



**Department of Defense
Headquarters
United States Military Entrance Processing Command**

Gender Dysphoria Processing

J-3, Operations Directorate

USMEPCOM Manual
May 15, 2025

PURPOSE: This manual:

- Provides procedural guidance on processing an applicant who has a current diagnosis or history of, or exhibit symptoms consistent with gender dysphoria.
- Supersedes previously published Policy Memorandum 16-1, Transgender Applicant Processing

APPLICABILITY. This manual applies to all organizational elements of USMEPCOM.

SUPPLEMENTATION & SUGGESTED IMPROVEMENTS. HQ USMEPCOM, J-3, Medical Branch (MEOP-ORM) is the proponent agency for this manual. Deviation from the direction outlined in this manual is prohibited without prior approval from the proponent. Users may submit comments and suggestions to HQ USMEPCOM, ATTN: J-3/MEOP-ORM, 2834 Green Bay Road, North Chicago, IL 60064-3091 or email: osd.north-chicago.usmepcom.list.j3-medical@army.mil.

MEDICAL BRANCH RESOURCE PAGE: [SPEAR](#)

EFFECTIVE DATE: May 15, 2025

1. As directed by reference (b), USMEPCOM will implement updated gender dysphoria medical accession standards. This guidance takes precedence over any previous USMEPCOM or individual Military Entrance Processing Station (MEPS) gender dysphoria policy or guidance. For the purpose of this manual and based on the Department of Defense (DoD) guidance in reference (b), gender dysphoria refers to a marked incongruence between one's experienced or expressed gender and assigned gender of at least 6 months' duration, as manifested by conditions specified in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-V): Fifth Edition, page 452, which is associated with clinically significant distress or impairment in social, occupational, or other important areas of functioning. The following guidance will remain in effect until expressly revoked.
2. Effective **May 15, 2025**, the MEPS Medical Department will implement the following medical standards in accordance with the definition of Gender Dysphoria as contained in the DSM-V (Appendix A):
 - a. An applicant for military Service and individual in the Delayed Training/Entry Program who have a current diagnosis or history of, or exhibit symptoms consistent with, gender dysphoria are disqualified for military Service.
 - b. A history of cross-sex hormone therapy or sex reassignment or genital reconstruction surgery as treatment for gender dysphoria or in pursuit of a sex transition, is disqualifying.
3. MEPS Medical Department will implement the following procedures:
 - a. During medical prescreen process upon identification of a diagnosis/condition specified in paragraphs 2a. or 2b., either from Health Information Exchange (HIE) review or the applicant's disclosure on the DD Form 2807-2, the MEPS provider will follow the current guidance for prescreen policy and procedures, and the applicant will be "Processing Authorized" unless there are additional medical/behavioral conditions that are a safety risk. In which case, "Processing Not Justified (PNJ)" can be requested by submitting a [ServiceNow](#) ticket to J-3/MEOP-ORM for review and approval under category "Medical Processing" and subcategory "Medical PRESC".
 - b. Each scheduling and processing action will be based on the applicant's biologic sex. Inclusive of examination room assignment, height/weight/body composition measurement, chaperone, bathroom assignment, as well as specimen collection and observation. Presence of a chaperone during accession medical examination (AME) process is strongly recommended.

Note: An applicant's phenotypic characteristics as well as clothing or hairstyle choices are not be used for the purpose of identifying a symptom(s) consistent with gender dysphoria.

