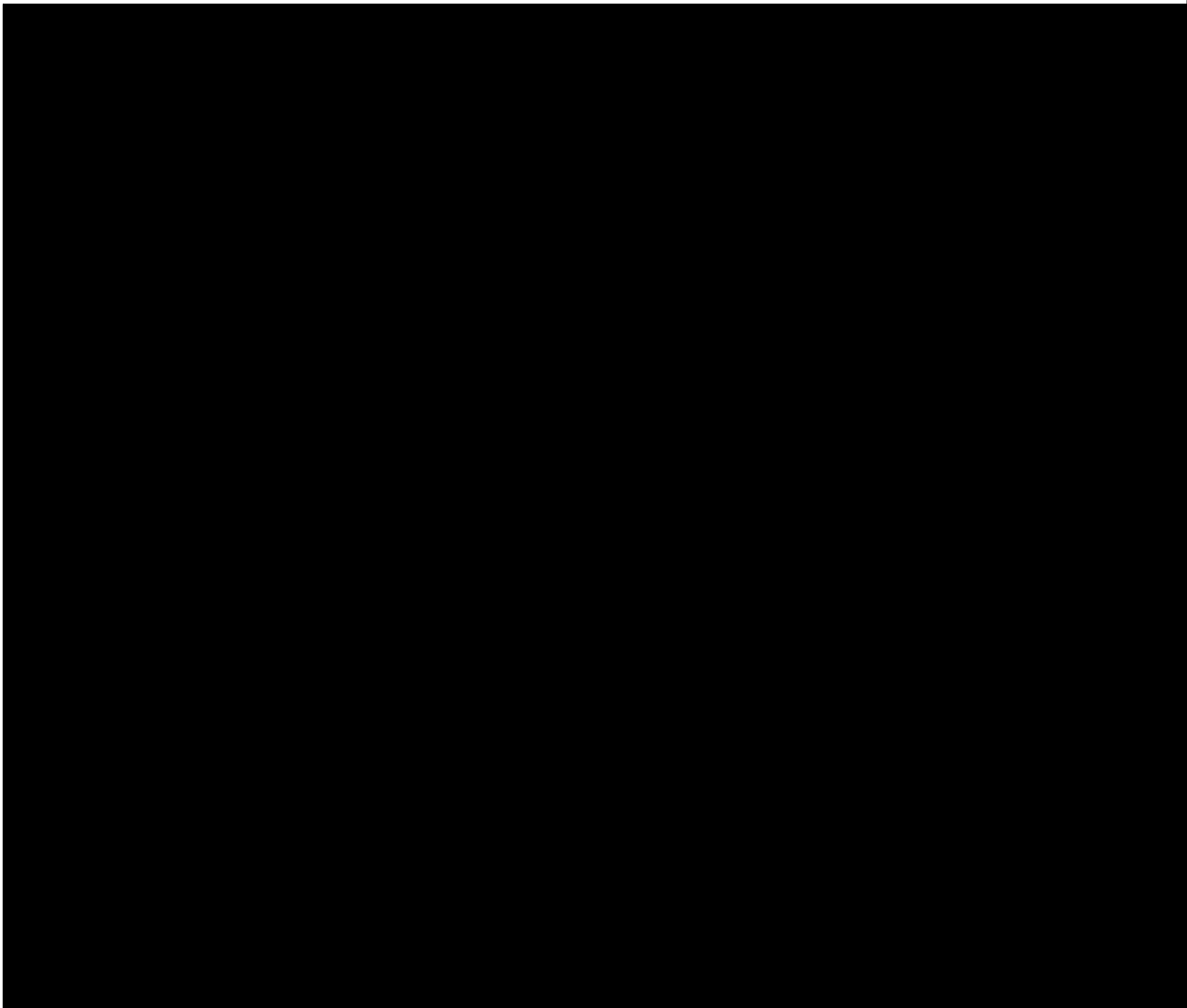
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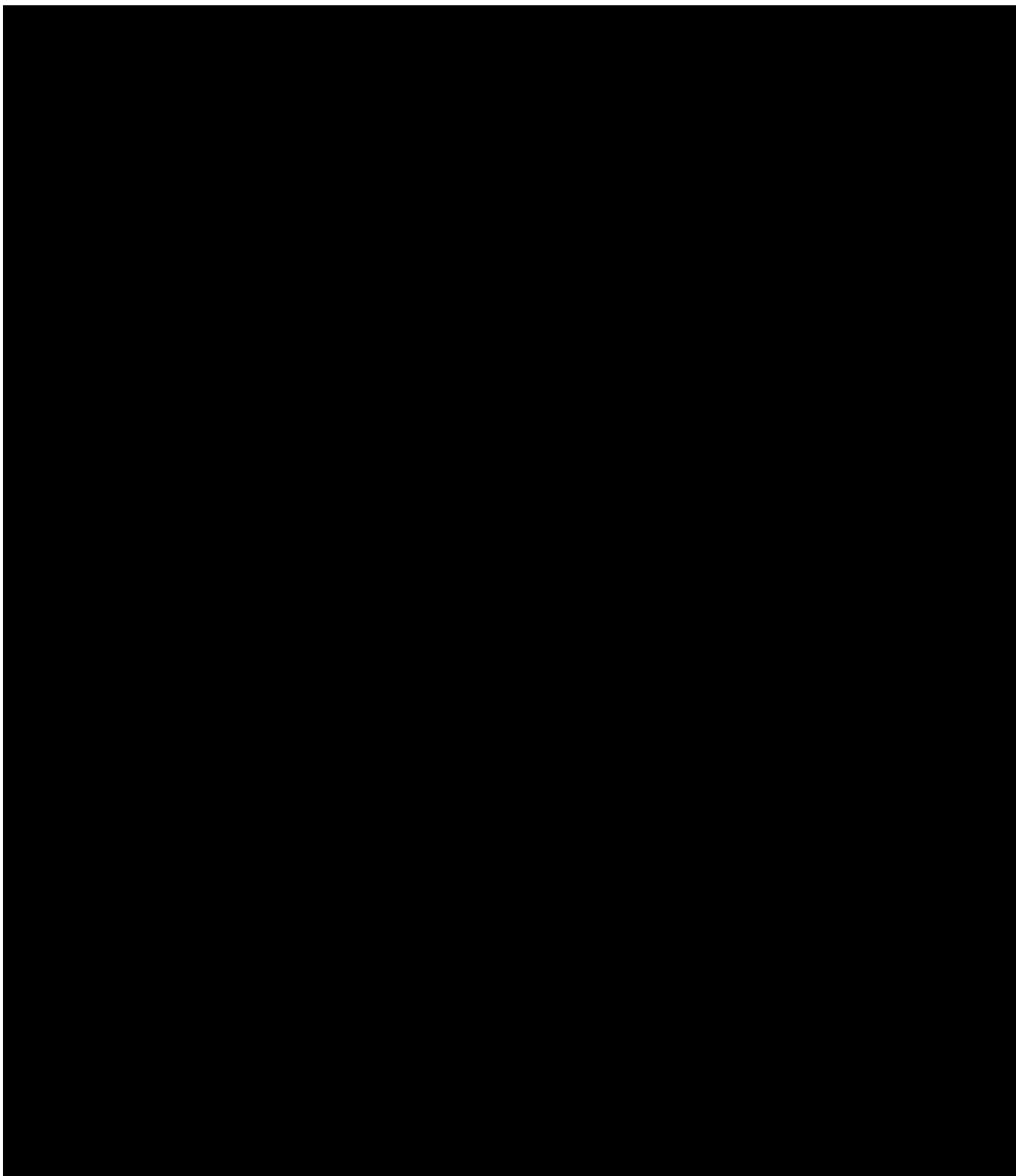




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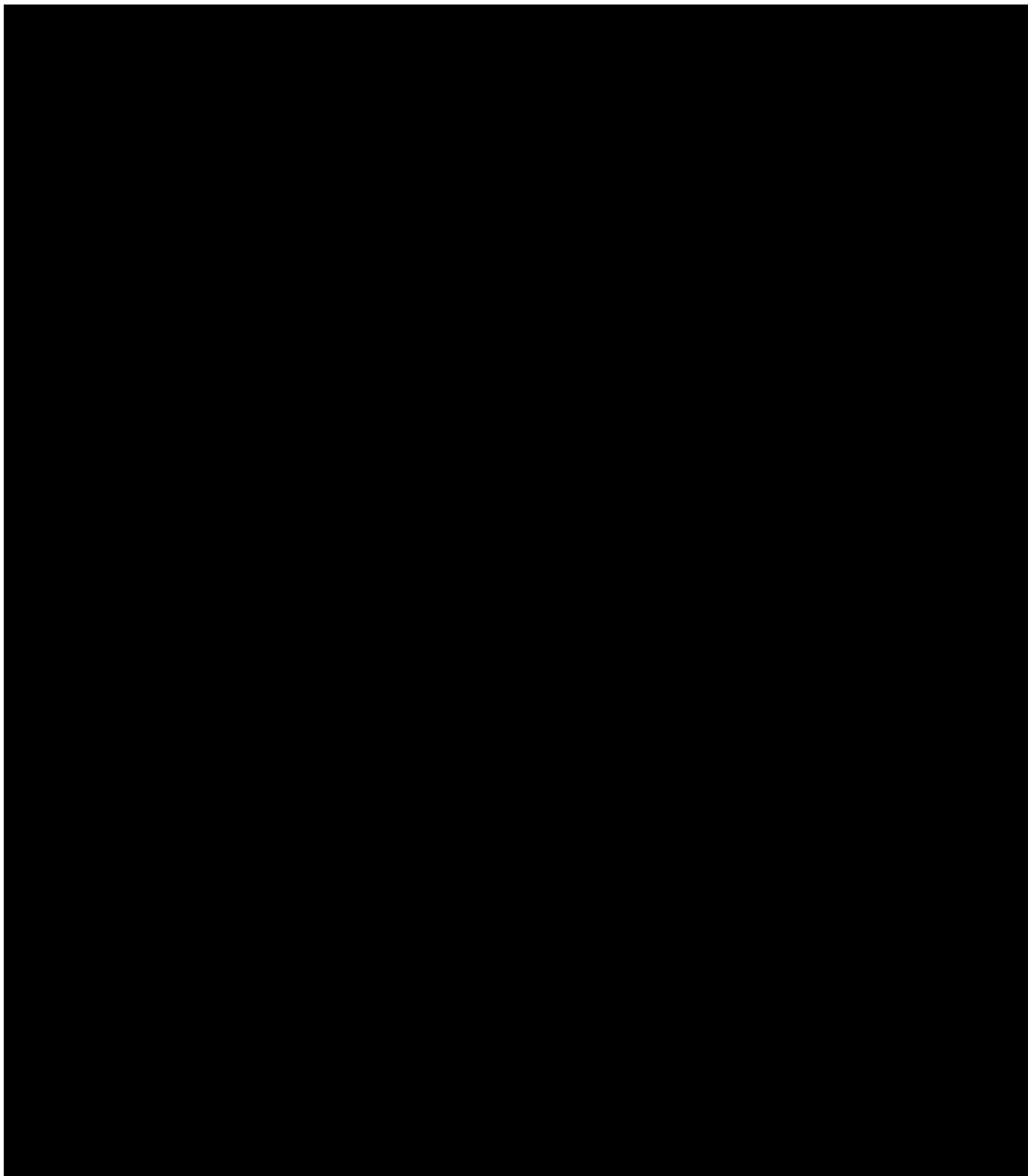




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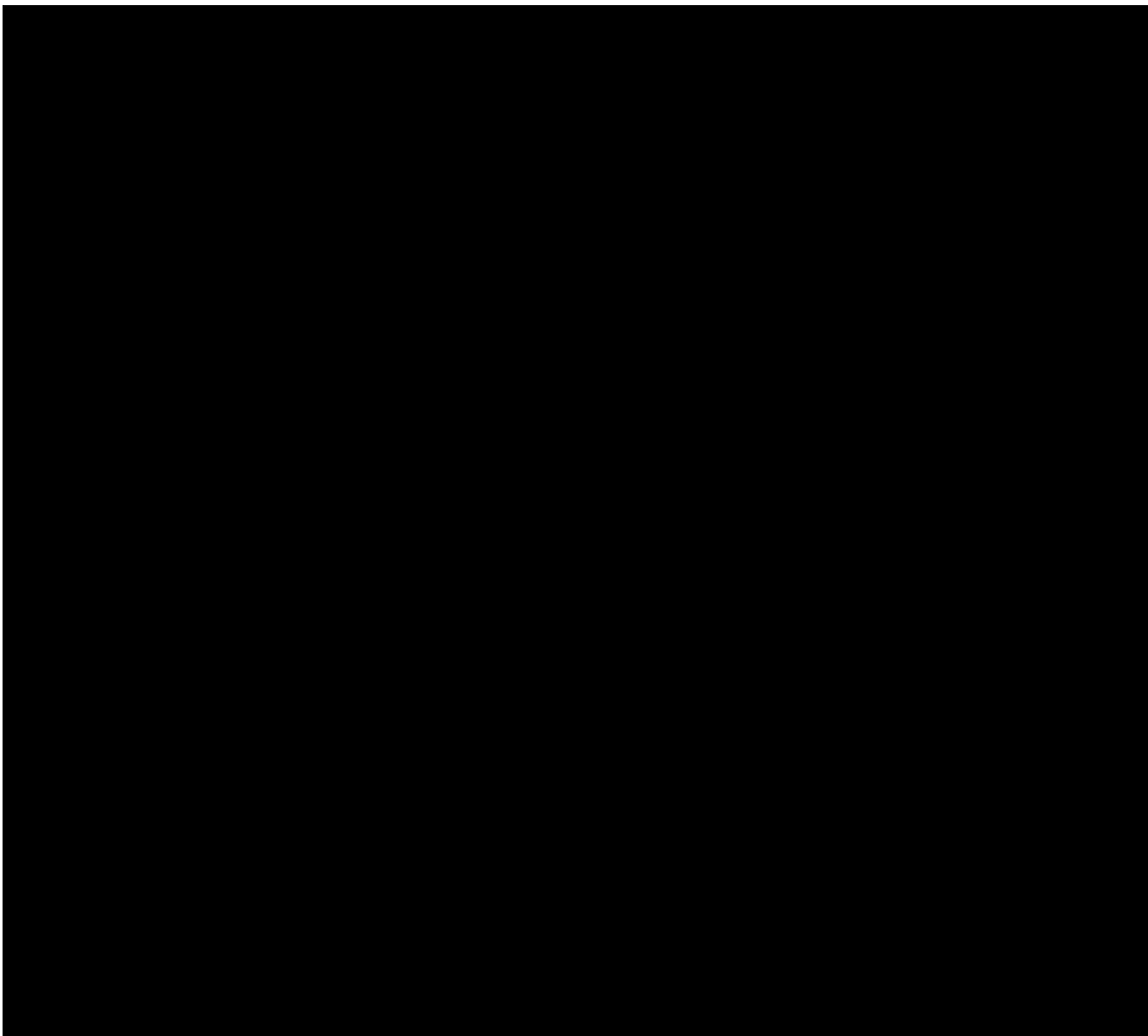
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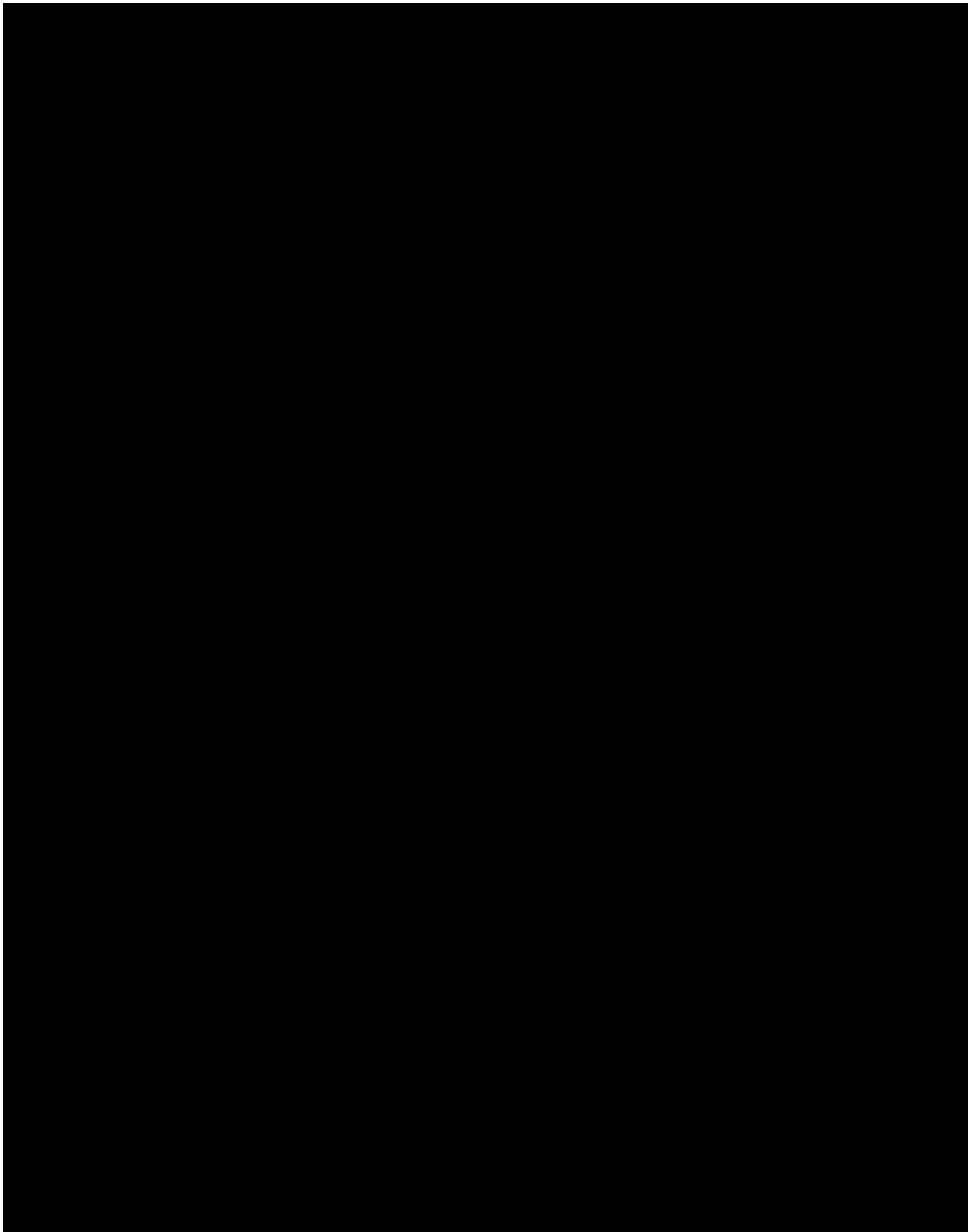
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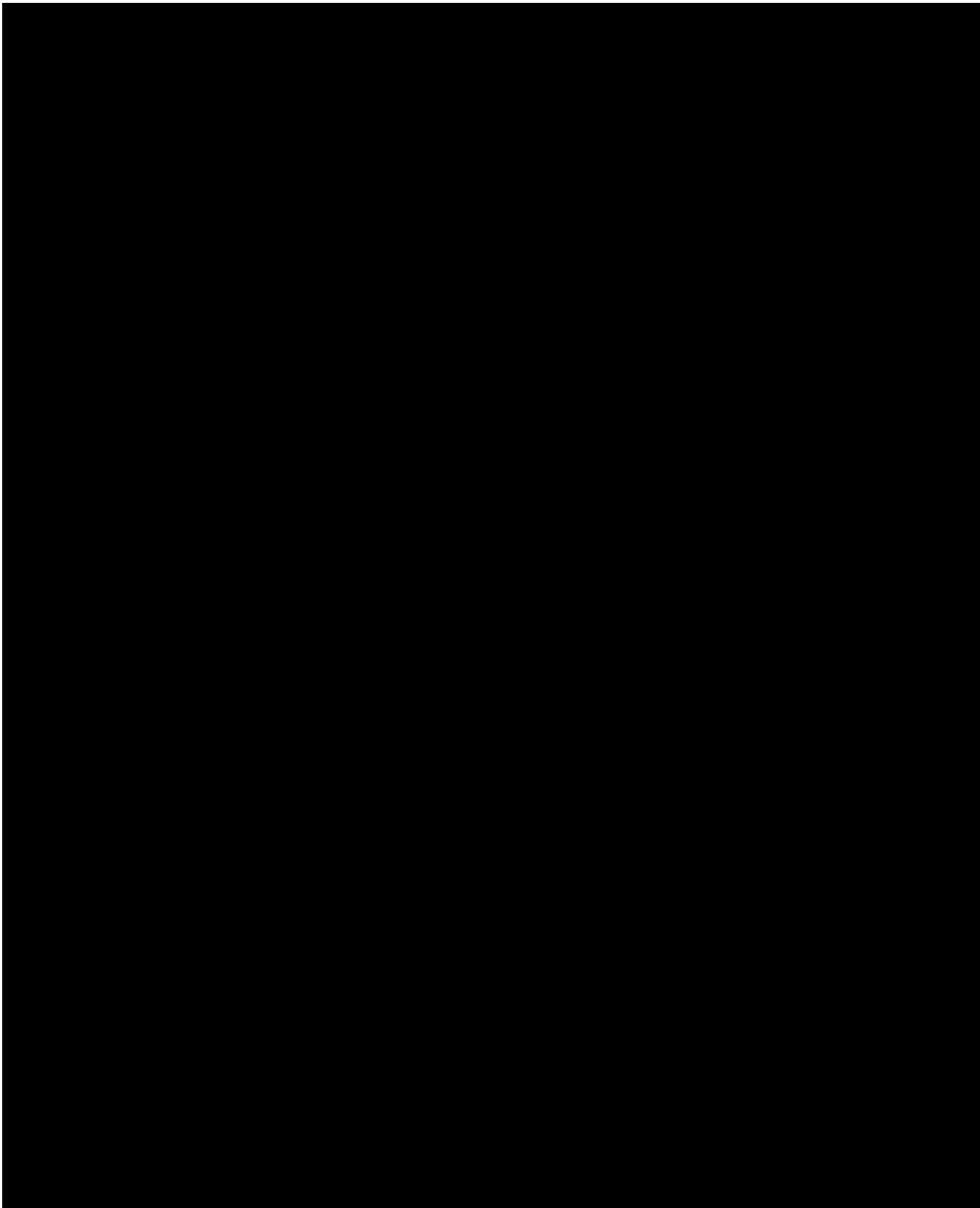
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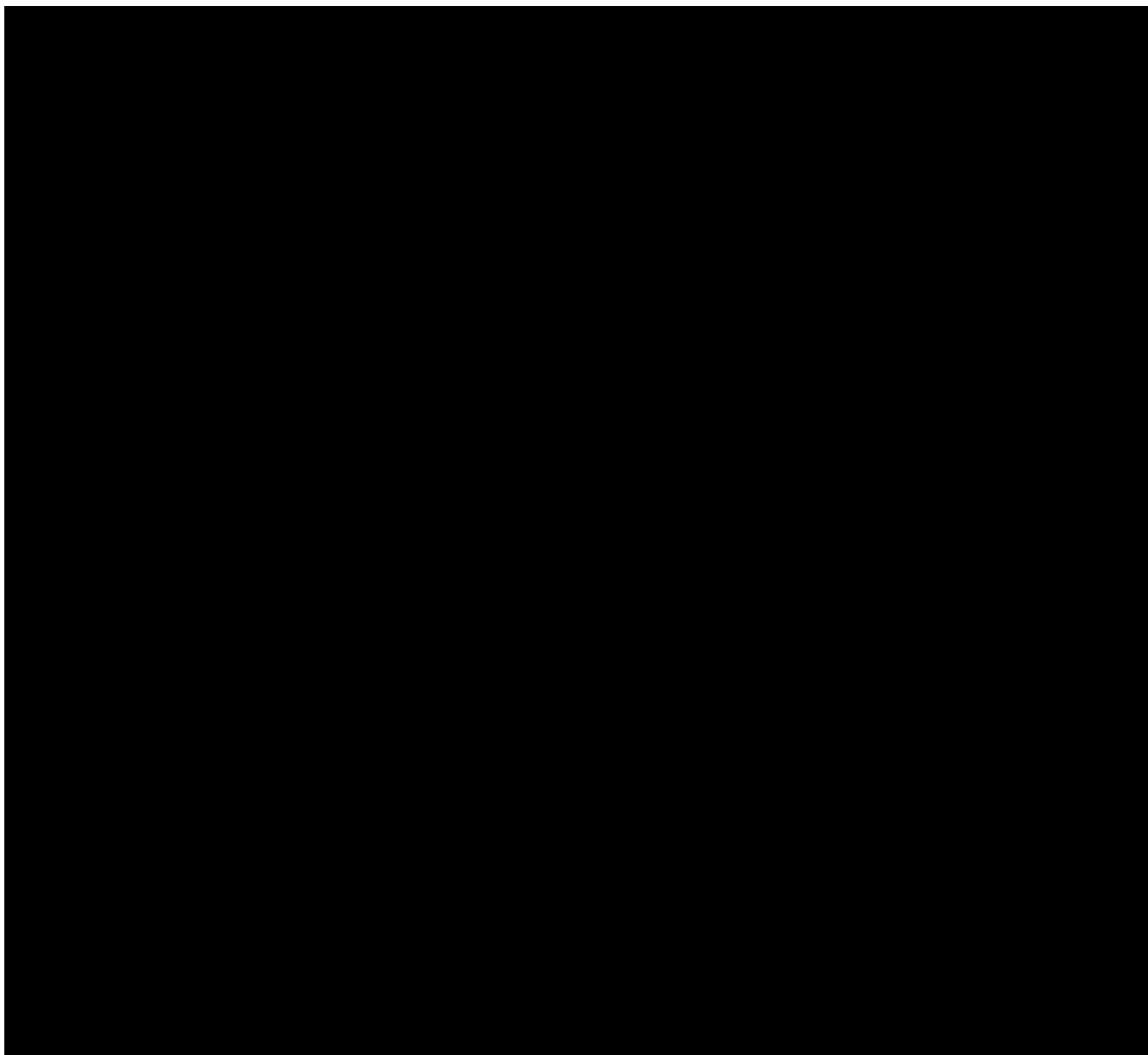
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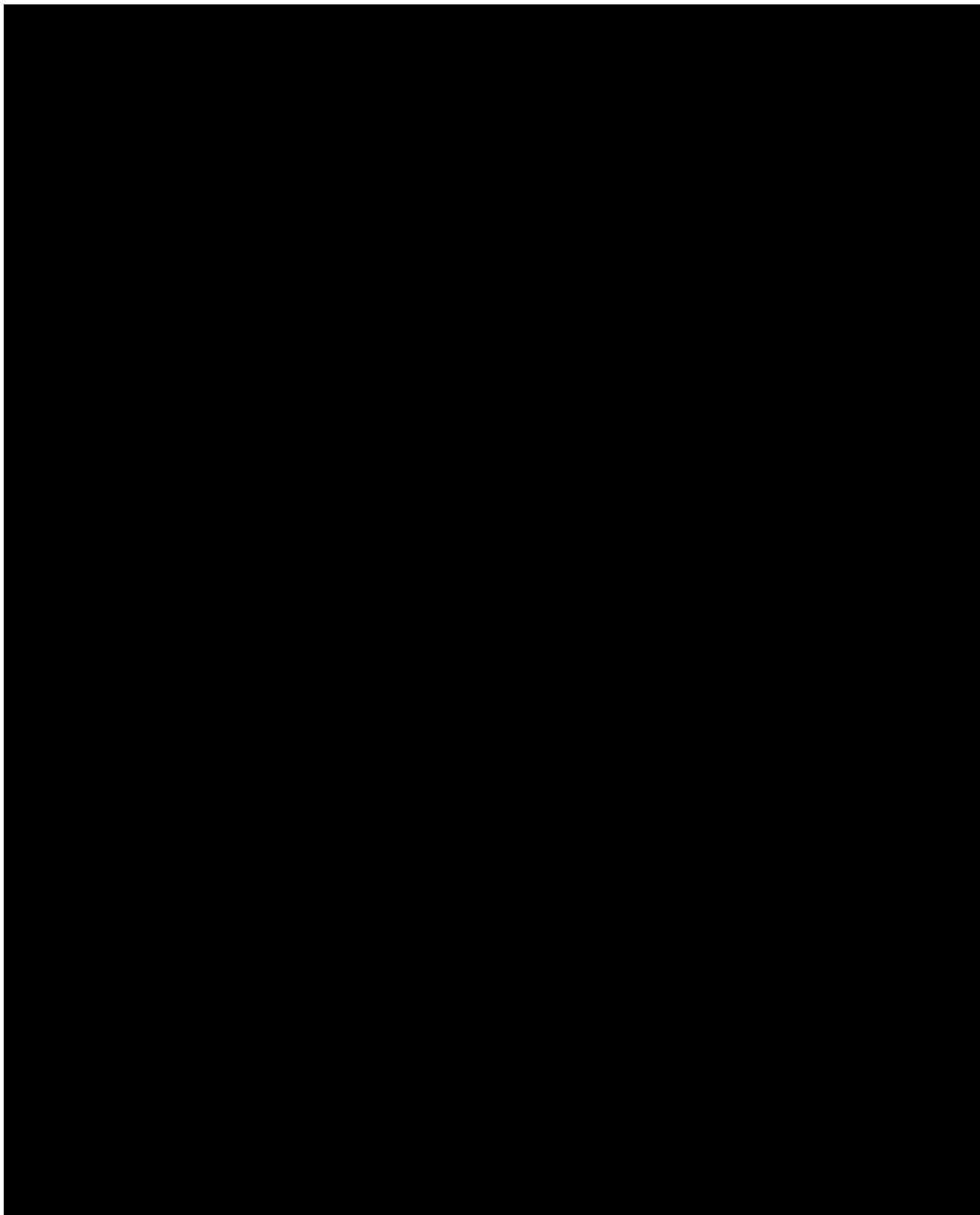
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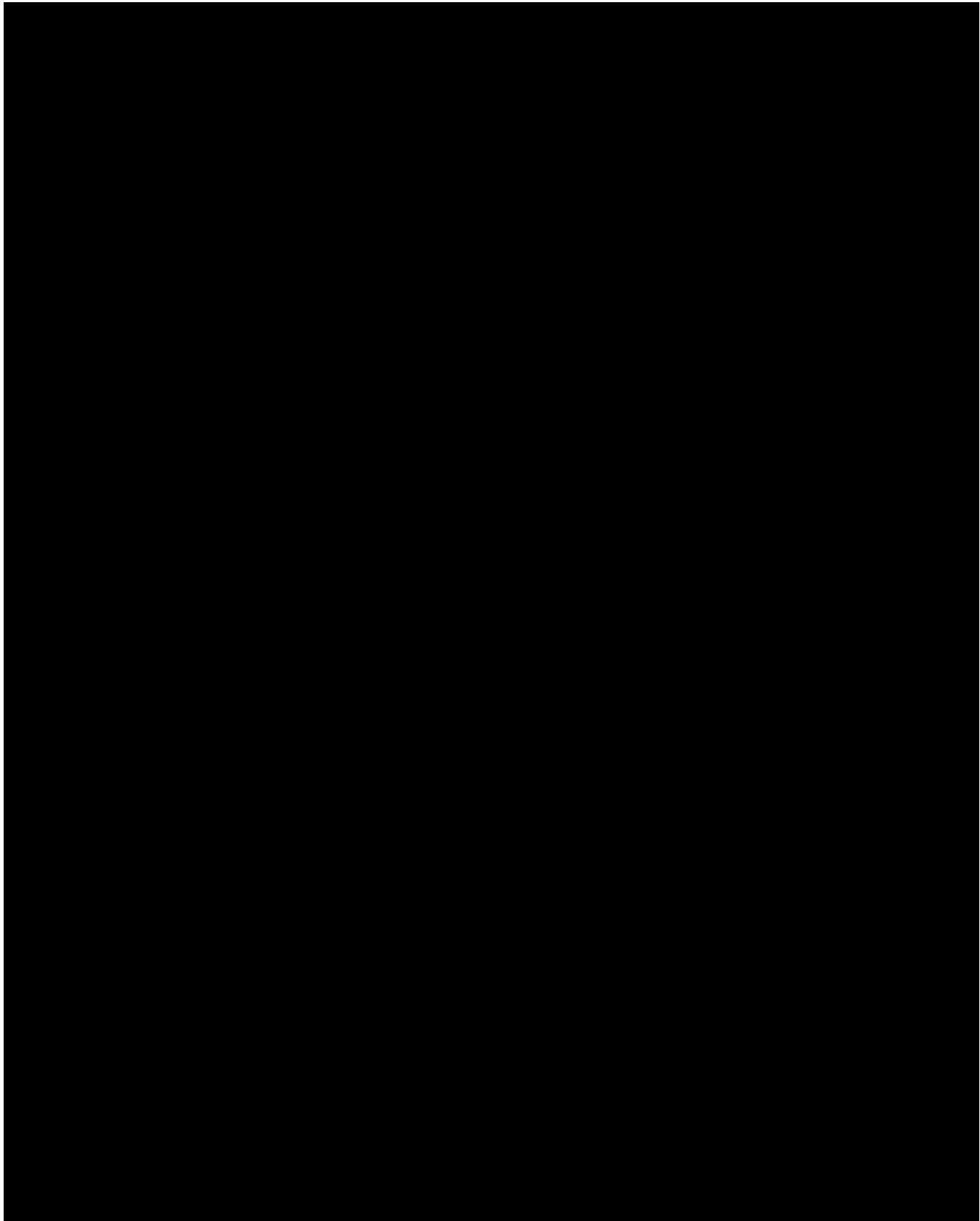
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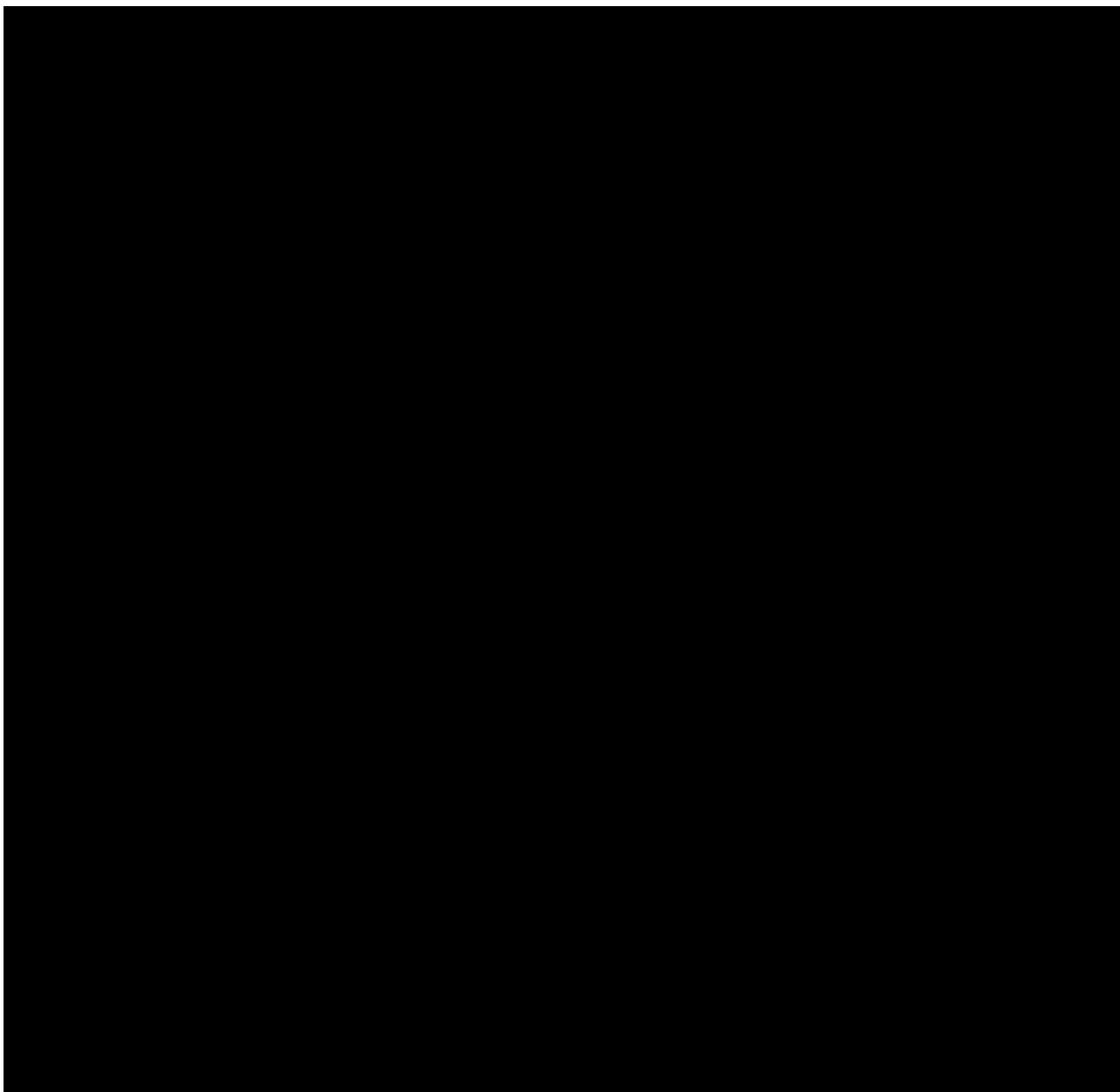
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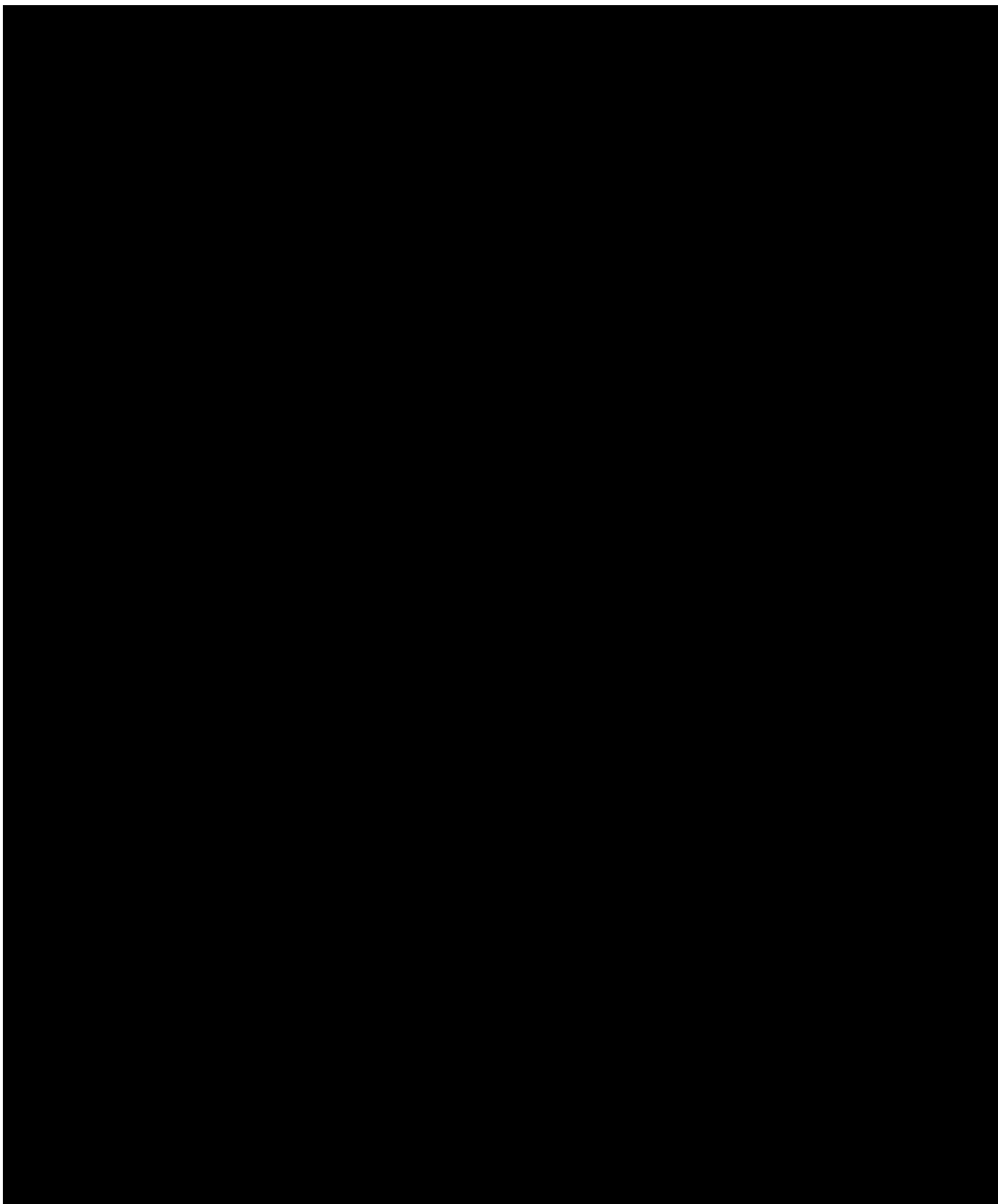


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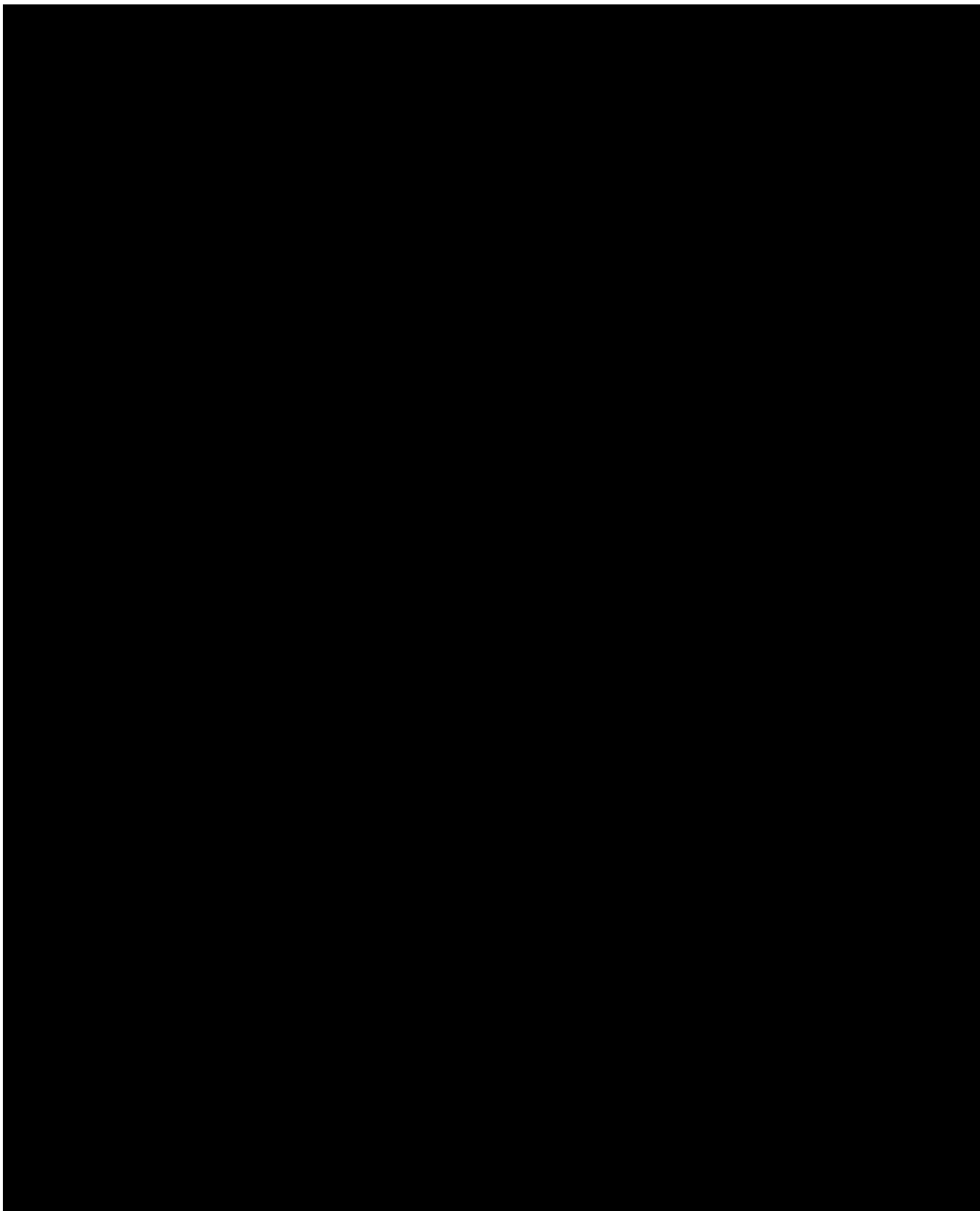


