



OPEN ACCESS

APPROVED BY
Frontiers Editorial Office,
Frontiers Media SA, Switzerland

*CORRESPONDENCE
Guneet K. Jasuja
✉ guneetk@bu.edu

RECEIVED 14 June 2024

ACCEPTED 28 June 2024

PUBLISHED 08 July 2024

CITATION

Jasuja GK, Wolfe HL, Reisman JI, Vimalananda VG, Rao SR, Blosnich JR, Livingston NA and Shipherd JC (2024) Corrigendum: Clinicians in the Veterans Health Administration initiate gender-affirming hormone therapy in concordance with clinical guideline recommendations. *Front. Endocrinol.* 15:1448887. doi: 10.3389/fendo.2024.1448887

COPYRIGHT

© 2024 Jasuja, Wolfe, Reisman, Vimalananda, Rao, Blosnich, Livingston and Shipherd. This is an open-access article distributed under the terms of the [Creative Commons Attribution License \(CC BY\)](#). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.

Corrigendum: Clinicians in the Veterans Health Administration initiate gender-affirming hormone therapy in concordance with clinical guideline recommendations

Guneet K. Jasuja^{1,2,3*}, Hill L. Wolfe^{4,5,6}, Joel I. Reisman¹, Varsha G. Vimalananda^{1,7}, Sowmya R. Rao⁸, John R. Blosnich^{4,9}, Nicholas A. Livingston^{10,11} and Jillian C. Shipherd^{10,11,12}

¹Center for Healthcare Organization & Implementation Research, Veteran Affairs (VA) Bedford Healthcare System, Bedford, MA, United States, ²Section of General Internal Medicine, Boston University Chobanian & Avedisian School of Medicine, Boston, MA, United States, ³Department of Health Law, Policy and Management, Boston University School of Public Health, Boston, MA, United States, ⁴VA Center for Health Equity Research and Promotion, VA Pittsburgh Healthcare System, Pittsburgh, PA, United States, ⁵Pain Research, Informatics, Multi-morbidities, and Education (PRIME) Center, VA Connecticut Healthcare System, West Haven, CT, United States, ⁶Section of Biomedical Informatics and Data Science, Yale School of Medicine, New Haven, CT, United States, ⁷Section of Endocrinology, Diabetes, Nutrition and Weight Management, Boston University Chobanian and Avedisian School of Medicine, Boston, MA, United States, ⁸Department of Global Health, Boston University School of Public Health, Boston, MA, United States, ⁹Suzanne Dworak-Peck School of Social Work, University of Southern California, Los Angeles, CA, United States, ¹⁰National Center for PTSD, VA Boston Healthcare System, Boston, MA, United States, ¹¹Department of Psychiatry, Boston University Chobanian & Avedisian School of Medicine, Boston, MA, United States, ¹²LGBTQ+ Health Program, Office of Patient Care Services, Department of Veterans Affairs, Washington, DC, United States

KEYWORDS

gender-affirming hormone therapy, clinical guidelines, guideline concordance, transgender and gender diverse, veterans, Veterans Health Administration

A Corrigendum on

Clinicians in the Veterans Health Administration initiate gender-affirming hormone therapy in concordance with clinical guideline recommendations

By Jasuja GK, Wolfe HL, Reisman JI, Vimalananda VG, Rao SR, Blosnich JR, Livingston NA and Shipherd JC (2024). *Front. Endocrinol.* 15:1086158. doi: 10.3389/fendo.2024.1086158

In the published article, there was an error. A sentence in the results sub-section of the abstract did not match with a sentence in the results section 3.3 “Guideline concordance on GAHT initiation” on page 5 of the published article.

A correction has been made to the **Results** section in the **Abstract**. This sentence previously stated: “Among veterans who started feminizing GAHT with estrogen, 97.0% were guideline concordant due to no documentation of venous thromboembolism, breast cancer, stroke, or myocardial infarction.”

The corrected sentence appears below.

“Among veterans who started feminizing GAHT with estrogen, 98.6% were guideline concordant due to no documentation of venous thromboembolism, or breast cancer.”

The authors apologize for this error and state that this does not change the scientific conclusions of the article in any way. The original article has been updated.

Publisher's note

All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.