

Physical Access If You Have a Disability



Check everything that you need. Then tell the doctor's office ahead of time.

Also, ask your doctor to keep a copy in your medical file.

Getting to the Doctor's Office:

- I use a wheelchair, and I need to be able to get to your building and into your office.
- I will use an accessible bus or van. There needs to be an accessible route from the bus stop to the office.
- I need an accessible parking space. There needs to be an accessible route from the parking space to the office.
- Other: _____

Getting Health Care:

- I need an accessible restroom.
- I need an exam table that adjusts up and down. It should adjust down to 17–20 inches from the floor (or _____).
- I need assistance getting on and off the exam table.
- Please use this sheet when you refer me to other facilities. Also, when I have tests or procedures, I need referrals to facilities where I can use the diagnostic equipment.
- I use a service dog, so please alert anyone who may be allergic to or frightened of dogs.
- I have a life-threatening or health-threatening reaction to these products. Please reschedule my appointment if I will be exposed to any of these items (check all that apply):
 - Latex
 - Pesticides
 - Roofing sealant
 - Paint
 - Scented personal care products
 - Other: _____

Notes: _____

Adapted with permission from June Isaacson Kailes, Associate Director CDIHP