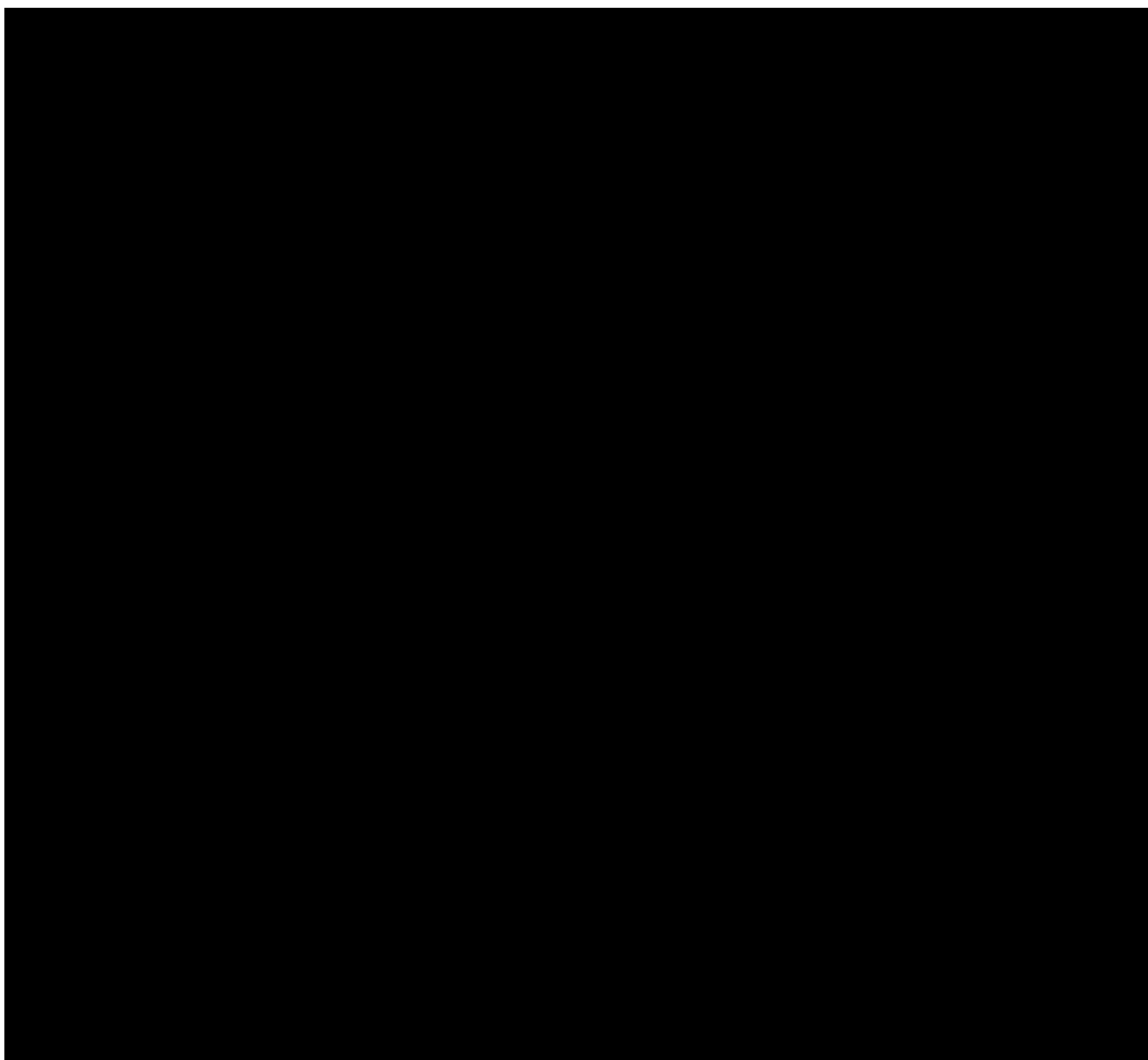




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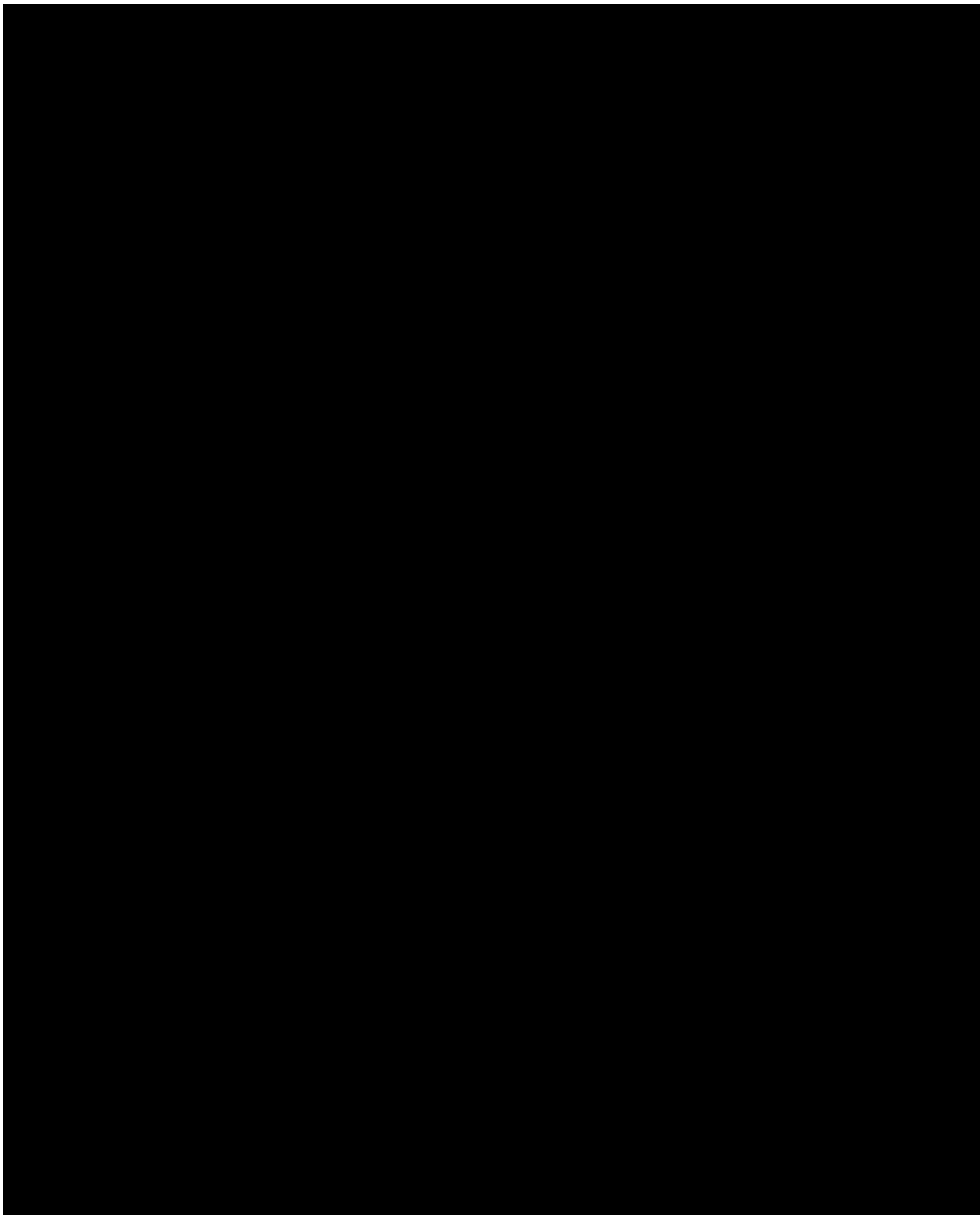
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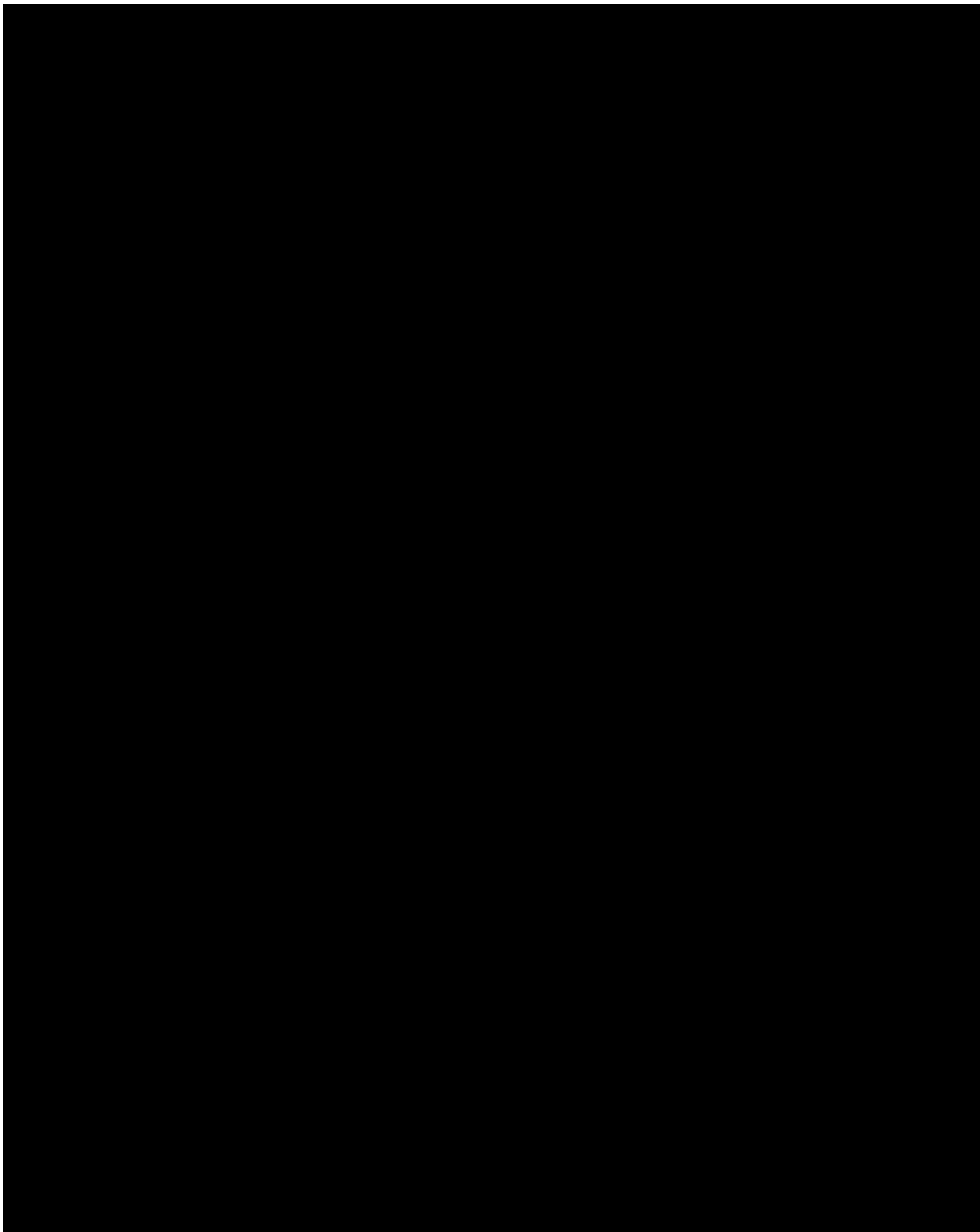
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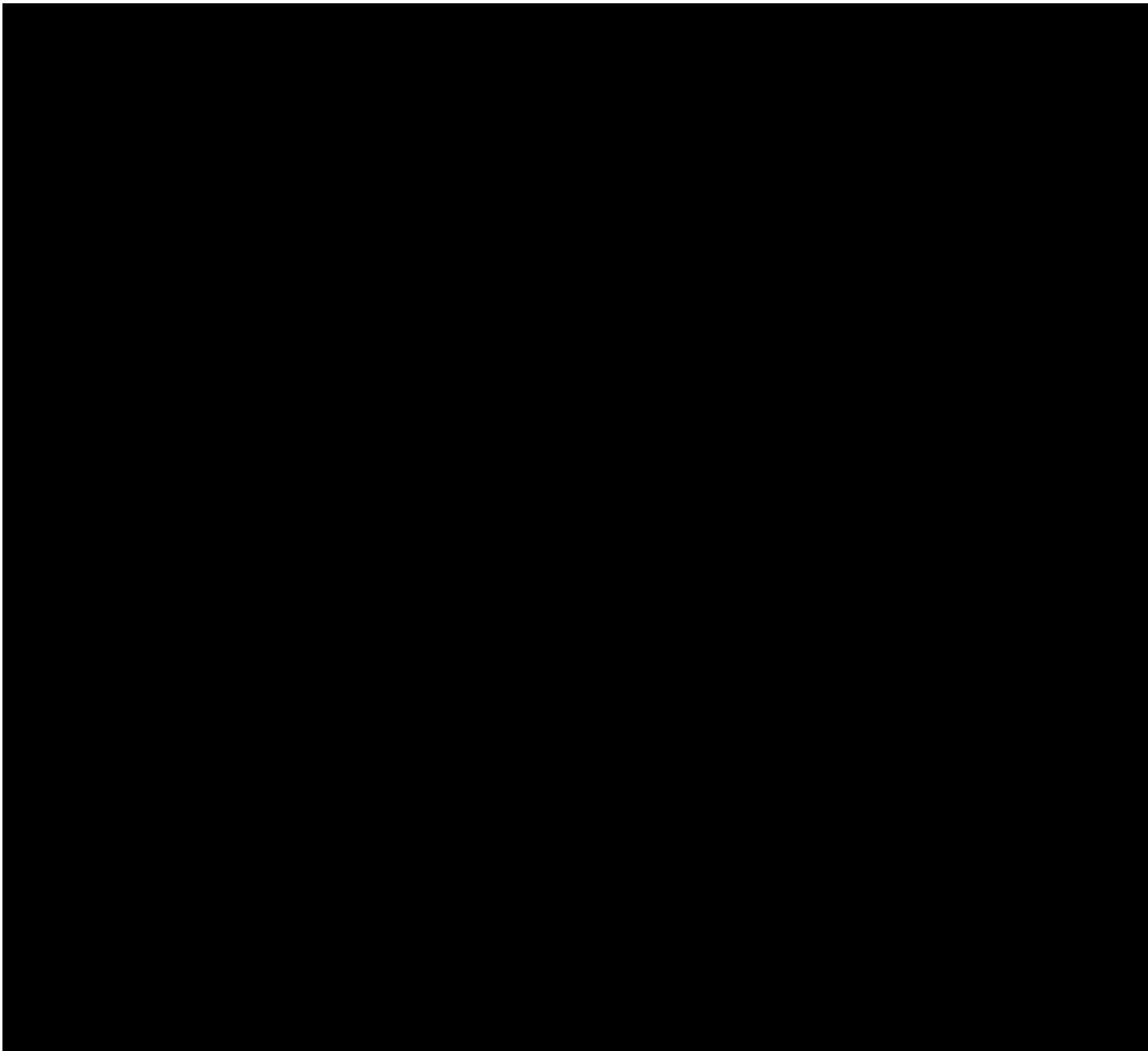
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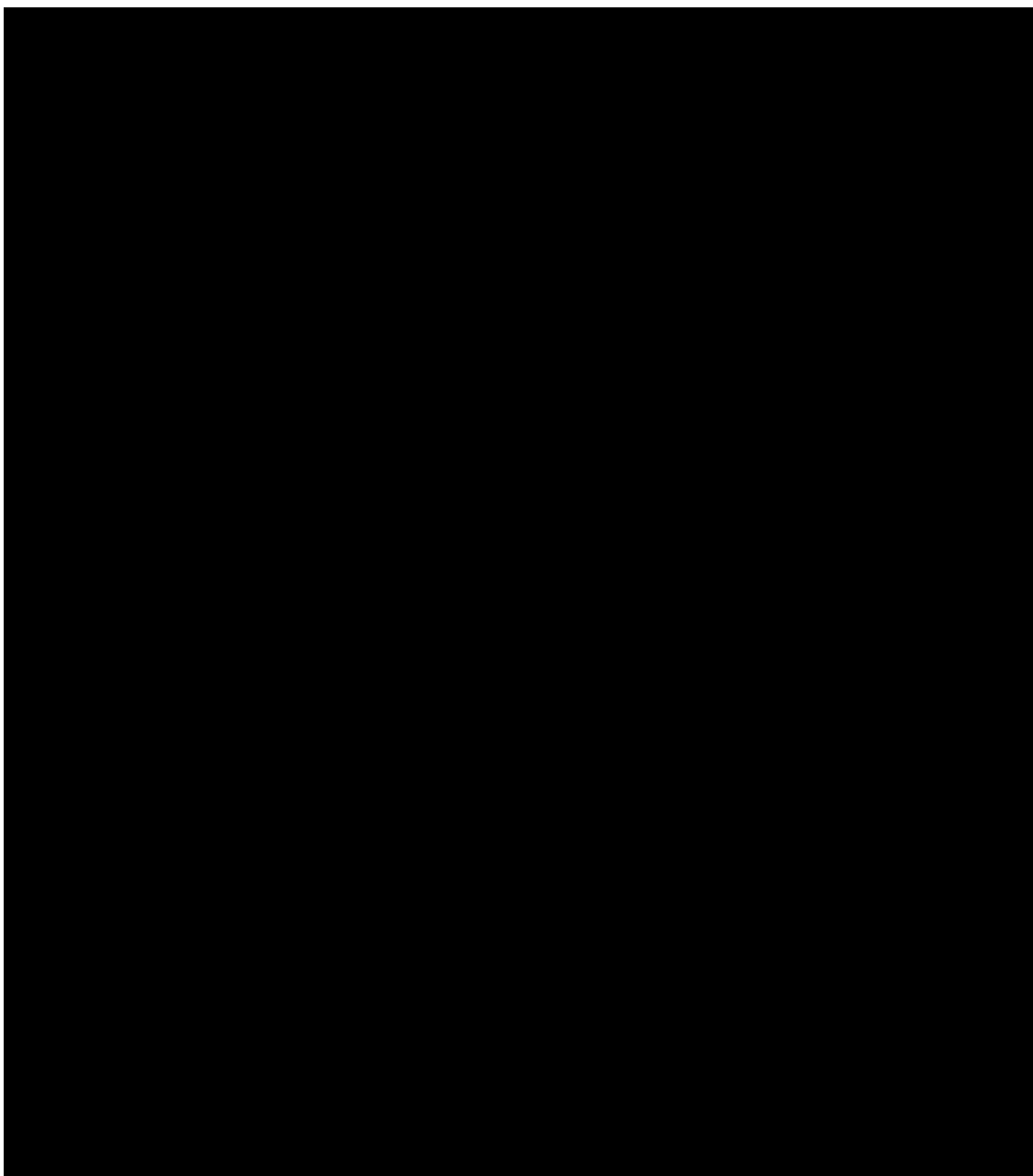
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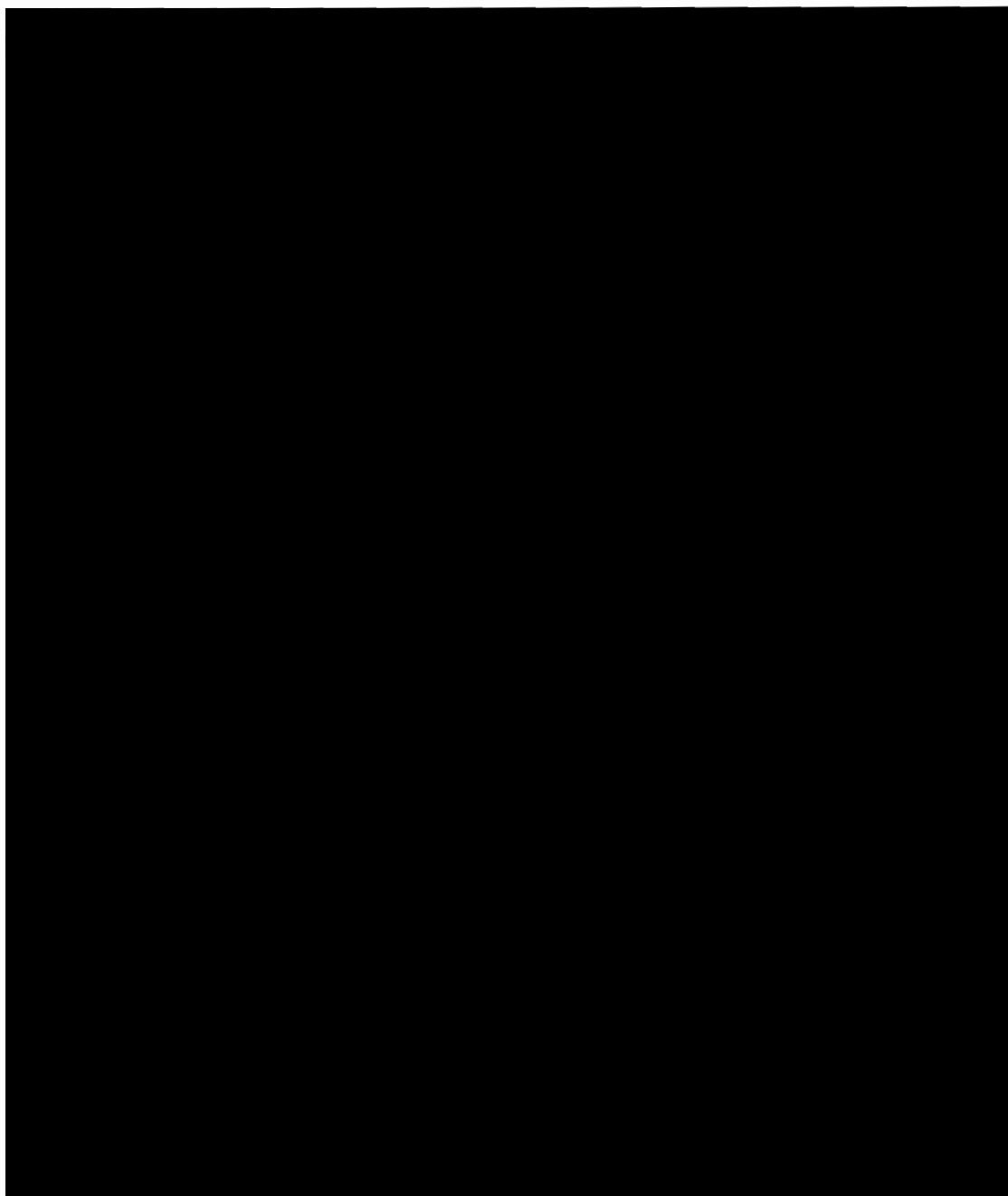
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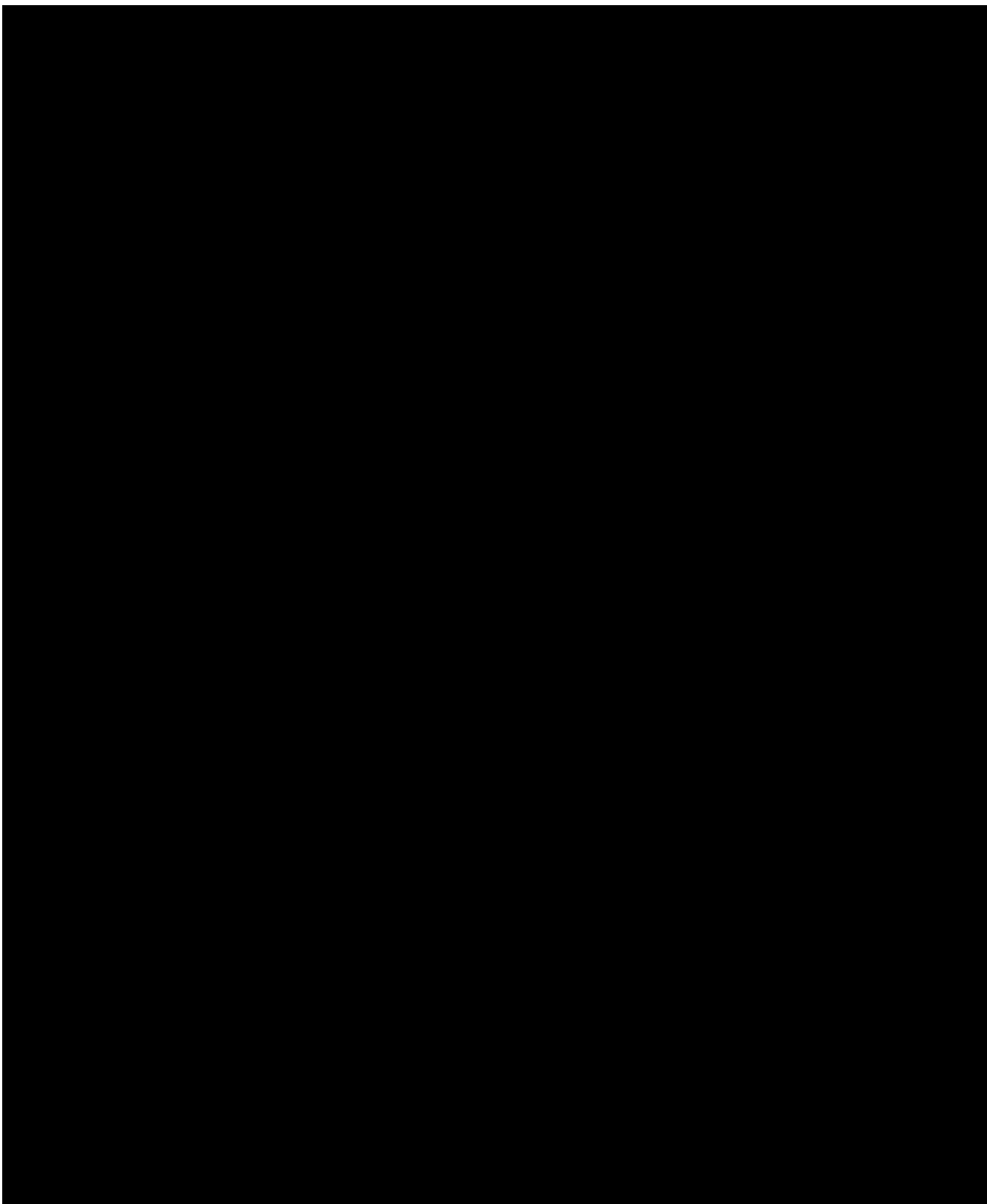
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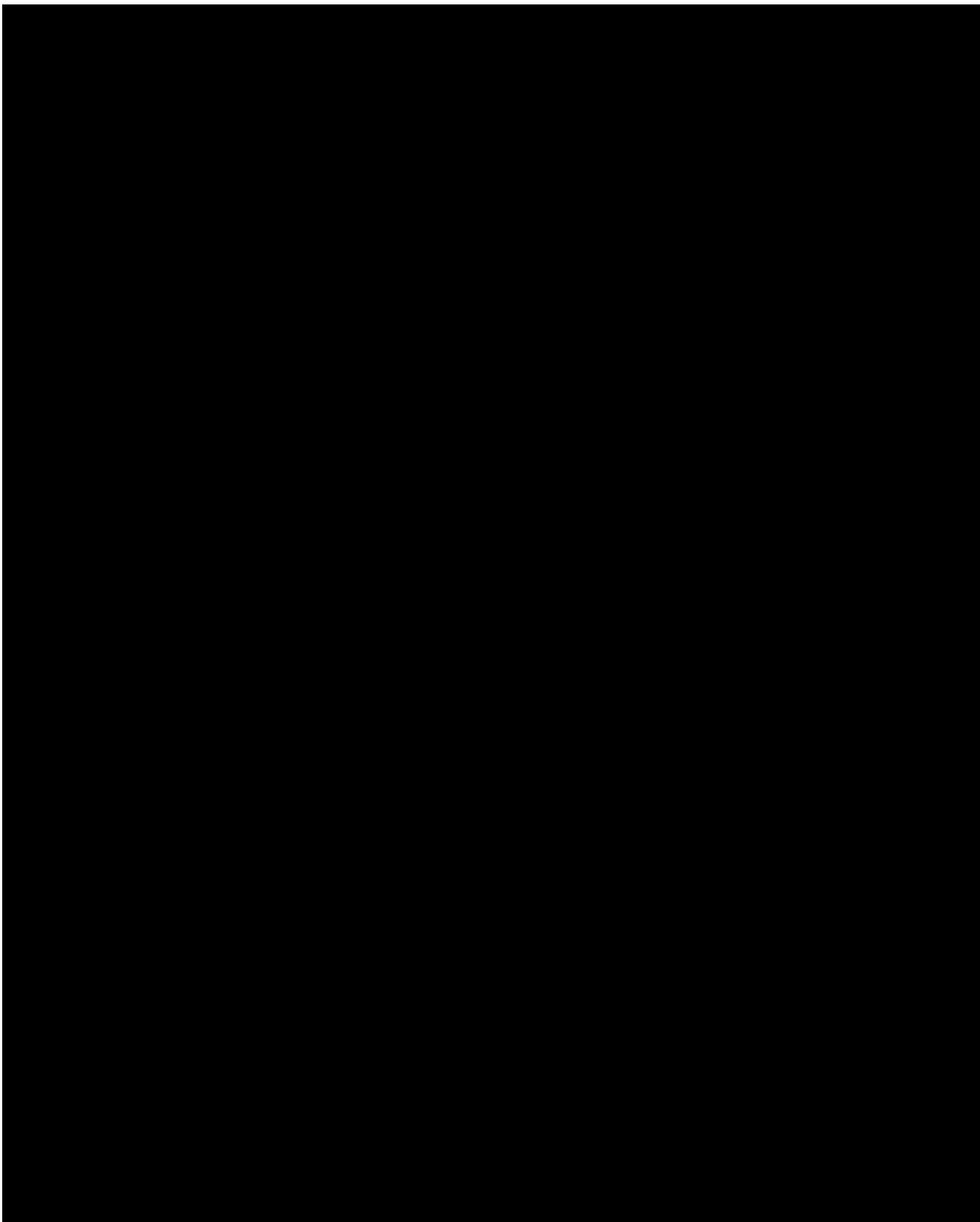
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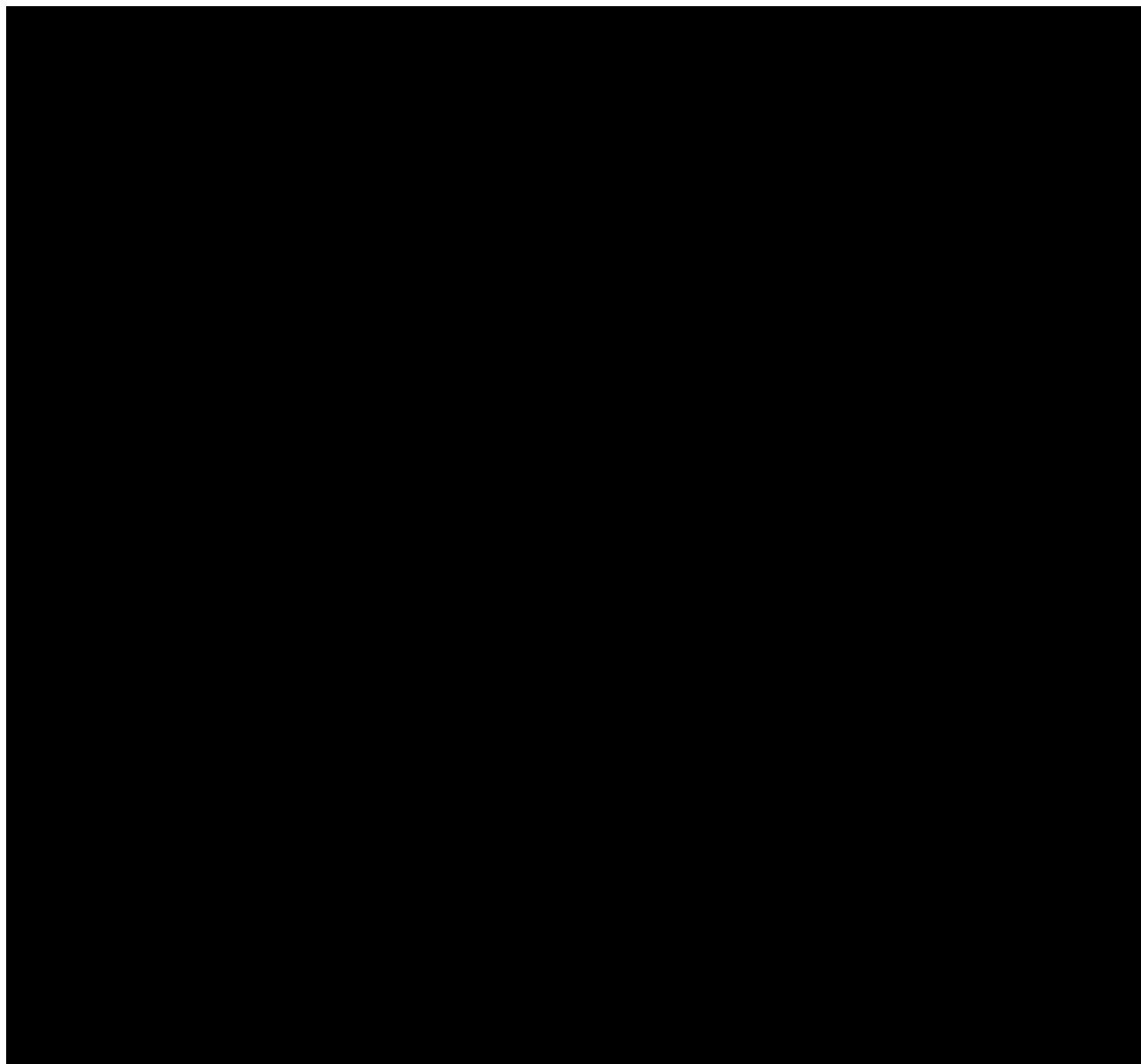
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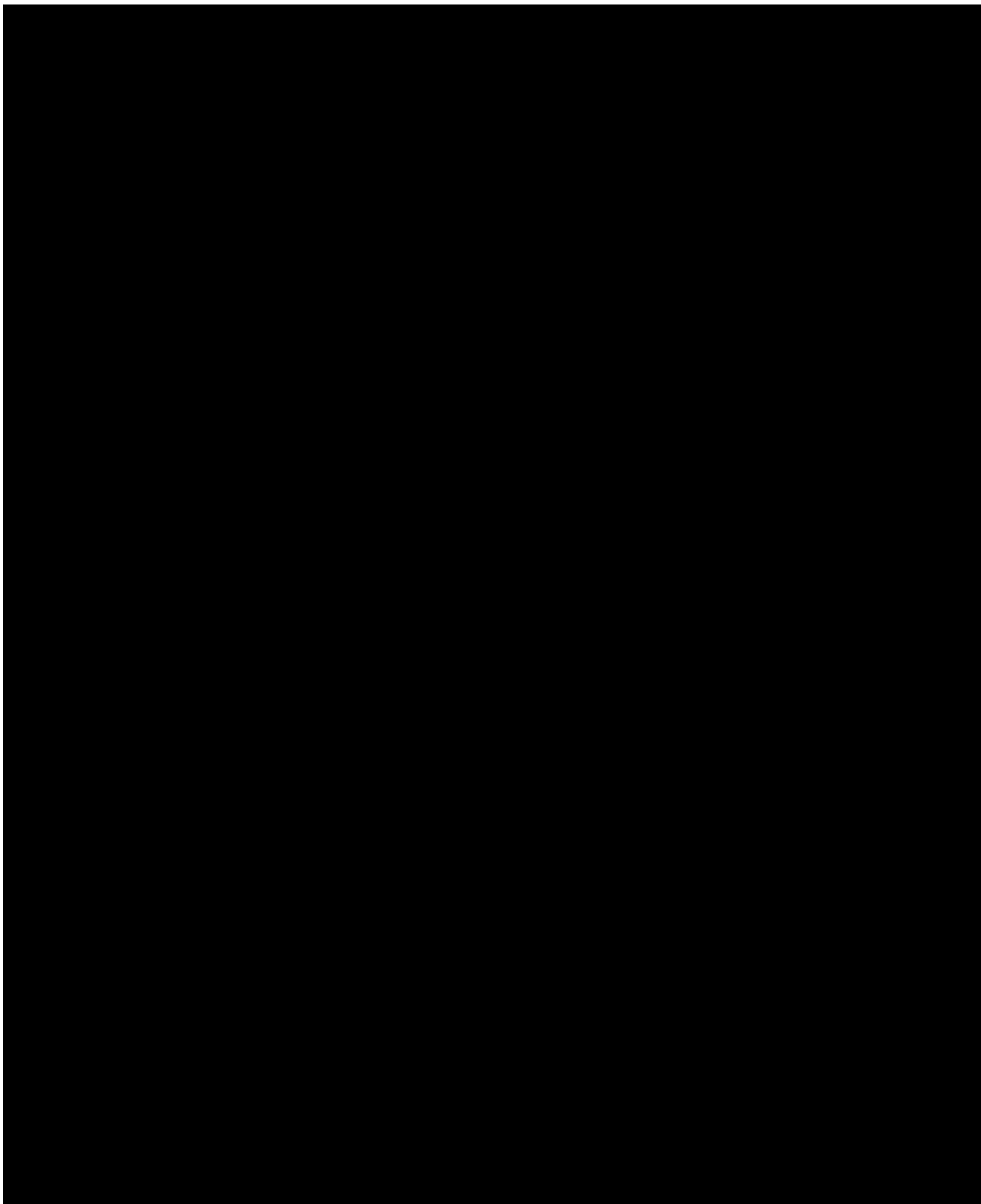
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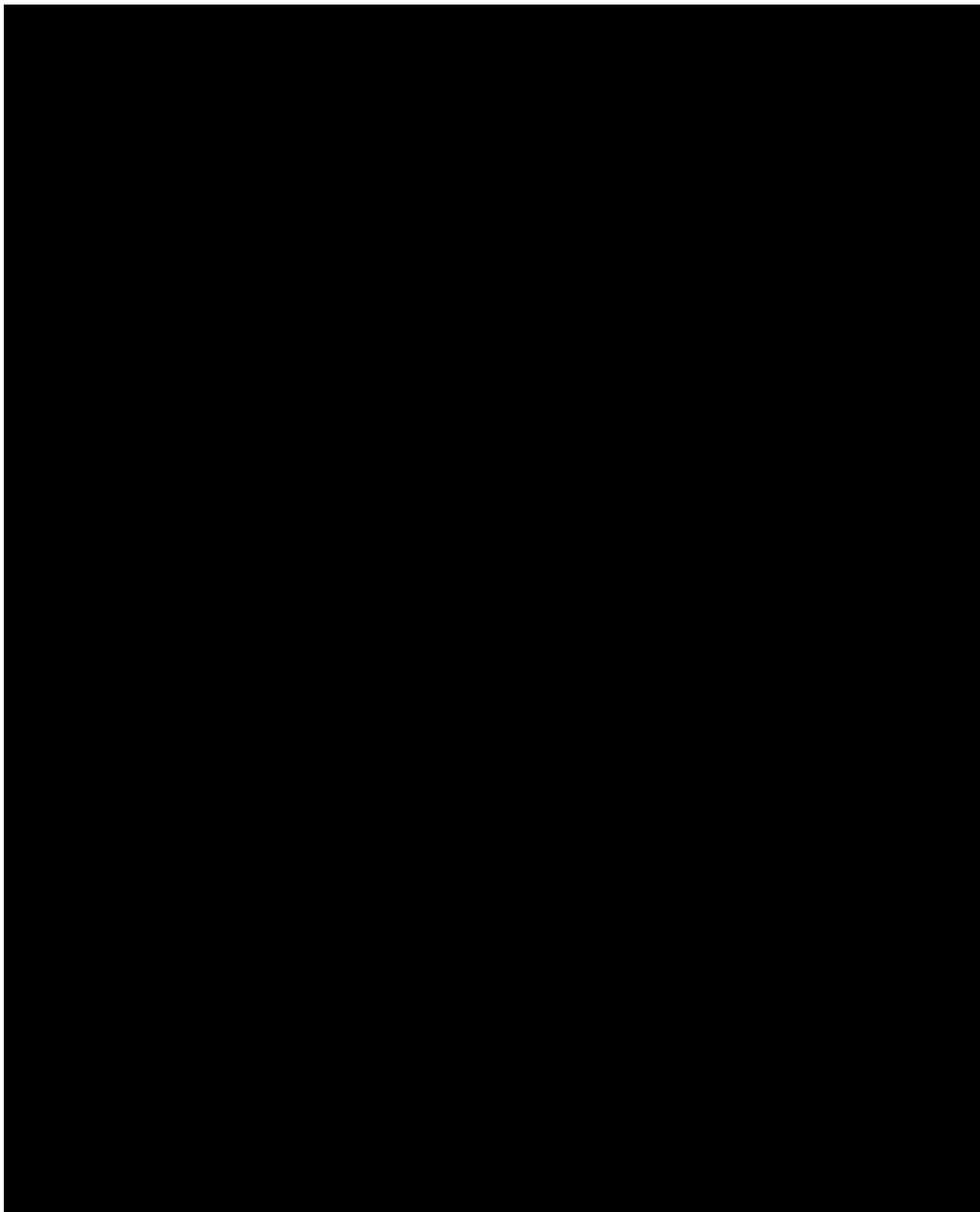
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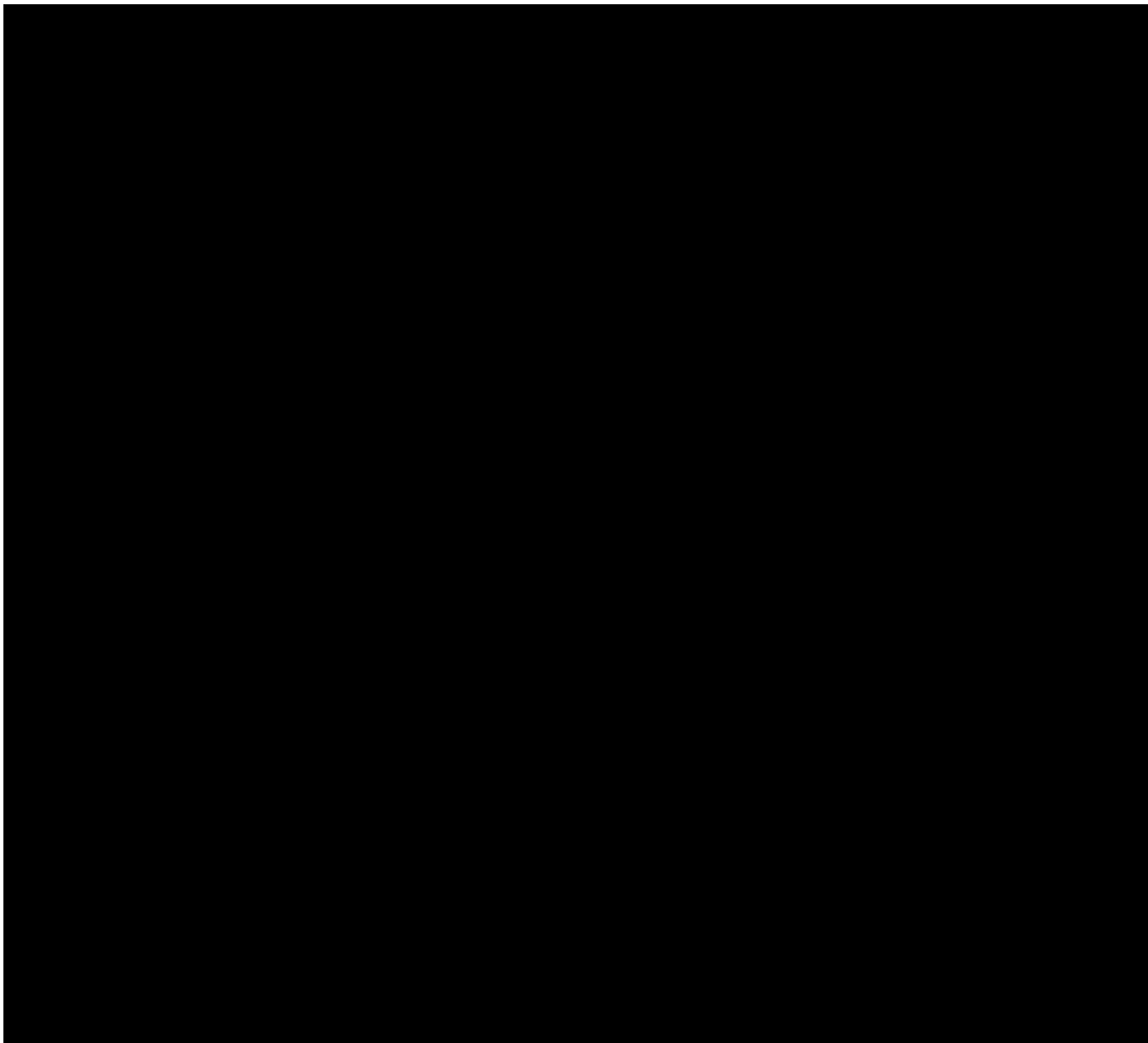
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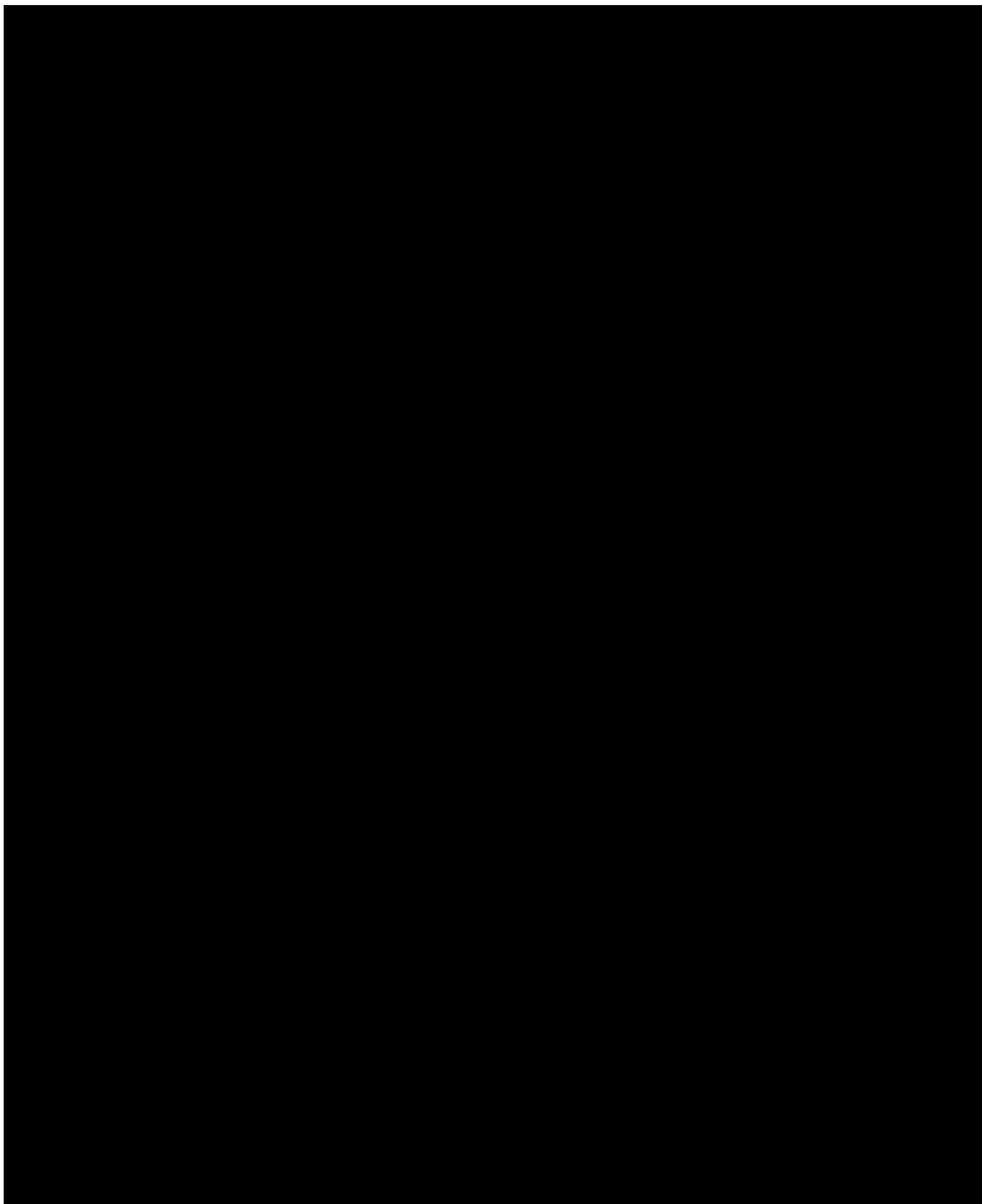
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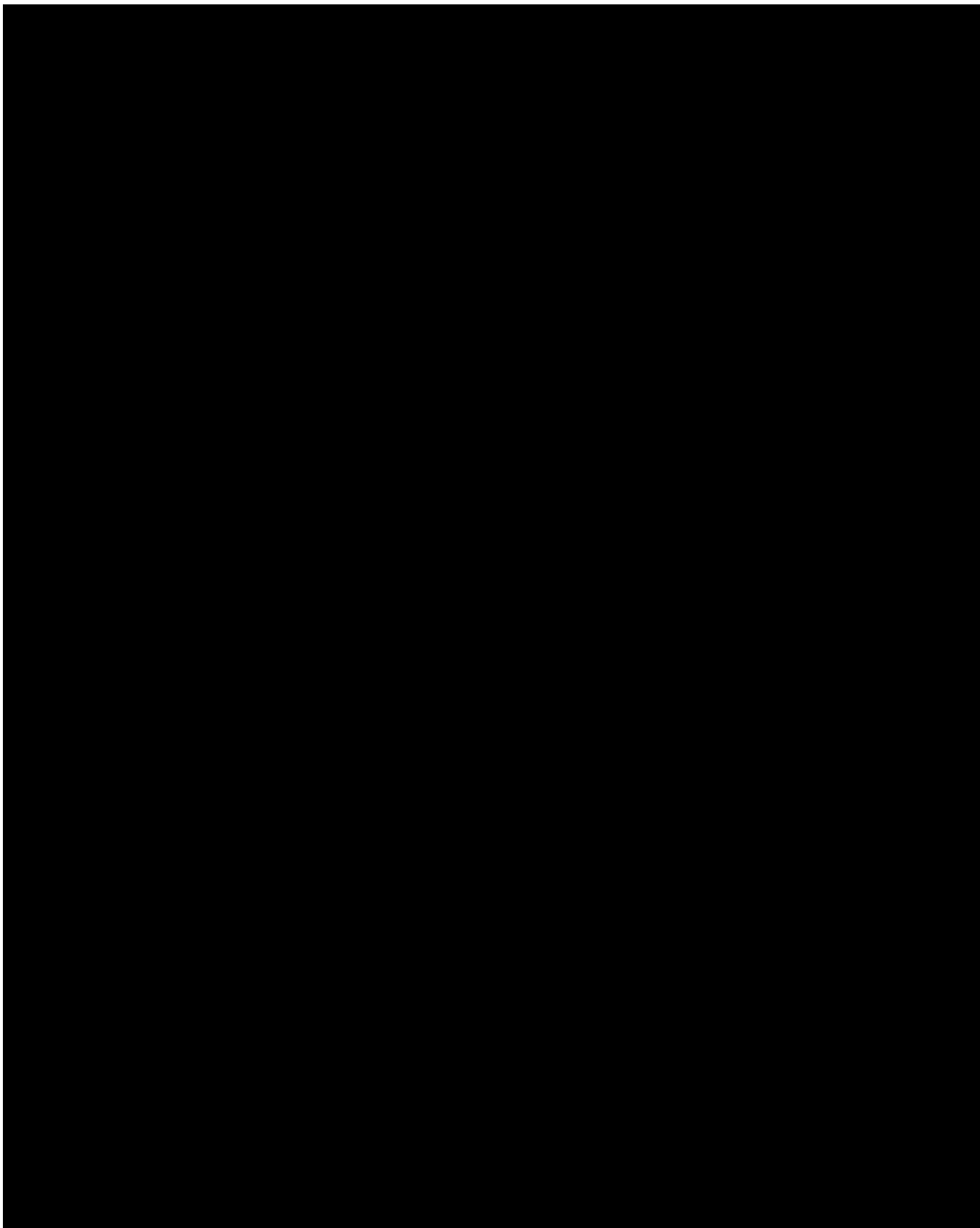




