

MEDICAL EVALUATION OF PUBERTAL DEVELOPMENT

THE TANNER STAGES

Stage	Female Anatomy	Stage	Male Anatomy
1	Pre-pubertal-No breast tissue	1	Pre-pubertal
2	Areolar enlargement w/ breast bud	2	Testes enlarge (4ml); scrotum larger, reddened & skin more coarse
3	Enlargement of breast & areola as a single mound	3	Penis enlarges, initially in length. Continued growth of testes & scrotum
4	Projection of areola above breast as a double mound	4	Penis grows in length and breadth; Continued growth of testes & scrotum (which becomes pigmented)
5	Adult; papilla (nipple) projects out of areola that is part of breast contour	5	Testes, scrotum & penis adult size
Common To Male & Female Anatomy Pubic Hair Development			
1	None	4	Small adult configuration
2	A few darker hairs along labia or at base of penis	5	Adult configuration with spread onto inner thighs
3	Curly, pigmented hairs across pubes	6	Adult configuration with spread to linea alba (lower abdominal mid-line)

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Progressive & informed pediatric endocrinological intervention with regards to transgender-identified children & adolescents indicates commencement of, at the very least, pubertal blocking treatment no later than Tanner Stage 2 whenever possible, followed by the appropriate cross-gender hormones as soon as possible.

In response to clinical research results and real-life experience with transgender-identified children & adolescents, TransActive recommends starting cross-gender hormones absolutely no later than Tanner Stage 3, when so desired by the child or adolescent.

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