

STANFORD UNIVERSITY MEDICAL CENTER

STANFORD, CALIFORNIA 94305 • (415) 497-5824

13th October 1976

STANFORD UNIVERSITY SCHOOL OF MEDICINE
Department of Surgery
Division of Plastic & Reconstructive Surgery
Rehabilitation Surgery

Sheila Sullivan

Post Street

Apartment

San Franci co, CA 94109

Dear Sheila Sullivan:

This letter is written to acknowledge receipt of your patient summary sheet. Because of the large number of applicants that we have for our Gender Dysphoria Program and the limited clinic space that is available, we are requesting that you complete a test (MMPI) which will be mailed to you next week. The examination must be returned to us and scored prior to scheduling an appointment for evaluation.

In completing the examination, please mark carefully between the lines with a <u>Number 2 Pencil</u> ONLY. Please answer every question. When you have <u>completed the</u> test, please return the answer sheet and test booklet to the following address:

Division of Plastic Surgery R213 Stanford University Medical Center Stanford, CA 94305

If you have any questions, please contact me.

Sincerely,

Marti Norberg Coordinator

Gender Dysphoria Program