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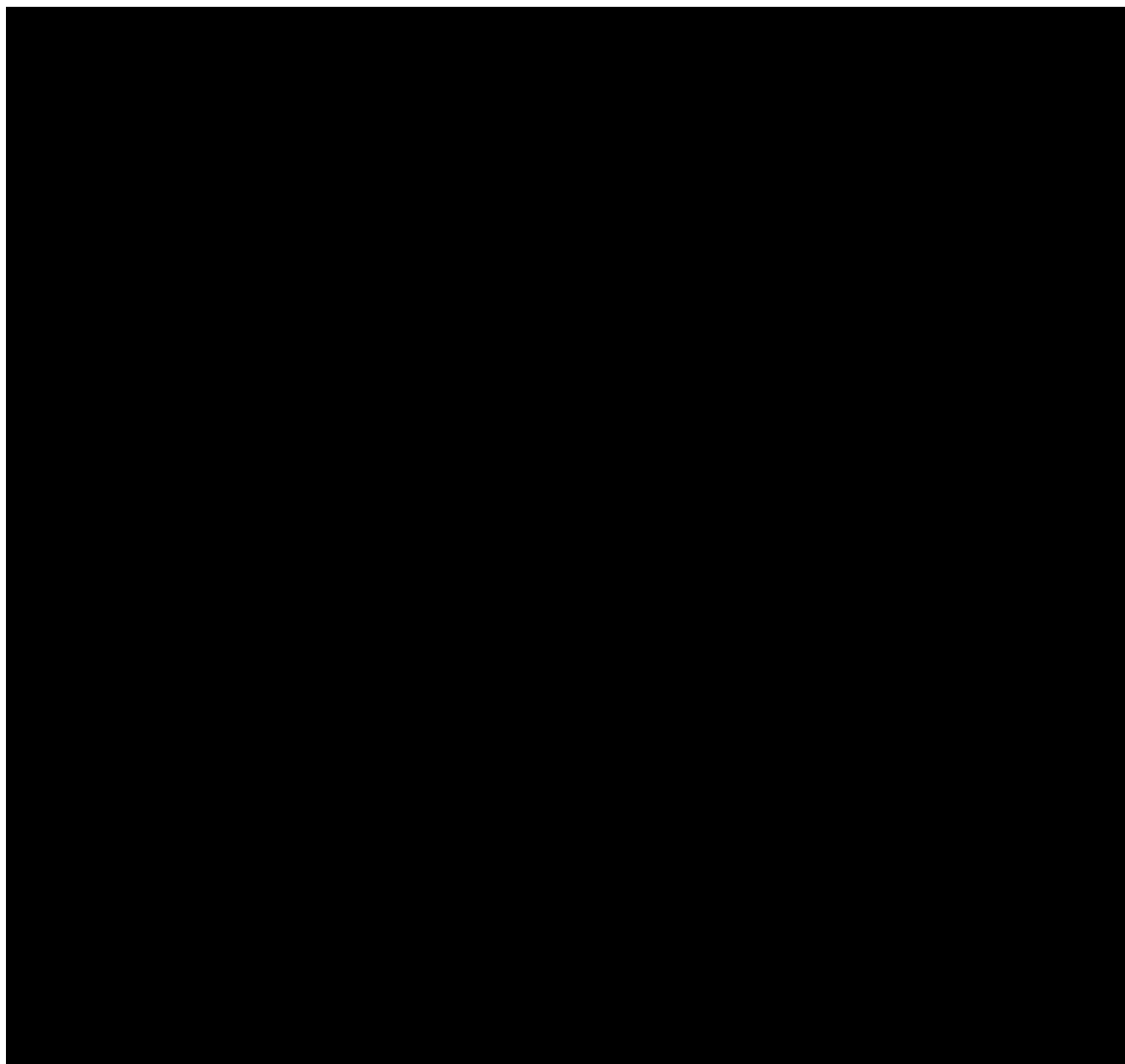
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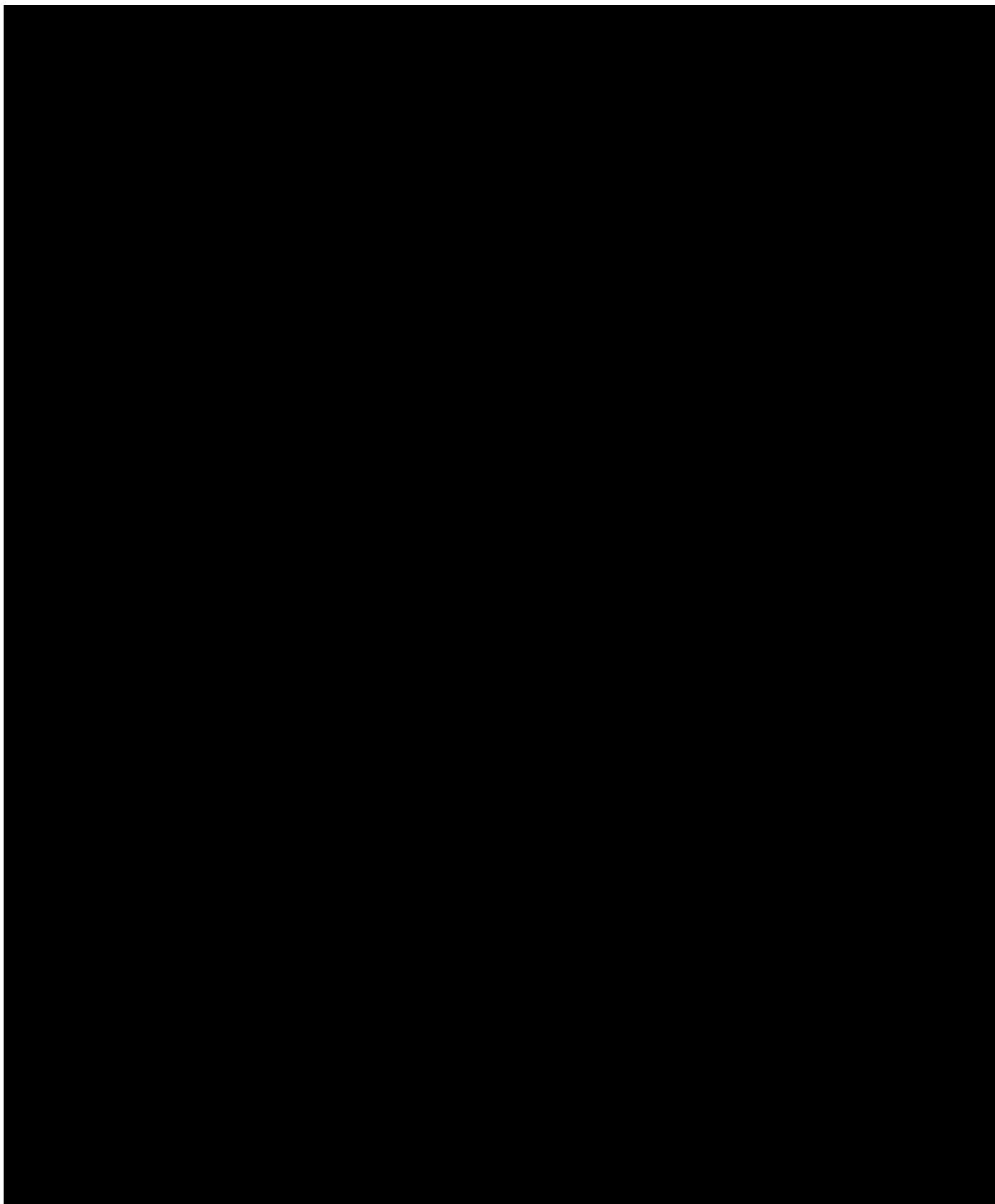
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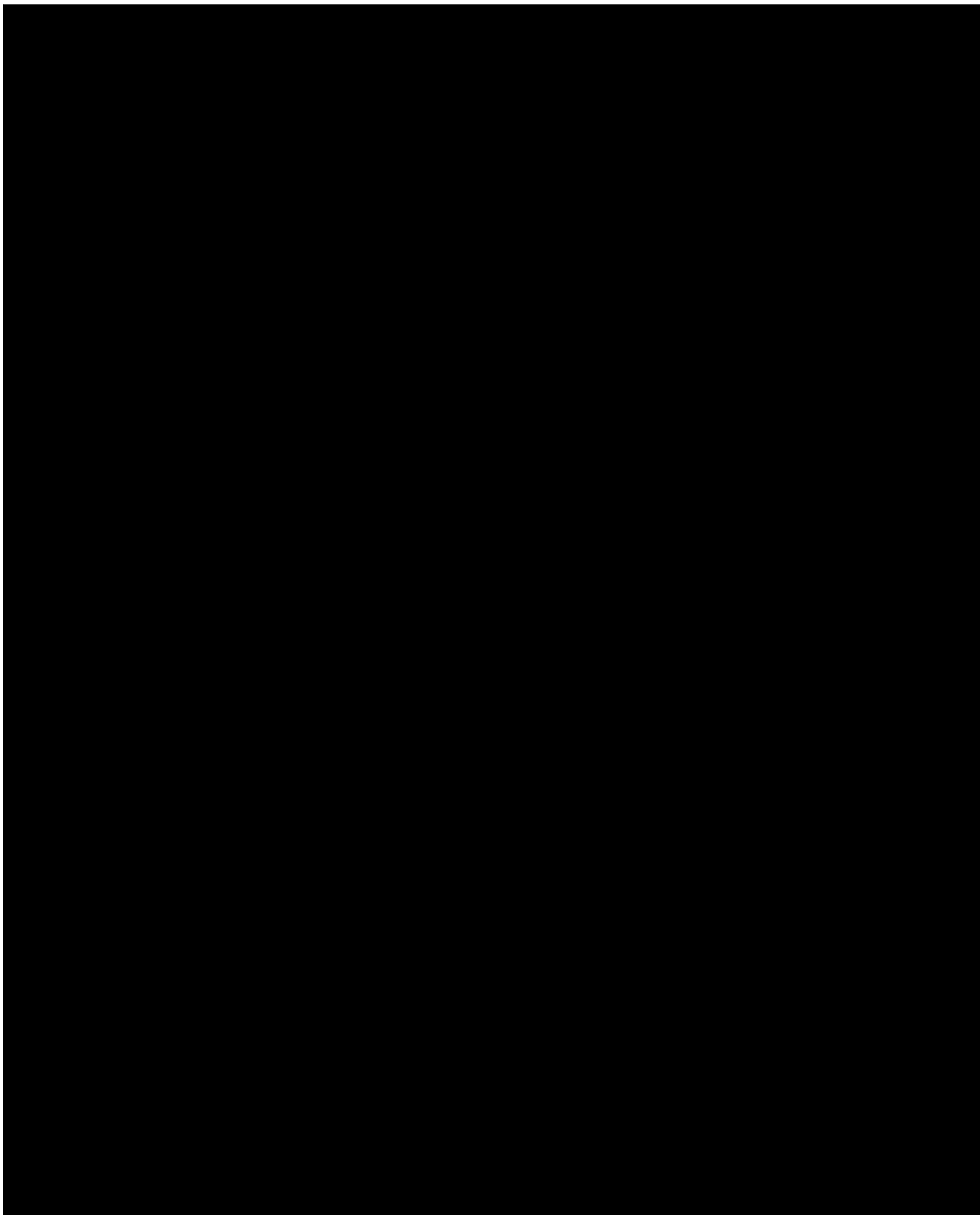
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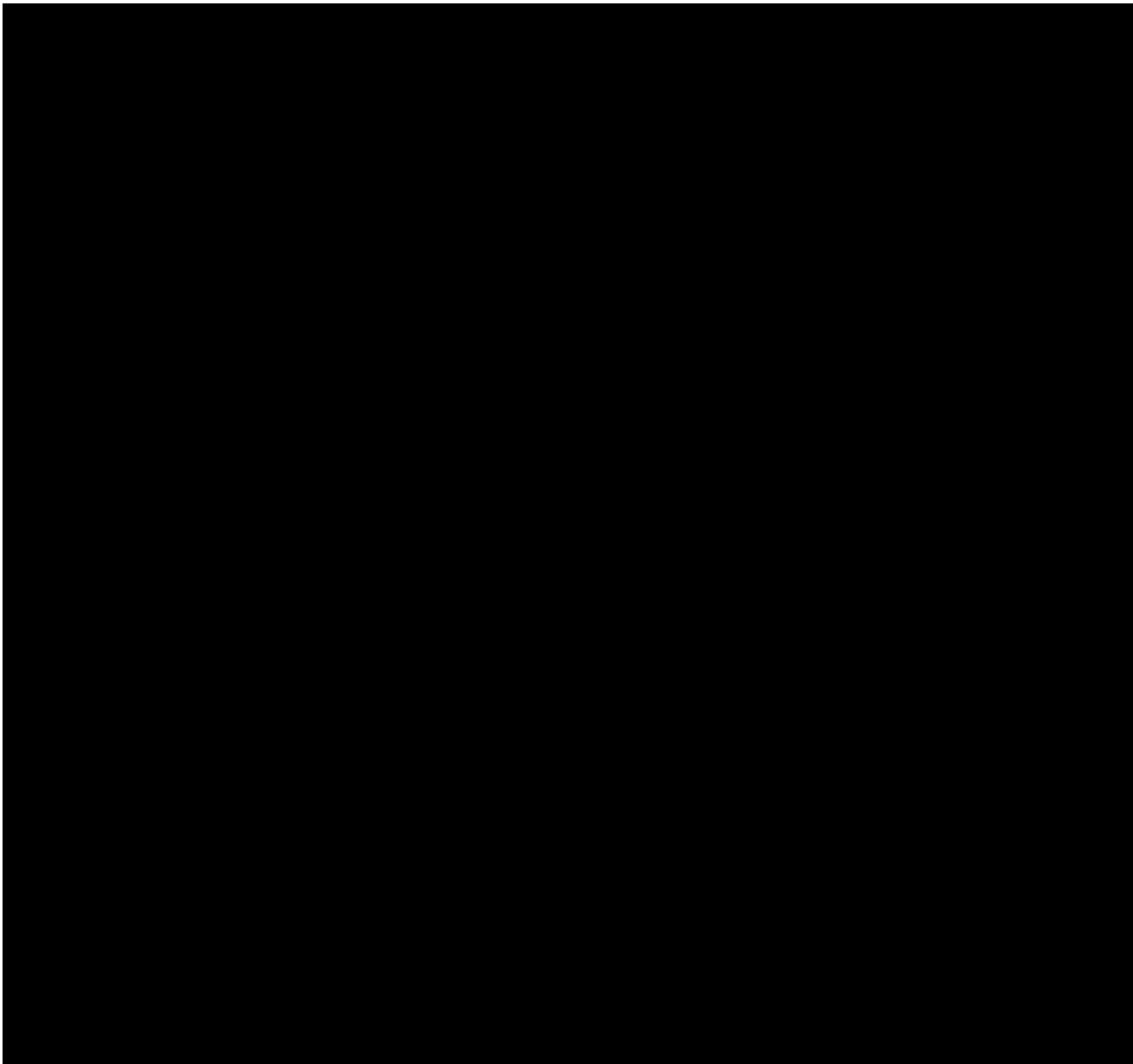
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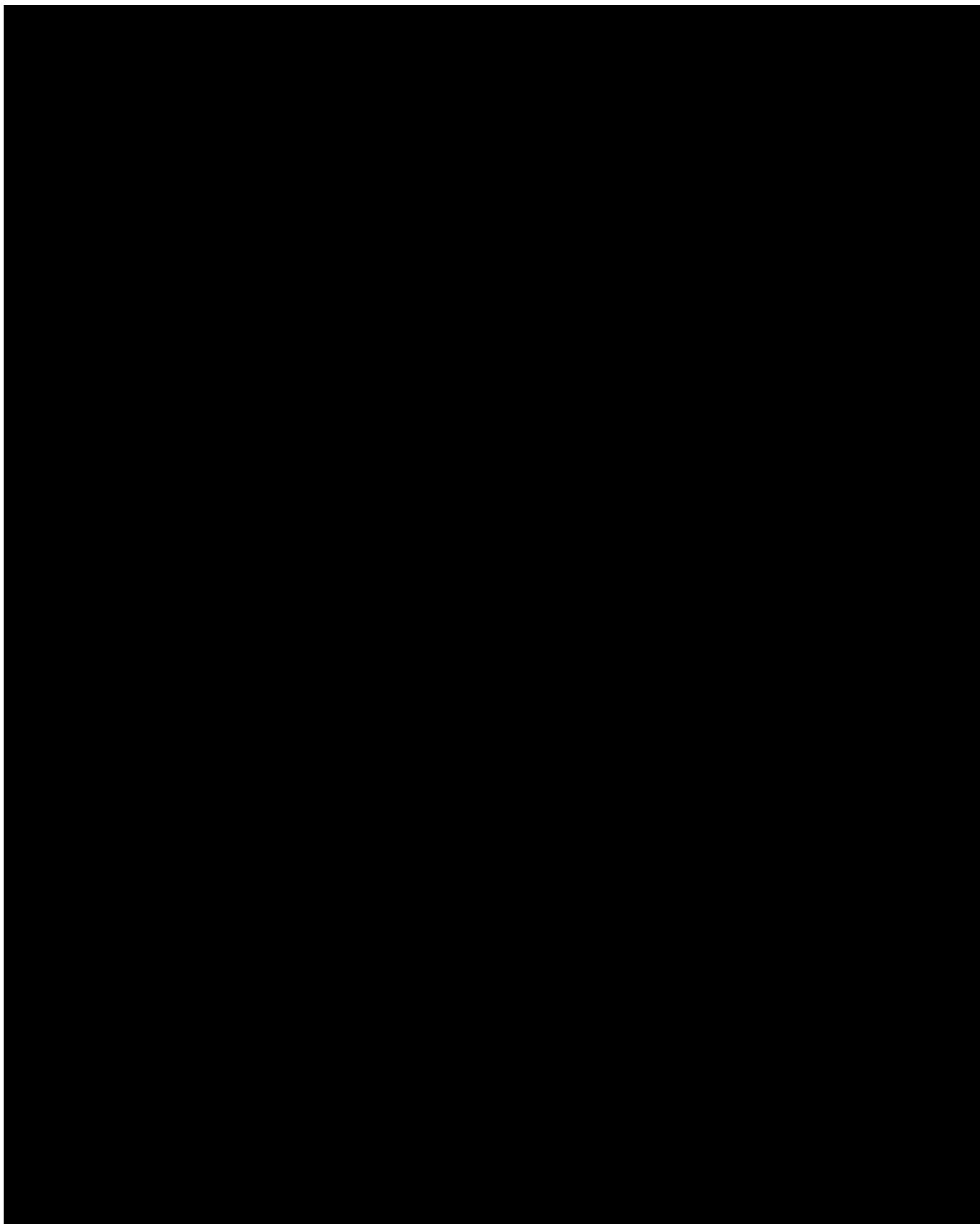
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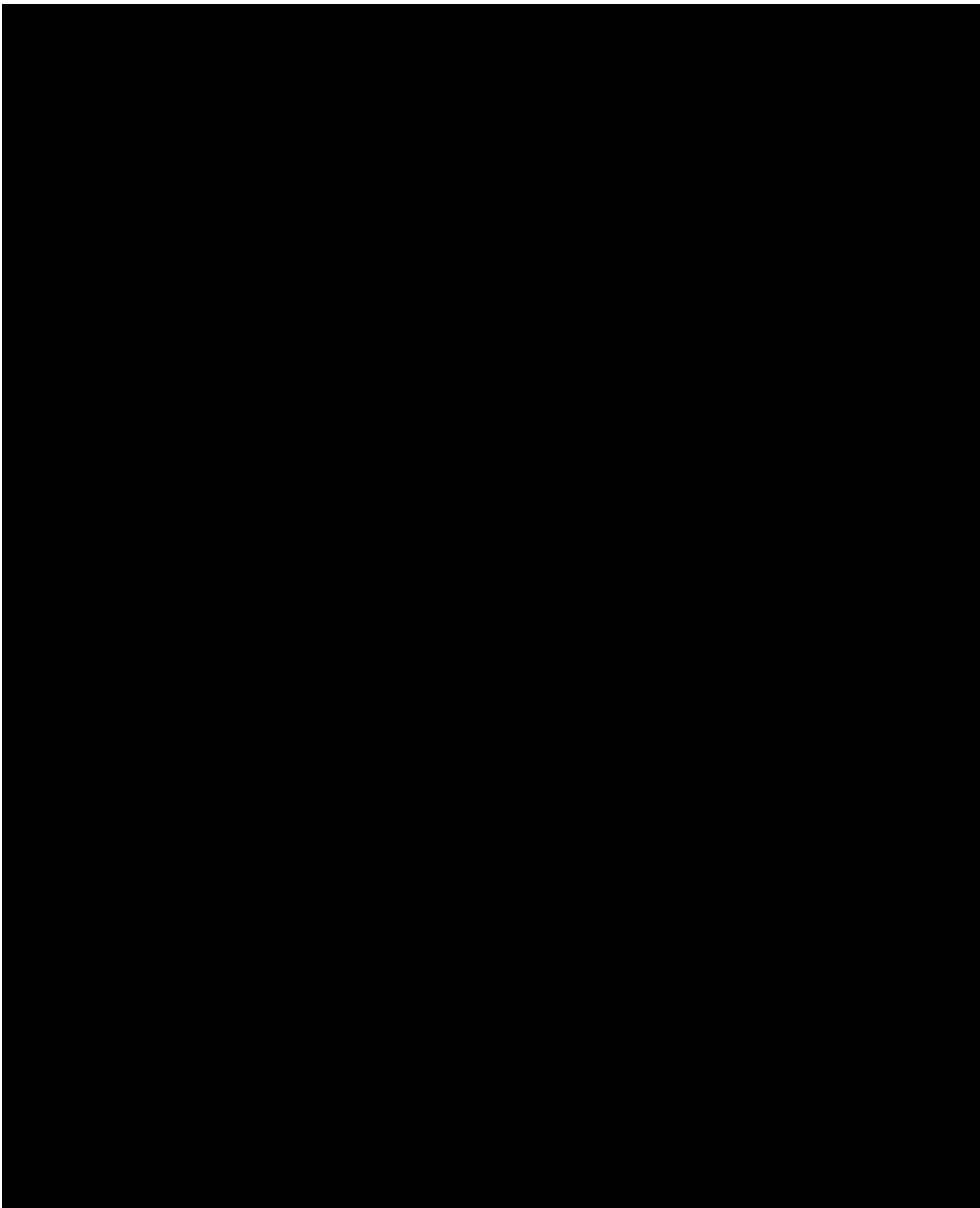
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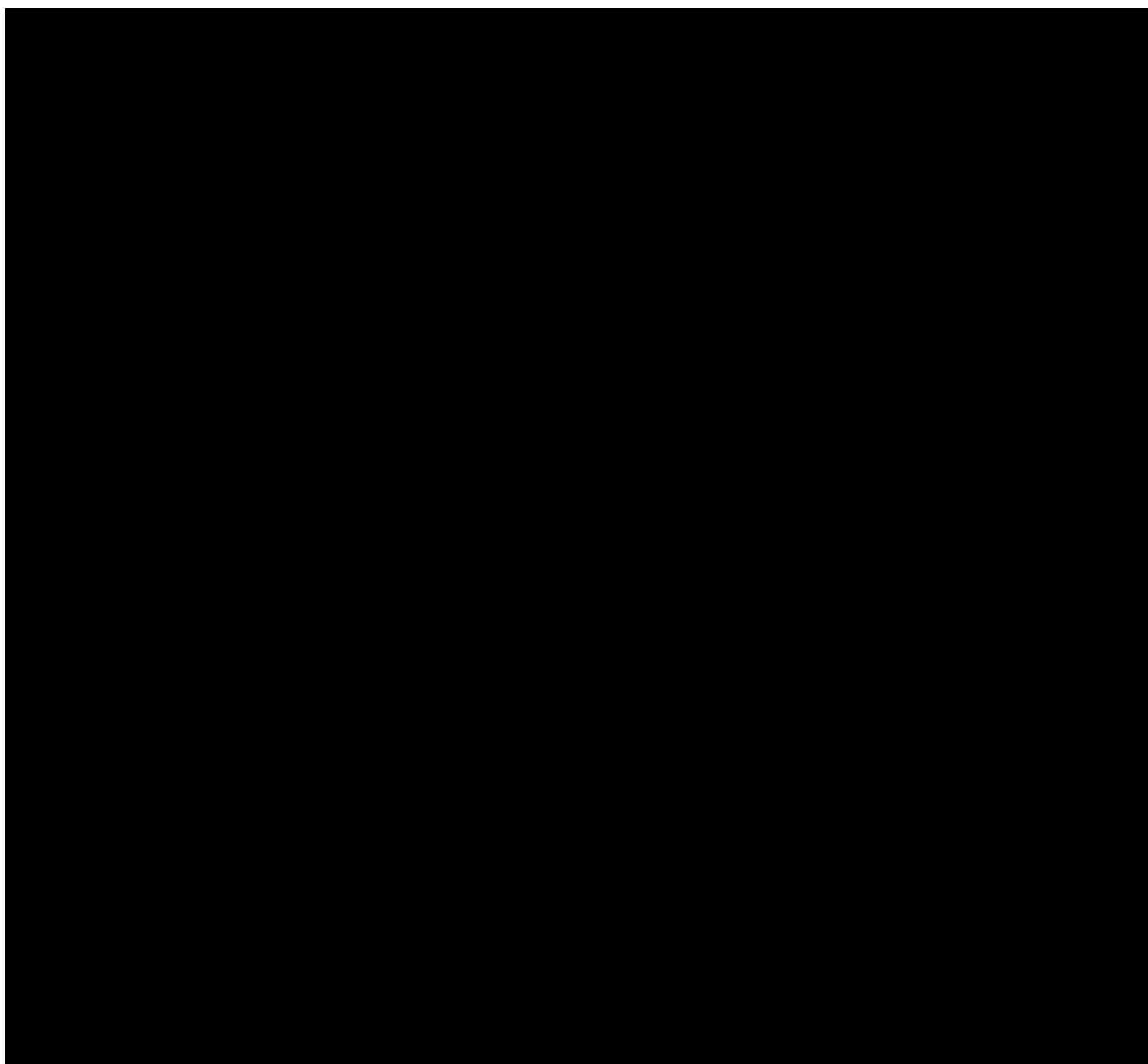
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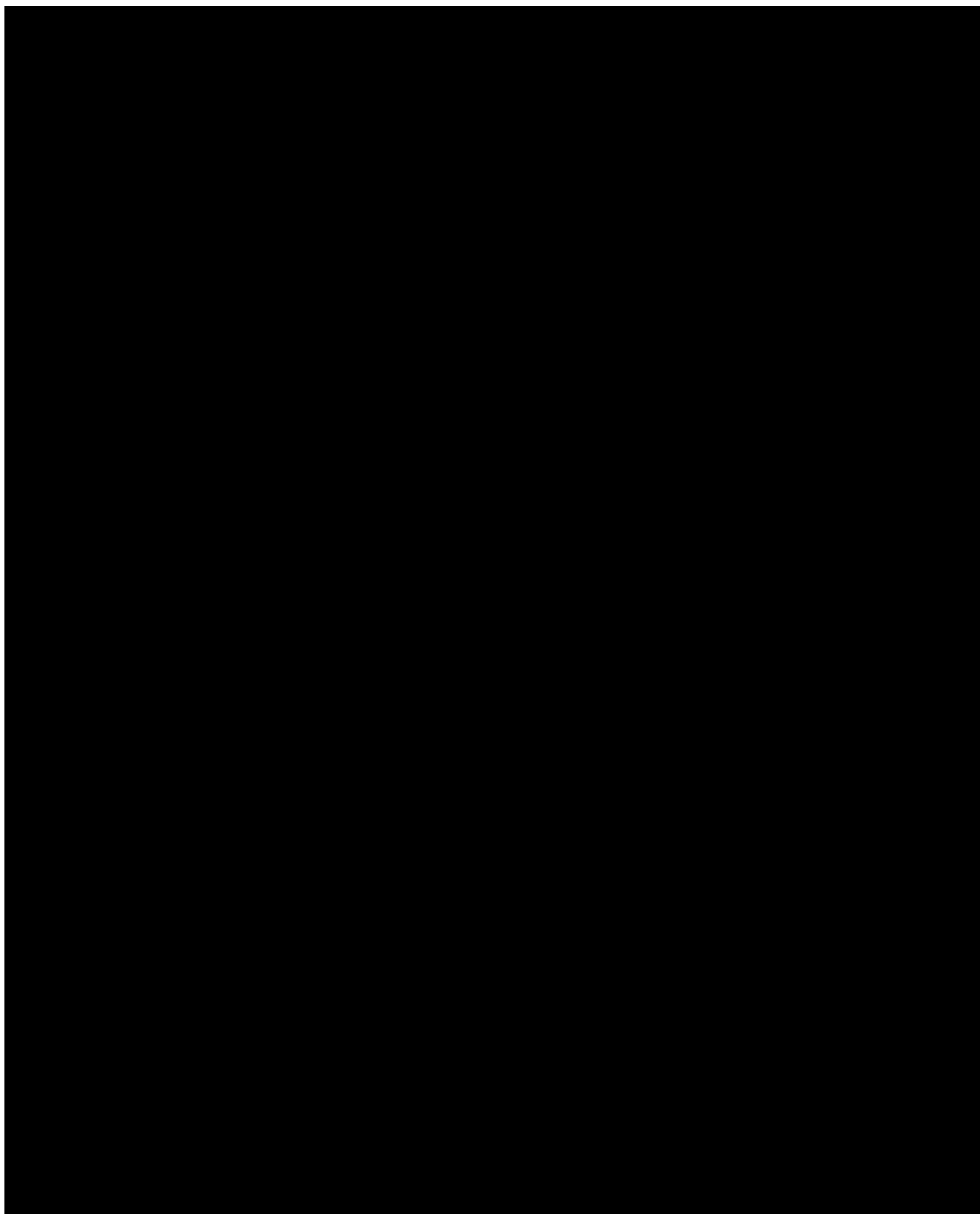
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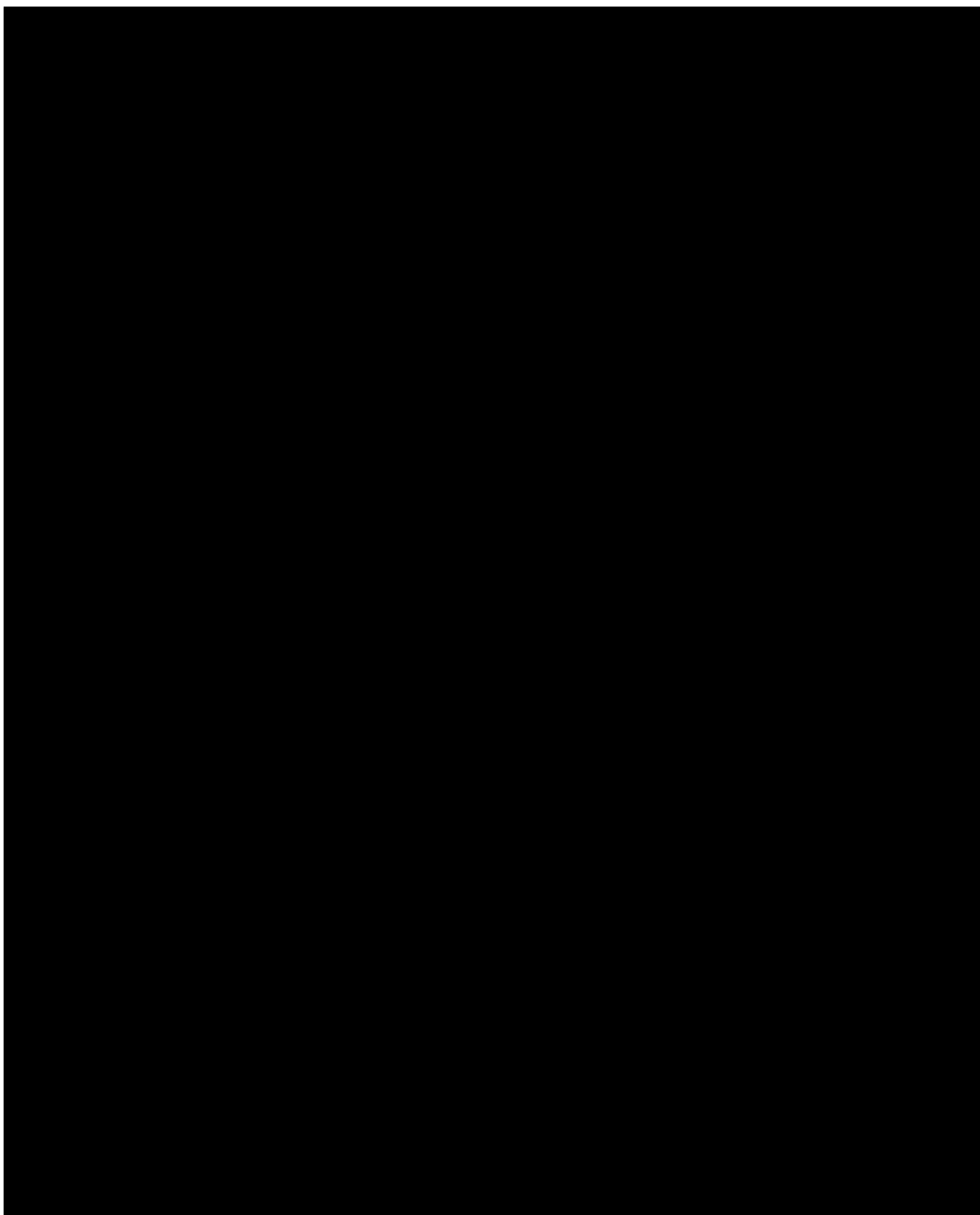
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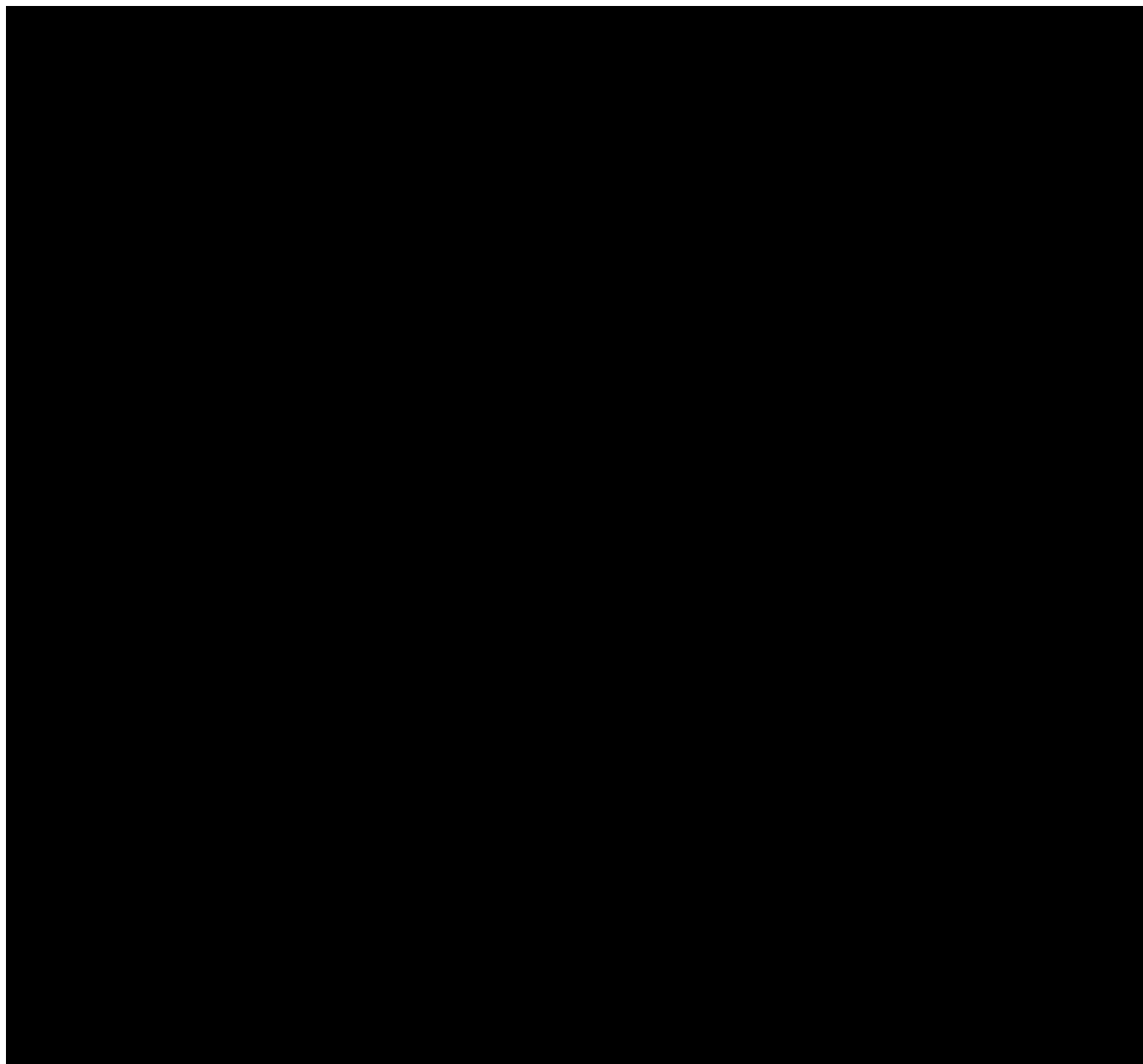




