

The College of Physicians & Surgeons of Alberta (CPSA) provides advice to the profession to support physicians in implementing the CPSA ***Standards of Practice***. This advice does not define a standard of practice, nor should it be interpreted as legal advice.

Advice to the Profession documents are dynamic and may be edited or updated for clarity at any time. Please refer back to these articles regularly to ensure you are aware of the most recent advice. Major changes will be communicated to our members; however, minor edits may only be noted within the documents.

Contents

Preamble	1
What does this mean for regulated members?.....	3
Statutory prohibitions now in force.....	3
Ministerial Order: what is permitted	3
Important clarifications.....	4
Collaborative care.....	5
CPSA’s ongoing role	5
What happens if a complaint is received?.....	5
Ongoing updates.....	6
Resources.....	6

Preamble

Gender-affirming care encompasses a range of medical, surgical and psychosocial interventions that support individuals whose gender identity differs from their sex assigned at birth. While CPSA’s role is to ensure that regulated members provide care that meets accepted standards of competence, ethics and professionalism, while complying with provincial legislation, we also understand how challenging these times are for members who provide gender-affirming care.

In 2024, the [Health Statutes Amendment Act](#) included amendments to the [Health Professions Act](#) (HPA) regarding gender-affirming care by the addition of sections 1.91, 1.92 and 1.93.

Only section 1.91 took effect in 2024 and stated:

Prohibition of sex reassignment surgery on minors

1.91 A regulated member shall not perform a sex reassignment surgery on a minor.

Sections 1.92 and 1.93 were not proclaimed in force in 2024. Those sections stated:

Prohibition of certain drug prescriptions for minors

1.92(1) A regulated member shall not prescribe a Schedule 1 drug within the meaning of the [Pharmacy and Drug Act](#), or any other drug identified in the regulations, to a minor for the purposes of hormone therapy, including puberty suppression and hormone replacement therapy, for the treatment of gender dysphoria or gender incongruence except in accordance with an order of the Minister under section 1.93.

(2) The Minister may make regulations identifying any drug as a drug for the purposes of this section.

Orders

1.93 The Minister may make orders

(a) authorizing the prescription of a Schedule 1 drug within the meaning of the [Pharmacy and Drug Act](#), or any other drug identified in the regulations made under section 1.92(2), to a minor for the purposes of hormone therapy, including puberty suppression and hormone replacement therapy, for the treatment of gender dysphoria or gender incongruence, and

(b) respecting any such authorization, including any terms, conditions or limits that apply to an authorization.

On Jan. 7, 2026, the Government of Alberta proclaimed sections 1.92 and 1.93 as now being in force.

CPSA will continue to monitor developments closely, including new regulations issued under section 1.92 and Ministerial orders issued under section 1.93.

What does this mean for regulated members?

Regulated members should continue to provide care in accordance with:

- applicable legislative requirements
- the Canadian Medical Association’s [Code of Ethics and Professionalism](#)
- CPSA’s [Standards of Practice](#) and [guidance](#)
- current clinical practice guidelines

Statutory prohibitions now in force

Under the [Health Professions Act](#) (HPA):

- Sex reassignment surgery: regulated members **must not** perform sex reassignment surgery on a minor (s. 1.91)
- Hormone therapy for minors: regulated members **must not** prescribe medications for the purpose of hormone therapy, including puberty suppression or hormone replacement therapy, for the treatment of gender dysphoria or gender incongruence (s. 1.92) **unless** permitted under a Ministerial Order issued under s. 1.93.

Ministerial Order: what is permitted

The [Ministerial Order](#) currently in effect sets out **specific and limited circumstances** in which hormone therapy may be prescribed to minors. In plain language, the Order provides the following six directions:

1. Continuation of existing treatment

Minors who received a prescription for hormone therapy for the treatment of gender dysphoria or gender incongruence before Jan. 7, 2026 may continue that treatment in Alberta.

2. Treatment started outside Alberta

If a minor began hormone therapy while their ordinary place of residence was outside of Alberta, that treatment is considered to have legally commenced and may continue after the legislation came into force.

