

**Appendix 1.** Peri-operative complications among patients receiving a hysterectomy for benign indications in an urban county hospital from 2000-2012 by gender.

Characteristic	Transgender Men (n = 33)	Cisgender Women (n = 850)
<b>Total Intraoperative Complications<sup>†</sup></b>	<b>0</b>	<b>67</b>
Anesthesia complications	0 (0.0)	1 (1.5)
Bladder injury	0 (0.0)	15 (22.4)
Bowel injury or resection	0 (0.0)	8 (12.0)
Transfusions (unplanned)	0 (0.0)	33 (49.3)
Unplanned removal of an organ	0 (0.0)	4 (6.0)
Urinary tract injury (not bladder)	0 (0.0)	3 (4.5)
Other	0 (0.0)	3 (4.5)
<b>Total Acute Post-op Complications<sup>†</sup></b>	<b>6</b>	<b>199</b>
Bowel ileus / obstruction	0 (0.0)	18 (9.0)
Bowel injury	0 (0.0)	3 (1.5)
Infection (NOS)	1 (16.7)	7 (3.5)
Fever (no evidence of infection)	1 (16.7)	32 (16.1)
Nerve injury	0 (0.0)	3 (1.5)
Pelvic hematoma	0 (0.0)	1 (0.50)
Re-operation	0 (0.0)	1 (0.50)
Thromboembolisms (DVT/PE)	1 (16.7)	1 (0.50)
Transfusion	1 (16.7)	47 (23.6)
Unplanned admission to ICU	1 (16.7)	6 (30.1)
Urinary retention	0 (0.0)	59 (29.6)
Urinary tract infection	0 (0.0)	13 (6.5)
Wound infection / separation	1 (16.7)	8 (4.0)
<b>Total Delayed Post-op Complications<sup>†</sup></b>	<b>5</b>	<b>166</b>
Bladder injury	0 (0.0)	1 (0.60)
Bowel ileus / obstruction	0 (0.0)	14 (8.4)
Bowel injury	0 (0.0)	2 (1.2)
Fever	0 (0.0)	4 (2.4)
Infection (NOS)	0 (0.0)	3 (1.8)
Nerve damage	0 (0.0)	1 (0.60)
Pelvic abscess	0 (0.0)	3 (1.8)
Pelvic hematoma	0 (0.0)	2 (1.2)
Re-operation	2 (40.0)	24 (14.5)
Thromboembolism (DVT/PE)	0 (0.0)	2 (1.2)
Transfusion	0 (0.0)	1 (0.60)
Unplanned readmission	1 (20.0)	53 (31.9)
Urinary retention	0 (0.0)	8 (4.8)
Urinary tract injury	0 (0.0)	2 (1.2)
Vaginal cuff infection	0 (0.0)	21 (12.7)
Wound infection / separation	2 (40.0)	10 (6.0)
Wound dehiscence	0 (0.0)	3 (1.8)

Data are n (%).

Individuals may have had more than one complication.

NOS, not otherwise specified; DVT, deep vein thrombosis; PE, pulmonary embolus

Other intraoperative complications include: metabolic derangements and pulmonary and urinary infections requiring intraoperative treatment.