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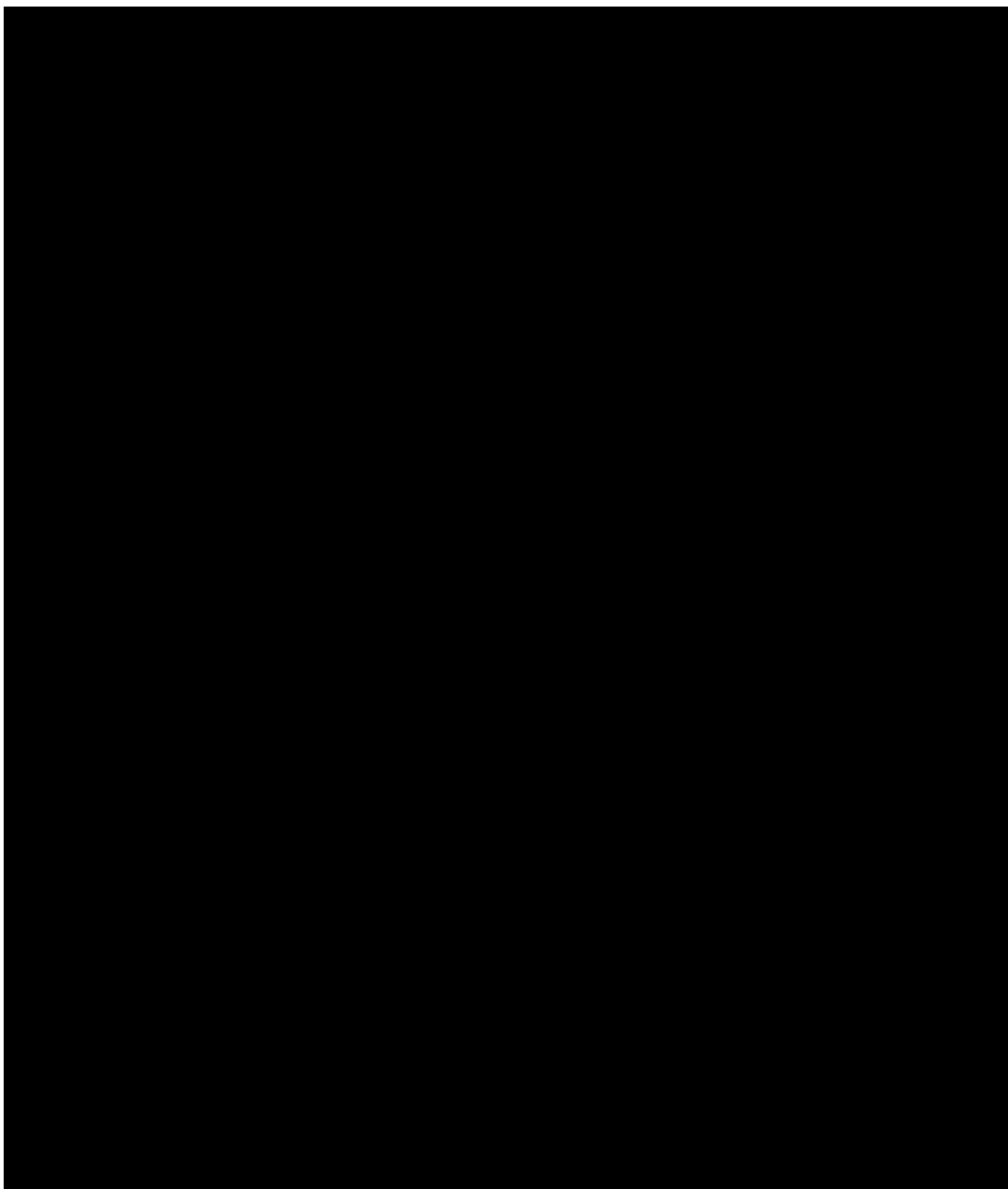
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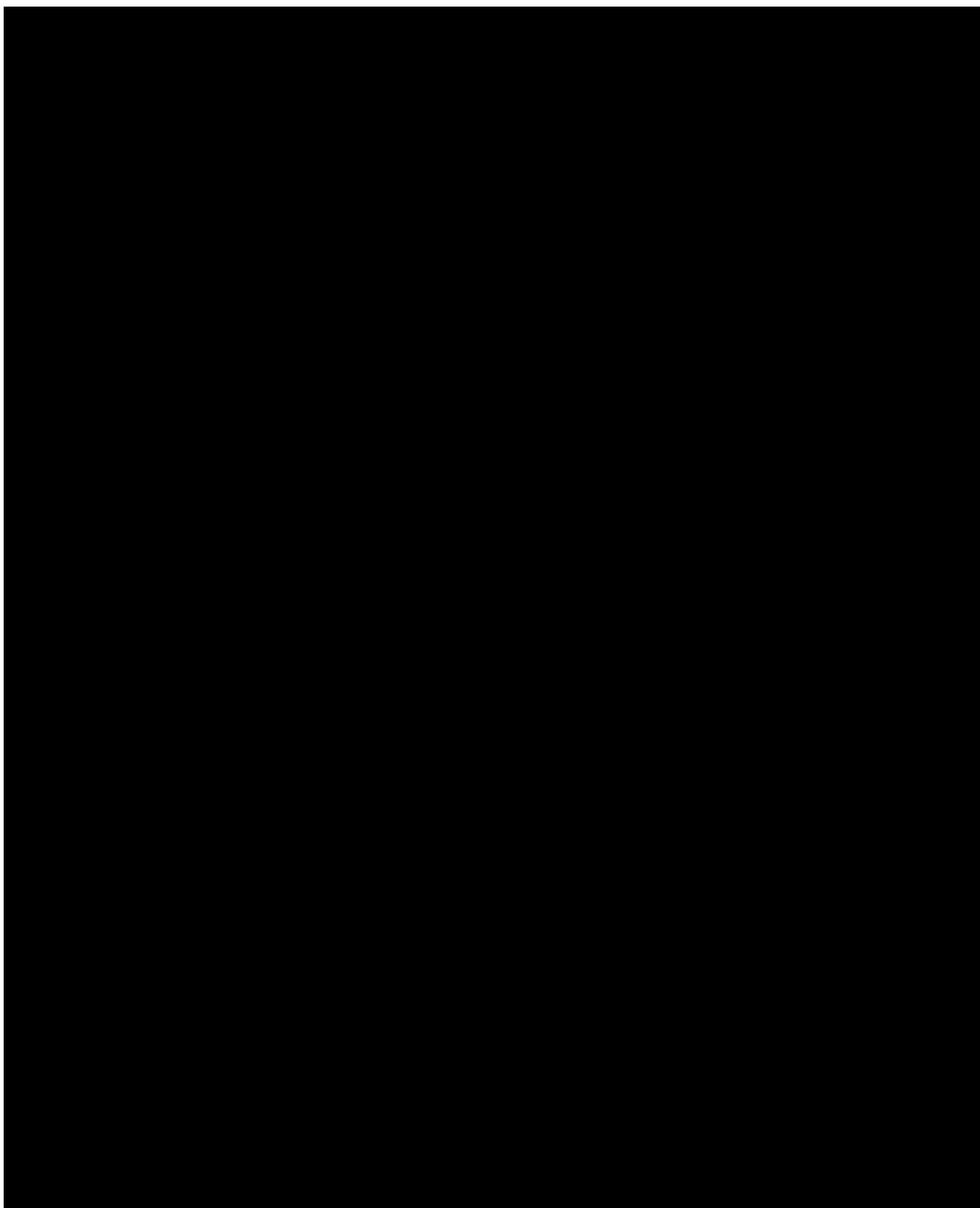
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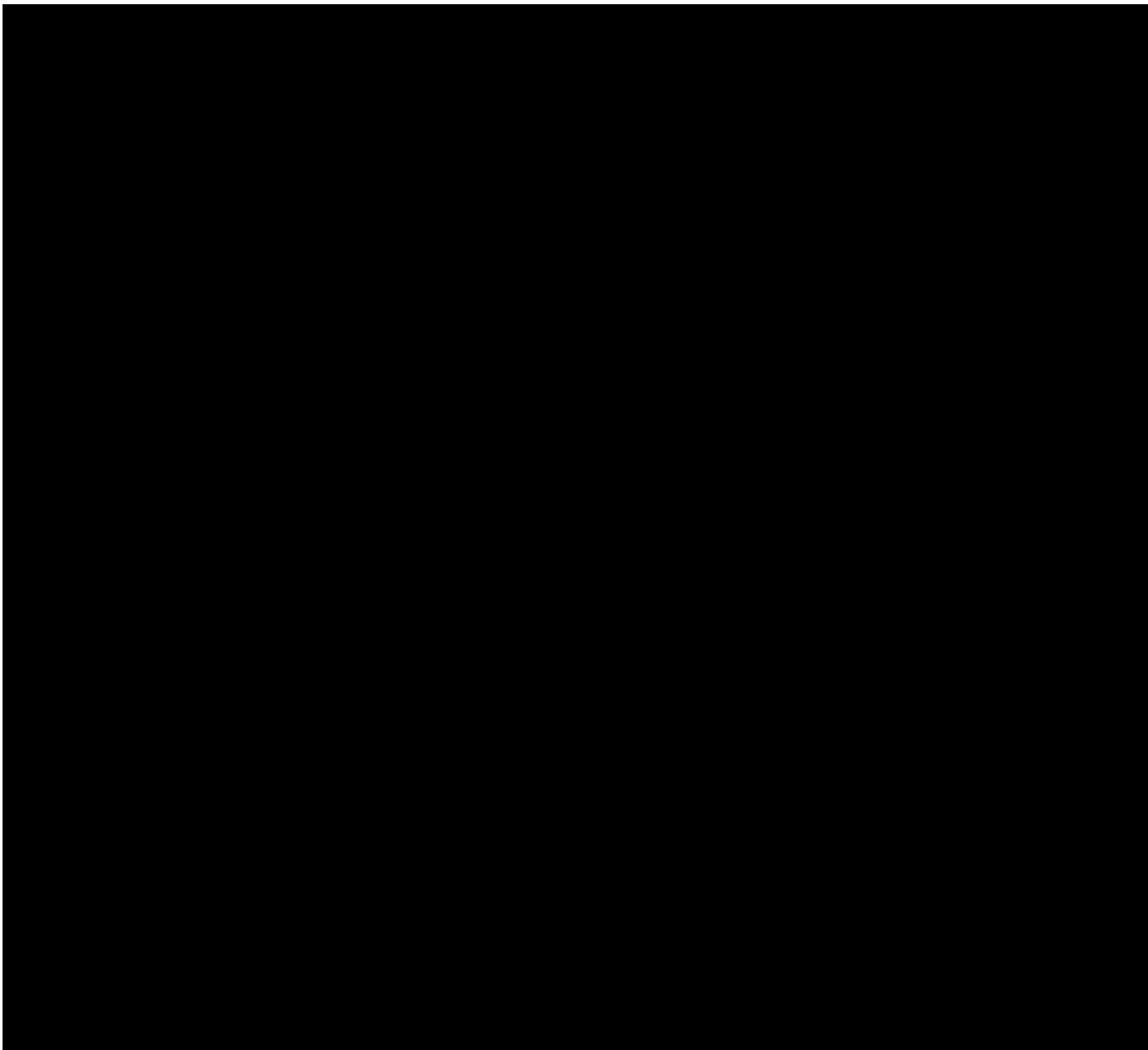
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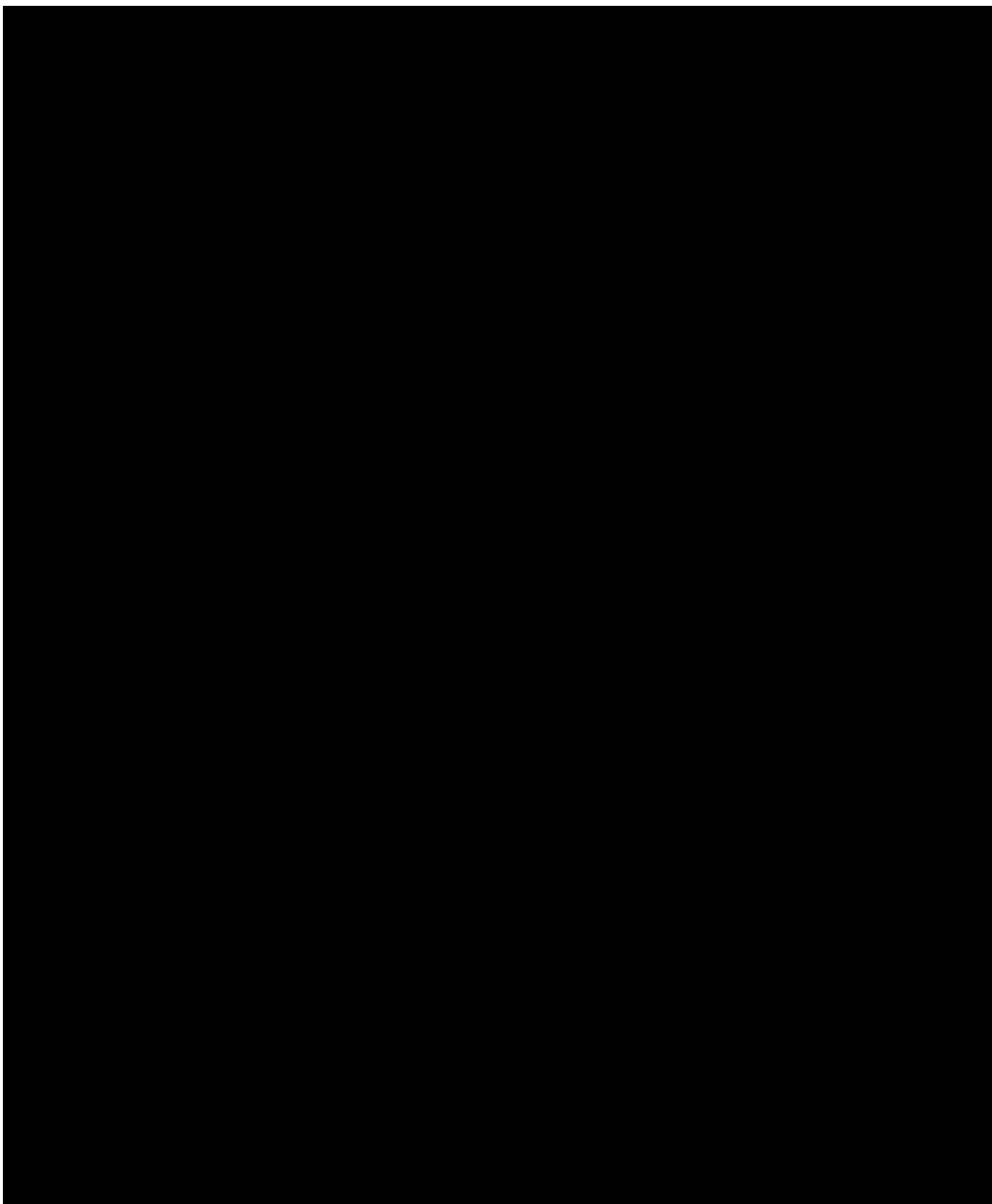
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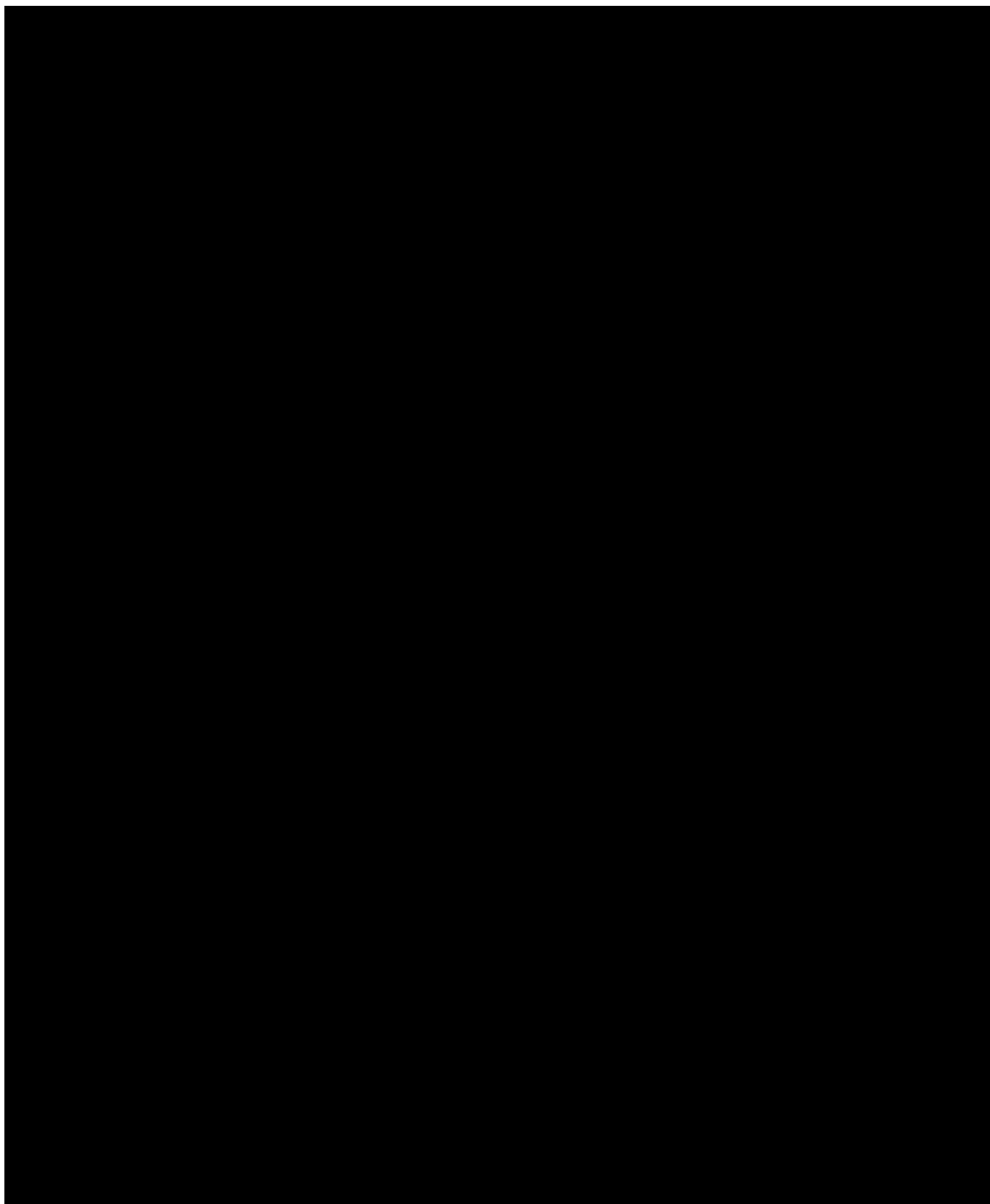
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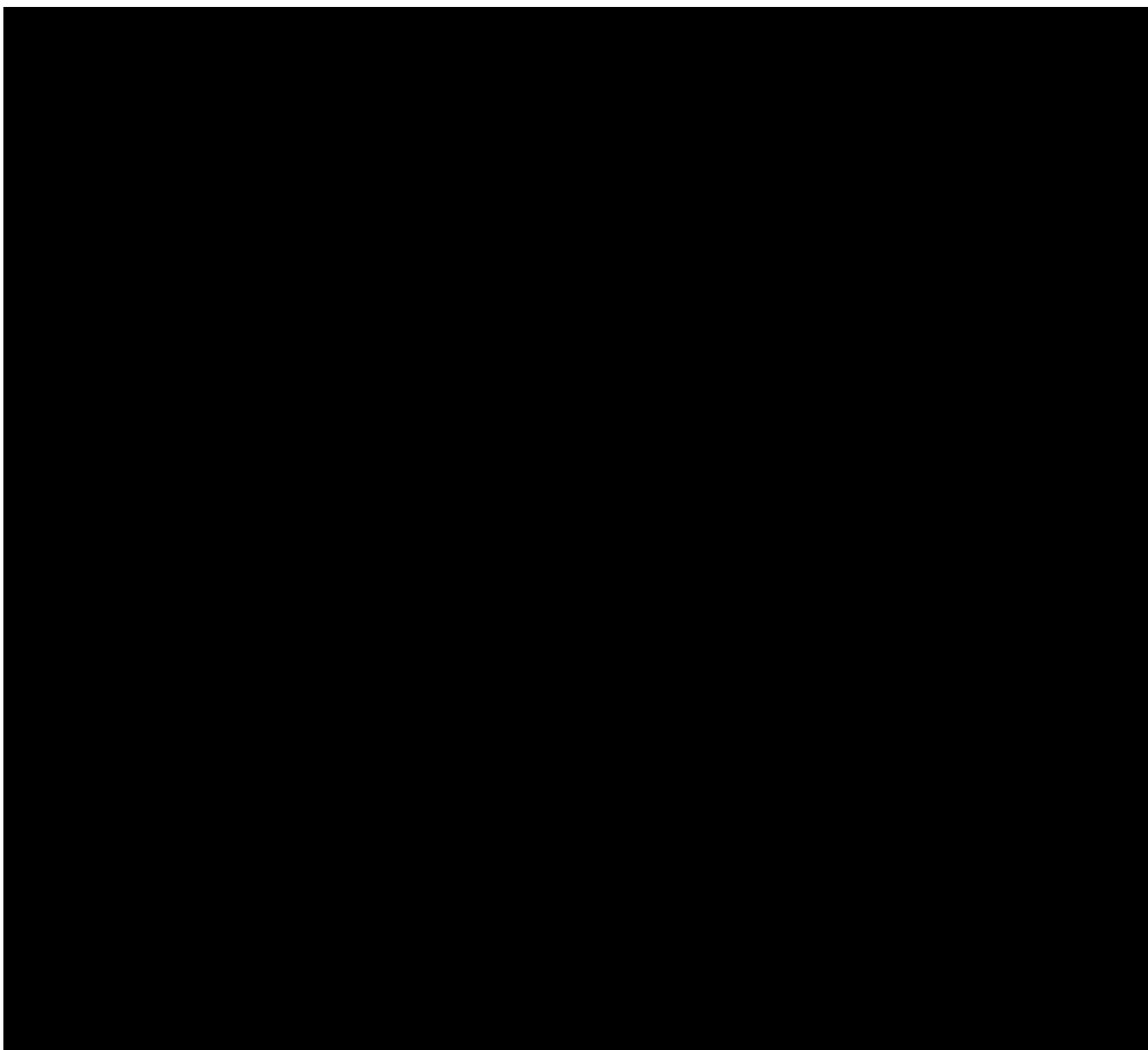
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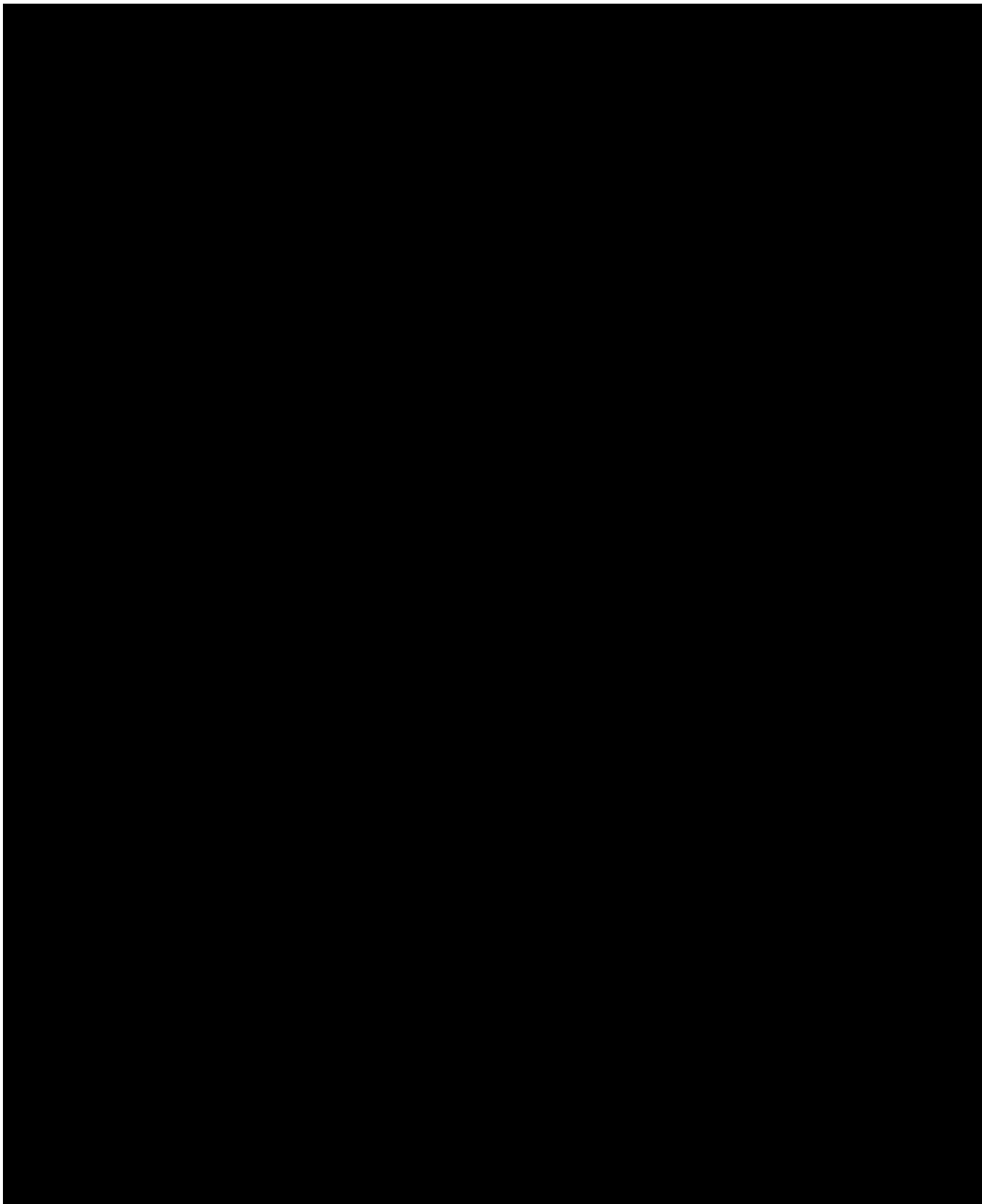
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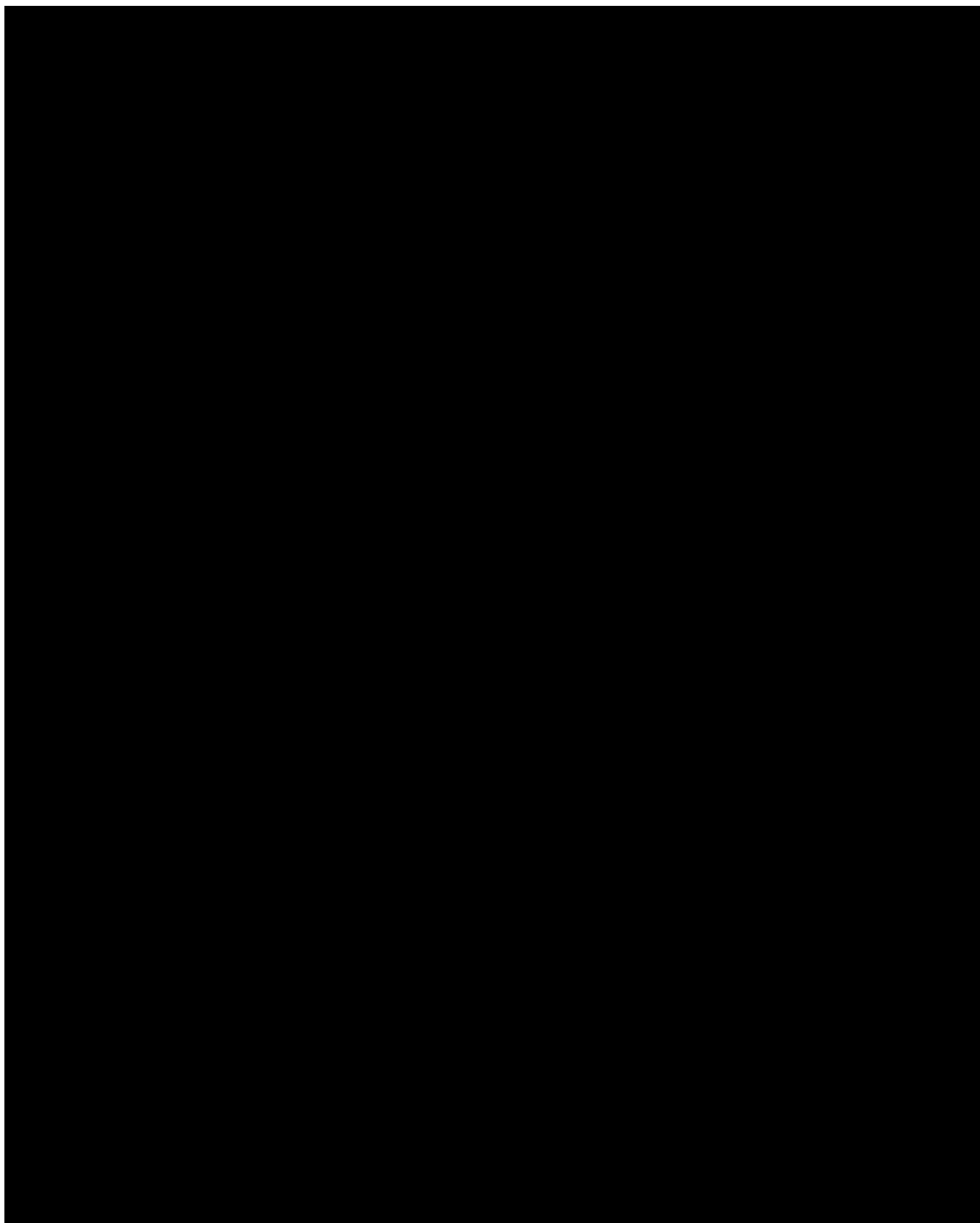


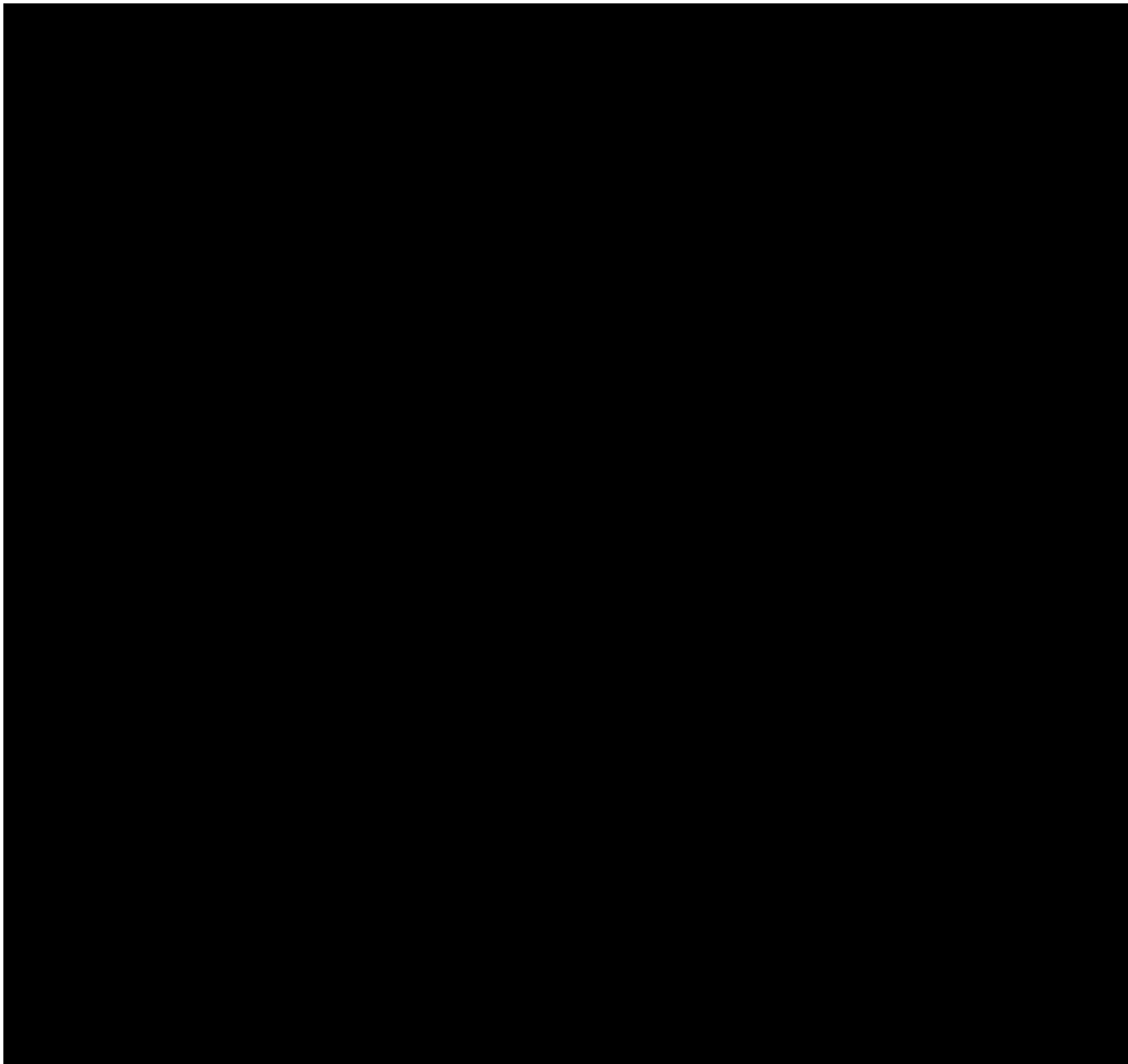


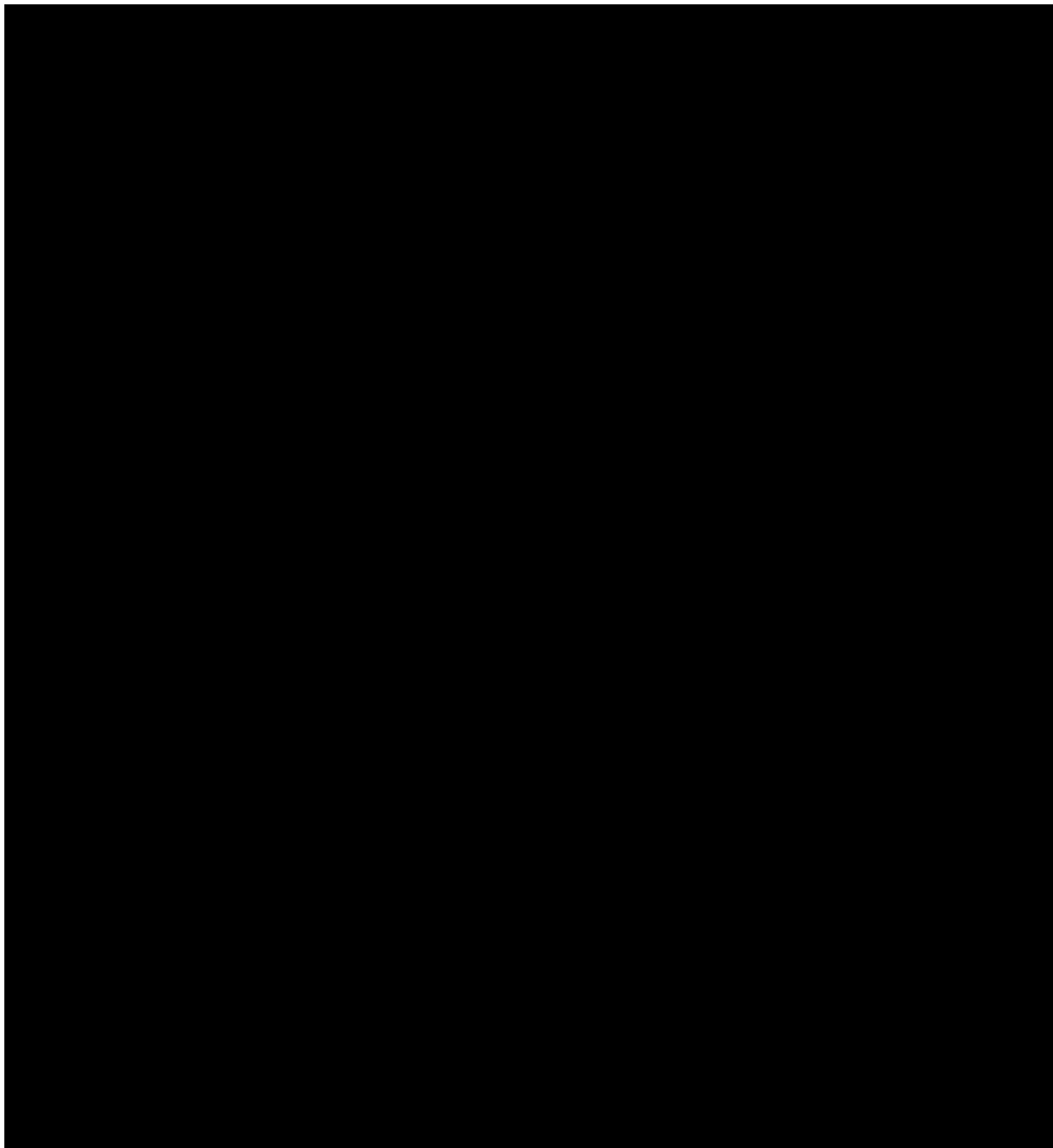
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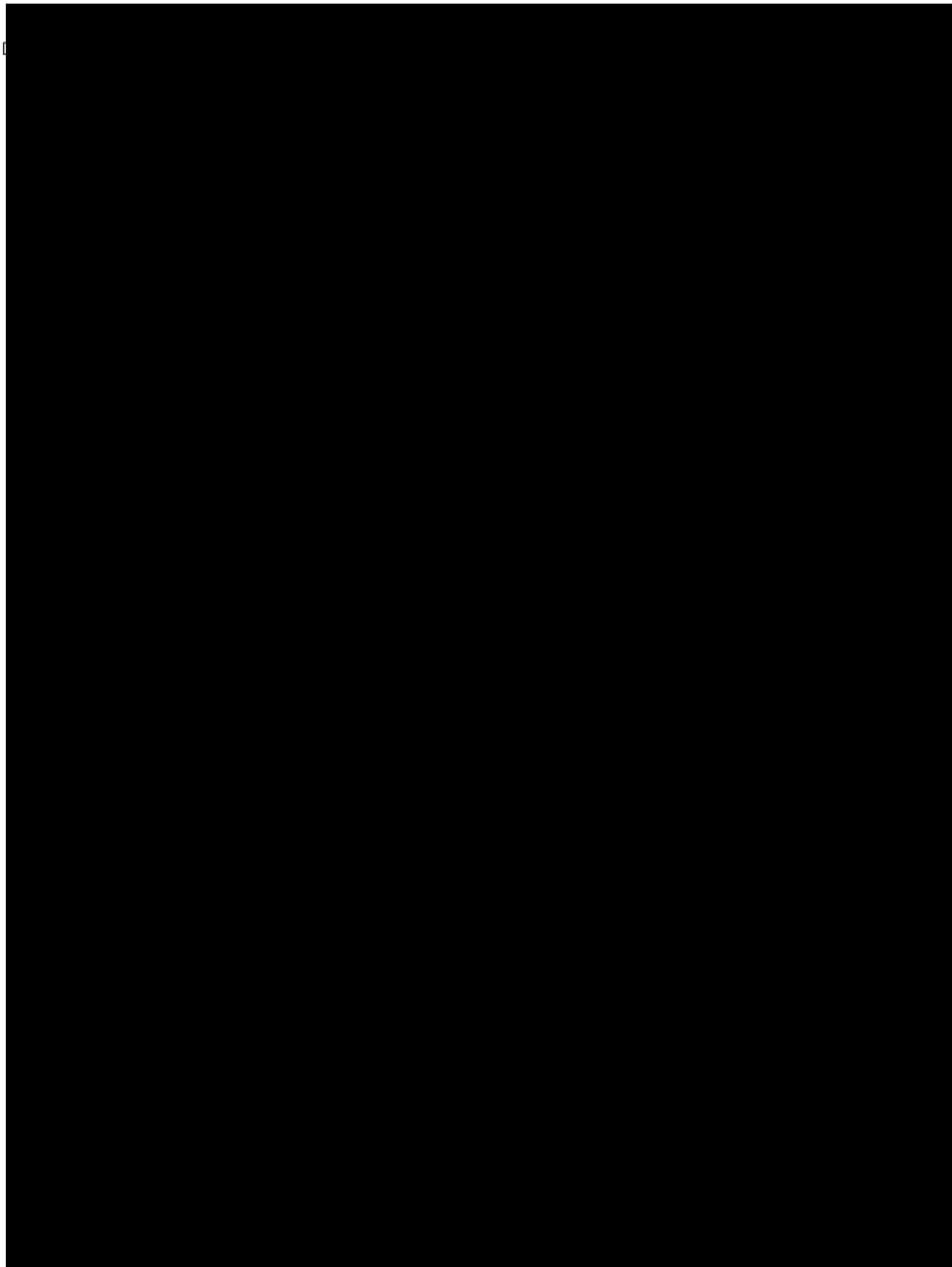
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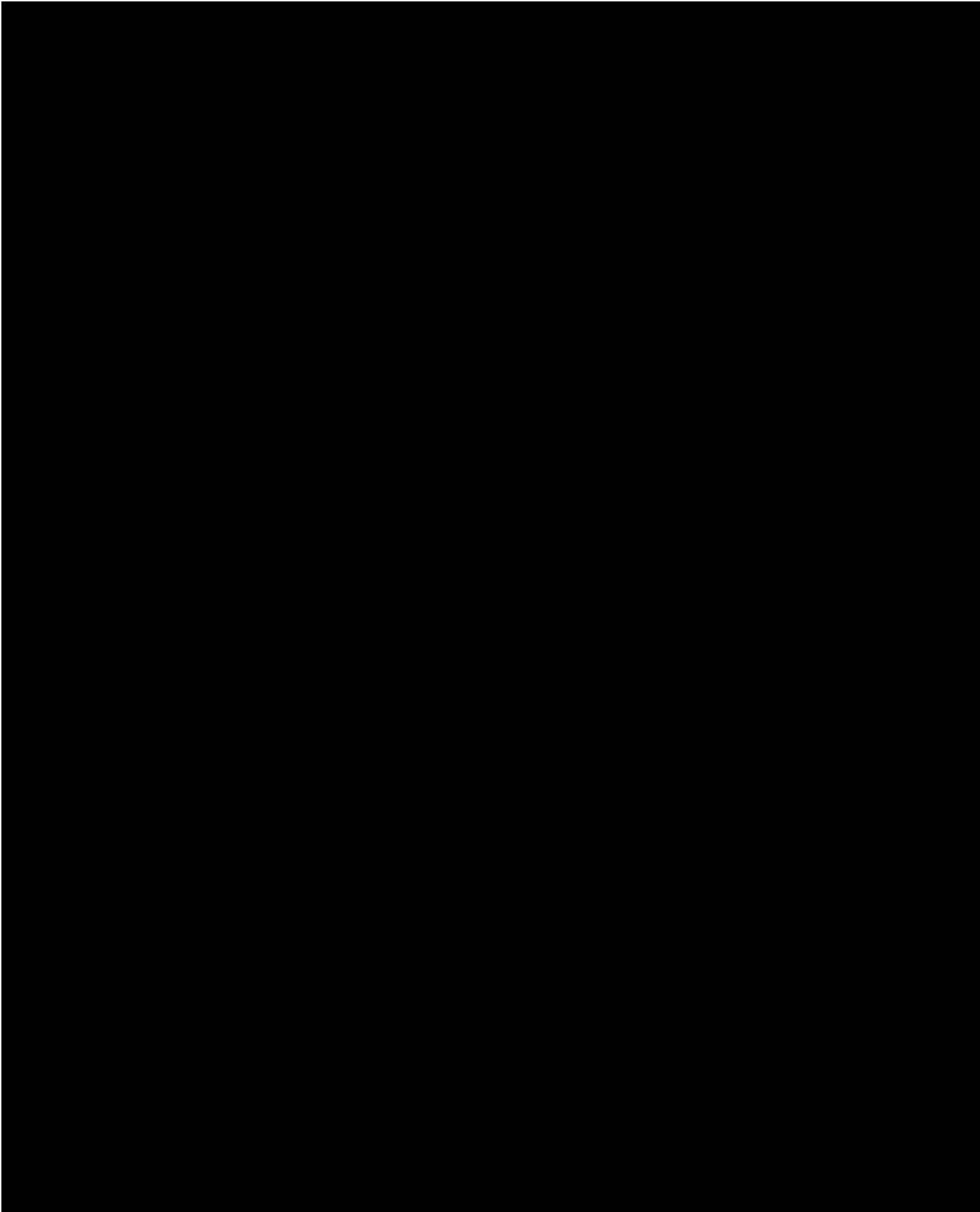


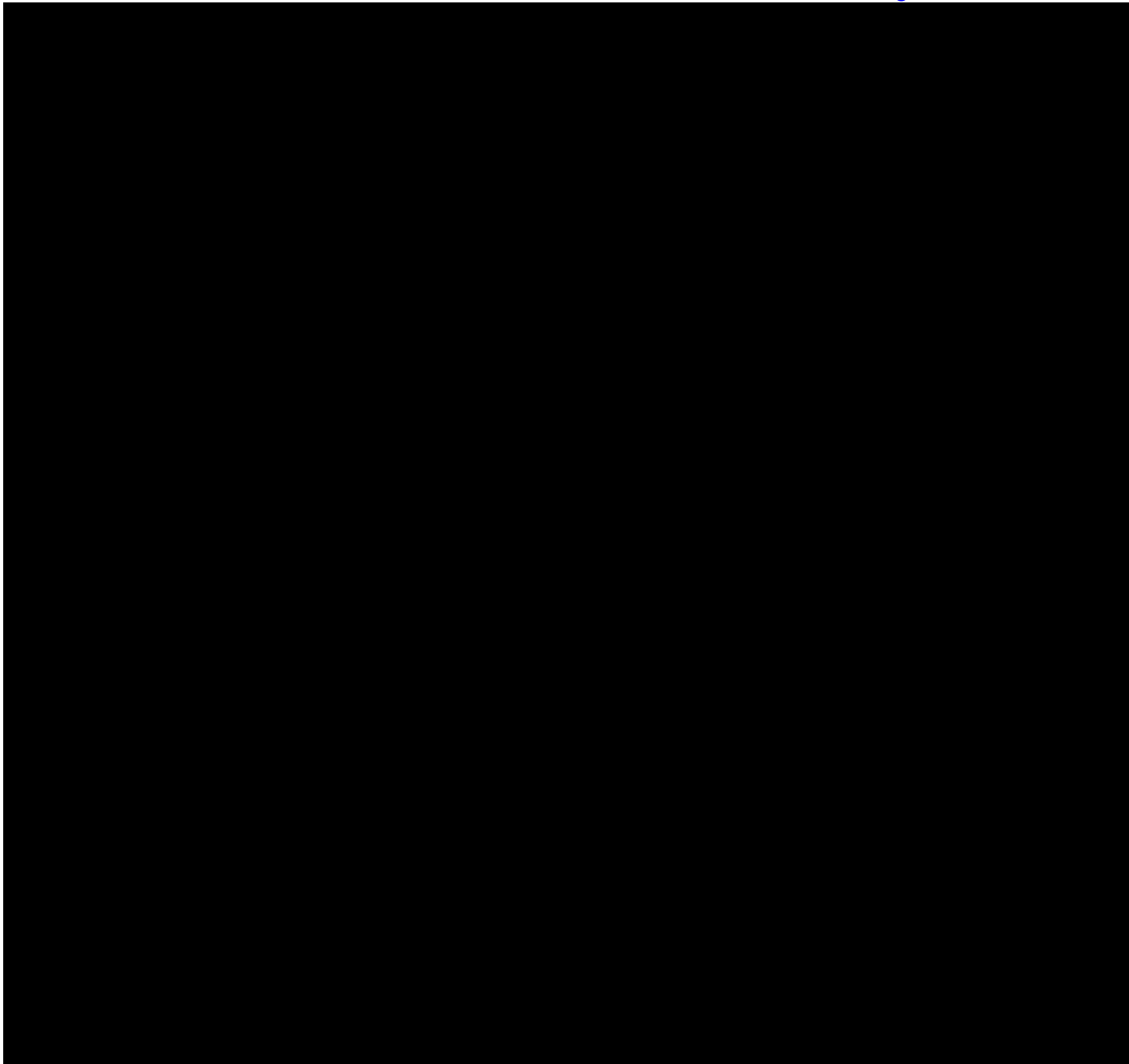




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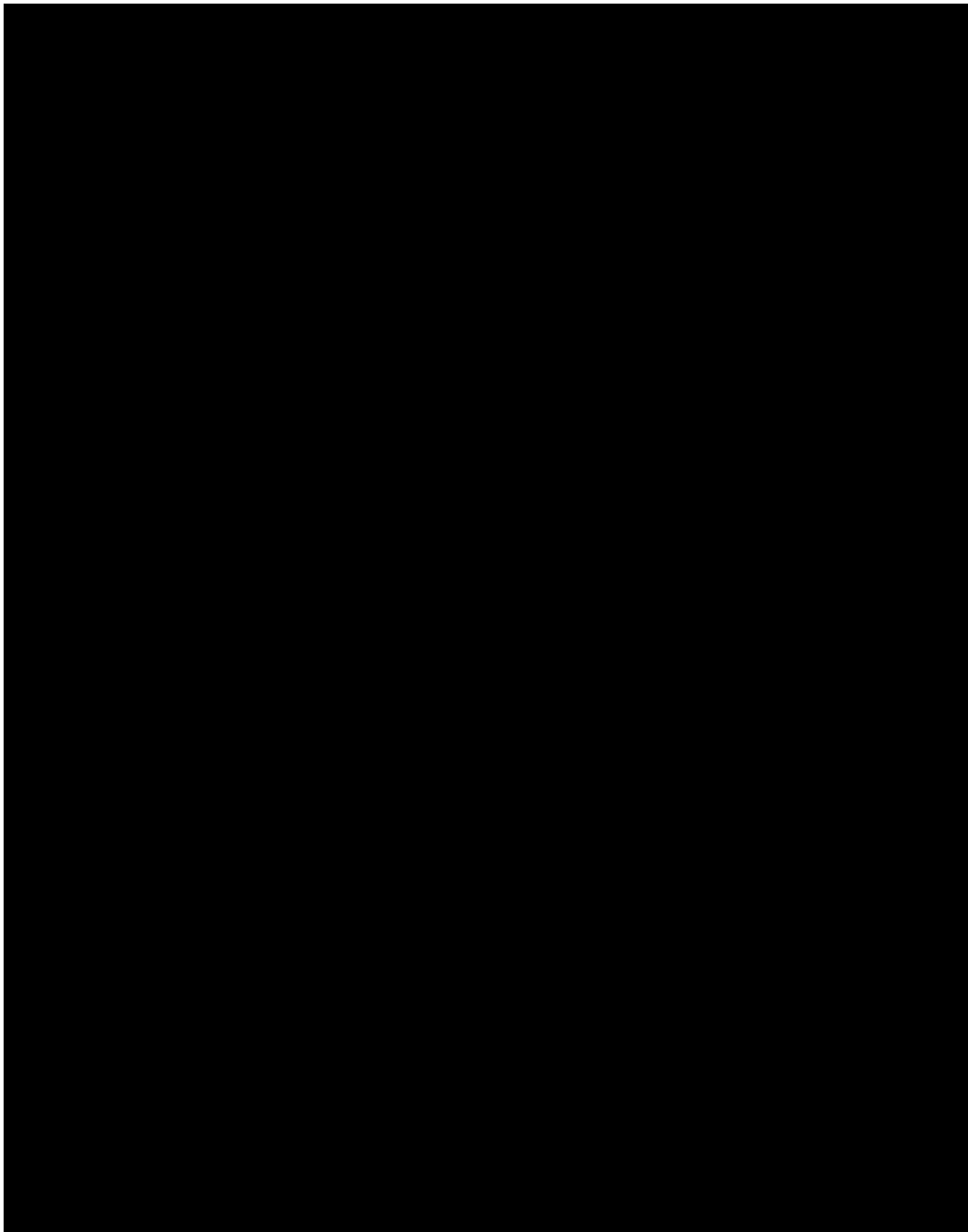




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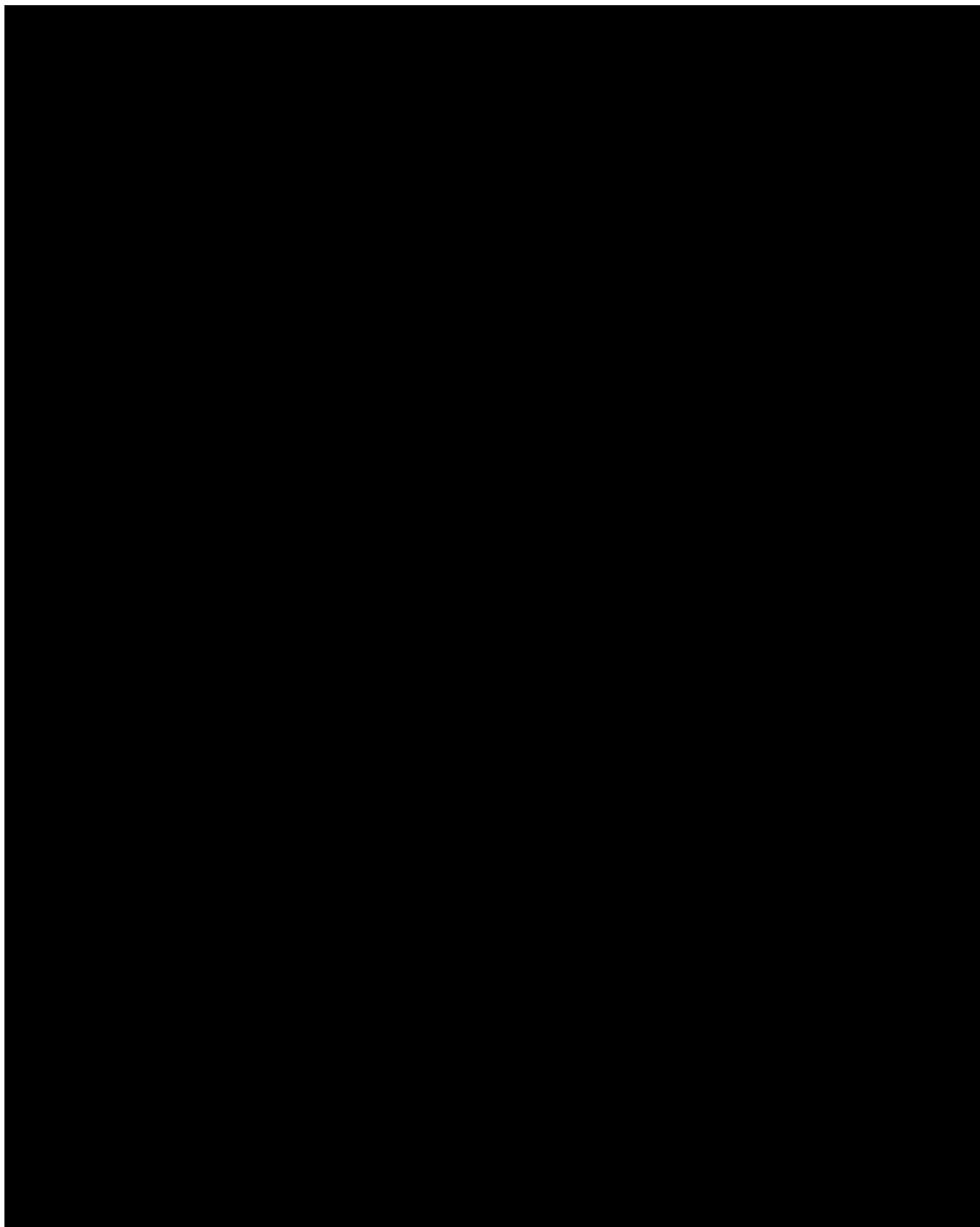
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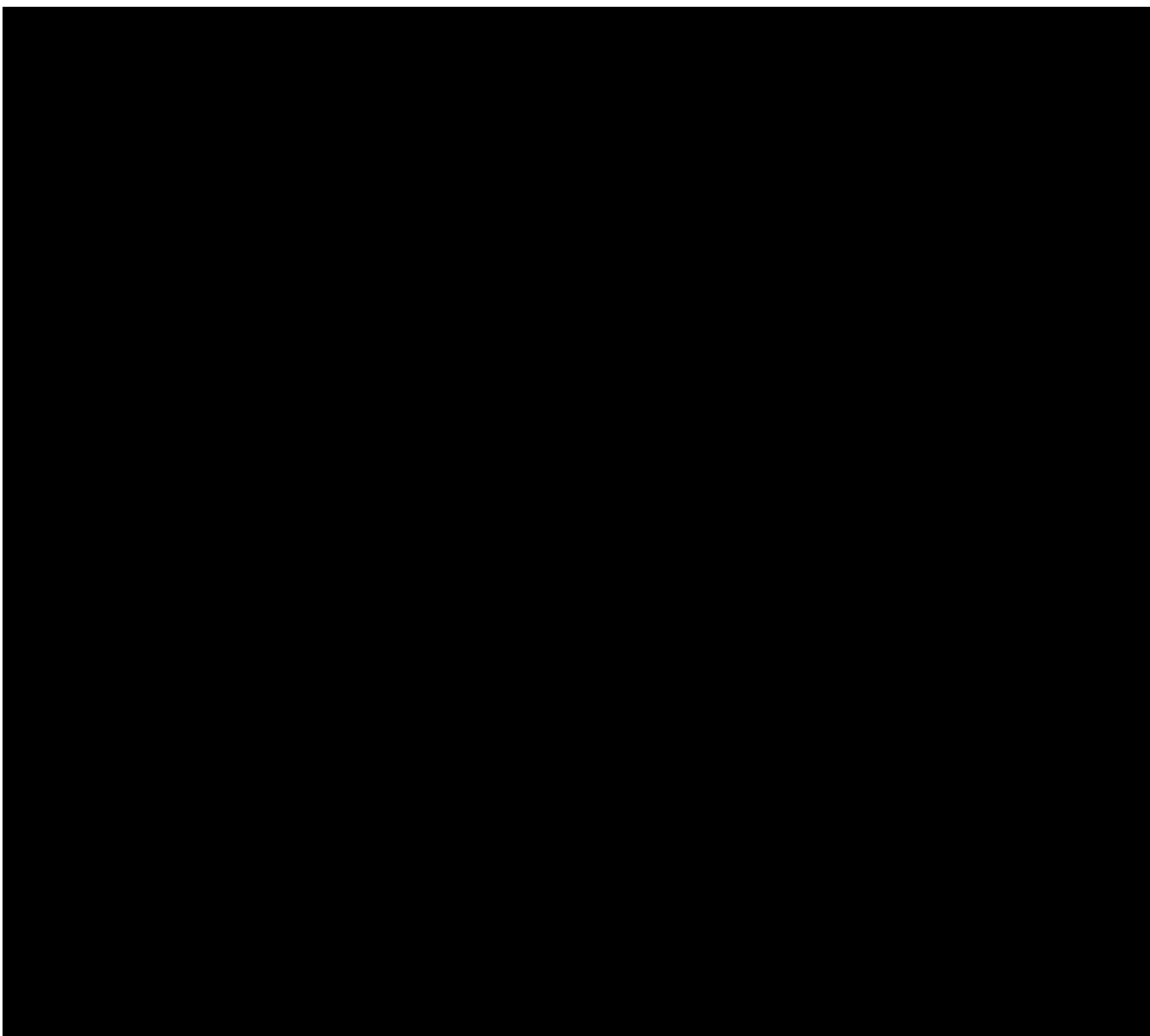




