



Disability in Medicine Mutual Mentorship Program (DM3P)

Accommodations Crowdsourcing Document

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Instructions:

Please use the Comments feature to add your suggestions about accommodations in healthcare training and practice environments to the tables on the next several pages. You can navigate to the table(s) relevant to your disability by clicking the relevant item in the table of contents below or by scrolling down.

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Table 1: Self care, disease management, monitoring and treatment

Task	Accommodation	Disabilities, Barriers, and Characteristics
Consistent, regular and adequate sleep schedule	Modified work schedule (such as release from overnight shifts, preference for shifts in certain times of day, limited shift length, hard stop times)	Sleep, anxiety or mood disorder, seizure disorder, neurological or central nervous system disorder, diabetes, universal
Consistent, regular and adequate sleep schedule	Advance knowledge of rotation options/site requirements and/or preferential rotation/site assignments	Sleep, anxiety or mood disorder, seizure disorder, neurological or central nervous system disorder, diabetes, universal
Attend healthcare appointments	Ability to make up missed time on weekends or other times	
Receive inpatient care	Ability to take exams remotely (such as due to hospitalization or due to school not being able to provide accommodations)	
Documentation	Ability to write notes from home	
Disease management	Modified curriculum timeline (increased time between rotations, longer rotations with shorter hours, etc.)	
	Ability to substitute inpatient surgical floor time for OR time	
Transportation to distant sites	Advance knowledge of rotation options/site requirements and/or preferential rotation/site assignments	
Disease monitoring	Breaks to allow time to monitor disease	Diabetes, chronic disease

Disease treatment	Modified schedule to allow for time to give treatments, rest, or attend doctors appointments	Diabetes, cystic fibrosis, mood, sleep or anxiety disorder, chronic disease
Disease management	Schedule modification and breaks to allow for disease management	Mood, anxiety or sleep disorders, central nervous system or neurological disorders, diabetes, chronic disease
Provide oxygen for disease management	Place to provide electricity for portable oxygen	Oxygen requirement
Nutrition	Ability to take breaks to eat meals/snacks away from patients	Diabetes, GI conditions, eating disorders, headache
Nutrition/Infection Control	Access to outdoor, private, and/or well-ventilated space to eat and time to use the space (it can take a long time to get outdoors from a hospital floor, especially if you also have to change in/out of OR scrubs to do it!)	
Ability to attend virtual/tele-health medical and therapy (PT, OT, mental health, etc) appointments	Access to private space with adequate phone/wi-fi access	
Security and availability of disability aids	Access to consistent storage space (especially locked space)	
Organization/Task-switching	[something to manage/prioritize the constant notifications - texts, phone calls, Epic chats, pages, etc.]	
Using the EMR	(Better) ability to customize interface, in terms of both the cognitive load/organization and visual accessibility	
	Coaching	
	Advocate/mentoring	

Understanding own needs in a clinical space	Ability to iterate on accommodation ideas (not actually an accommodation, just a reminder)	
Understanding own needs in a clinical space	Ability to preview clinical rotations/tasks and/or test out accommodations before being on graded rotations	

Table 2: Mobility and Physical Tasks

Task	Accommodation	Disabilities, Barriers, and Characteristics
Perform physical task or procedure in standing position	Standing wheelchair	Wheelchair user, spinal cord injury, lower extremity weakness
Performing physical task or procedure in standing position	Lower height of patient	Wheelchair user, spinal cord injury, lower extremity weakness, skeletal dysplasia, short stature
Performing physical task or procedure in standing position	Step stool	Short stature, skeletal dysplasia
Clinical documentation (typing)	Voice dictation software and hardware (Nuance Dragon Medical One, PowerMic Dictation Microphone vs PowerMic Mobile on personal device)	Carpal tunnel, fine motor disability, fatigue
Clinical documentation (typing)	Scribe	
Physical exam tasks requiring strength and dexterity beyond that of the examiner (e.g., strength testing)	Trained intermediary, directed by trainee/physician	
Complete sequence of required clinical clerkships	Do not schedule particularly intense rotations (e.g., OB/GYN, surgery) consecutively	Fatigue, chronic illness, sleep disorders, mobility impairments
Perform ear exam	Digital otoscope Wispr (WiscMed) or smartphone adapter for otoscope (Welch Allyn iExaminer Pro)	Wheelchair user, short stature, dexterity issues
Stand for extended periods of time (e.g., rounds, clinic visits, OR)	Chair or stool available as needed	Balance difficulty, fatigue, chronic pain, hx of recurrent syncopal episodes

Perform eye exam	Smartphone adapter for ophthalmoscope (Welch Allyn iExaminer Pro)	Wheelchair user, short stature, dexterity issues
Retract tissues during surgery	Use ring mount for retractors in the OR	Reduced strength
Participate in required surgery clerkship	Consider assignment to certain surgical subspecialties instead of general surgery Ophthalmology- no retracting ENT- operate seated Plastics/hand surgery- operate seated Pediatrics- smaller patients (note that peds ORs are often WARM) Assign students to observe minimally-invasive surgeries Assign students to ORs with cameras built into overhead lights	Individuals with mobility disabilities and/or strength limitations
Demonstrate CPR for BLS certification	Excuse from requirement to personally perform CPR and allow demonstration of competency by verbalizing technique or directing others	
Auscultate heart and lungs	Extended length stethoscope (Ultrascope- can specify length of extended tubing)	Wheelchair user, short stature
Clerkship site placement	Assign student to site accessible by public transportation	Unable or limited ability to drive
Clerkship parking	Give access to close parking (and covered/garage parking during snowy months). This should be provided at the same cost as the default parking assignment.	Mobility disabilities, unsteady balance, gait difficulties

