

Accessible Examination Tables



Figure 1: Photo Credit: Courtesy of Craig Hospital

Accessibility of doctors' offices, clinics, and other health care providers is essential in providing medical care to people with disabilities. Due to barriers, individuals with disabilities are less likely to get routine preventative medical care than people without disabilities. Accessibility is not only legally required, it is important medically so that minor problems can be detected and treated before turning into major and possibly life-threatening problems.

The Americans with Disabilities Act requires access to medical care services and the facilities where the services are provided. Private hospitals or medical offices are covered by Title III of the ADA as places of public accommodation. Public hospitals and clinics and medical offices operated by state and local governments are covered by Title II of the ADA as programs of the public entities. Section 504 covers any of these that receive federal financial assistance, which can include Medicare and Medicaid reimbursements. The standards adopted under the ADA to ensure equal access to individuals with disabilities are generally the same as those required under Section 504.

Source: U.S. Department of Justice: Access to Medical Care for Individuals with Mobility Disabilities

Web Sites

Access to Medical Care for Individuals with Mobility Disabilities. U.S. Department of Justice, Civil Rights Division, Disability Rights Section and the U.S. Department of Health and Human Services, Office for Civil Rights. July 2010.

http://www.ada.gov/medcare_ta.htm

This booklet discusses the ADA's requirements for accessible medical care; answers common questions about physicians' responsibilities; describes standards for accessible examination rooms; and describes accessible medical equipment (exam tables and chairs, radiologic equipment, mammography machines) and patient transfer techniques. The booklet may be read online or downloaded as a PDF. Copies can be ordered by calling the ADA Information Line at 800-514-0301 (toll-free, voice) or 833-610-1264..

ADA.gov: Fact Sheet: New Rule on the Accessibility of Medical Diagnostic Equipment Used by State and Local Governments 8/8/24

<https://www.ada.gov/resources/2024-08-08-mde-fact-sheet/>

Northwest ADA Center: Accessible Medical Examination Tables and Chairs

https://archive.nwadacenter.org/sites/adanw/files/files/Fact%20Sheet_Accessible%20Medical%20Exam%20Tables_LargePrint.pdf

NPR: Medical Care Often Inaccessible to Disabled Patients

<http://www.npr.org/templates/story/story.php?storyId=14362338>

This September 13, 2007, story discusses barriers to medical care faced by patients with physical disabilities and offers some recommendations for finding accessible providers.

The following are a list of websites of manufacturers and vendors who provide accessible examination tables. Please note a listing here is not an endorsement; the sites below are offered for informational purposes only.

Hausmann Industries: Examination Tables

http://www.hausmann.com/product_pages/examination_tables.html

130 Union Street
Northvale, NJ 07647

Phone: 201-767-0255
Toll-free: 888-428-7626
Model 4460, 4465 is billed as a “Wheelchair Accessible ADA Exam Table”.

Midmark

<http://www.midmark.com>

1700 S. Patterson Blvd, Suite 400

Dayton, OH 45409

Phone: 800-MIDMARK

Midmark makes a line of Barrier-Free® Power Examination Tables. Click *Products*, then *Medical Products* to view.

Welner Enabled

<http://www.welnerenabled.com/>

224 W. 30th St., Suite 808

New York, NY 10001

Phone: 800-430-9810

Welner Enabled designs and builds products and devices that enable people with disabilities and others with special needs to access sensitive, compassionate, and thorough medical diagnosis and treatment. Products include the Next Generation Welner Enabled Examination Table – an accessible, hi-lo powered examination table specifically designed for bariatric, geriatric, and disabled patients.

Articles

“Accessible Exam Tables—Just Ask”. *New Mobility*. December 2005, pp. 43-45.

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