CPSA currently understands “ordinary place of residence” to generally refer to where a person’s life is centrally based, centered on habitual living, routine, and settled intentions, and is distinguished from transient or casual presence.

3. New prescriptions for 16- and 17-year-olds

Regulated members may prescribe hormone therapy to minors aged 16 or 17, provided all required approvals (below) are obtained.

4. Required approvals

Where approvals are required for a 16- or 17-year-old:

- parental or legal guardian consent must be provided;
- physician approval must be given by a physician registered with CPSA who is authorized to practice medicine in Alberta; and
- psychologist approval must be given by a psychologist registered with the [College of Alberta Psychologists](#) who is authorized to practice in Alberta.

5. Renewing or modifying existing prescriptions

Regulated members may renew or modify an existing hormone therapy prescription for a minor who was lawfully prescribed hormone therapy.

Regulated members may only prescribe a different class of hormone therapy, such as switching from a puberty suppression hormone to hormone therapy or vice versa, if they meet the conditions of clauses 3 and 4.

6. Disorders of sex development

Regulated members may prescribe hormone therapy to minors diagnosed with a disorder of sex development, regardless of whether the minor also has a diagnosis of gender dysphoria or gender incongruence.

Important clarifications

- Outside the specific circumstances outlined above, the statutory prohibitions remain in effect.
- Regulated members are expected to remain informed as this area continues to evolve.

- As a regulator, CPSA does not have the authority to provide exemptions to legislation.

Regulated members are encouraged to seek independent legal advice, including from the [Canadian Medical Protective Association](#) (CMPA), if guidance is required in relation to a specific patient or practice scenario.

Collaborative care

It is important to maintain careful collaboration with other regulated health professionals involved in the patient's circle of care (e.g., psychologists, pharmacists, etc.). This will ensure everyone has the information needed to meet the care needs of patients, support families and provide seamless care.

CPSA's ongoing role

CPSA operates under Alberta's model of profession-led regulation, granted under the HPA. This model allows the profession to set standards within legislative frameworks, assess competence and address unprofessional conduct while acting in the public interest.

CPSA will continue to monitor legislative developments and communicate updates promptly and transparently. Our responsibility remains ensuring that patient care in Alberta is safe, ethical and aligned with professional standards, while supporting regulated members in understanding and meeting their legislative obligations.

CPSA does not have authority as the regulator to provide exemptions to legislation: only the Minister may provide an exemption.

What happens if a complaint is received?

If CPSA receives a complaint related to gender-affirming care, or any other area of practice, the matter follows established processes under HPA. The Complaints Director reviews the concerns to determine whether the regulated member's conduct may constitute unprofessional conduct that requires acting upon. Each case is assessed on an individual basis, including a review of whether the applicable standard of care was met. In doing so, CPSA considers its [Standards of Practice](#), as well as all relevant statutory requirements to determine the outcome.

Ongoing updates

Updates will be shared through [The Messenger](#) newsletter, on the [CPSA website](#) and via CPSA social media channels as new information becomes available.

Resources

CPSA team members are available if you have questions or concerns. Please contact support@cpsa.ca or 1-800-561-3899.

The AMA's [Physician & Family Support Program](#) offers 24/7/365 confidential support and resources. You can contact them directly by calling 1-877-767-4637.

CPMA offers resources in the [Physician Well-Being Index](#) that can be accessed with your member number and password, as well as the [Member Support Program](#) and [Wellness Support Program](#).

You may also wish to consider looking into employee assistance programs that may be offered by your employer.

RELATED STANDARDS OF PRACTICE

- [Code of Ethics and Professionalism](#)
- [Duty to Report a Colleague](#)
- [Duty to Report Self](#)

COMPANION RESOURCES

- Advice to the Profession: [Duty to Report a Colleague/Self](#)
- [Health Professions Act](#)
- [M.O. 31-2025 - Primary and Preventative Health Services](#)

Review Date	Revision/Change
Feb. 2026	Resources added