- c. During AME, upon review of the results of the applicant's past medical history review, if the MEPS provider determines the following:

- (1) The condition(s) is consistent with gender dysphoria or symptoms consistent with gender dysphoria, the applicant will be disqualified under S-3P, DoDI citation 6.28.t with ICD code F64.9.
 - (2) If the MEPS provider confirms a history of gender affirming pharmacologic treatment consistent with cross-sex hormone therapy, the applicant will be disqualified under P-3P, DoDI citation 6.24.t with ICD code Z79.890.
 - (3) If the medical procedure is consistent with sex reassignment or genital reconstruction surgery as treatment for gender dysphoria or in pursuit of sex transition, the applicant will be disqualified under P-3P, DoDI citation 6.13.g or 6.14.n with ICD code Z87.890.
 - (4) If the definitive diagnosis or procedure history is not clear, and/or HIE data is non-contributory; however during accession medical interview, the applicant discloses past gender affirming treatment (pharmacologic (cross-sex hormone therapy), surgical or counseling/behavioral therapy) for gender incongruity issues, or the MEPS provider identifies a scar(s) suggestive of sex reassignment or genital reconstruction surgery, the MEPS provider can utilize the “MEPS_GDInterviewV1” auto-text in order to make further assessment. Upon review of the applicant’s answers, the MEPS provider can render medical qualification determination. Assistance can be requested by submitting a [ServiceNow](#) ticket to J-3/MEOP-ORM under category “Medical Processing” and subcategory “Medical Exam.”
- d. For an applicant who processed through the MEPS after release of reference (c) and were left in an “open” status, the MEPS will go back and annotate appropriate disqualifications as follows:
- (1) For an applicant with a current diagnosis or history of gender dysphoria or a symptom(s) of gender dysphoria, S-3P with DoDI citation 6.28.t ICD code F64.9 will be used.
 - (2) For an applicant with a history of gender affirming pharmacologic treatment consistent with cross-sex hormone therapy, P-3P with DoDI citation 6.24.t with ICD code Z79.890 will be used.
 - (3) For an applicant with a history of sex reassignment or genital reconstruction surgery as treatment for gender dysphoria or in pursuit of sex transition, P-3P DoDI citation 6.13.g or 6.14.n with ICD code Z87.890 will be used.

Note: For assistance, MEPS may submit a [ServiceNow](#) ticket to J-3/MEOP-ORM under category “Medical Processing” and subcategory “Medical Requesting Additional Guidance.”

4. An applicant with a current diagnosis or history of, or exhibiting symptoms consistent with, gender dysphoria who was qualified for Service with or without approved medical waiver prior to publication of reference (c) will be handled in accordance with policy guidance of their respective sponsoring Service.

- References:** (a) [Executive Order 14183, *Prioritizing Military Excellence and Readiness*](#), dated January 27, 2025
- (b) [Secretary of Defense Memorandum, *Prioritizing Military Excellence and Readiness*](#), dated February 7, 2025
- (c) [Under Secretary of Defense for Personnel and Readiness \(USD P&R\) Memorandum, *Additional Guidance on Prioritizing Military Excellence and Readiness*](#), dated February 26, 2025
- (d) [Secretary of Defense Memorandum, *Implementing Policy on Prioritizing Military Excellence and Readiness*](#), dated May 8, 2025

Appendix A.

Gender Dysphoria in Adolescents and Adults

A. A marked incongruence between one's experienced/expressed gender and assigned gender, of at least 6 months' duration, as manifested by at least two of the following.

1. A marked incongruence between one's experienced/expressed gender and primary and/or secondary sex characteristics (or in young adolescents the anticipated secondary sex characteristics).
2. A strong desire to be rid of one's primary and/or secondary sex characteristics because of a marked incongruence with one's experienced/expressed gender (or in young adolescents, a desire to prevent the development of the anticipated secondary sex characteristics).
3. A strong desire for the primary and/or secondary sex characteristics of the other gender.
4. A strong desire to be of the other gender (or some alternative gender different from one's assigned gender).
5. A strong desire to be treated as the other gender (or some alternative gender different from one's assigned gender).
6. A strong conviction that one has the typical feelings and reactions of the other gender (or some alternative gender different from one's assigned gender).

B. The condition is associated with clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Adopted from: American Psychiatric Association. Gender dysphoria. In: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, American Psychiatric Association, Arlington, VA 2013, p.452-453.