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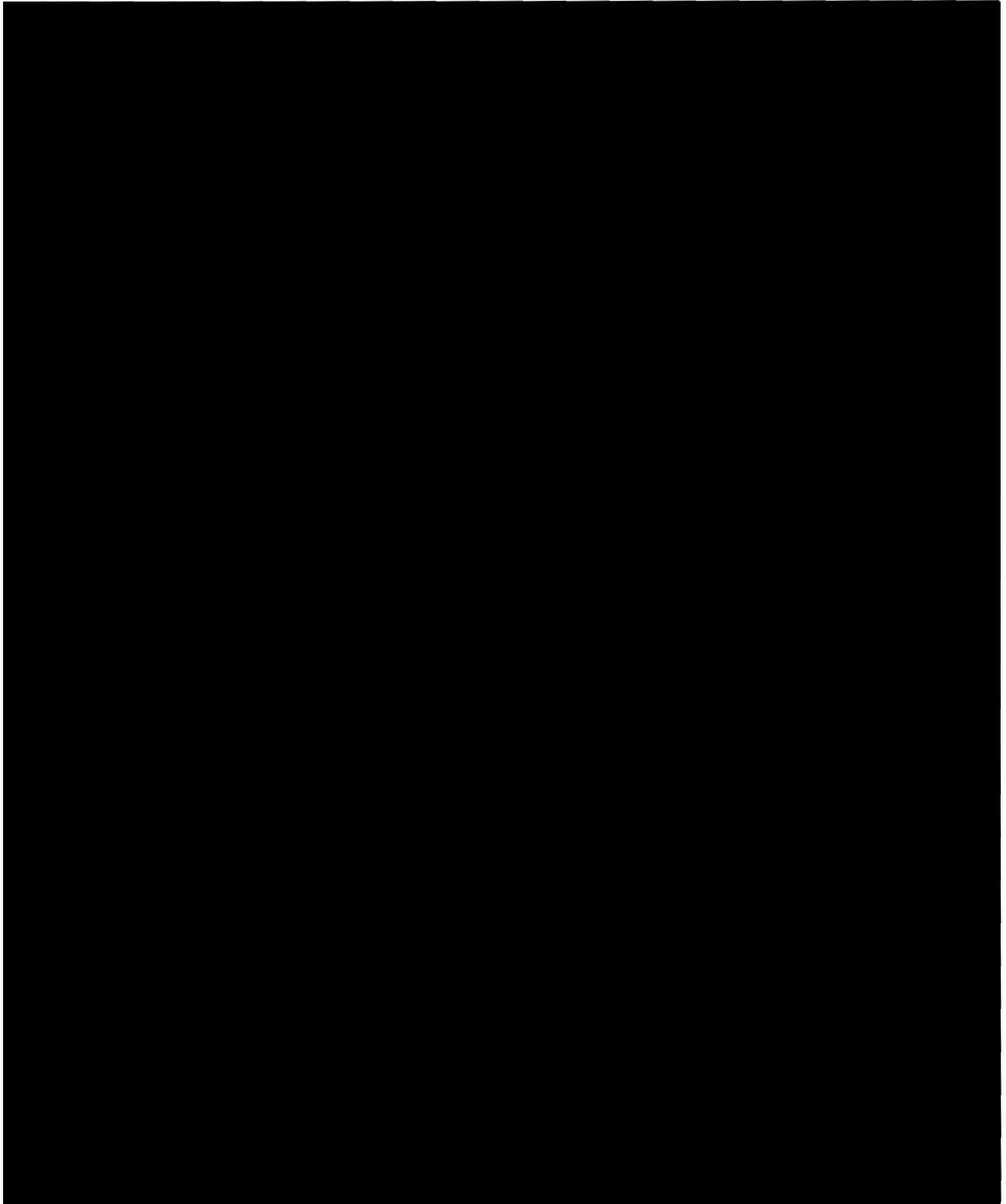
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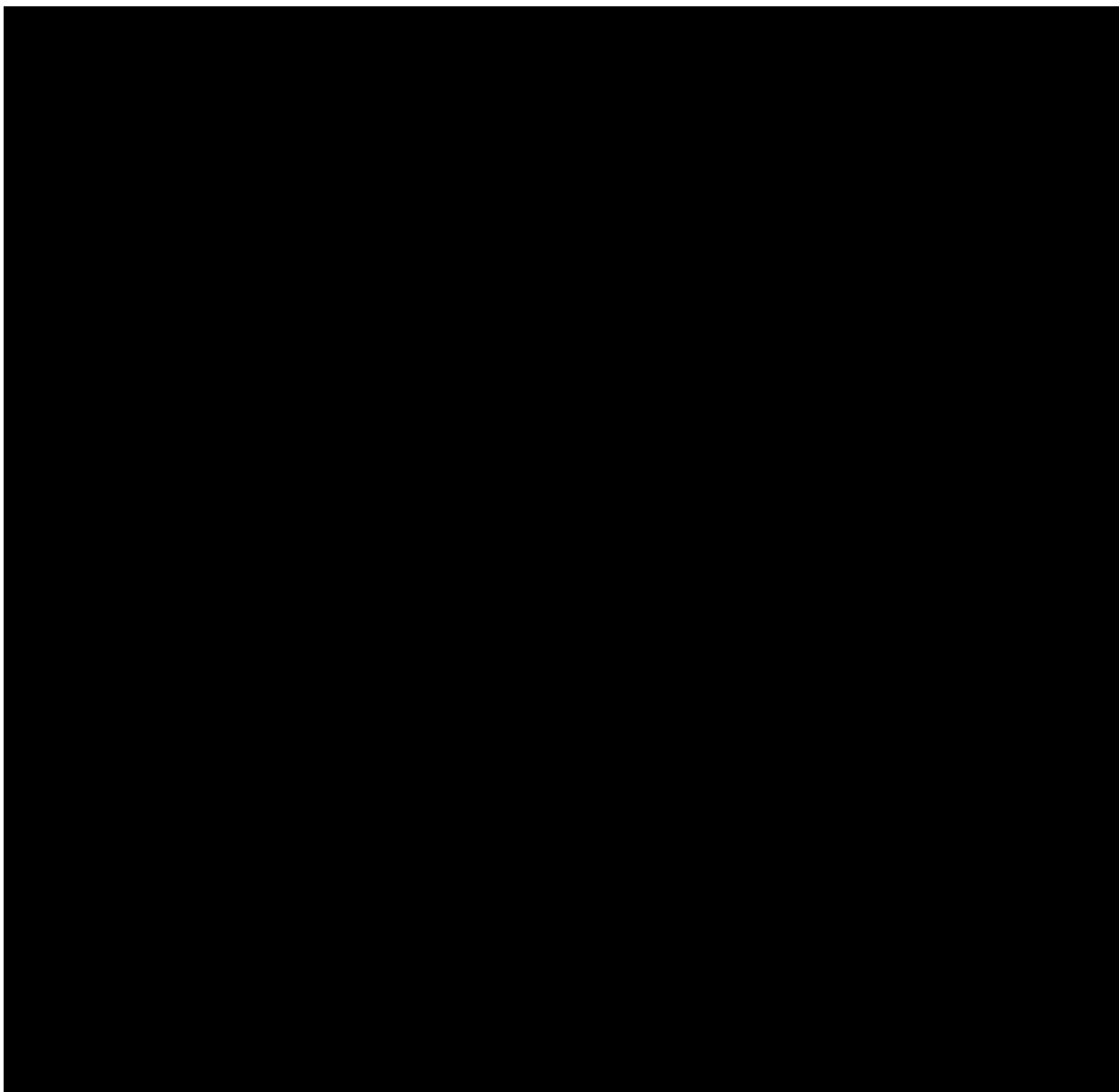
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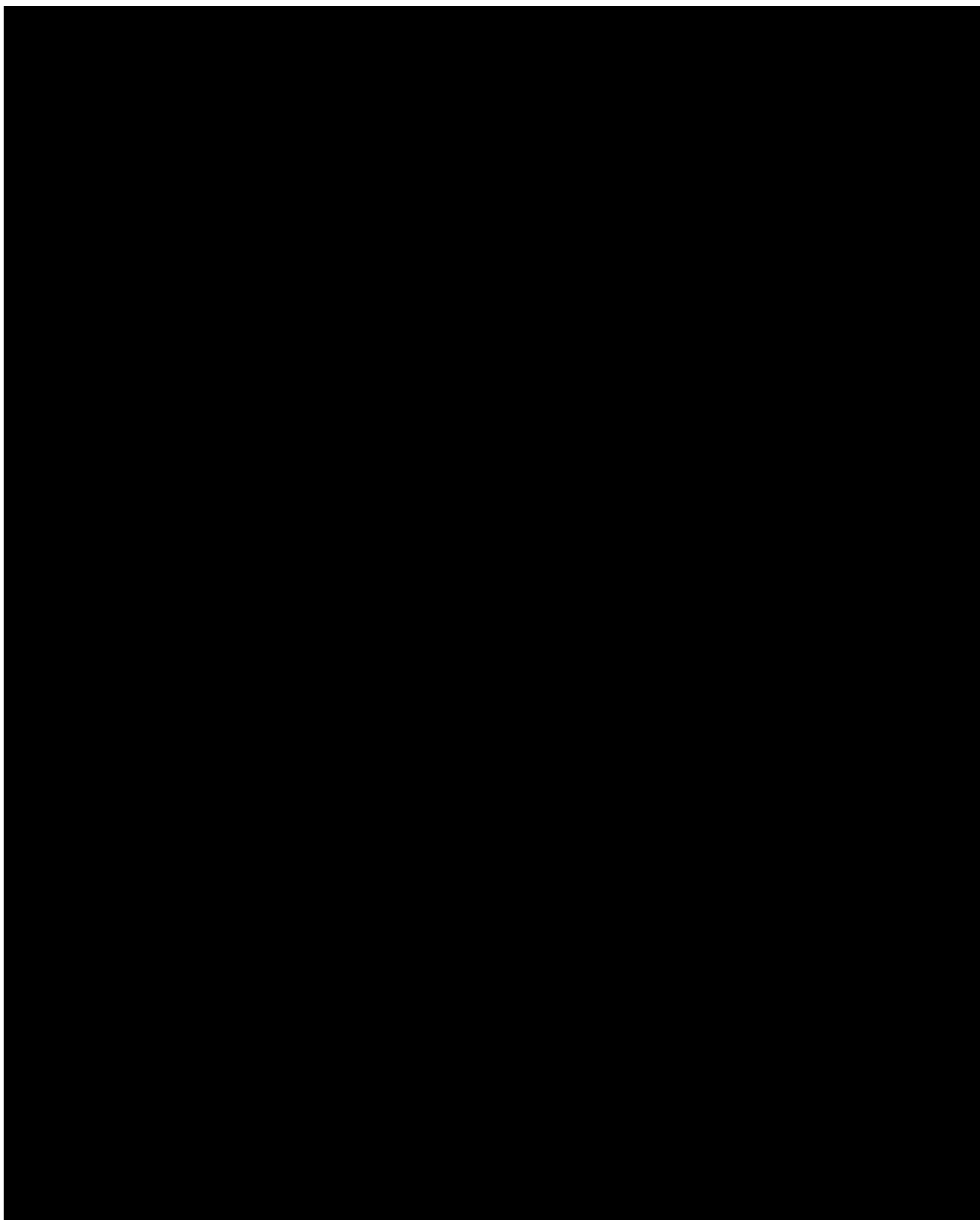
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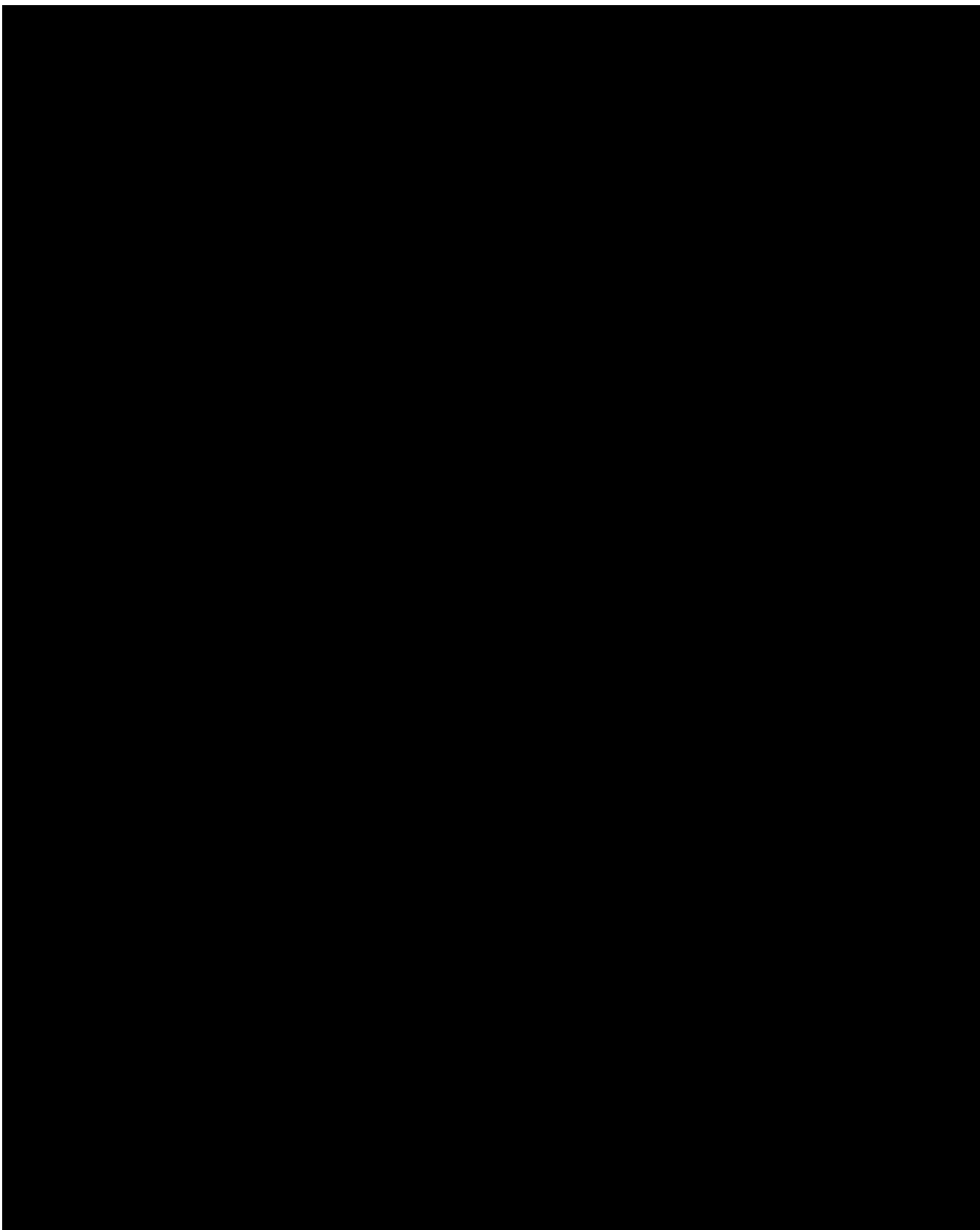


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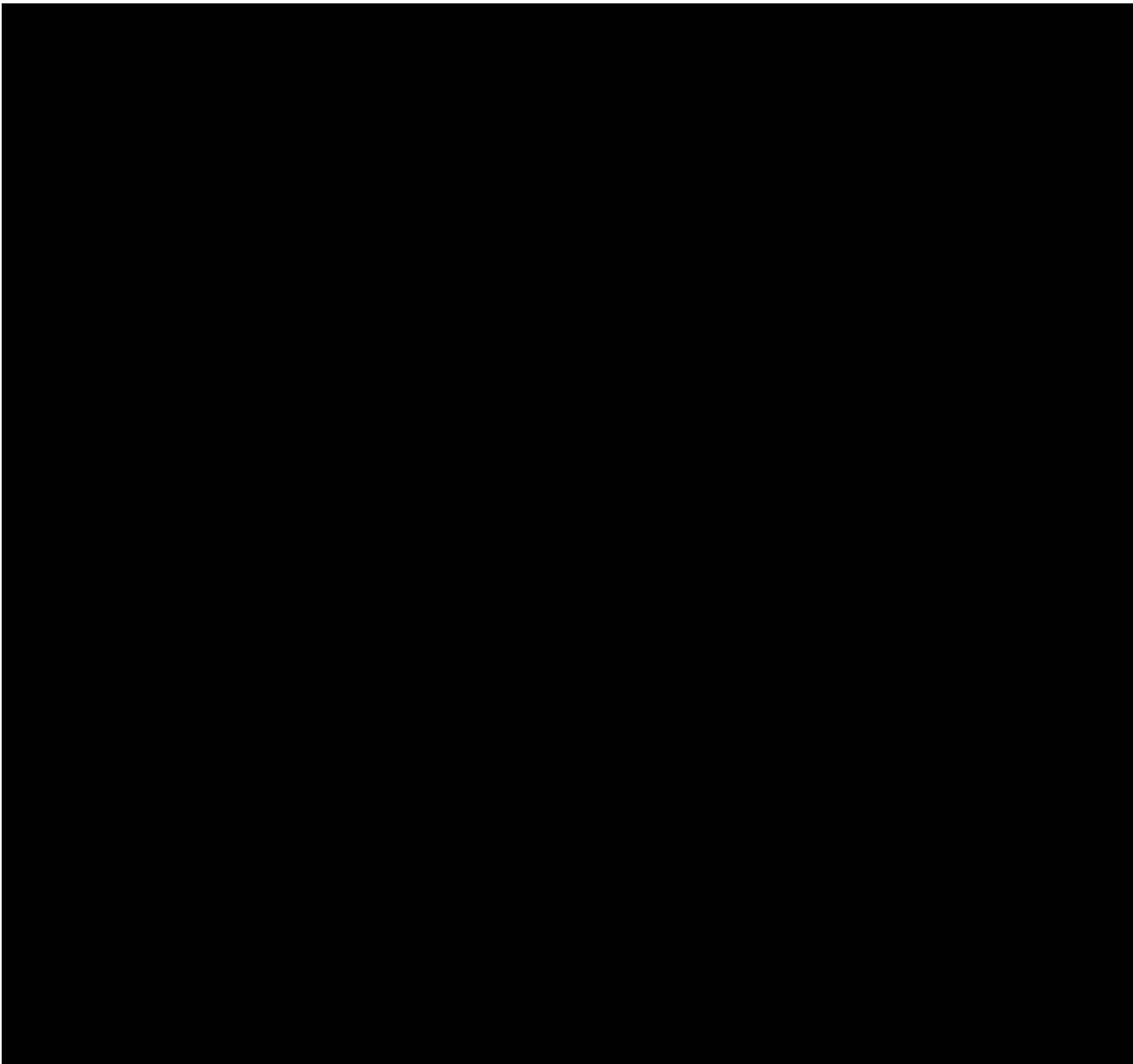
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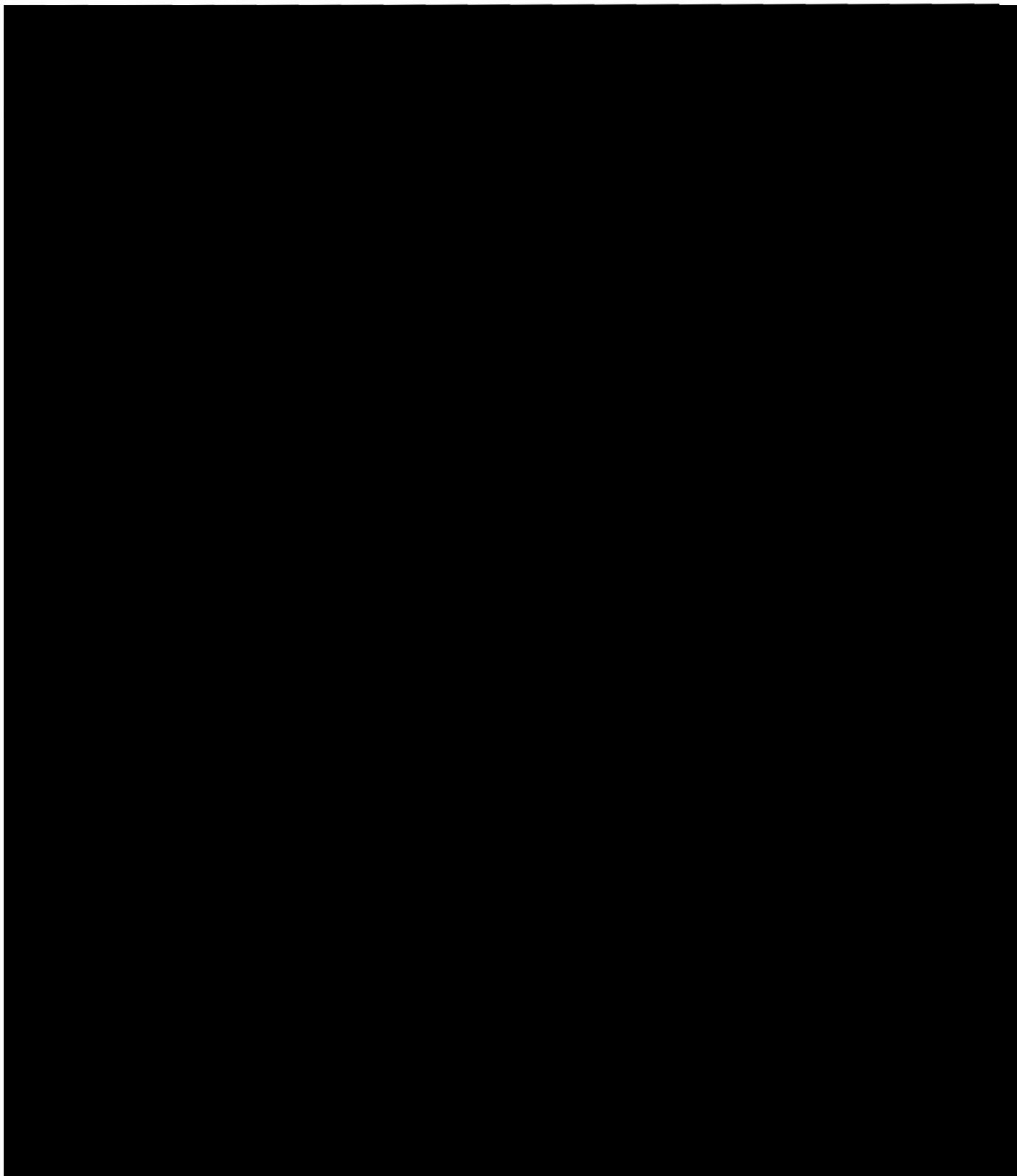
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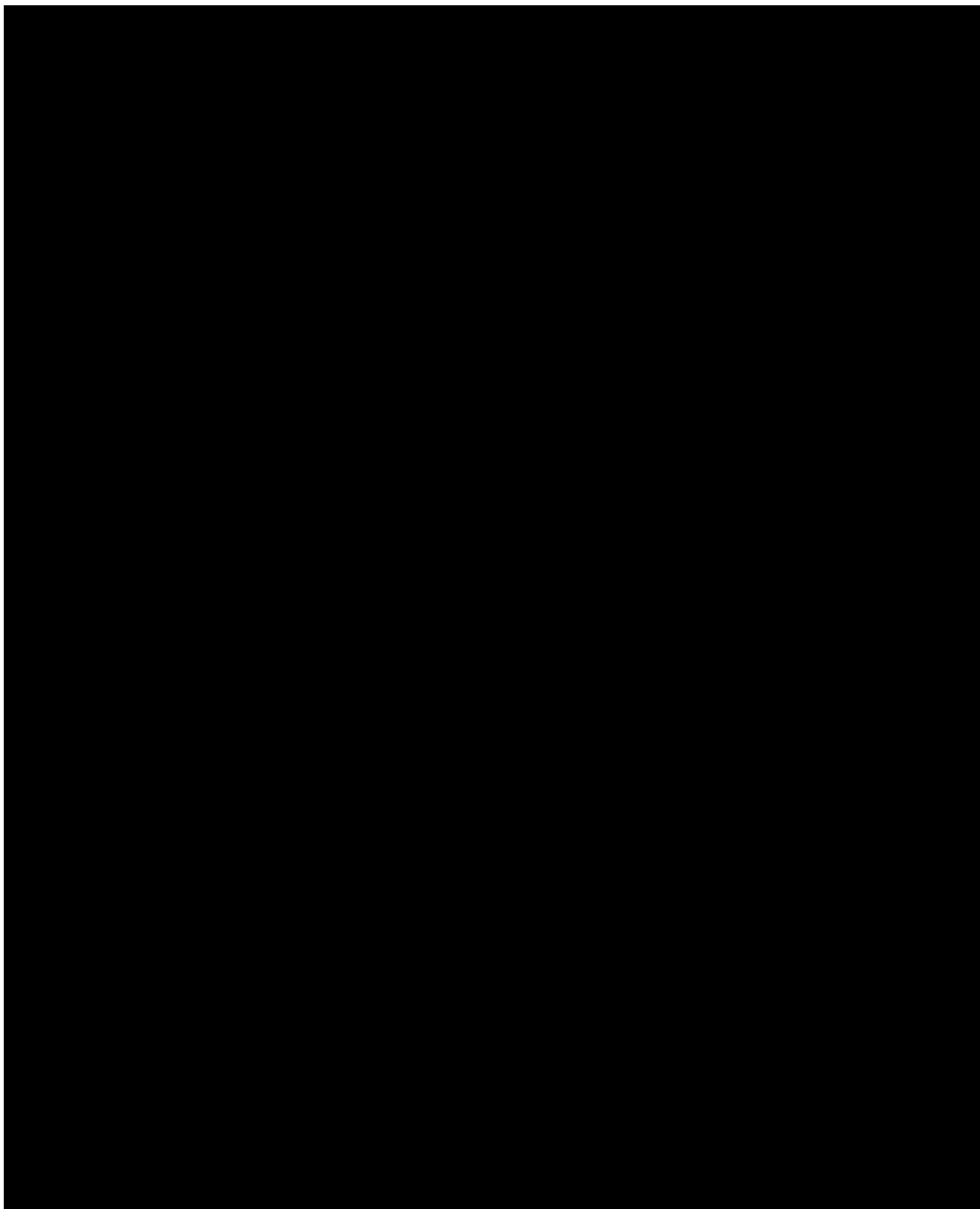
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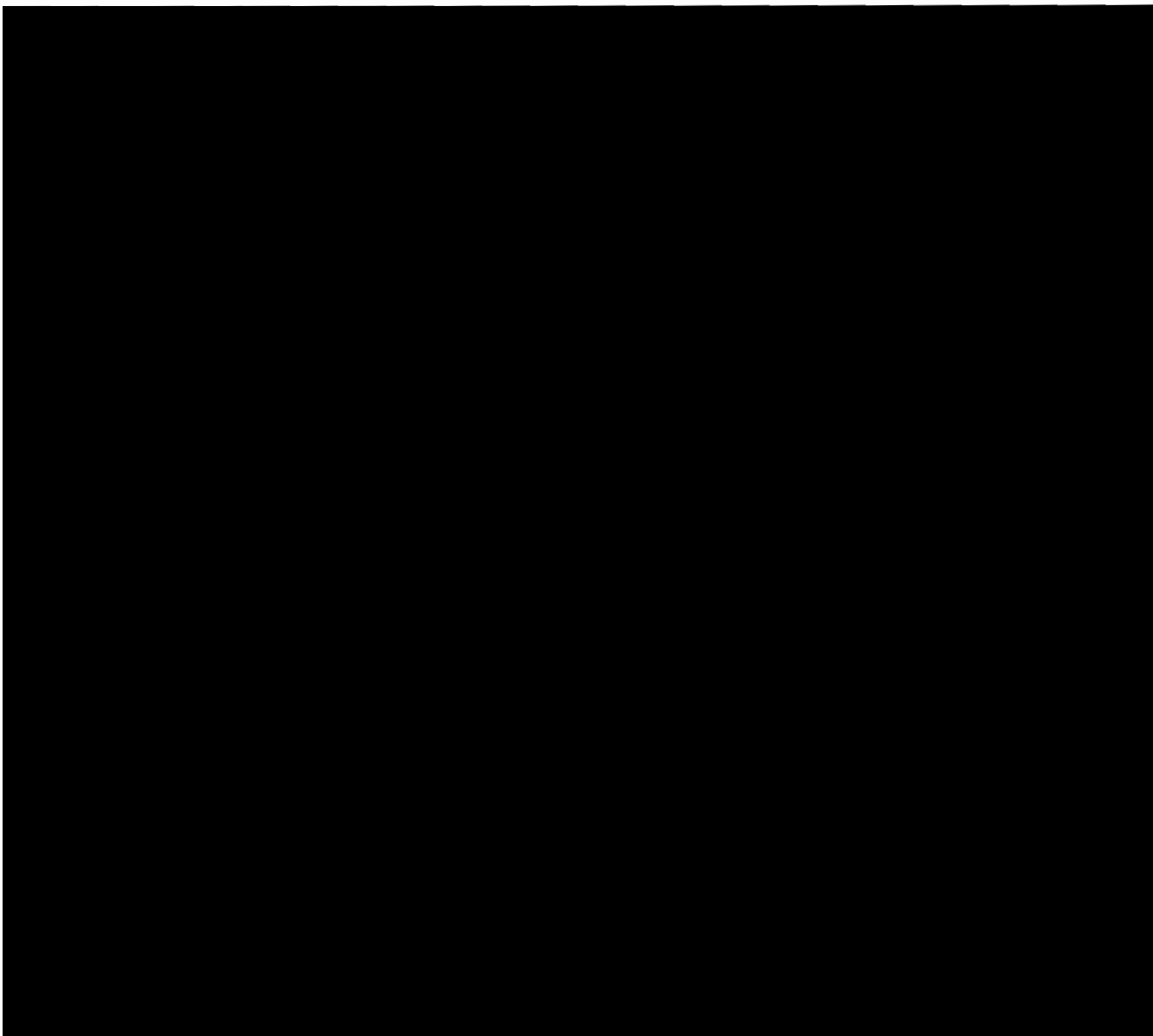
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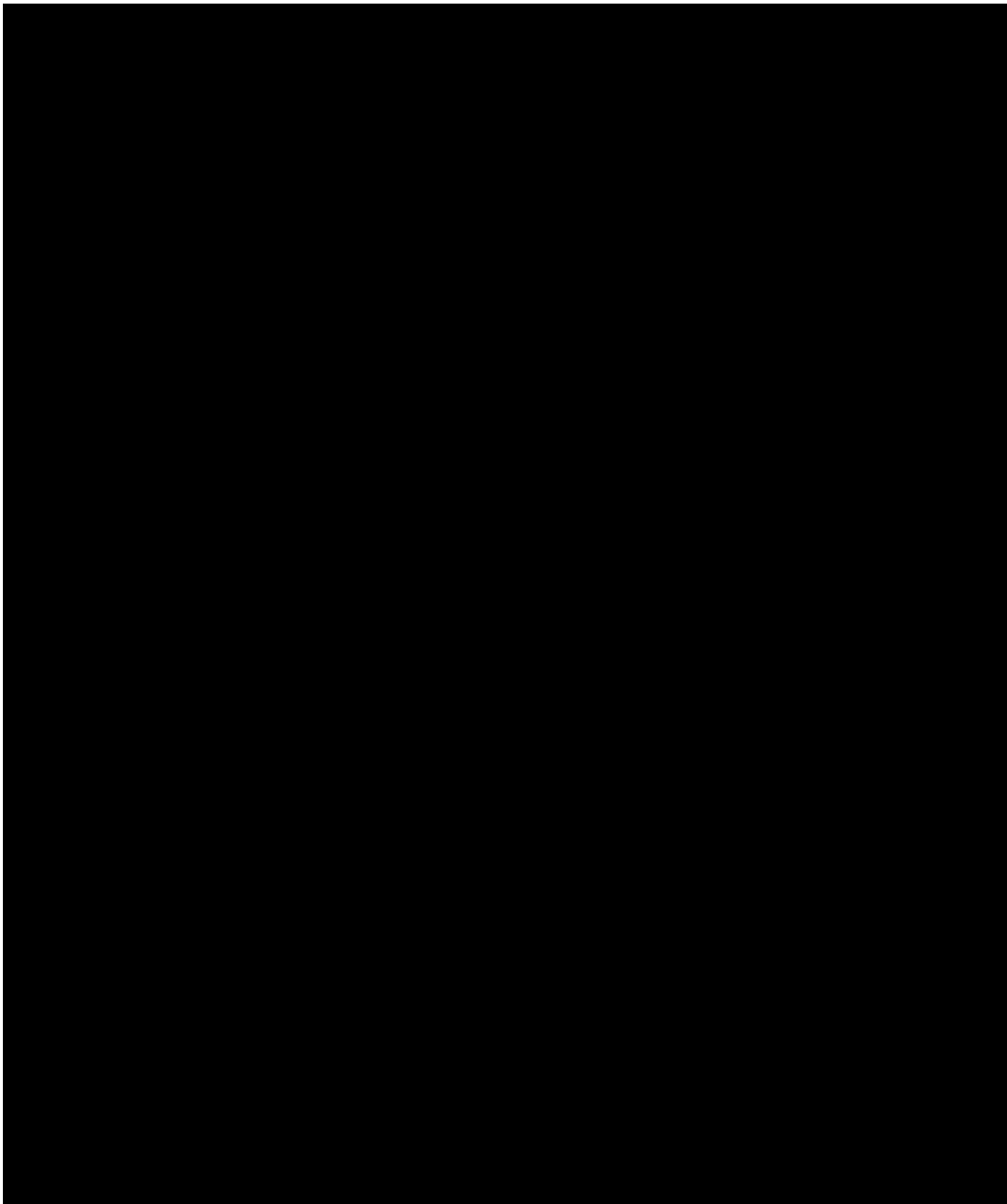
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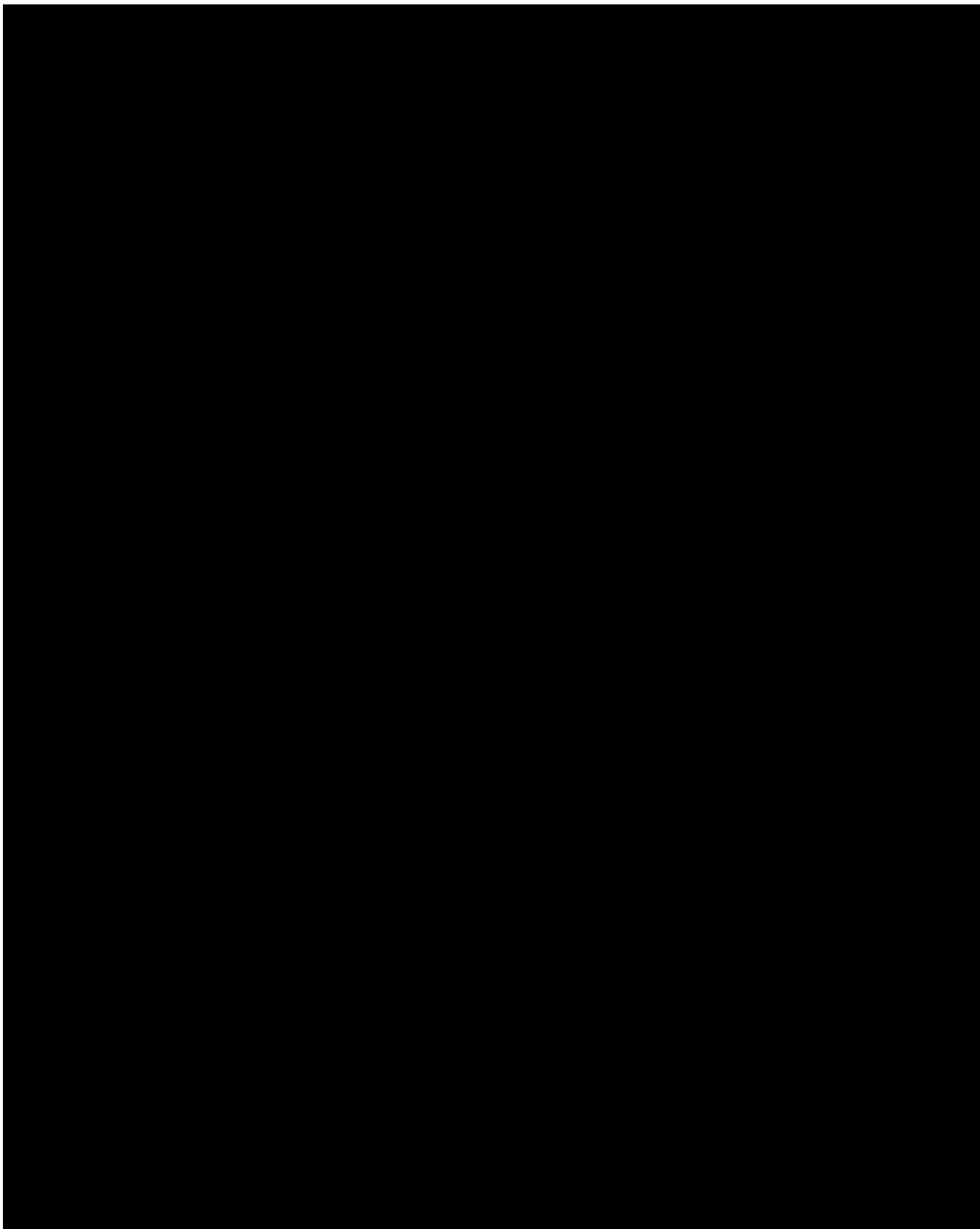


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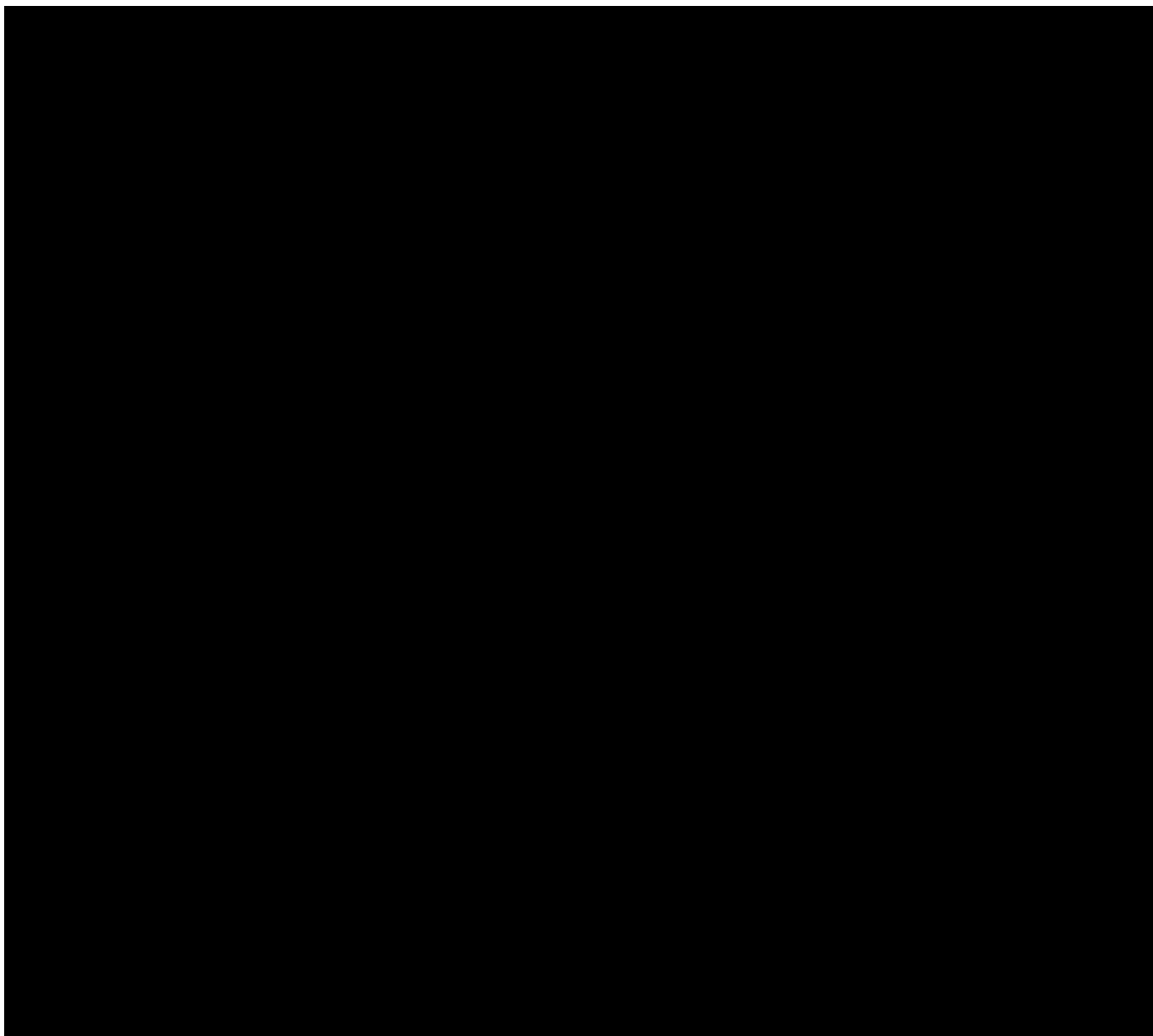






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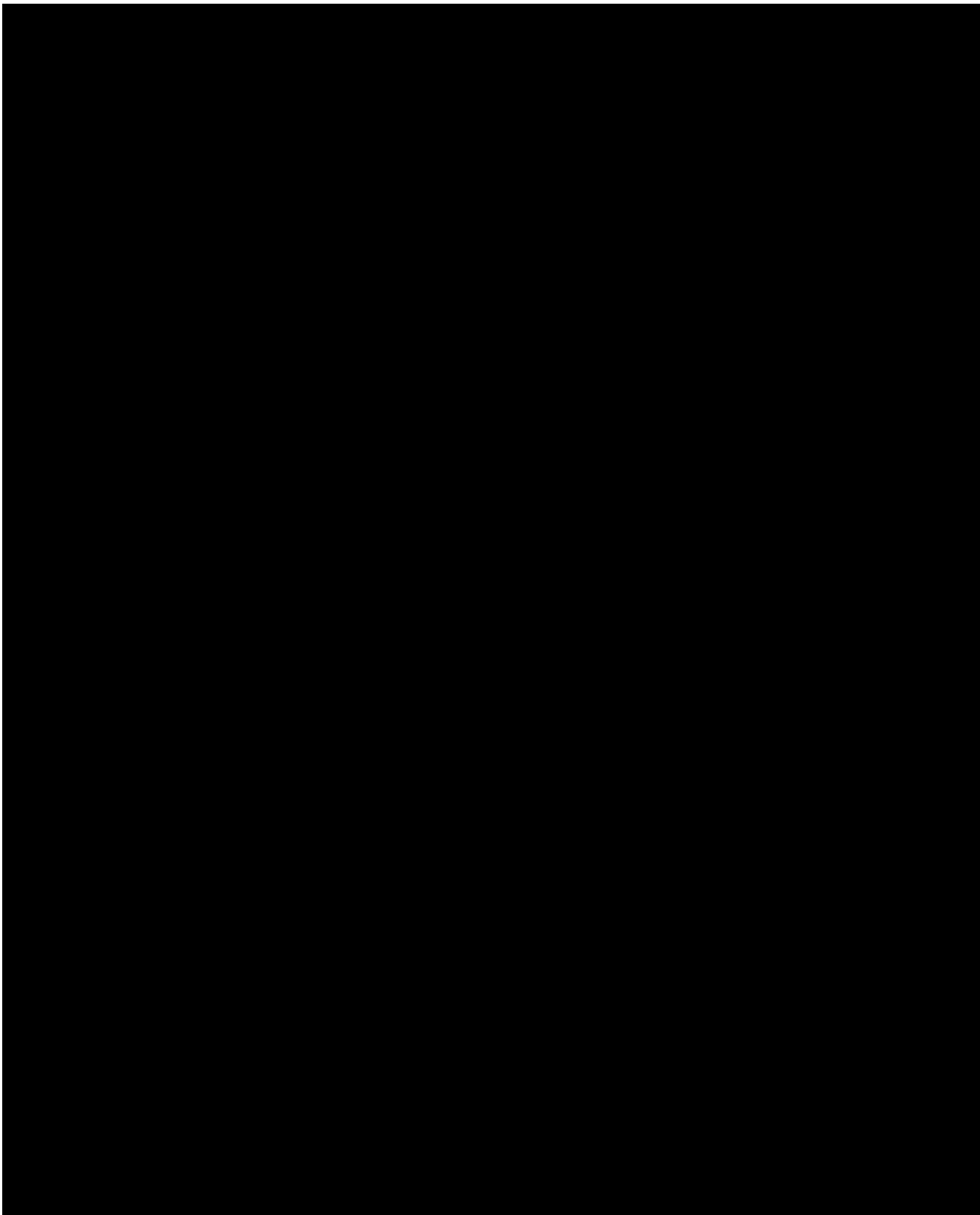
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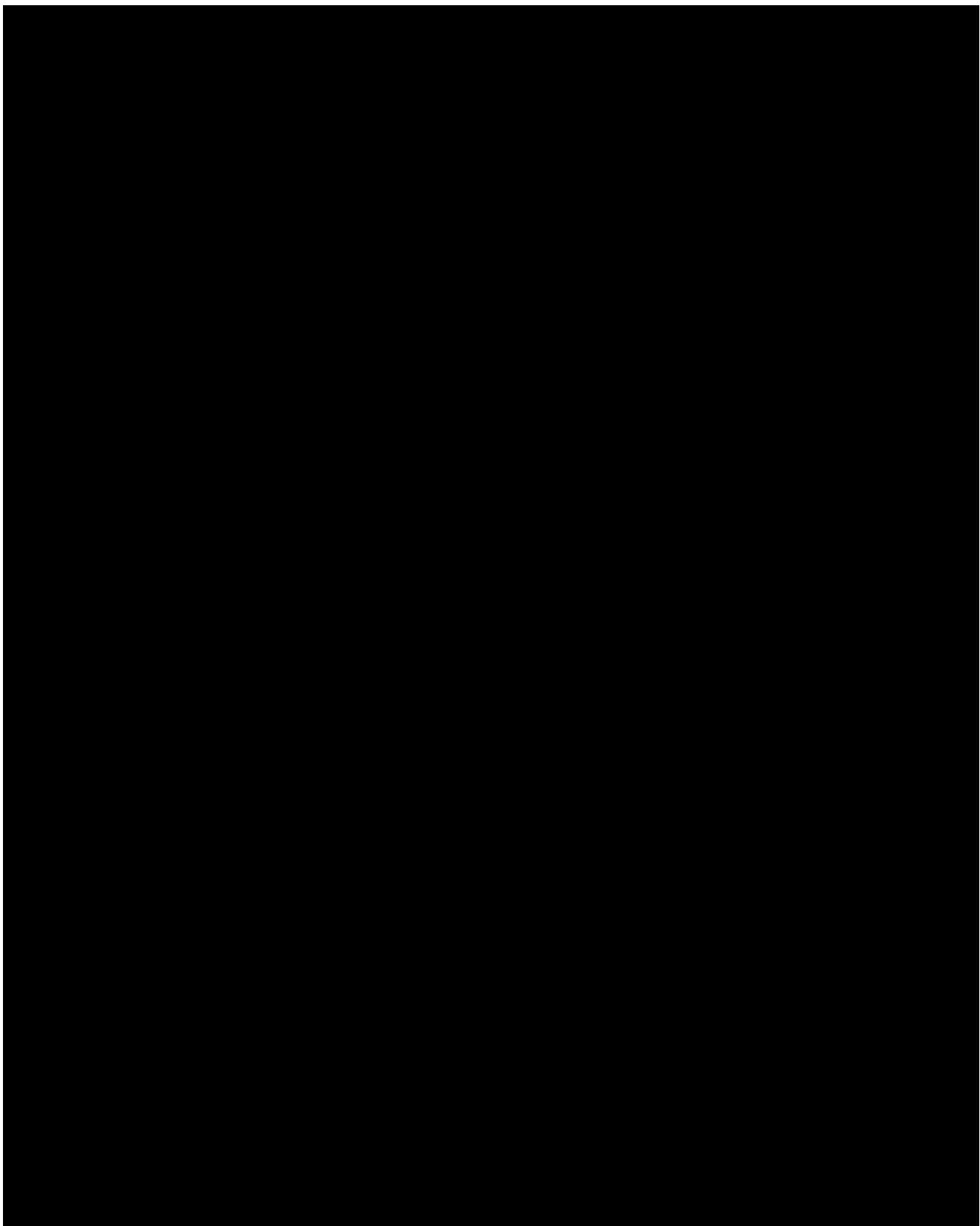
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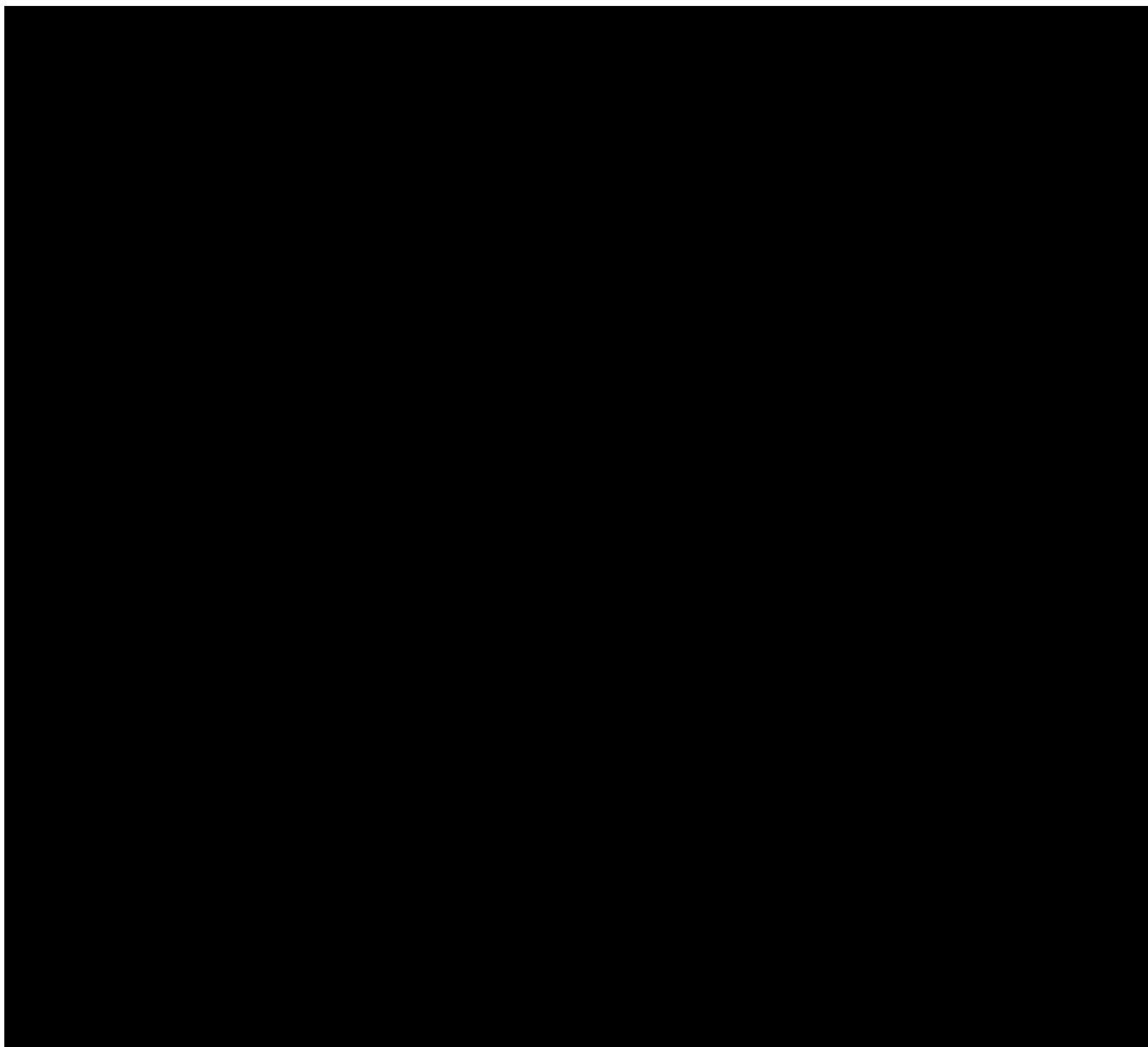