Table 3: Cognitive

Task	Accommodation	Disabilities, Barriers, and Characteristics
Time management	Personal coaching	ADHD, cognitive disability, disorganized, Depression, Anxiety, TBI, ABI,
Data interpretation	System to organize information	ADHD, cognitive disability, neurological or central nervous system disorder, universal
Data interpretation	Extended time	ADHD, cognitive disability, neurological or central nervous system disorder
Decision making	Extended time	ADHD, cognitive disability, neurological or central nervous system disorder
Memory	Mnemonics	Universal
Time management	Deadline reminders	Depression, Anxiety, ADHD, TBI, ABI,
Time management	Staggered or spaced midterm and final exams and projects.	Depression, Anxiety, ADHD, TBI, ABI,
Documentation	AI, technology, recording devices, smart templates, dictation/transcribing, individual setup, Robin healthcare (transcribing device), smart pen, digi pen,	Any
Documentation	Editing (screen reader, reading programs, grammaly, * These might not be HIPPA compliant,	
Reading comprehension	Oral readers that are HIPPA compliant	Dyslexia, Auditory processing, sensory
Non-visual information capture	Letter board, sign language, coaches	

Appointments (Coaching, skill training)	Parking pass, scheduling flexibility/ protected time,	
Beta testing	Re-evaluation, updating,	
Sustaining focus,	iPad,	
Memory	iPad,	
Information processing	Reduced schedule, rest, eliminate fatigue	
Taking/retaining information	Reduce schedule, flexibility,	Processing disorders, cognitive disorder, maybe ADHD,
Get more sleep	Reduce schedule, flexibility,	Bipolar,
Sustained attention and decision making, info processing	No overnight call,	Many different disabilities, diabetes, seizure, neurological, sleep wake disorder

Table 4: Communication and Self-Expression

Task	Accommodation	Disabilities, Barriers, and Characteristics
Speaking	ASL interpretation	Hearing impairment
Speaking	Speech synthesizer/ Letter board	Vocal cord dysfunction, neurological disorder impacting speech, mutism
Speaking	Write or type	Hearing impairment
Speaking	Extended time	Vocal cord disorder, central nervous system disorder, hearing impairment, stutter
Writing	Dictation	fine motor weakness, decreased sensation in hands, vision impairment, prefers oral expression, amputation, ADHD, difficulty with coordination if having painful episode (i.e. sickle cell pain episode)
Filling out electronic forms and electronic documentation	Scribe	fine motor weakness, decreased sensation in hands, vision impairment, prefers oral expression, amputation
Drawing	Provide description of what needs to be drawn	Vision impairment, fine motor weakness, amputation
Writing	Extended time	Vision impairment, fine motor weakness, amputation, ADHD
Writing	Scribe	ADHD, arthritis, upper extremity weakness, chronic disease
Separating tasks	Alternate clinician	For clinicians with chronic disease, have alternate clinician to work for you when you are ill, then when you are well, you take back tasks

[illegible]

Table 5: Sensory and Information Input

Task	Accommodation	Disabilities, Barriers, and Characteristics
Reading	Audio materials	Vision impairment, ADHD, dyslexia, print related disability, fatigue with reading, auditory learner
Reading	Extended time	Vision impairment, central nervous system or neurological disorder, dyslexia, ADHD, decreased reading rate, print related disability
Reading electronic materials	Screen reader	Vision impairment, ADHD, dyslexia, print related disability, fatigue with reading, Migraine, seizure disorder, sleep disorder, light sensitivity, auditory learner. Lots of issues with initial setup and integration with electronic medical records. Pros/Cons with which screenreader to use. Windows magnifier/narrator are widely available on hospital computers.
Reading electronic materials	Paper print out	Light sensitivity, neurological or central nervous system disorder, migraine, seizure disorder, sleep disorder
Listening to speech	CART (Communication Access Realtime Translation)	Hearing impairment, auditory sensitivity, visual learner, need for silence
Listening	Extended time	Hearing impairment, central nervous system or neurological disorder, ADHD

Visualization of internal ear	Video otoscope	Vision impairment, telemedicine
Auscultation of heart	Stethoscope with visual sound wave read out	Hearing impairment
Seeing rashes, wounds, other physical exam findings	Photograph	Photodocumentation for the chart is common, and asking colleagues for help this way.
Visual characteristics of physical exam	Ask for help from other clinician (MD, RN, MA)	The specifics will be dependant upon your practice setting. Audio description of visual information without medical interpretation.
Examining IV pumps or PCAs	Take picture, OCR using Voiceover on phone/photos or use BeMyEyes (AI)	Vision impairment. Works well but easier once you know exactly what you are trying to look for.
Filling out clinical paperwork	Administrative assistant to scan and PDF editor to fill out vs AA to help you sign	Best tool depends on type of forms. Access to an administrative assistant who can learn your needs helps.
Reading patient diaries (fingerstick log, etc)	Phone camera OCR or BeMyEyes AI based OCR.	Visual impairment. Especially for simple logs, OCR can be a quick way to review.

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