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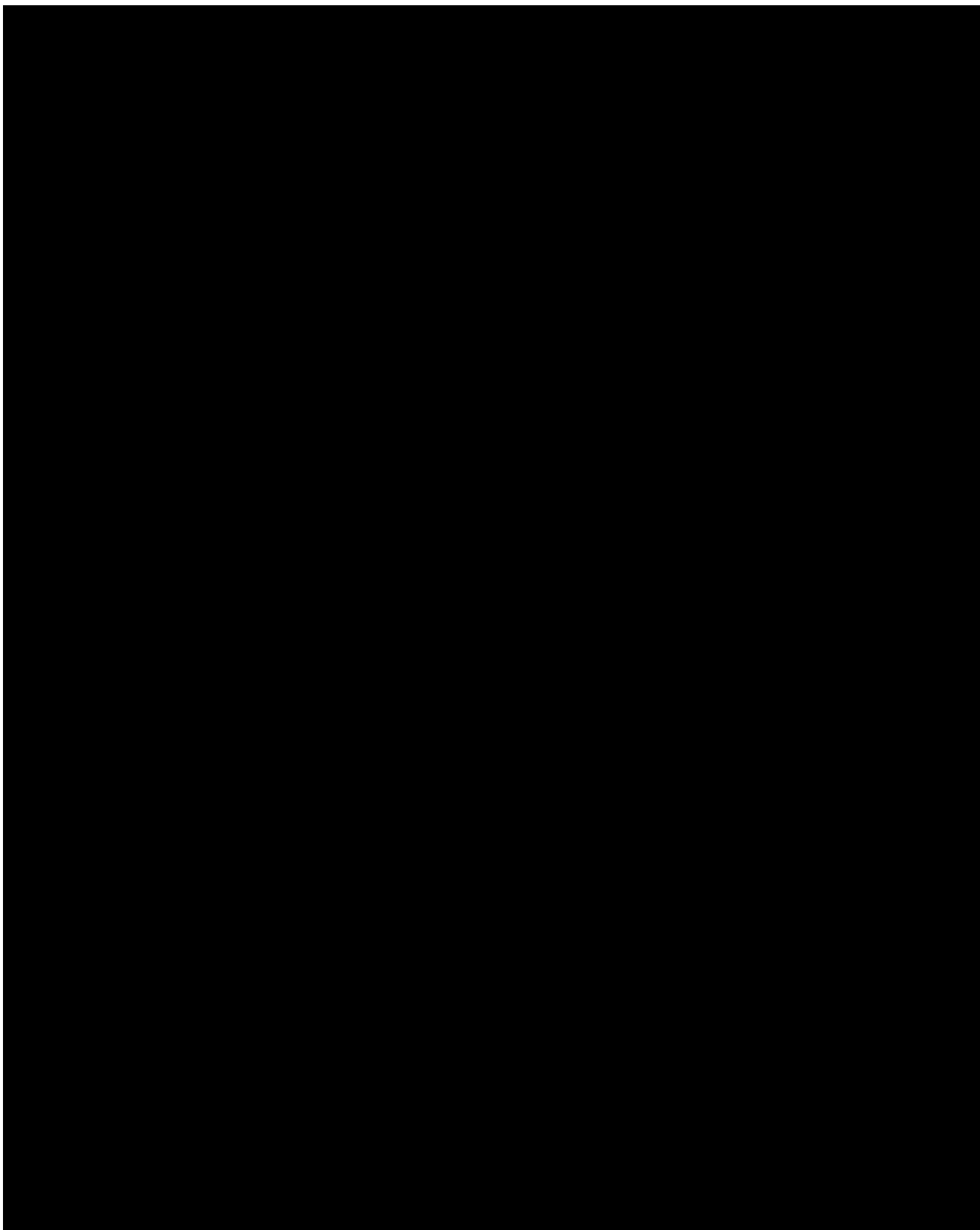
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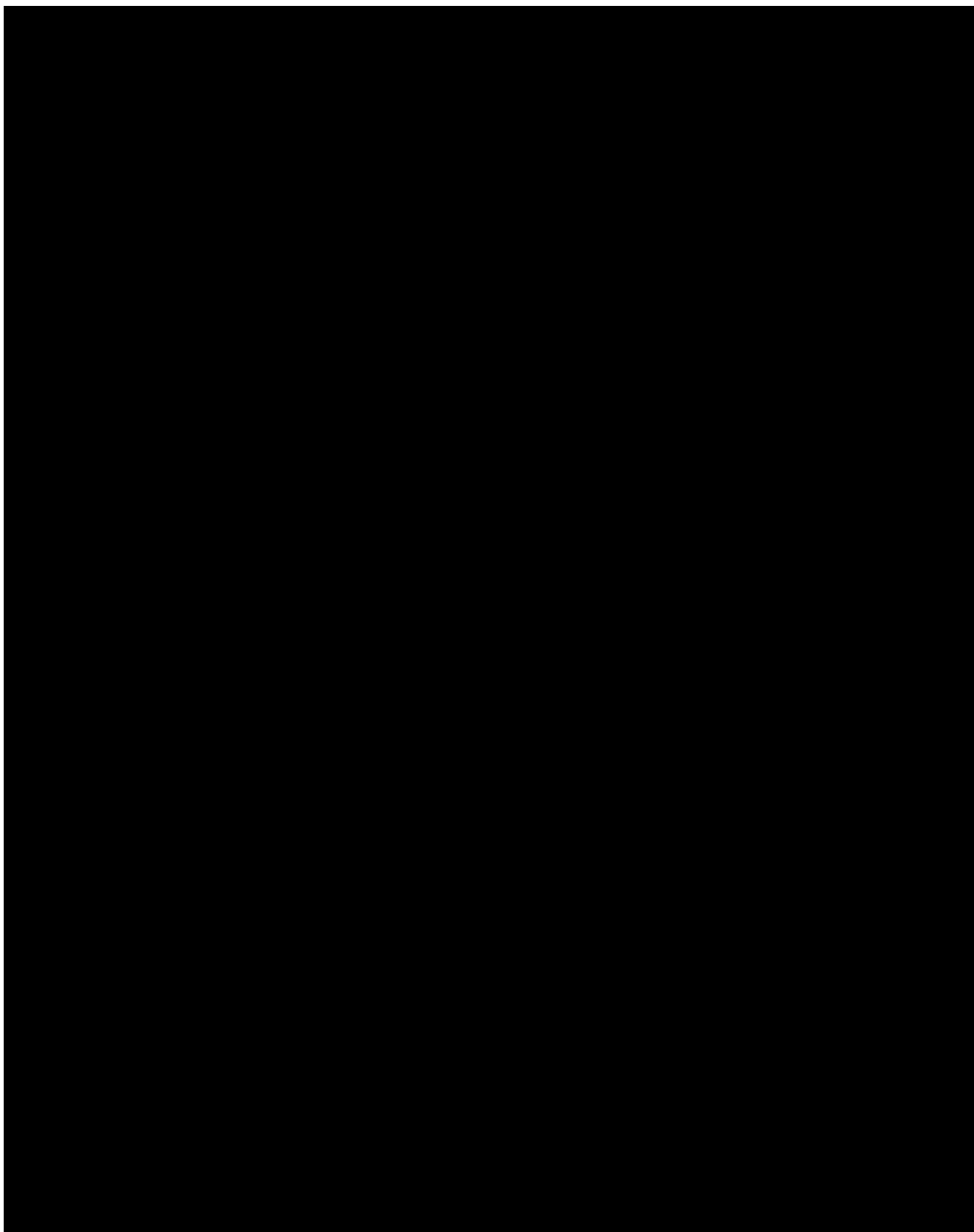
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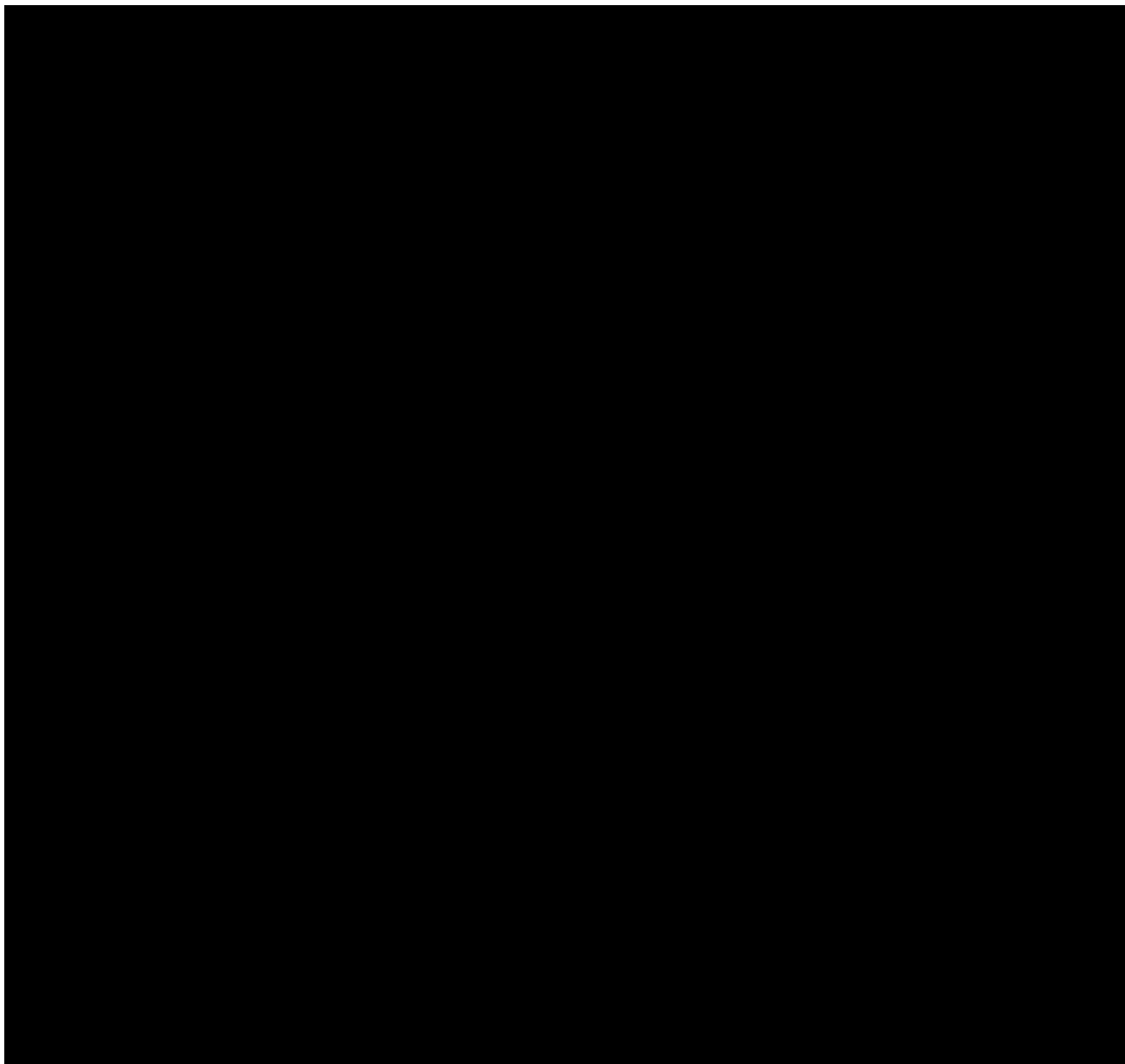
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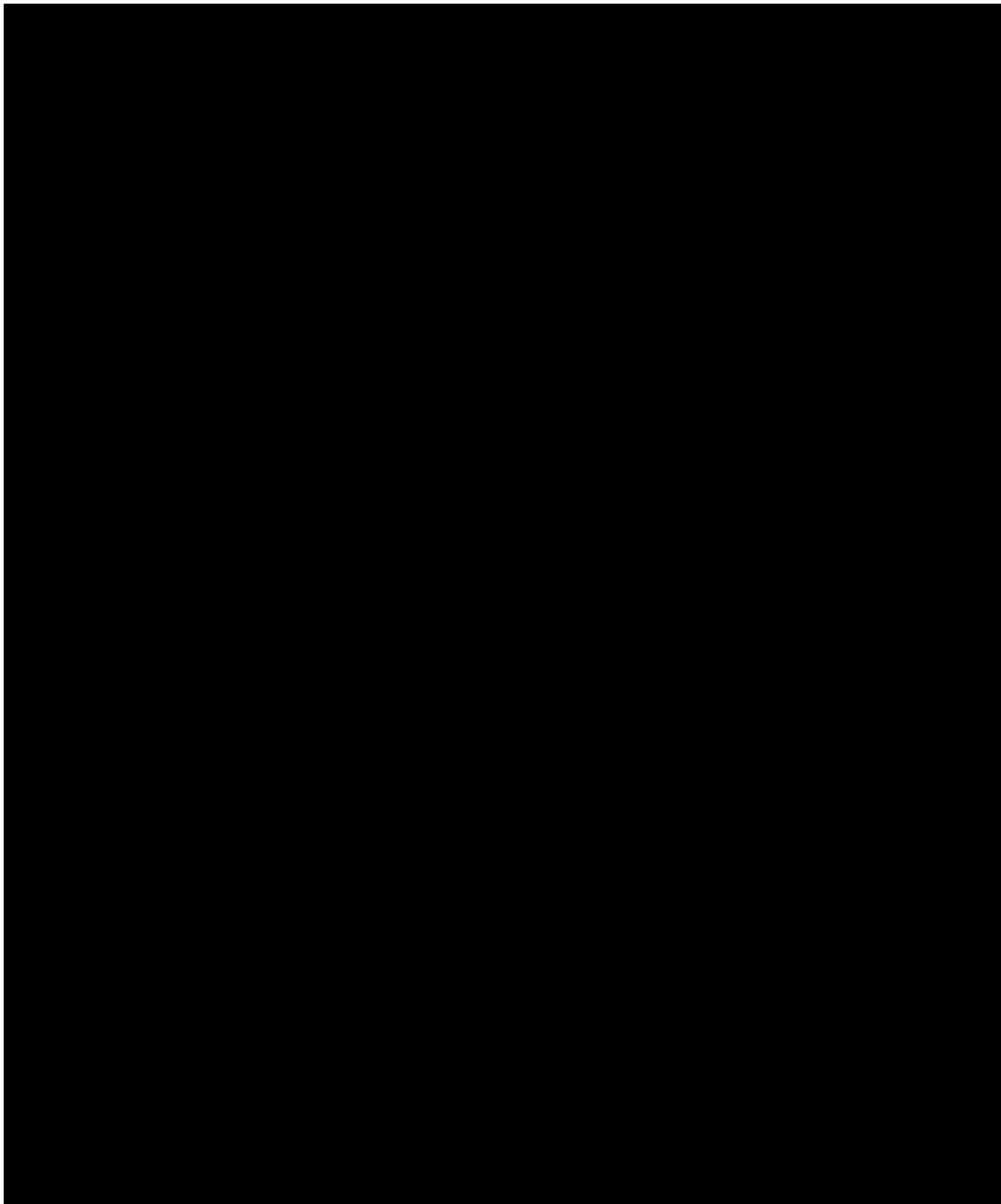
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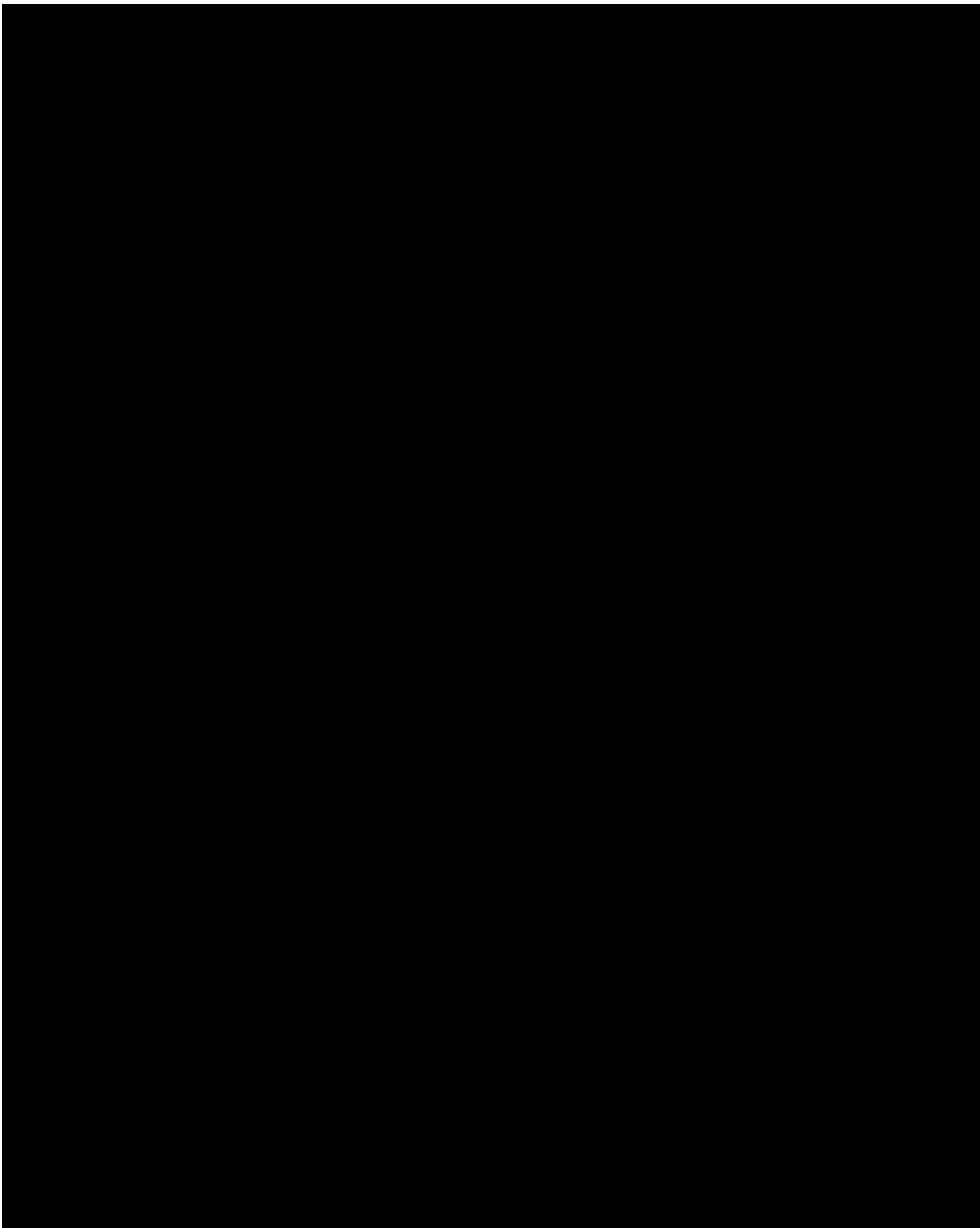
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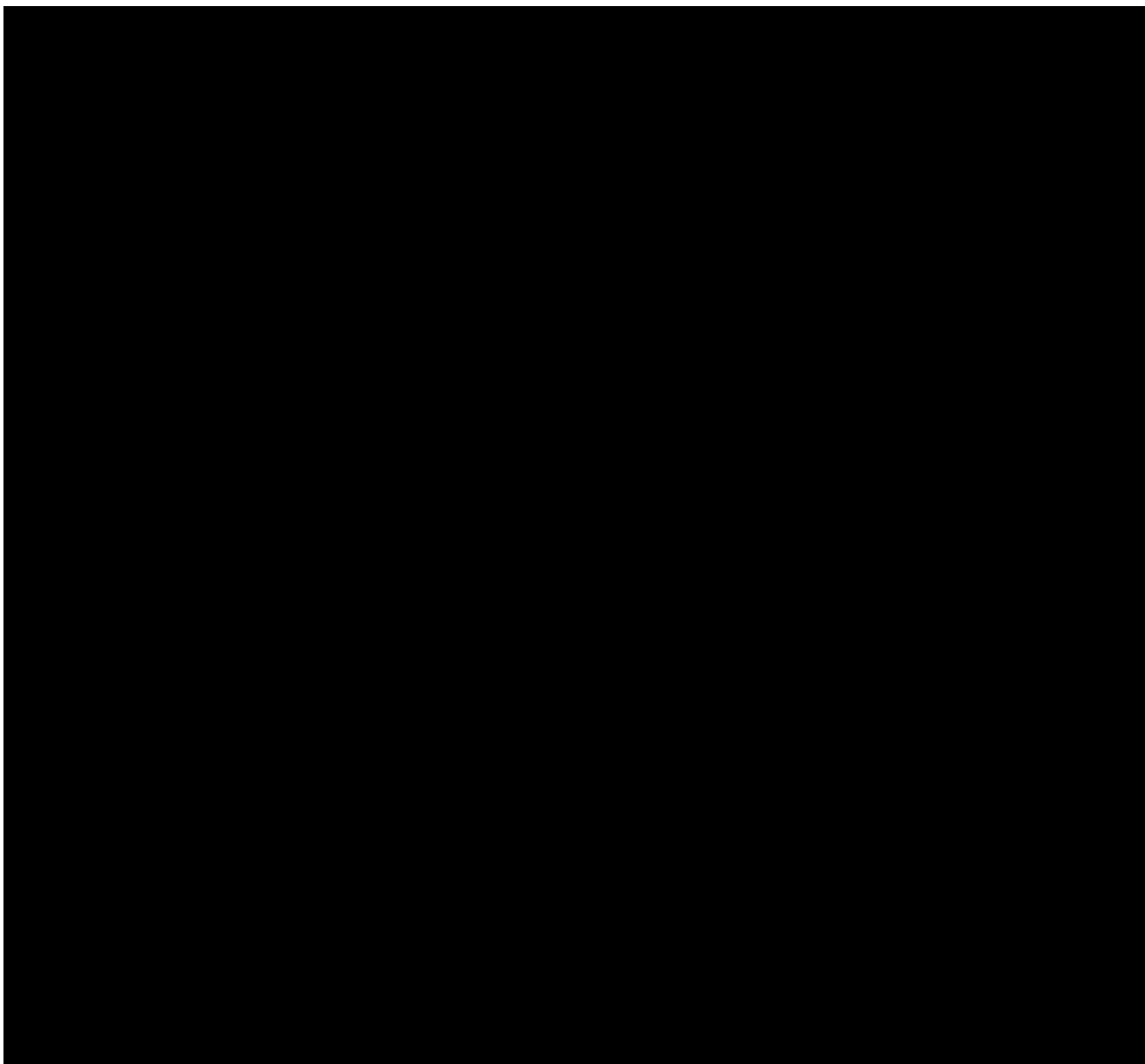


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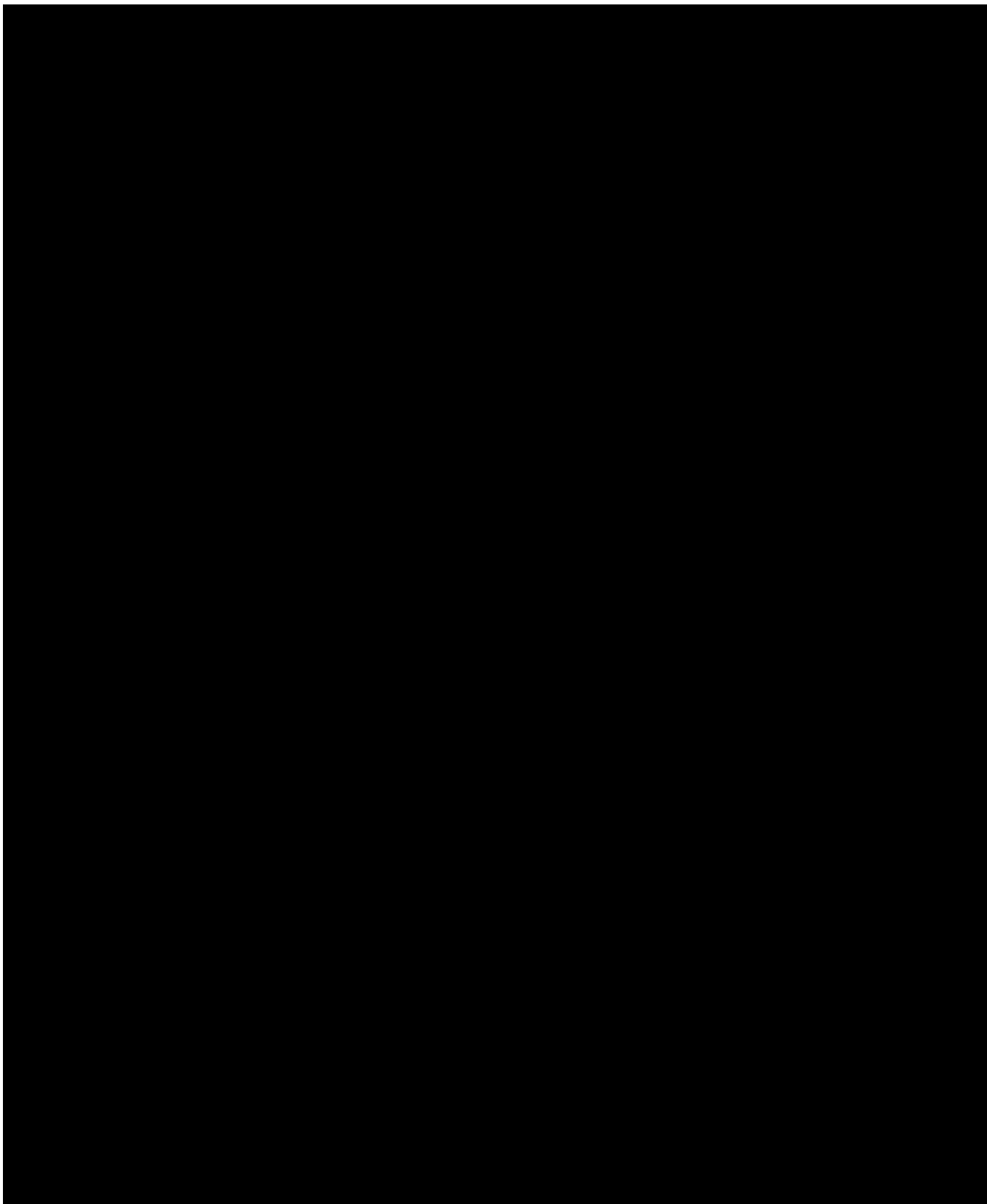






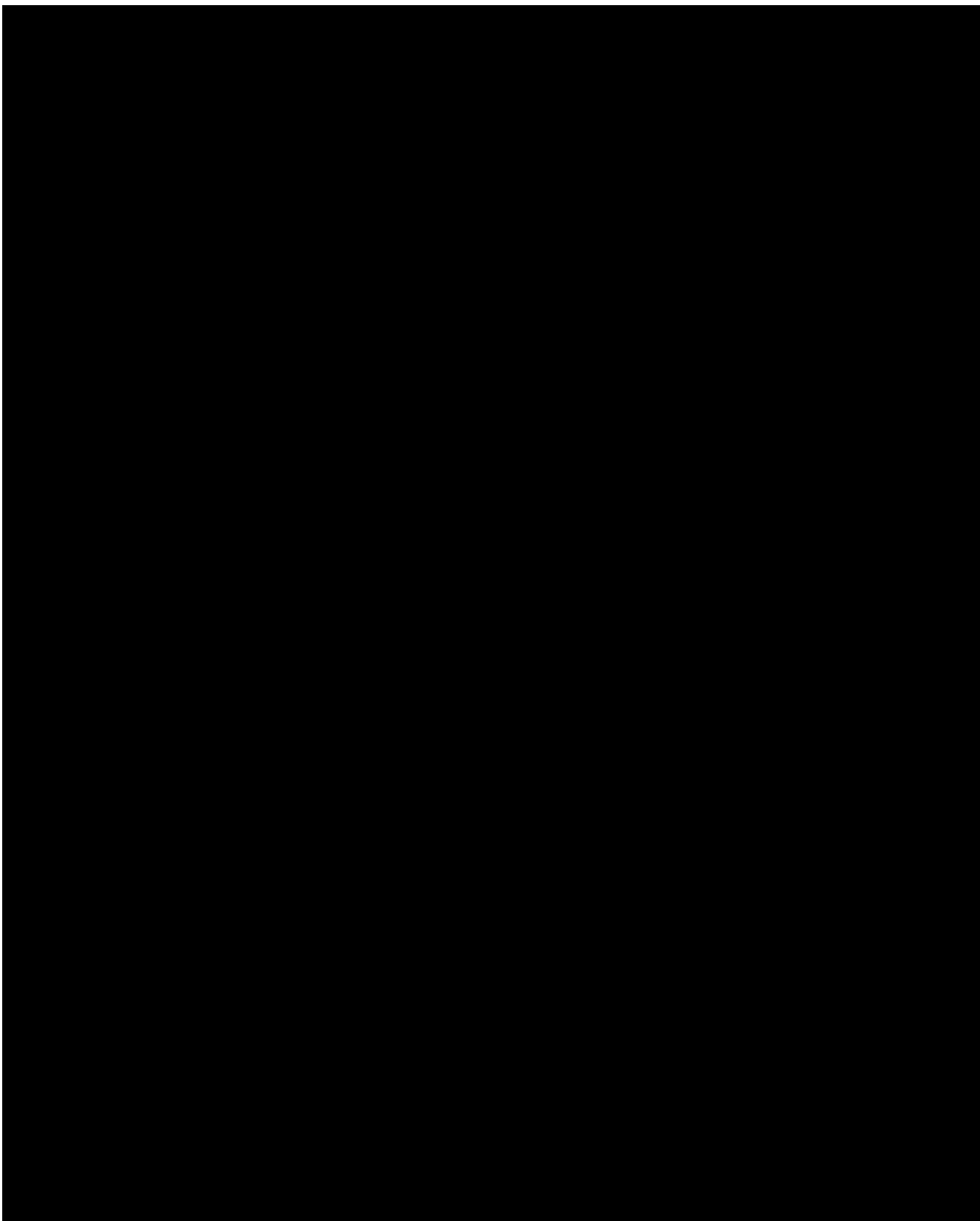
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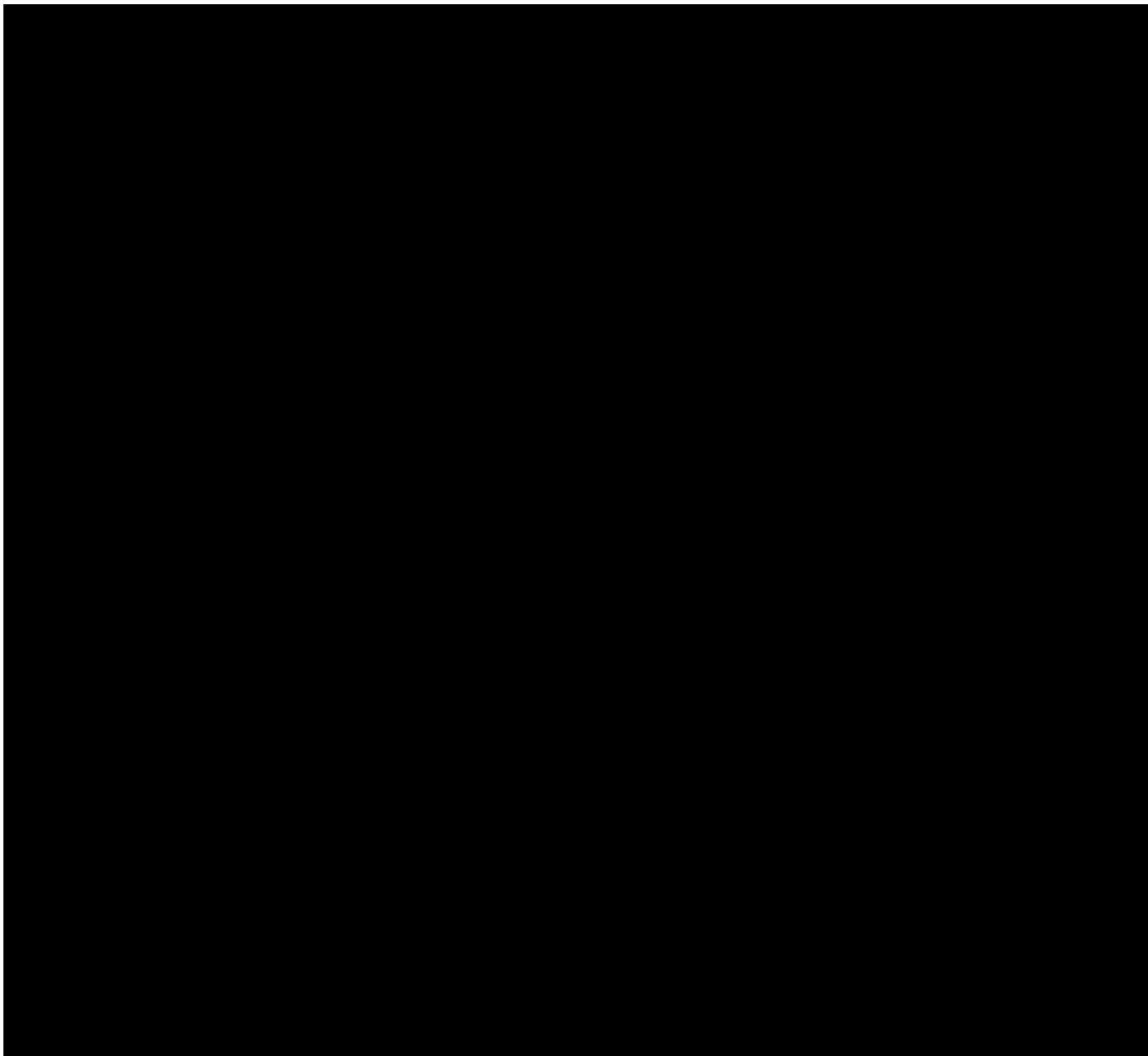
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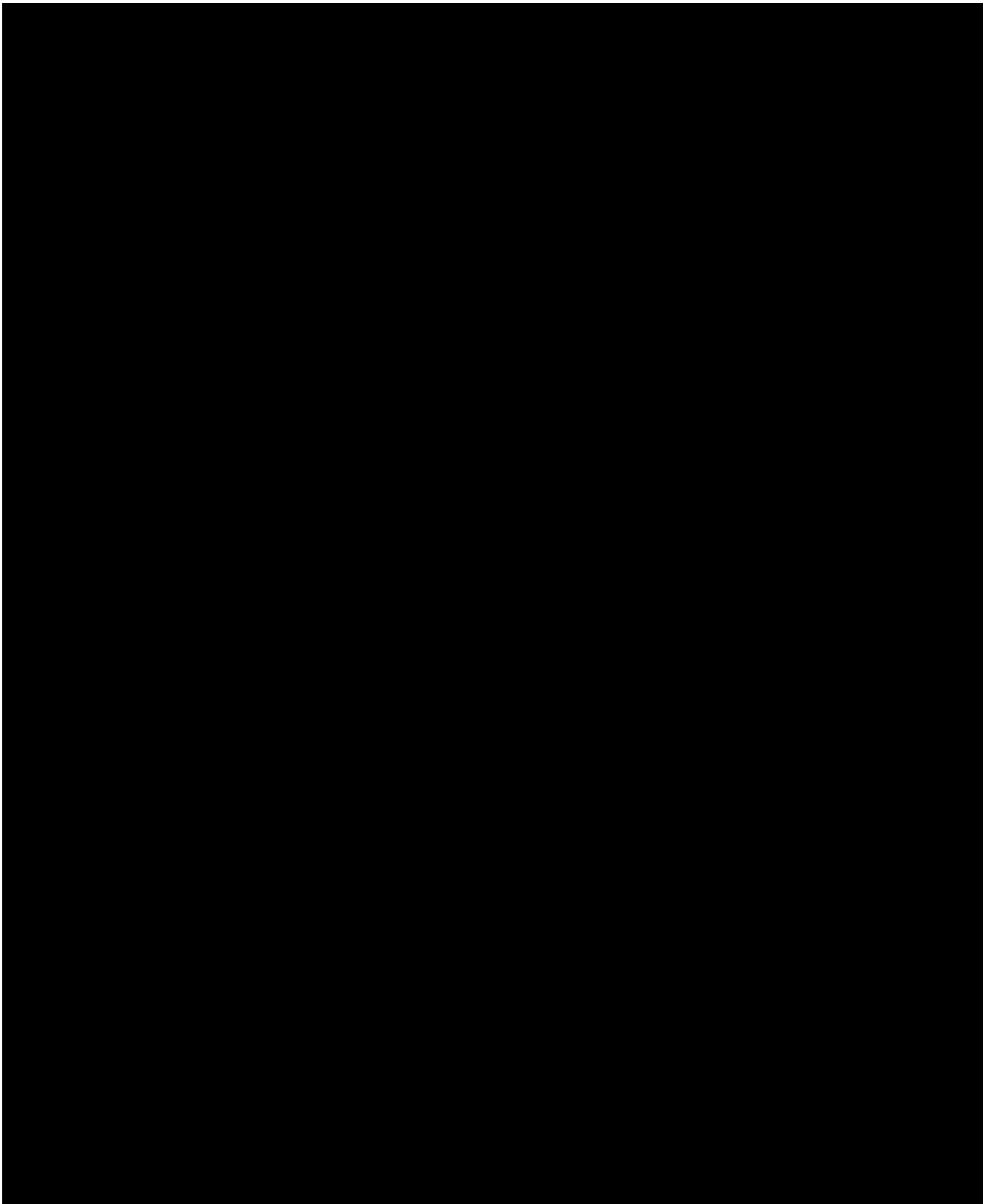
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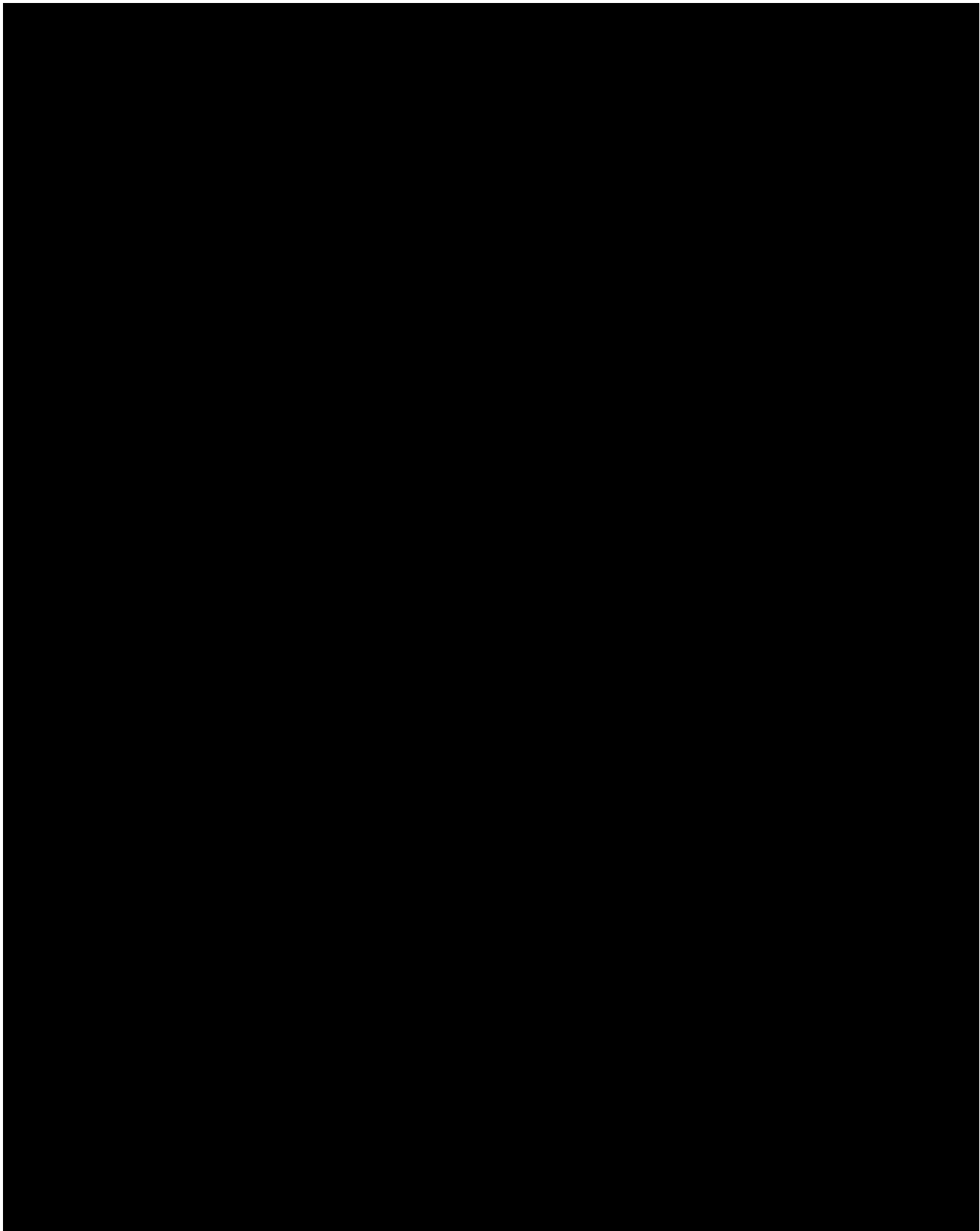
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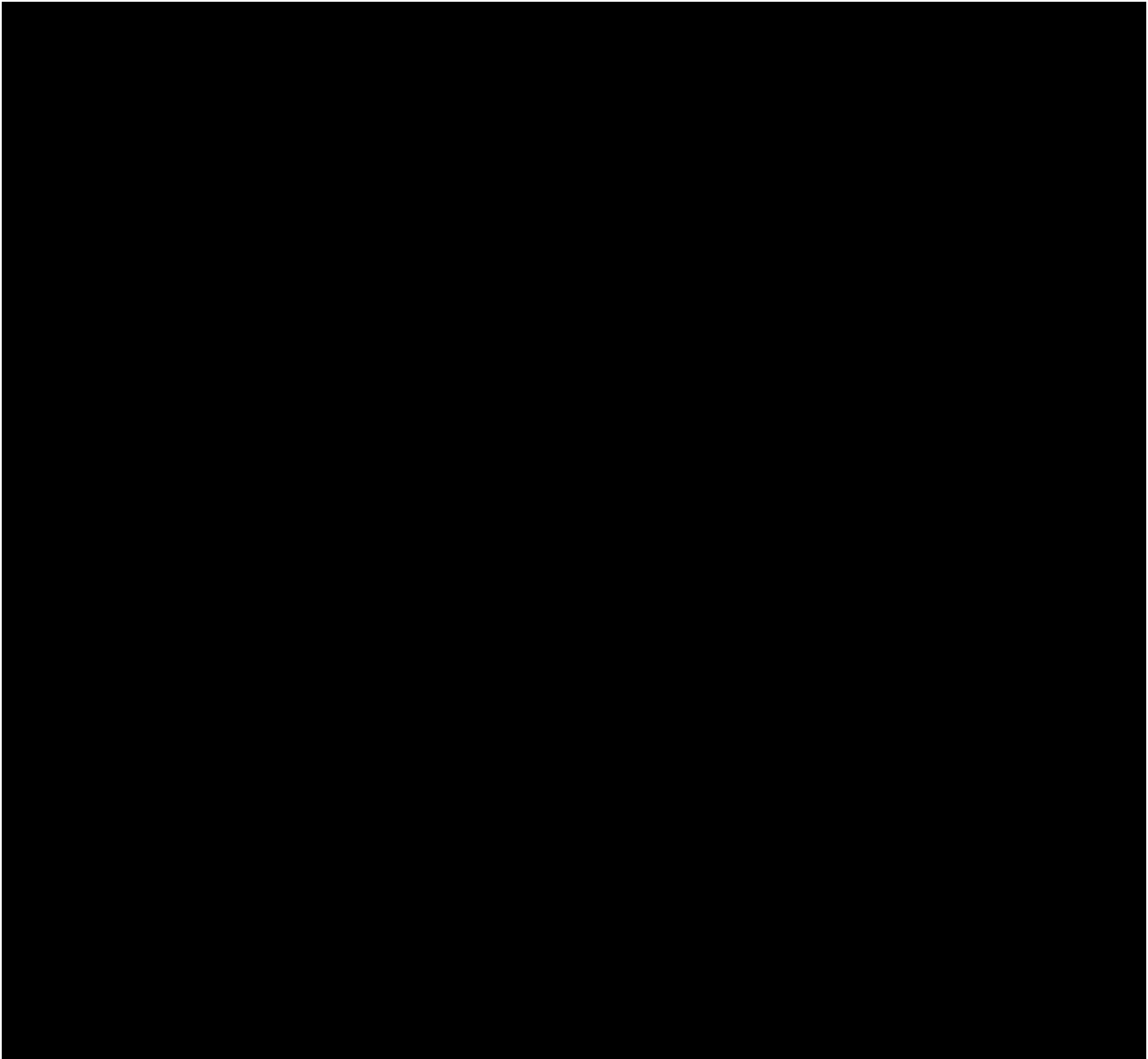
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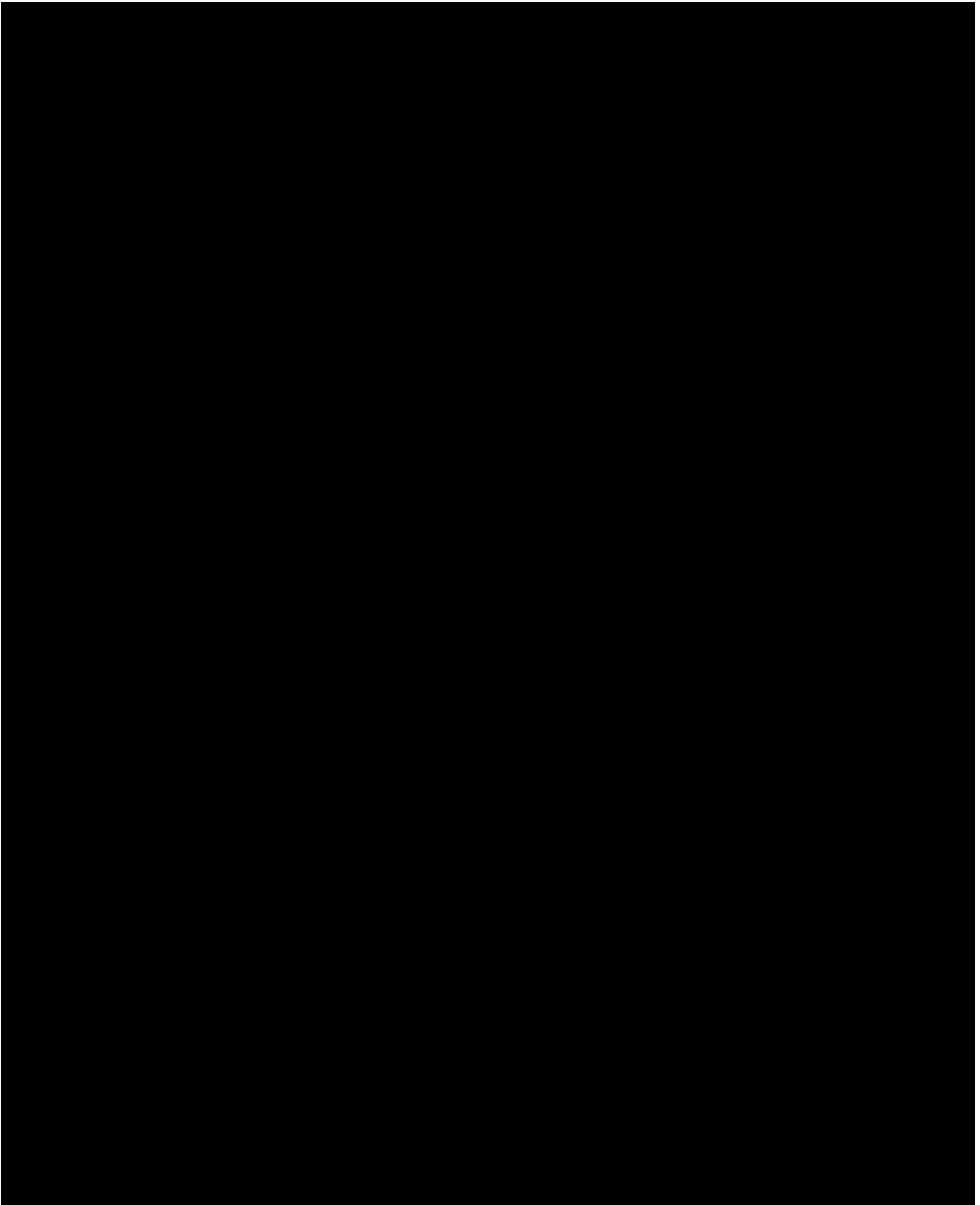
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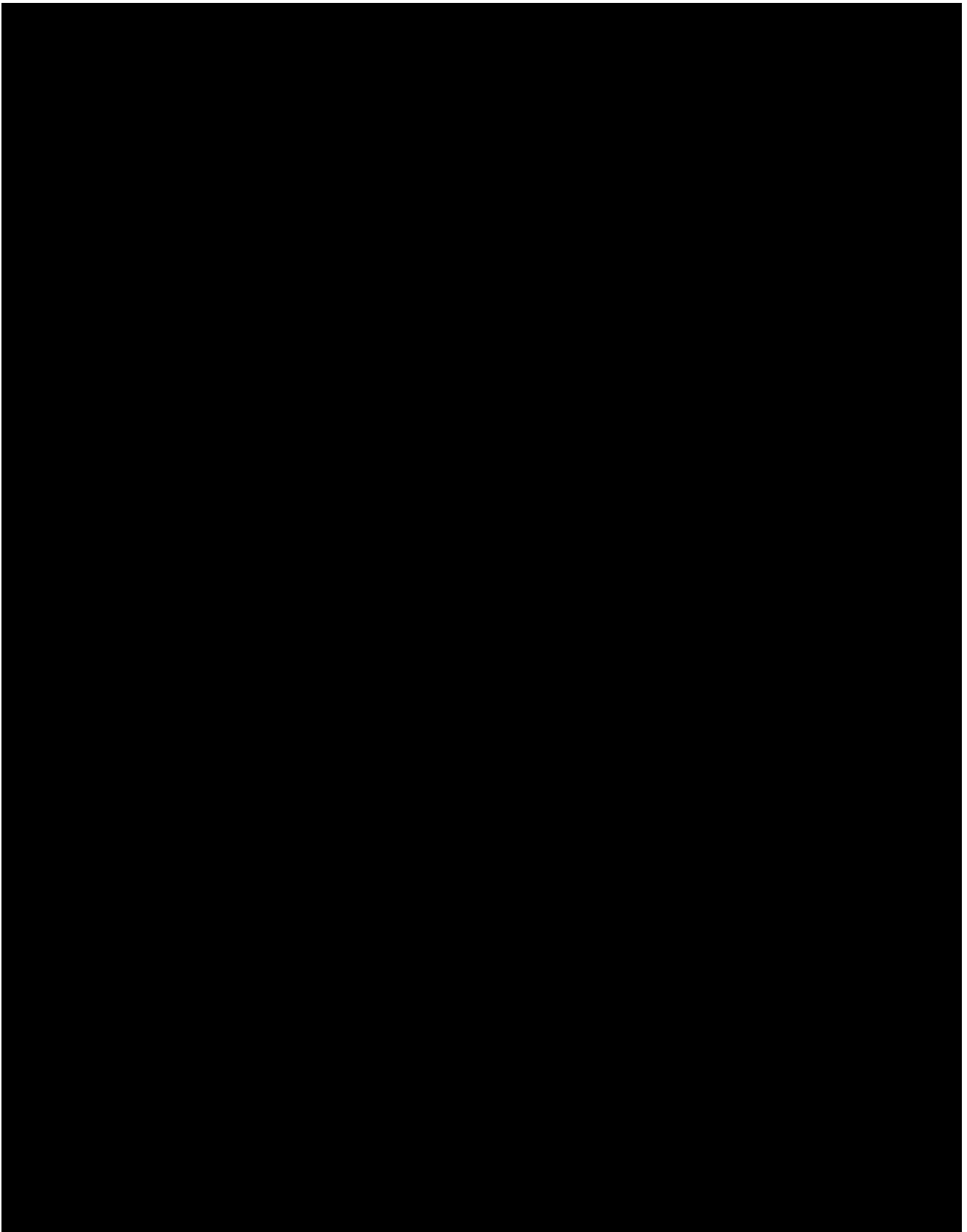
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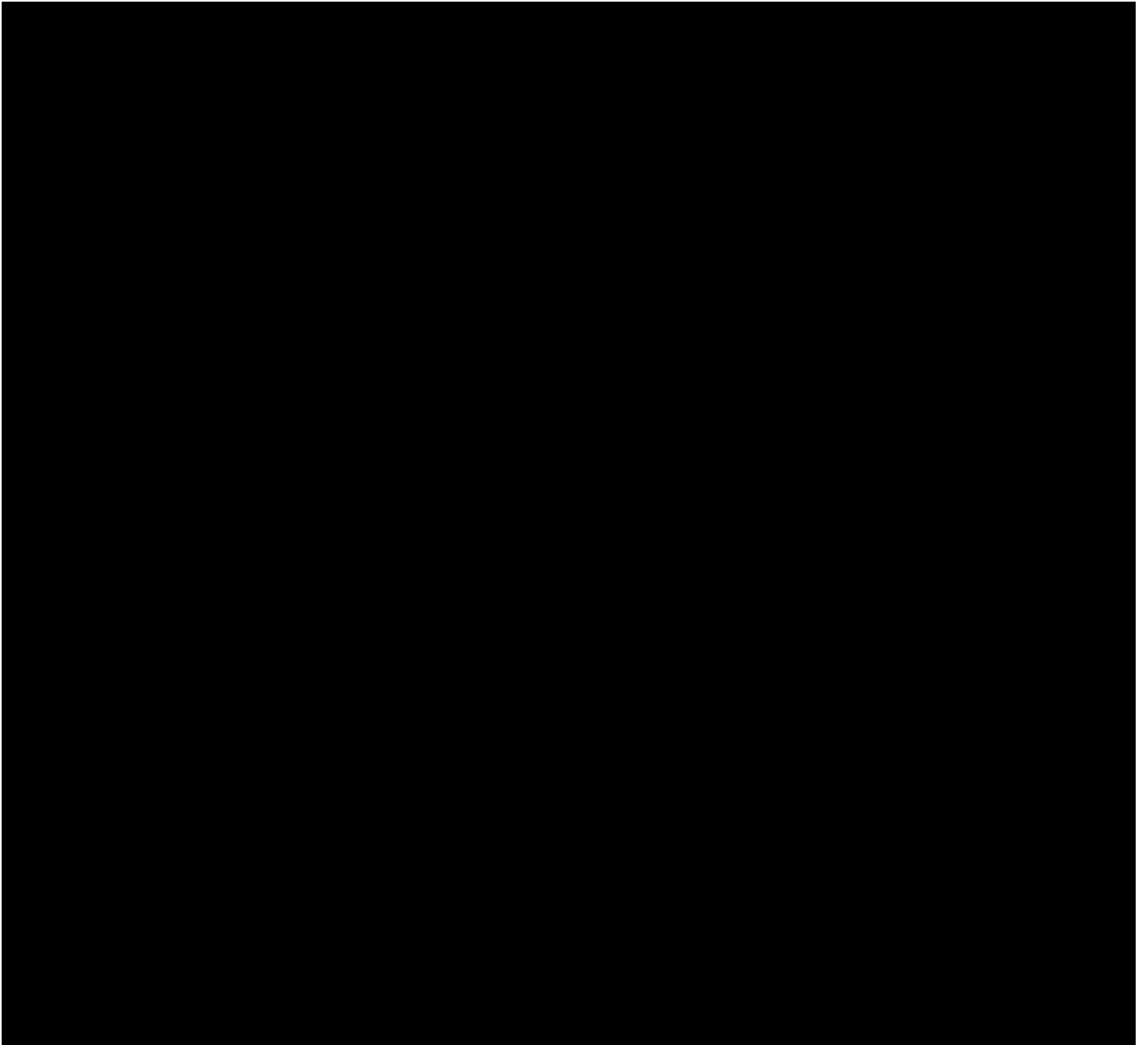
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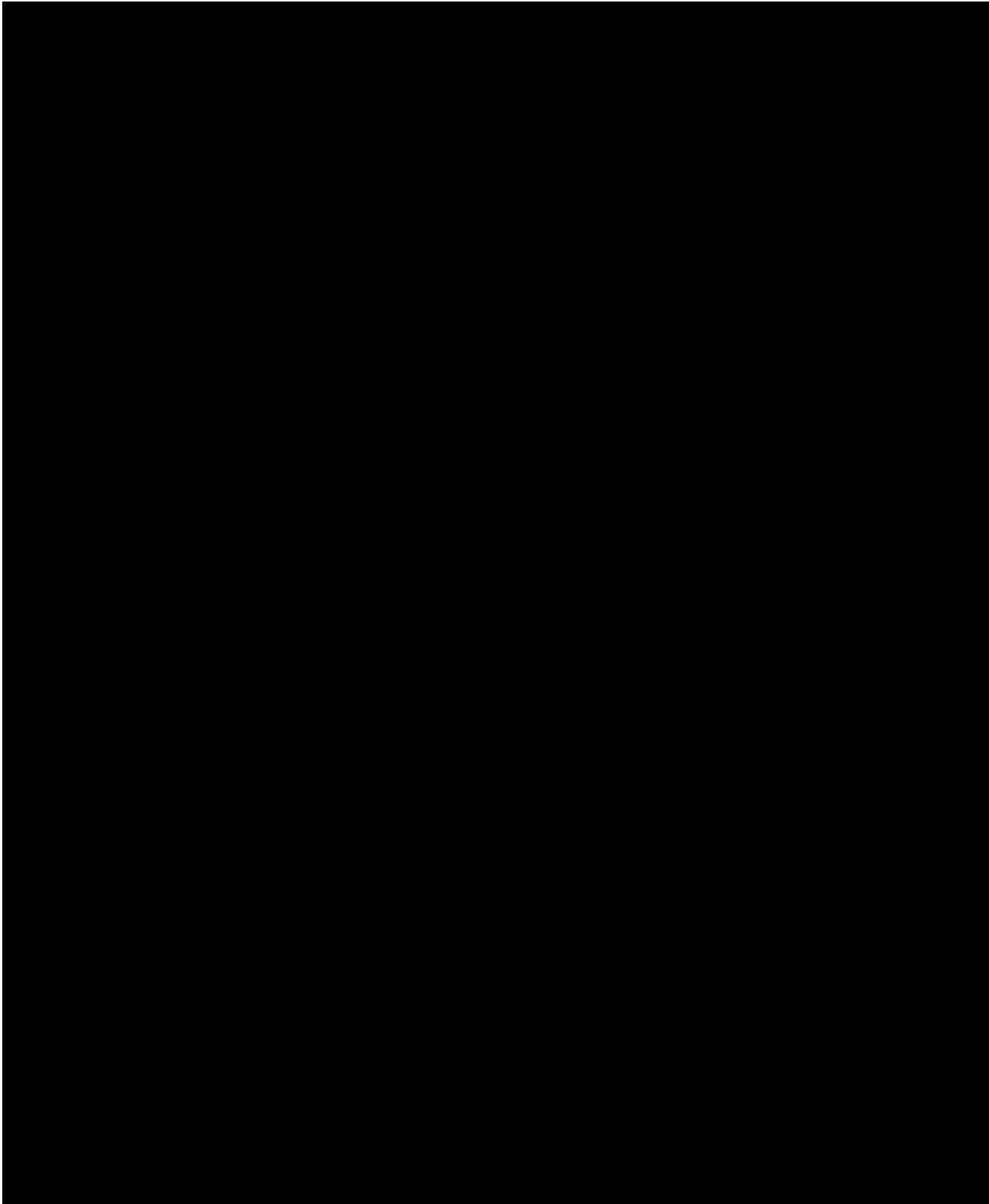
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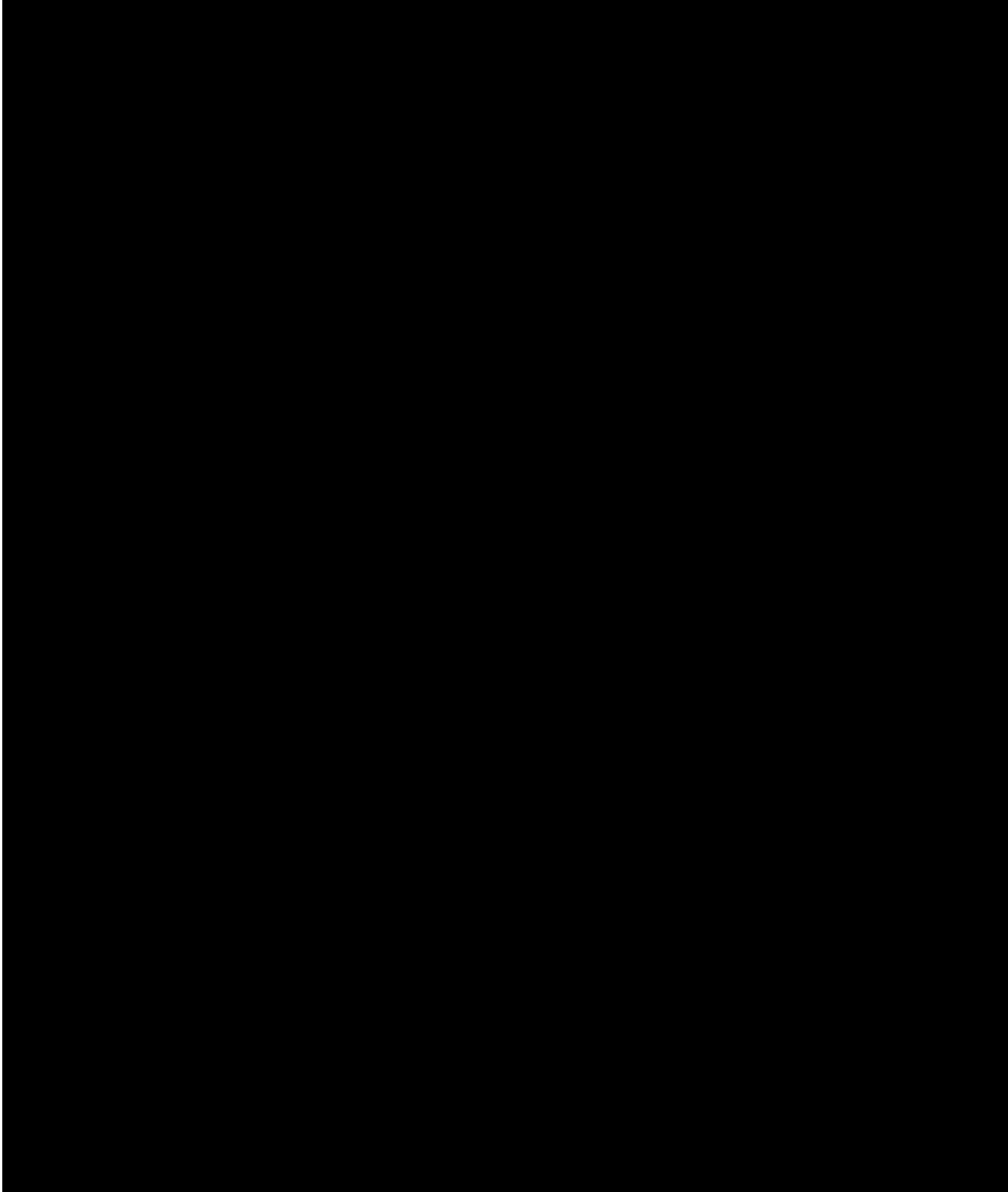
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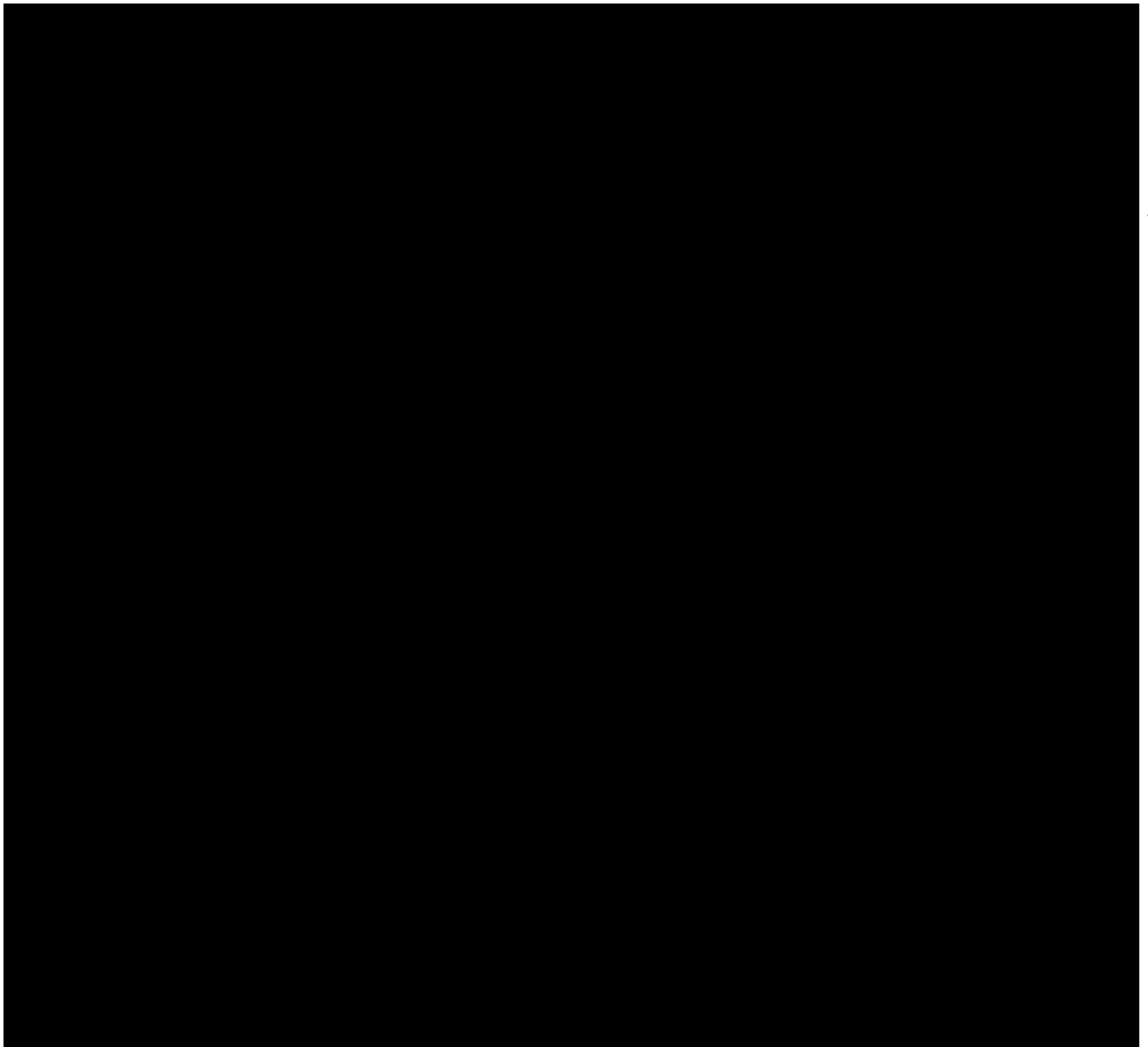
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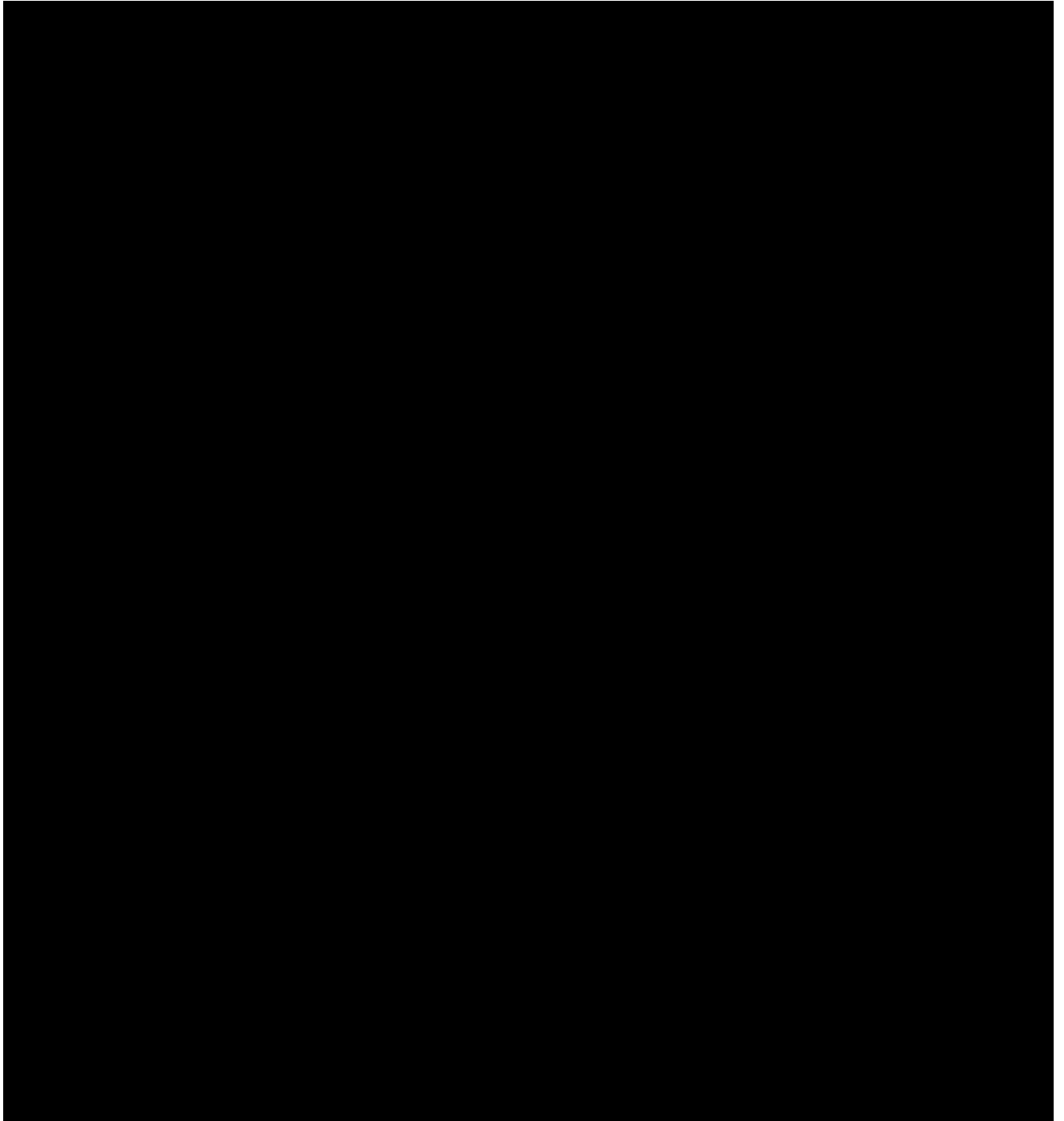
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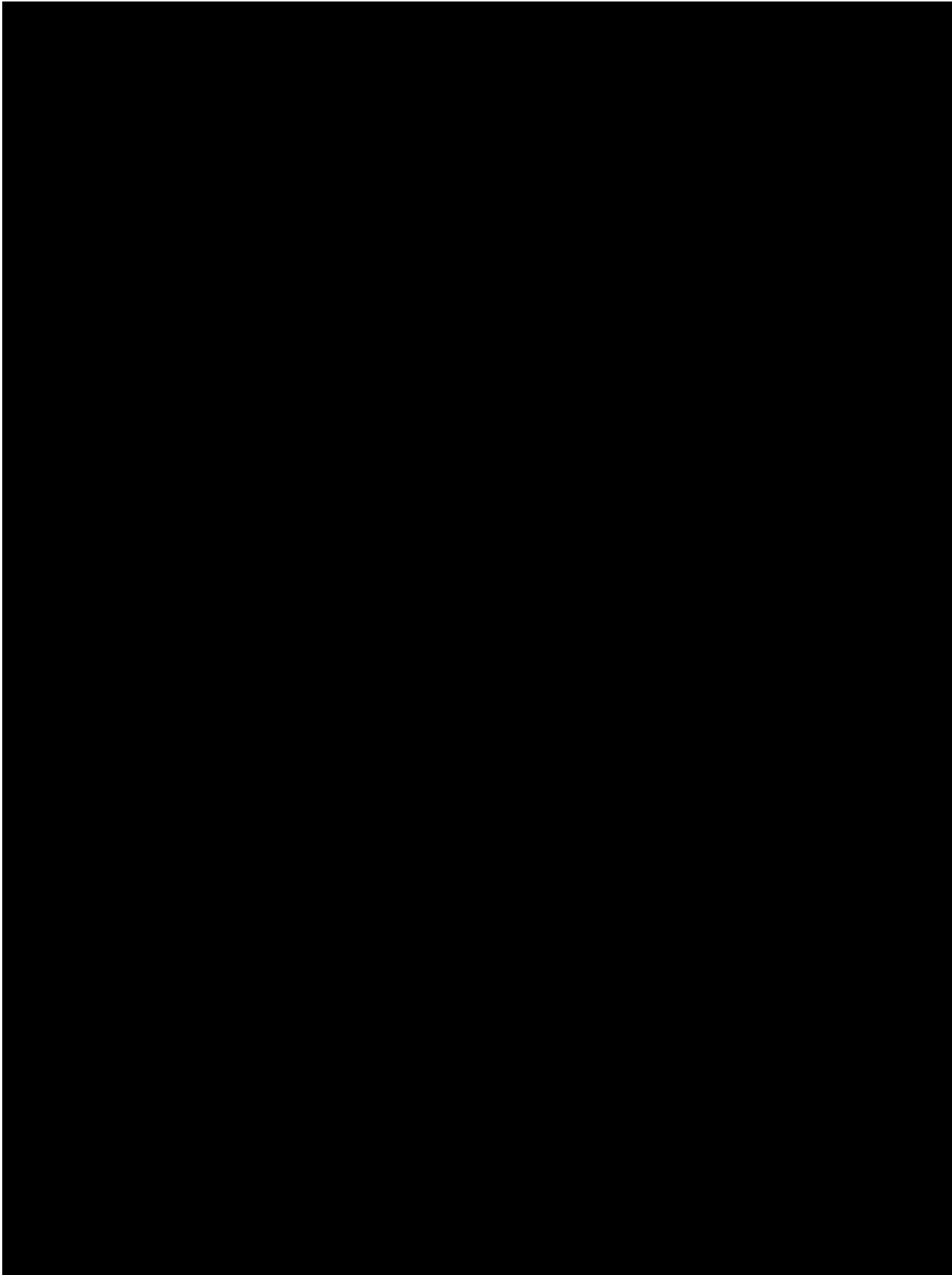
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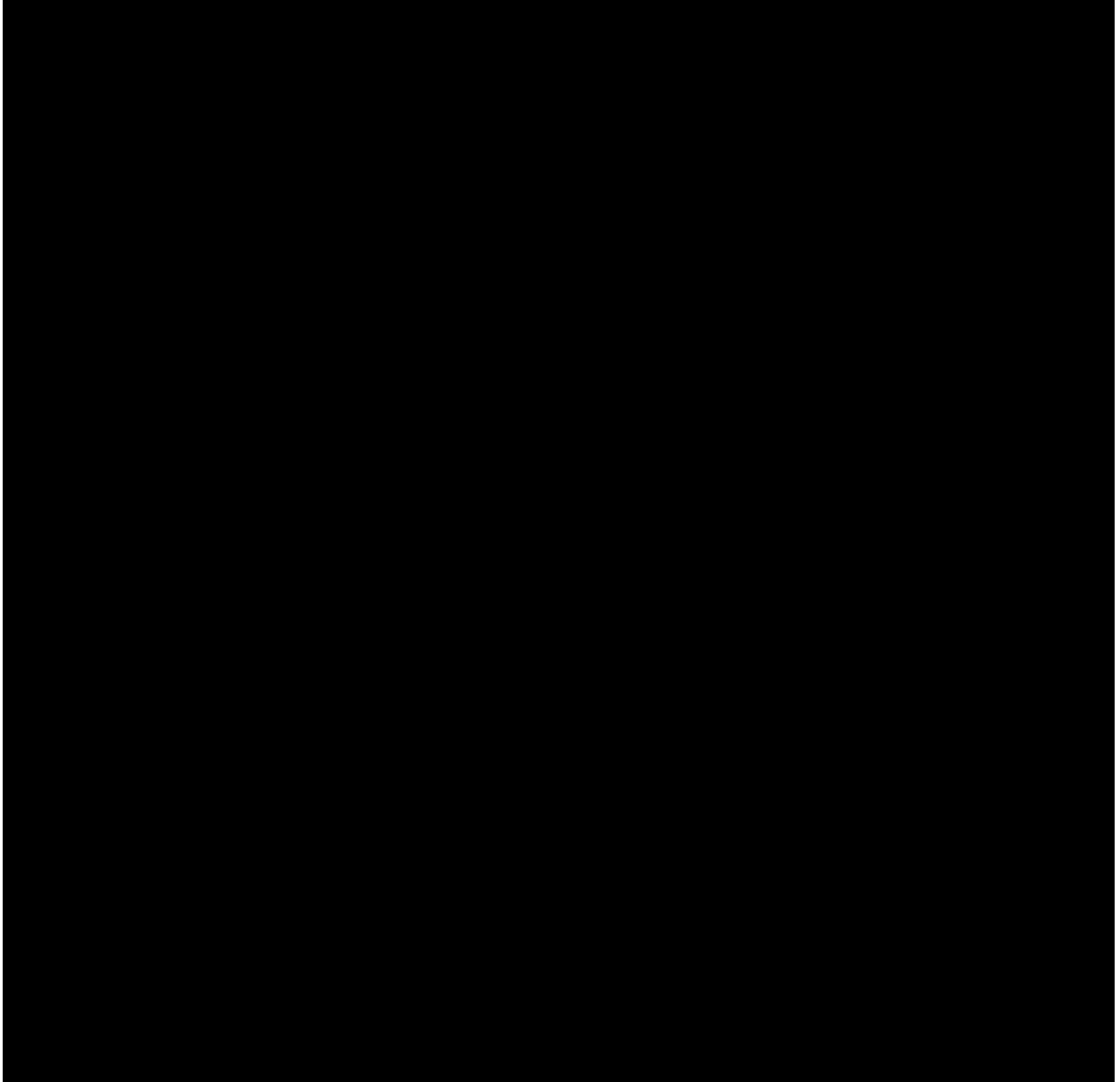
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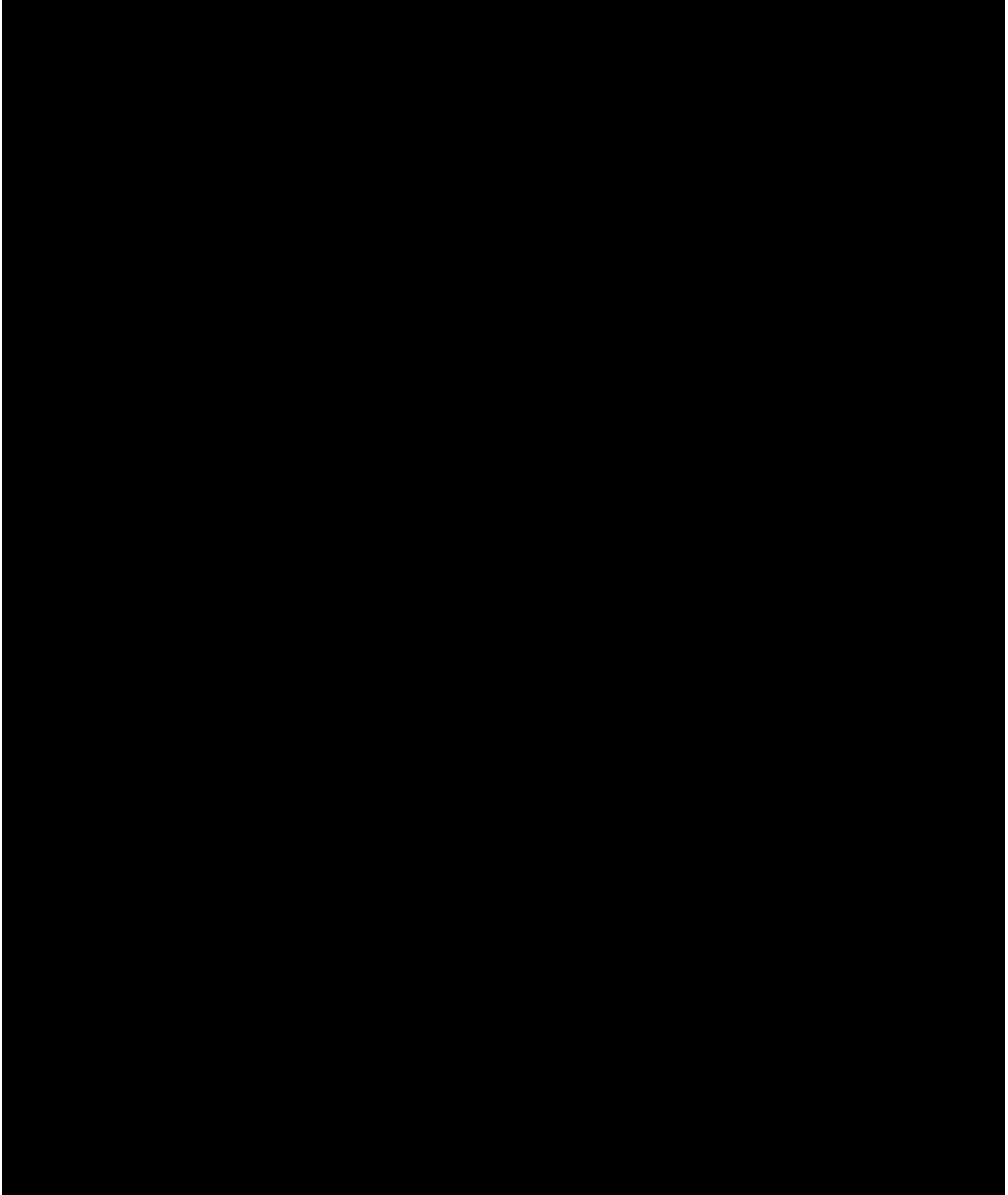




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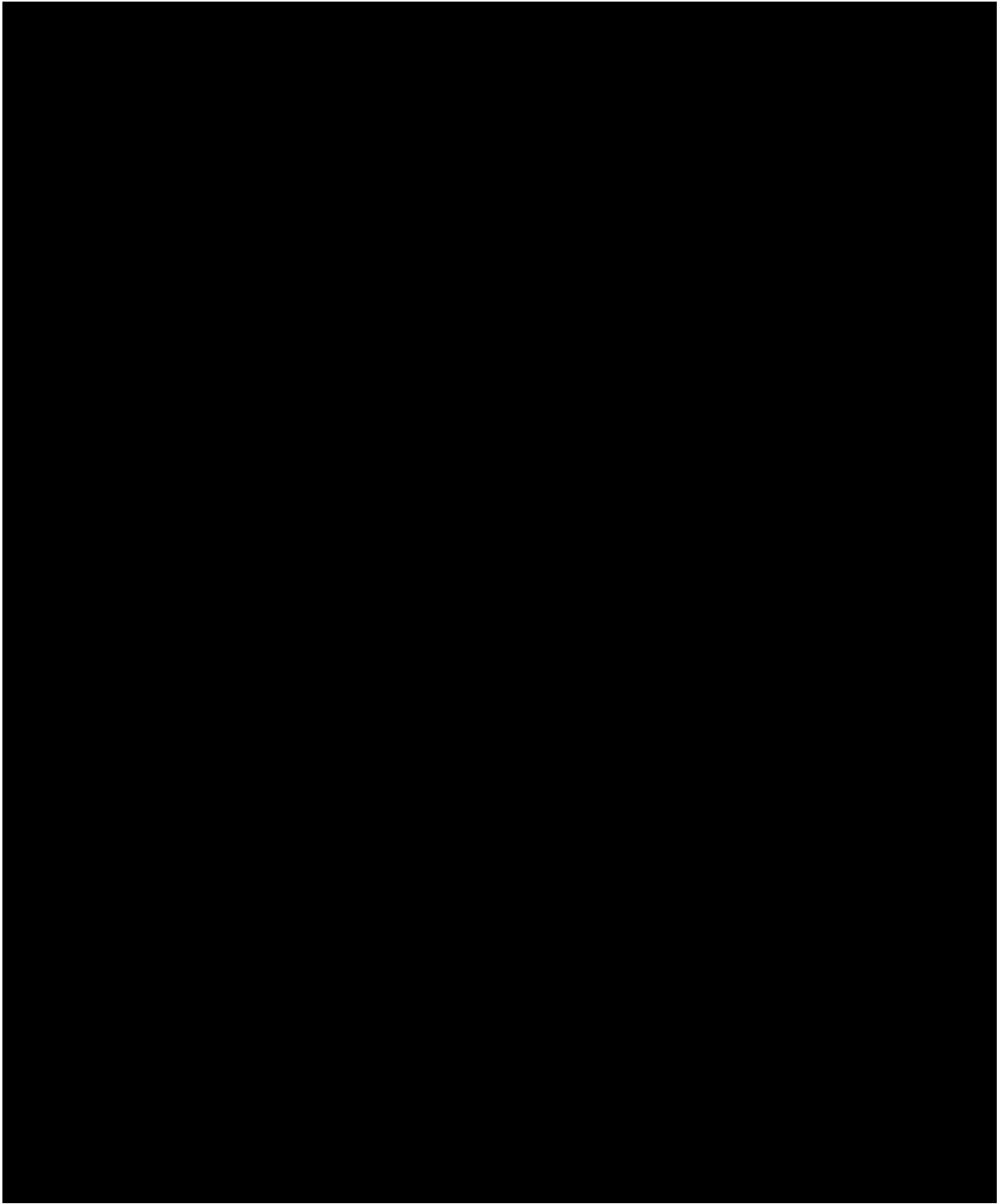
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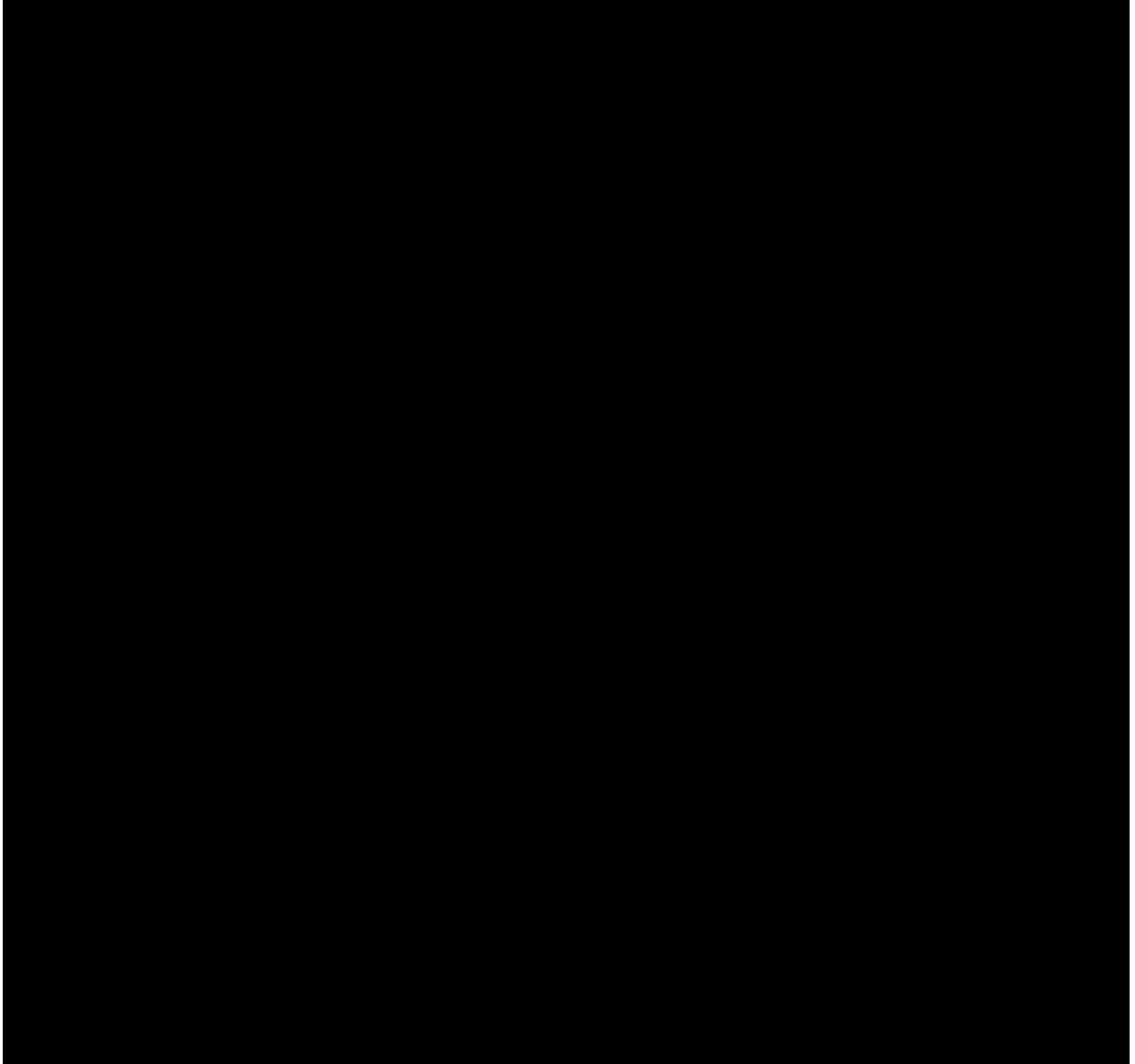
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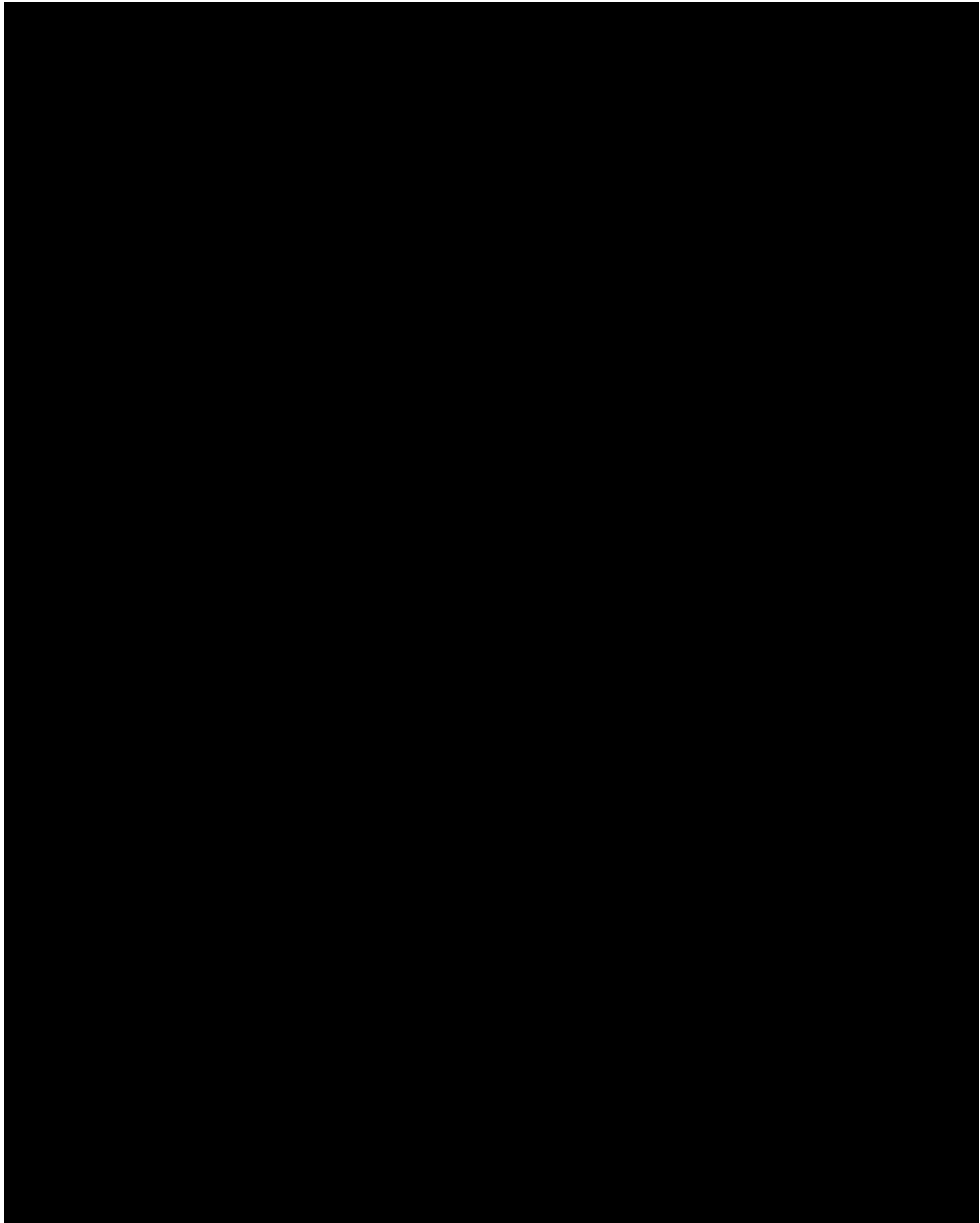
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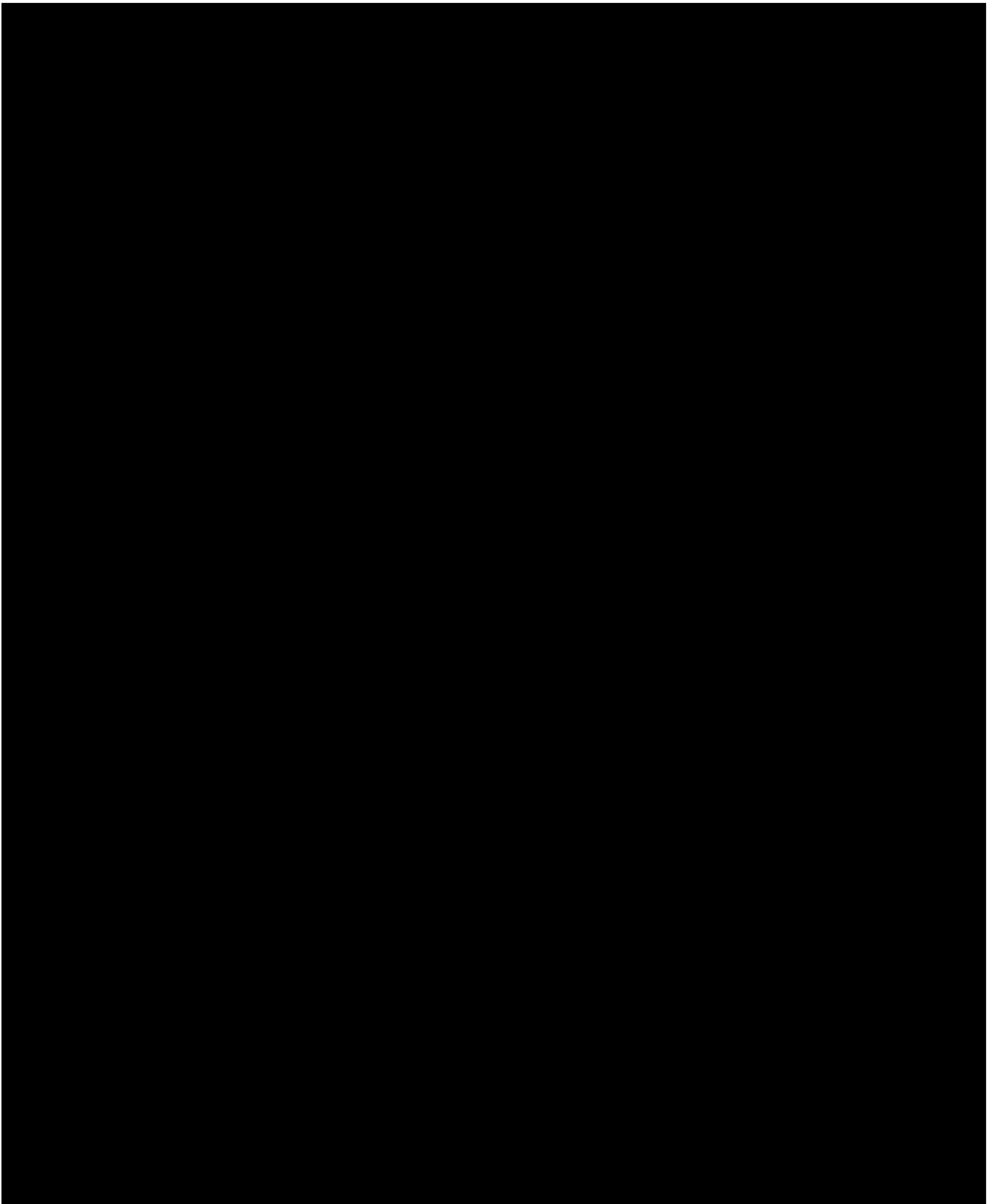


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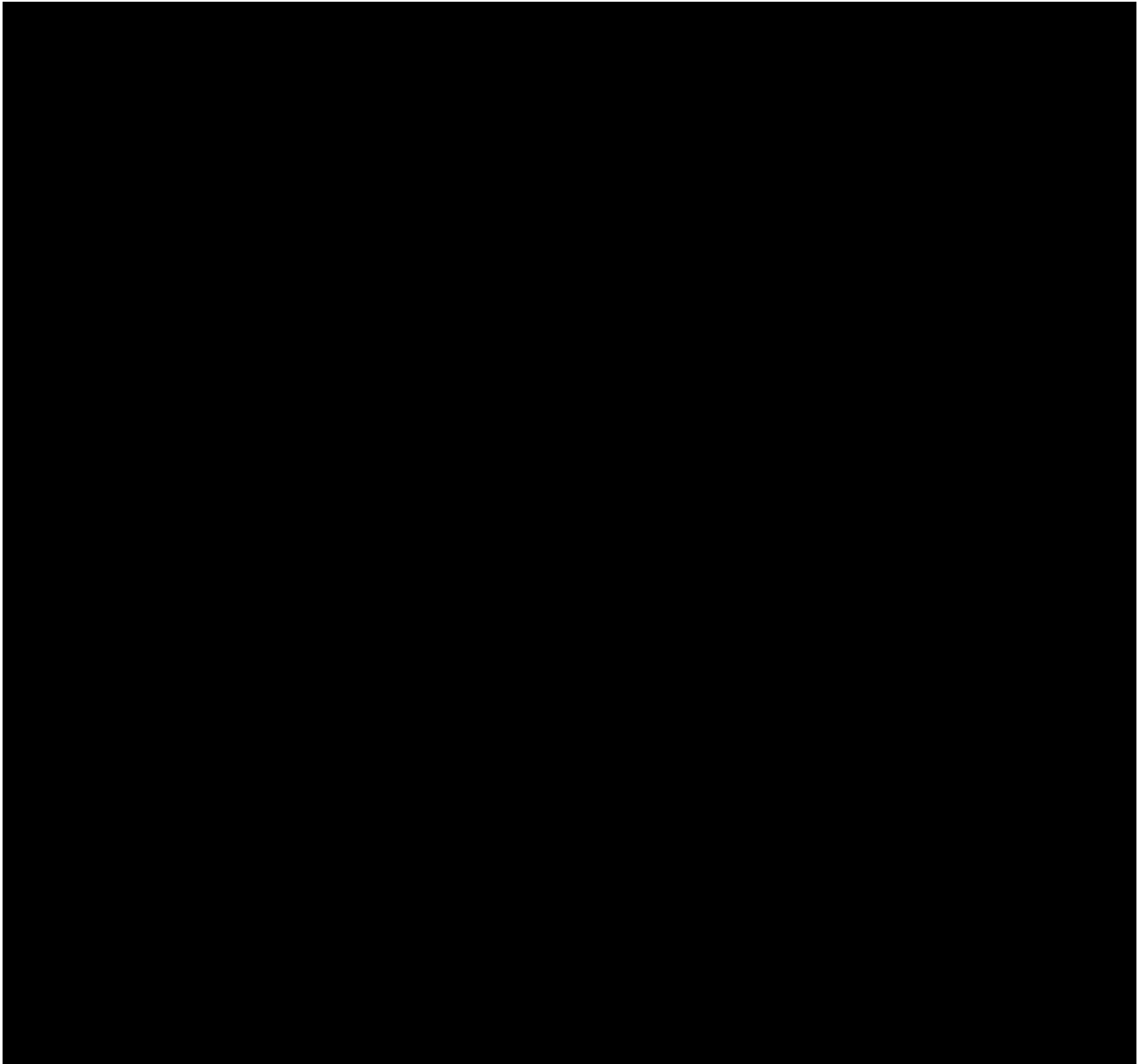






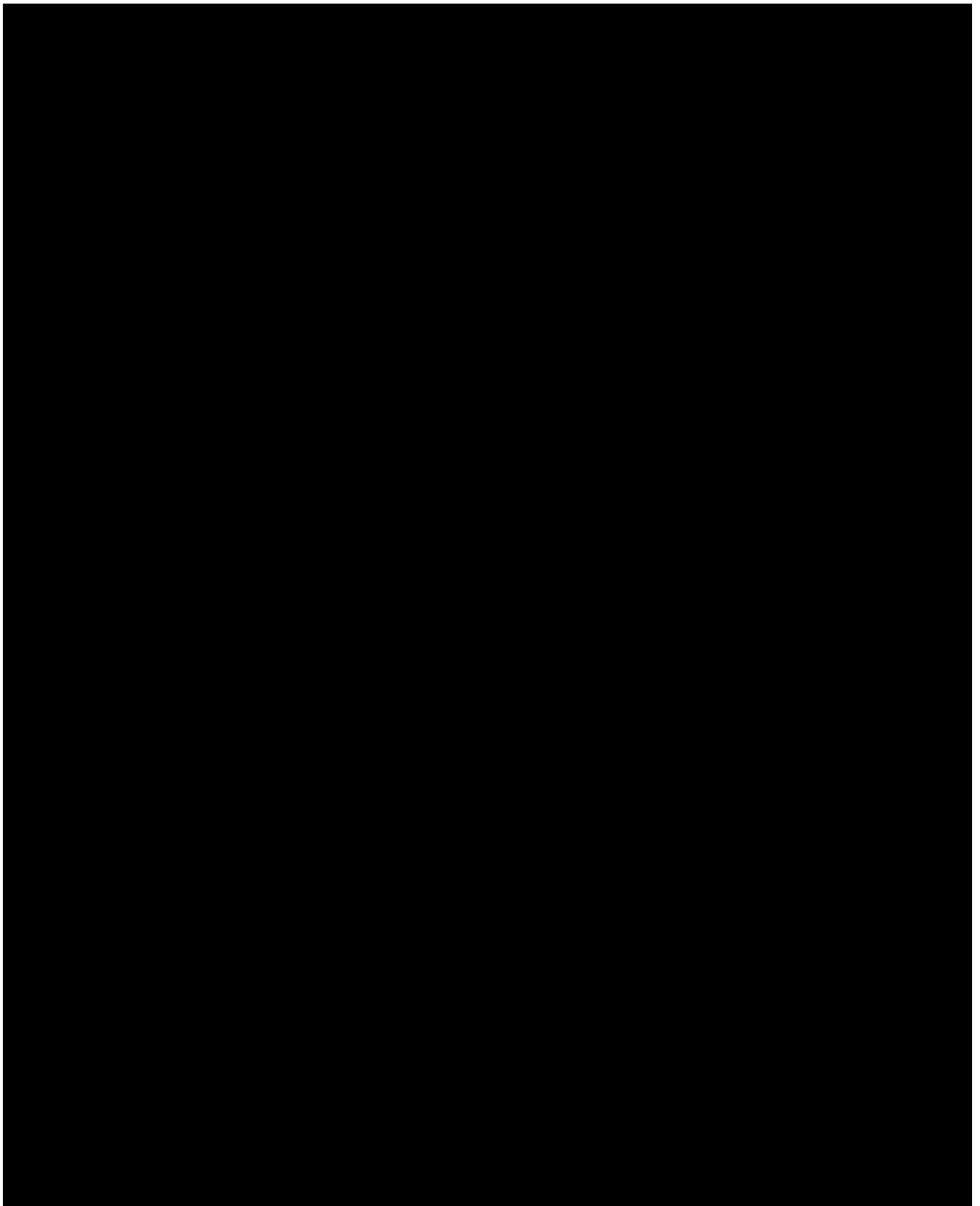
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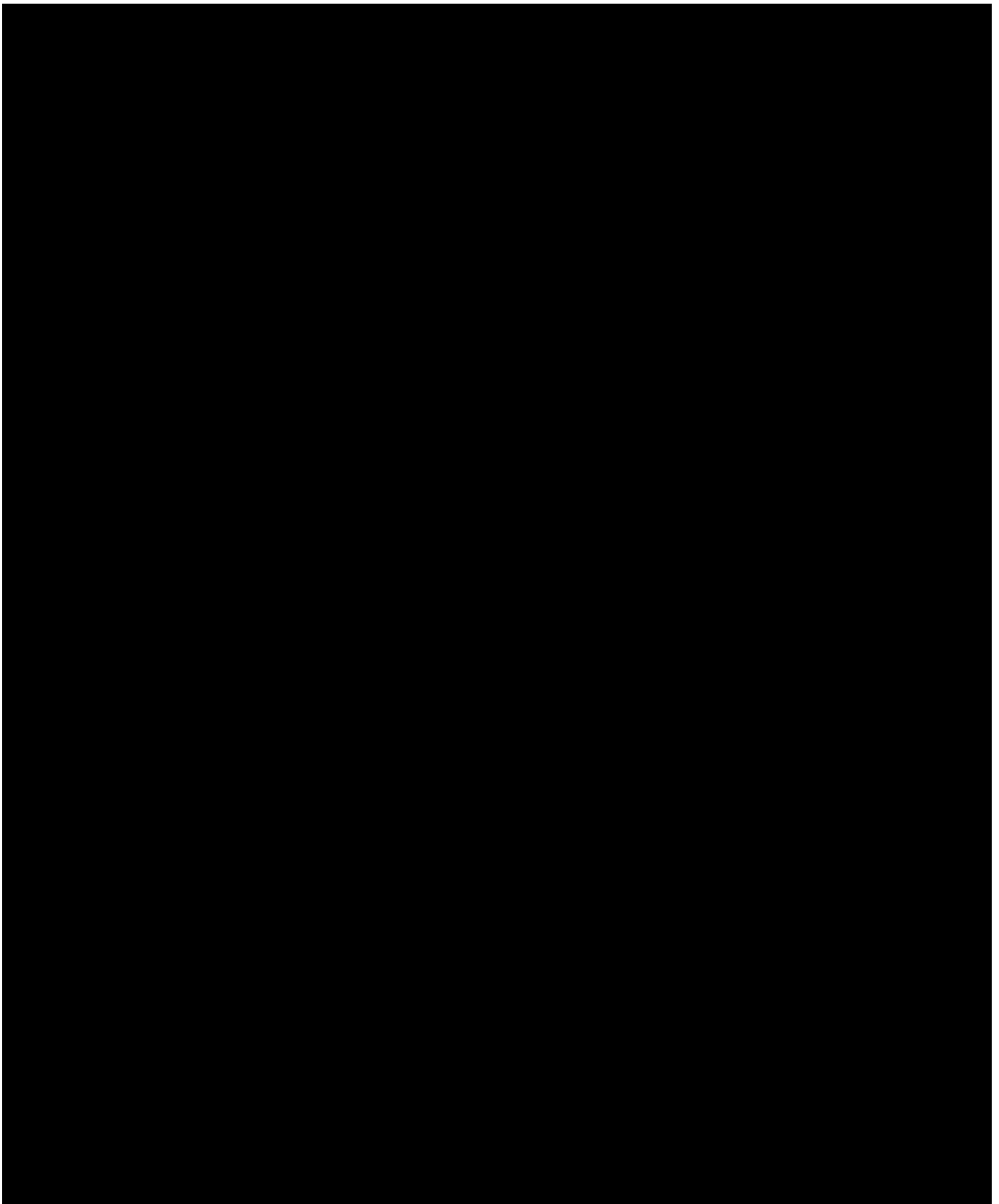
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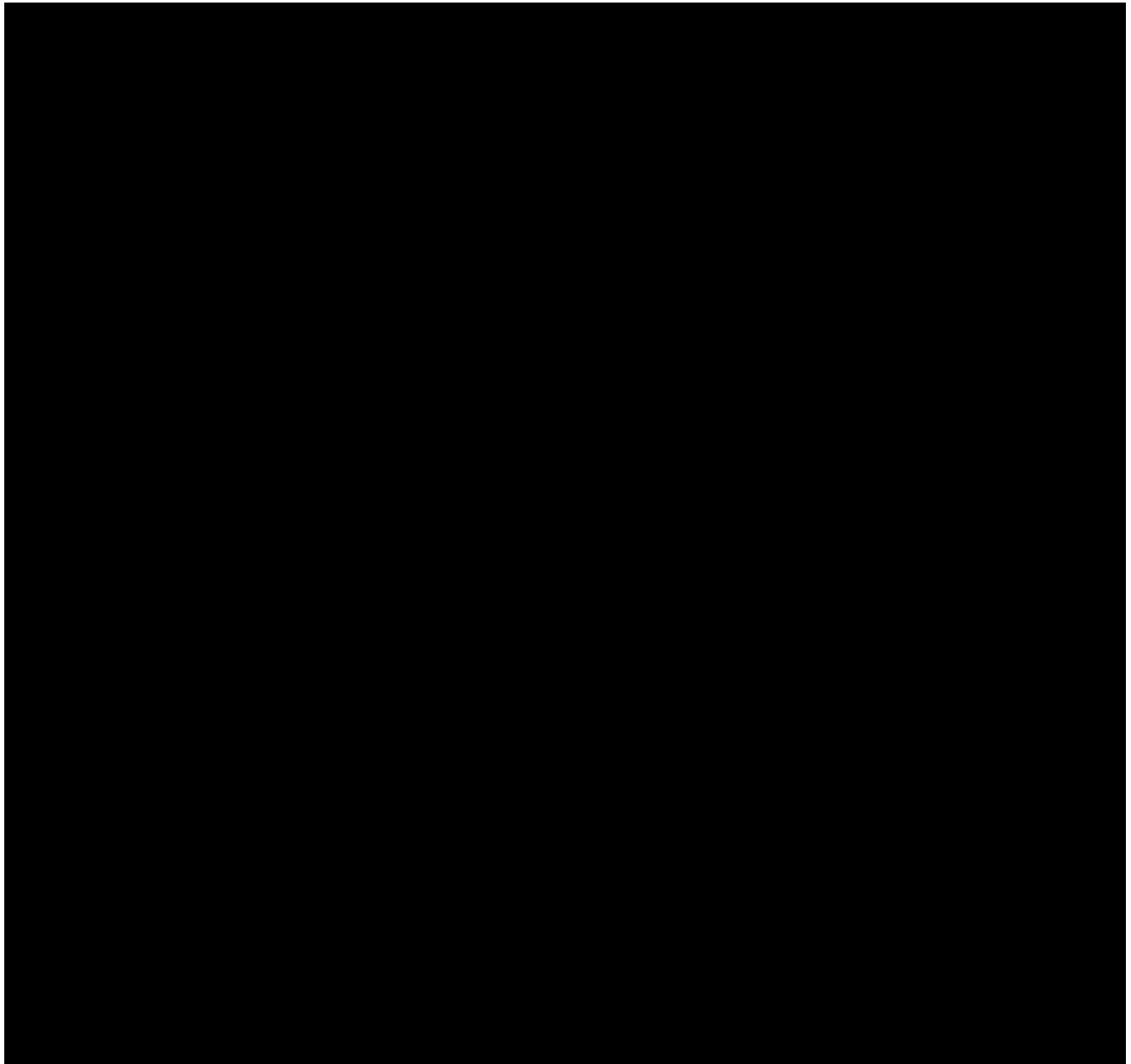


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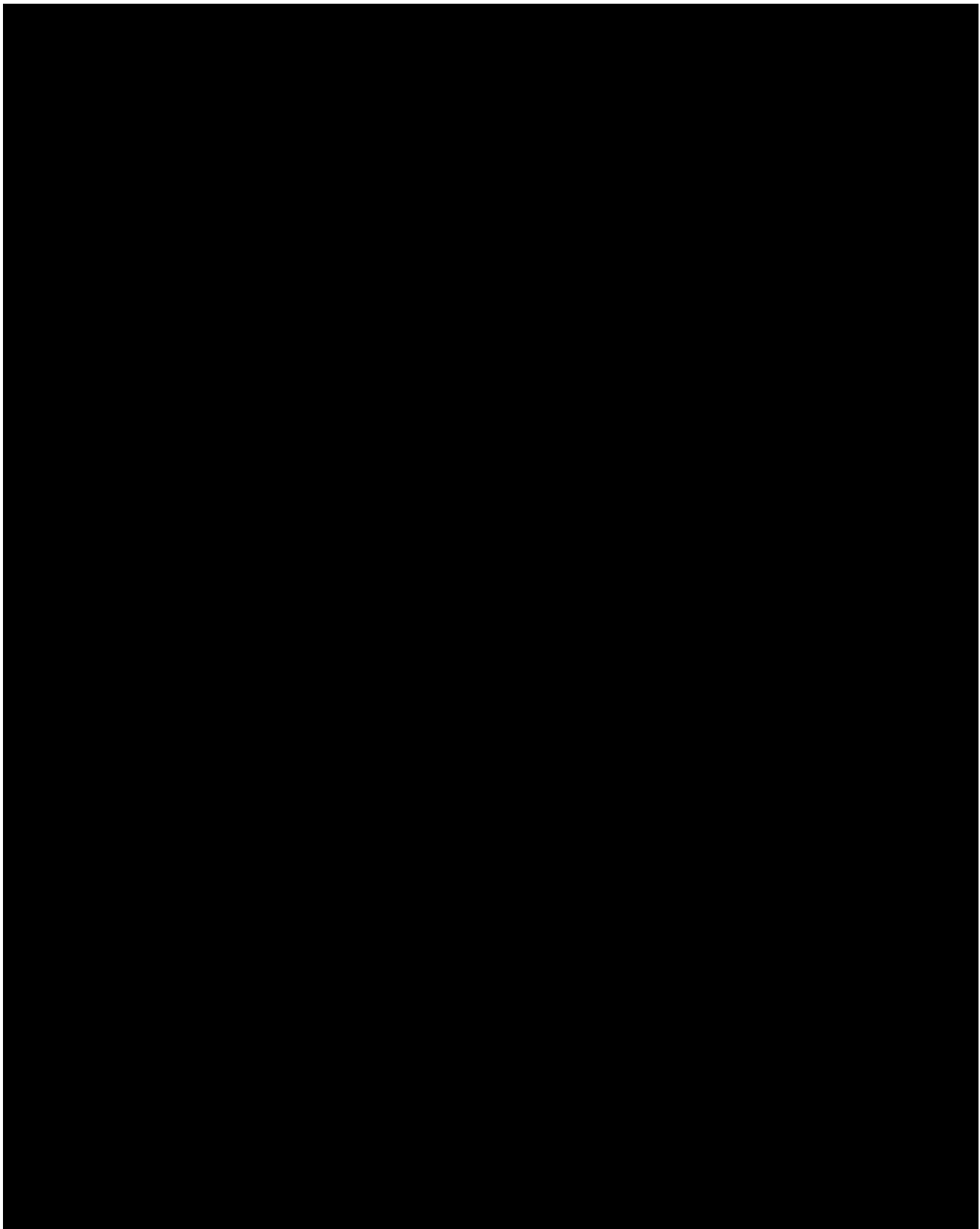






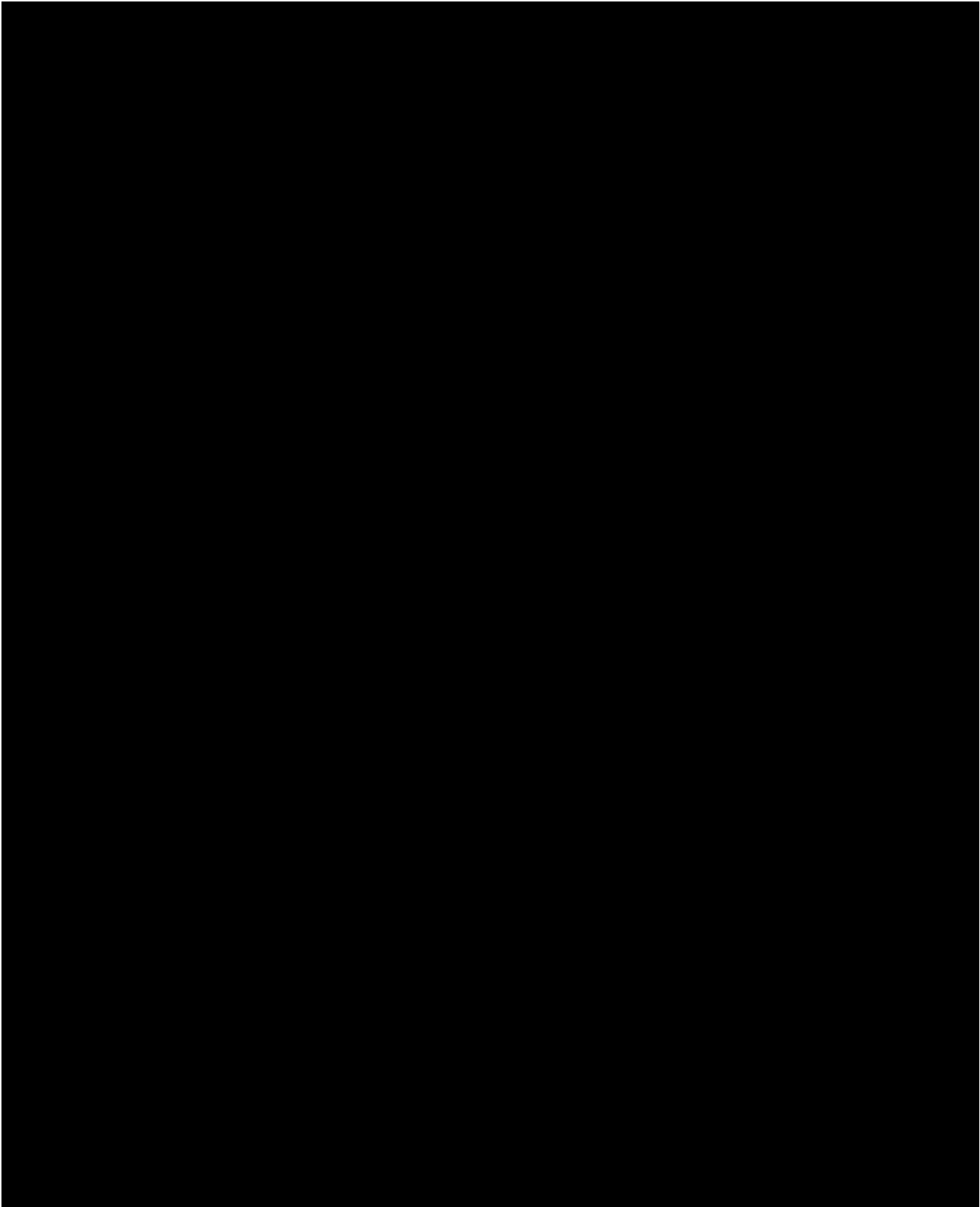
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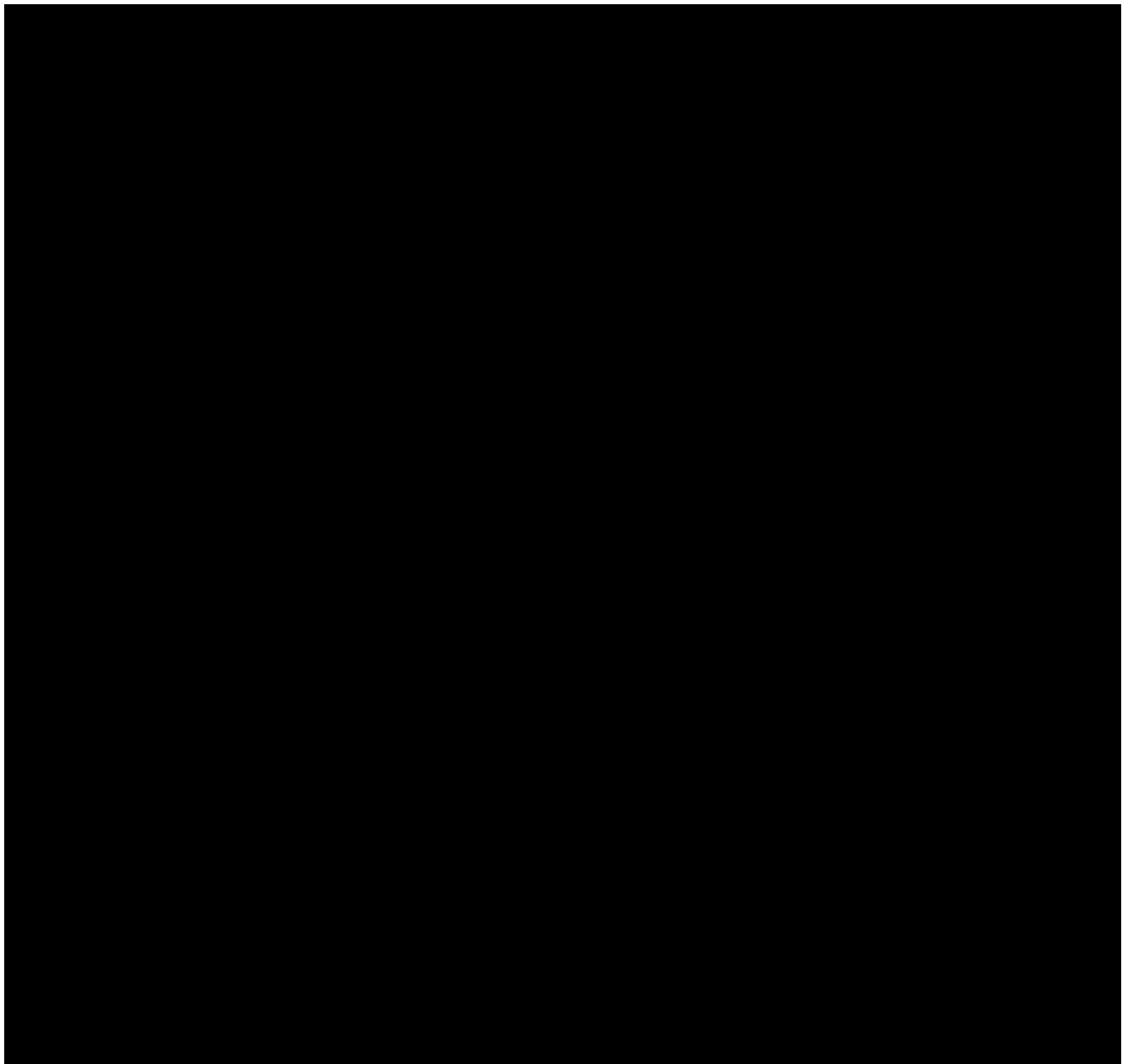
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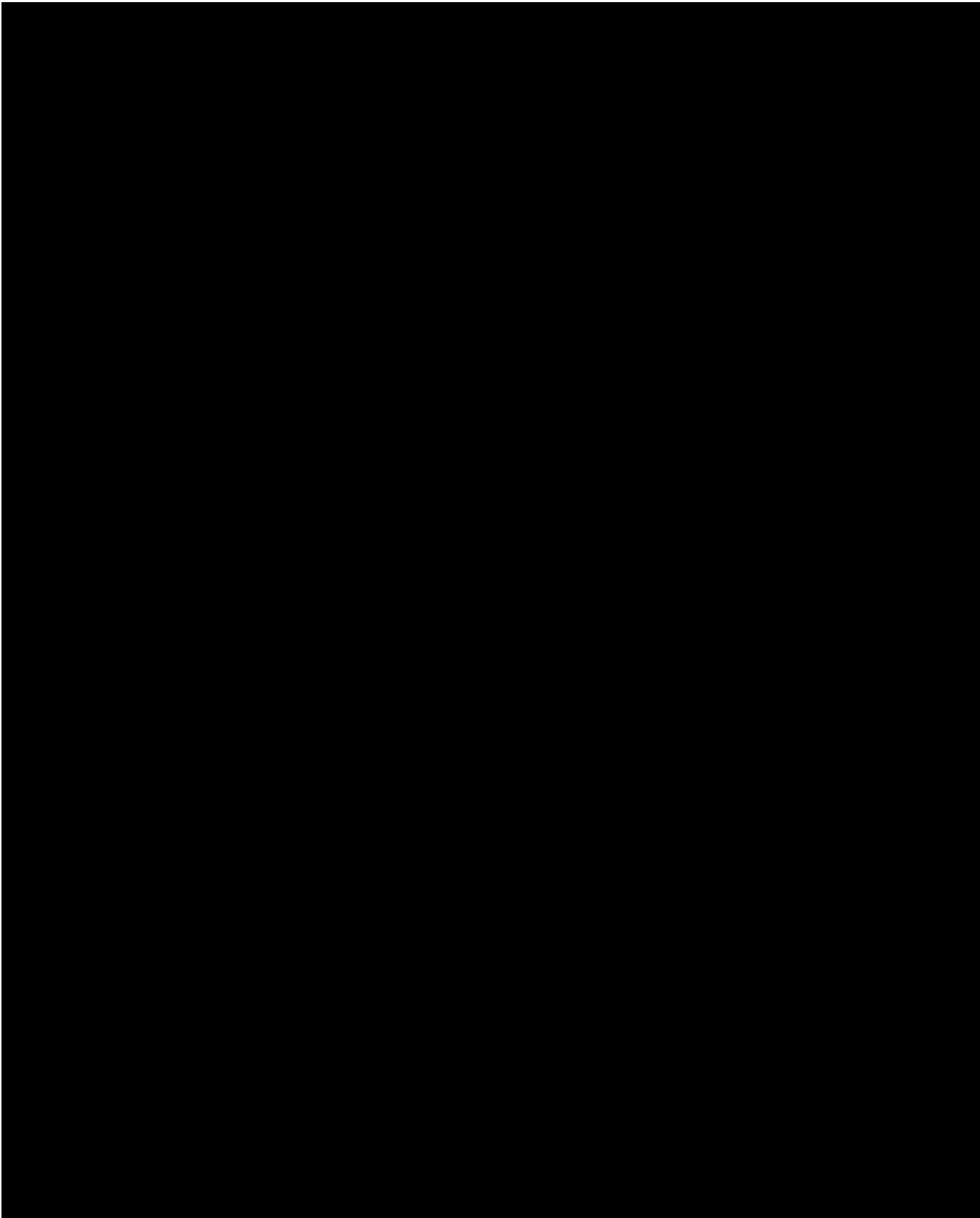
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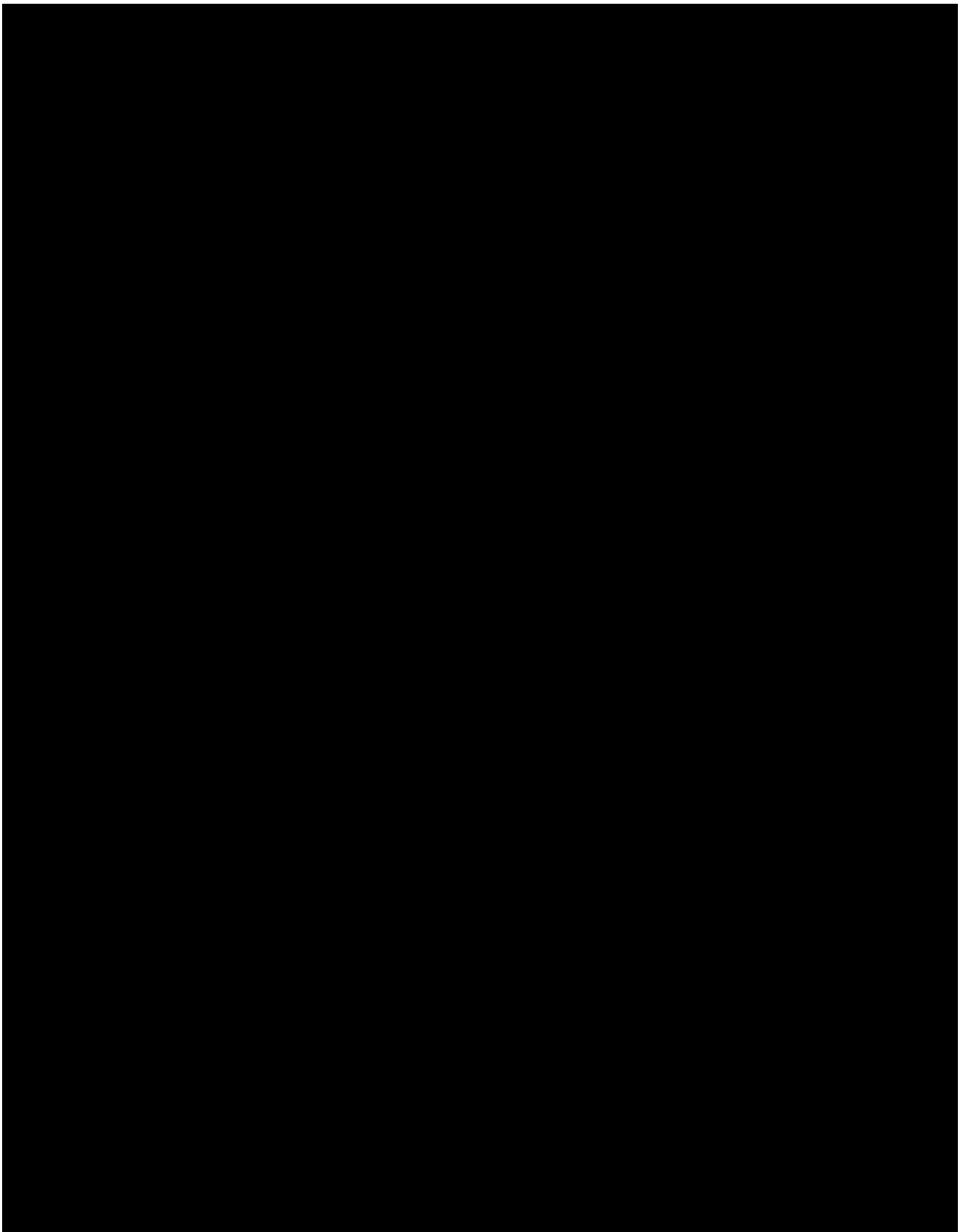
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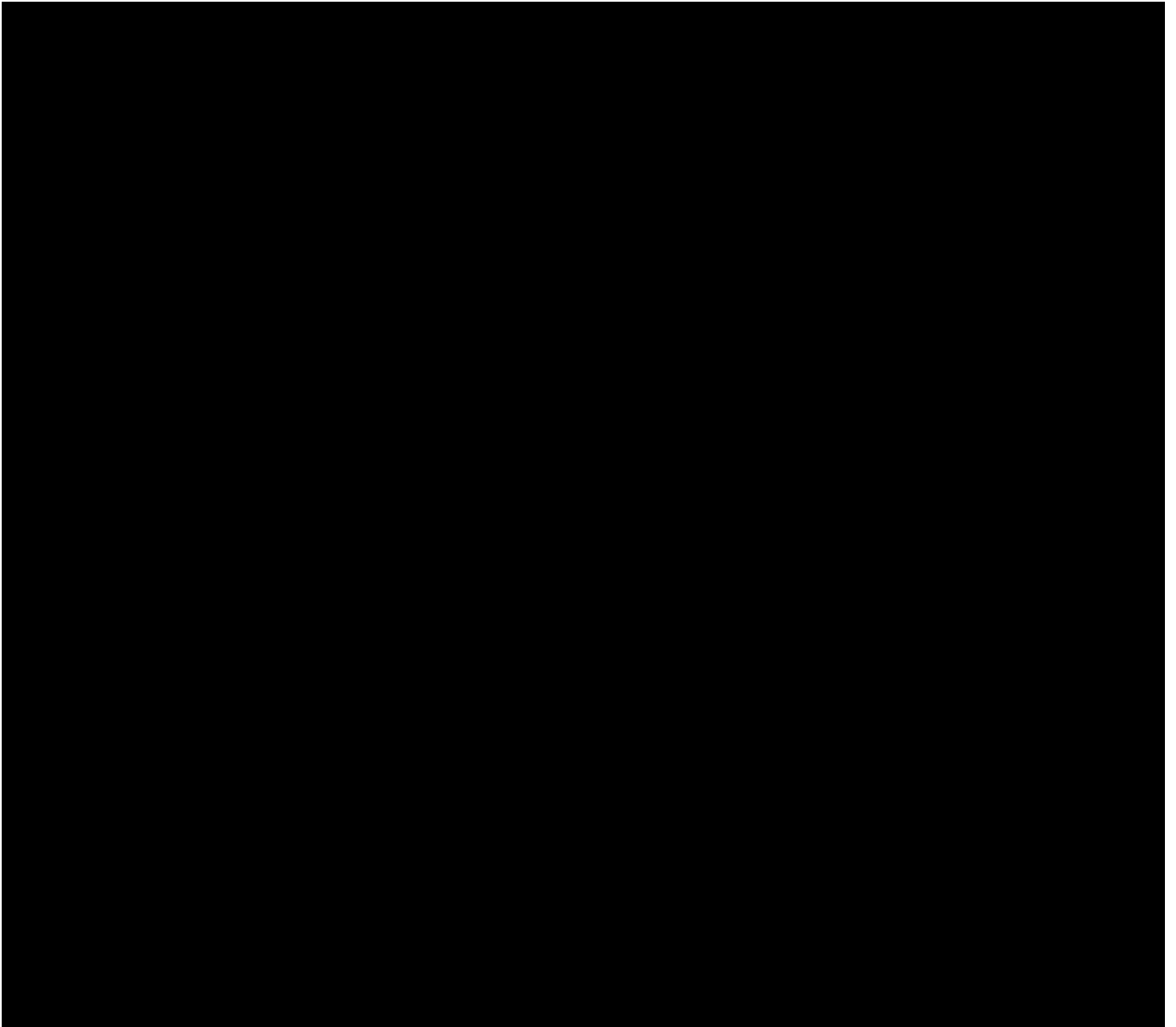
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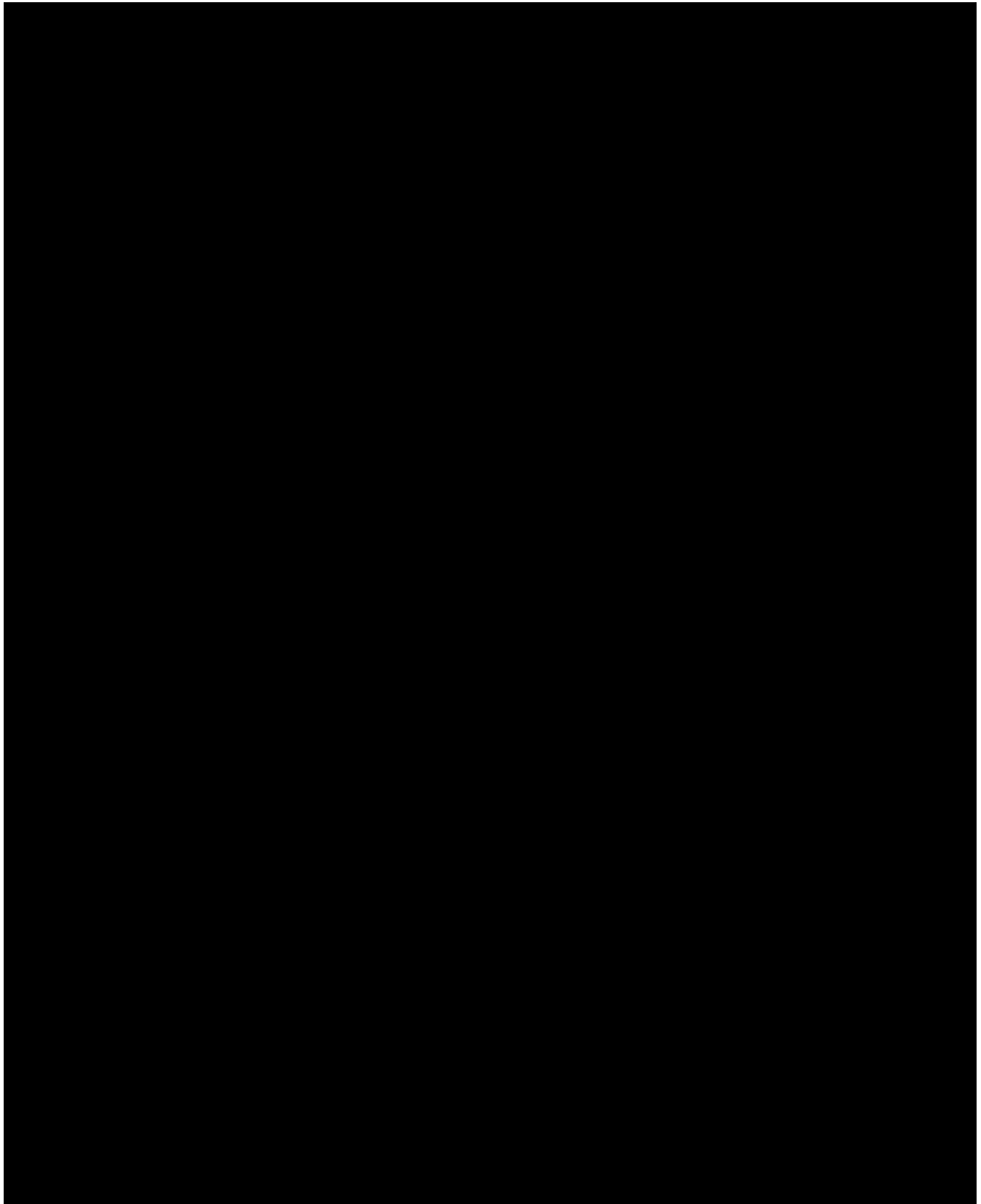




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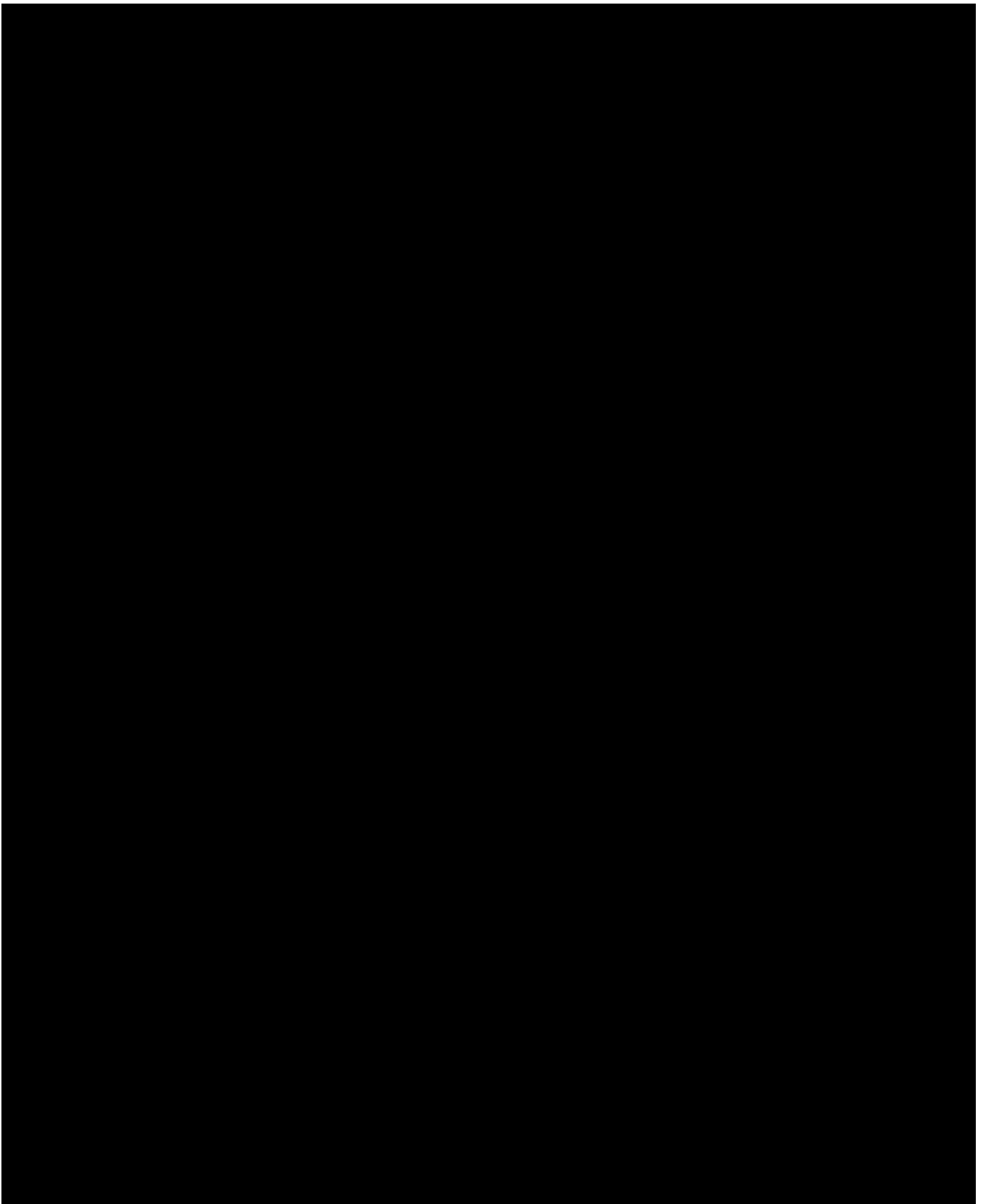
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