

How to Request Accommodations Before a Dermatology Visit

Accommodations are changes to how care is delivered so that a visit works for your body, your senses, and the way you communicate. Almost all of them work better when the clinic knows before you arrive. Use this guide to decide what to ask for, when to ask, and where to get free help if the answer is no.

STEP ONE

Ask early, ask in writing, confirm twice

WHEN YOU BOOK

Say what you need in the same call or message. Sending it through the patient portal or by email gives you a dated record.

ABOUT A WEEK BEFORE

Call to confirm the accommodation is actually scheduled, not just noted in your chart. Interpreters and equipment often need to be booked separately.

WHEN YOU ARRIVE

Confirm with the front desk. If something is missing, ask what can still be done today and what needs to be rescheduled.

WORDING YOU CAN REUSE

"I have a disability and I need [accommodation] for my appointment on [date]. Please confirm in writing that this will be arranged, and let me know who I should follow up with if it is not."

STEP TWO

Getting there, getting in, getting on the table

- ☐ An accessible entrance, route, restroom, and exam room, with accessible parking nearby
- ☐ A height adjustable exam table that lowers to about the height of a wheelchair seat, with a support rail
- ☐ An accessible weight scale you can use seated or in your wheelchair
- ☐ Transfer help: trained staff, a transfer board, or a patient lift
- ☐ Help undressing, dressing, and being positioned
- ☐ A longer appointment slot, or the first or last slot of the day
- ☐ A wait somewhere other than the main waiting room

STEP THREE

Communication access

- ☐ A qualified sign language interpreter, on site or by video
- ☐ Real time captioning, sometimes called CART
- ☐ An assistive listening device
- ☐ Staff who face you when they speak, and a clear window mask when infection control allows it
- ☐ A written summary of the plan before you leave
- ☐ Forms and instructions in large print, braille, plain language, or a format that works with your screen reader

Worth knowing. Joint guidance from the Department of Justice and the Department of Health and Human Services states that a patient with a disability may come to an appointment alone and that the provider must give reasonable assistance so care can happen, including help on and off the exam table and with positioning. [1] Under the HHS Section 504 rule, providers receiving HHS federal financial assistance had to have at least one accessible exam table and one accessible weight scale by July 8, 2026, if they use that equipment. [5, 6] Under the ADA, the clinic must provide the auxiliary aids needed for effective communication and cannot bill you for them. It generally chooses which aid, so say plainly what works for you. An adult with you may interpret only if you ask and they agree. [2, 3] General information about federal requirements, not legal advice.

STEP FOUR

Sensory, cognitive, and communication support

- ☐ A quieter or dimmer room, and fewer people in the room
- ☐ A step by step description of what will happen before it happens
- ☐ Permission to bring headphones, sunglasses, a fidget item, or a comfort object
- ☐ Questions sent in advance so you can prepare your answers
- ☐ One instruction at a time, and a chance to repeat it back
- ☐ A support person present, or a supported decision making arrangement you already use
- ☐ Written instructions with pictures, plus a number to call later
- ☐ A short break partway through the visit

A tool most patients have never heard of. The Autism Healthcare Accommodations Tool is a free questionnaire, built by a university and community research partnership, that generates a personalized accommodations report to hand to your provider. It was designed with and for autistic adults, and the questions are useful for many patients who find clinical environments difficult. Link in the resource list. [8]

STEP FIVE

The skin exam, biopsies, and patch testing

For a full body skin exam

- ☐ Ask to be examined in a position that works for your body: seated, side lying, or in your own chair
- ☐ Ask for the exam in stages rather than all at once
- ☐ Ask for extra draping, and for consent before each area is examined
- ☐ Say in advance if you have pressure injury risk, spasticity, tremor, contractures, pain, or blood pressure changes with position
- ☐ Ask them to describe what they see out loud, and to say where on your body they are looking
- ☐ Ask for photographs of areas you cannot see, and for those images to be described to you

Before a biopsy or procedure

- ☐ How long the site must stay dry, and how that fits with how you bathe or transfer
- ☐ Whether you can reach the site to care for it yourself, and who will help if you cannot
- ☐ Whether wound care can be simplified, or arranged through home health
- ☐ How stitches will be removed and whether that visit can be combined with another

Before patch testing

- ☐ Tape and adhesive sensitivity, and alternatives if your skin is fragile
- ☐ How many days you cannot shower, swim, or sweat heavily
- ☐ Whether the patches will sit where a brace, sling, harness, or backrest presses
- ☐ Transportation for the return visits, which are usually several days apart

STEP SIX

Medications and after visit instructions

- ☐ **Accessible prescription labels.** Many pharmacies provide talking labels, braille, or large print on request, often at no extra charge
- ☐ A formulation you can actually apply: ask about sprays, foams, or applicators if creams are hard to reach or spread
- ☐ An alternative if you cannot reach the treated area, including who can help apply it
- ☐ Dosing written in plain language, with a printed or digital schedule
- ☐ Refills timed so you are not making extra trips
- ☐ Instructions sent to your caregiver or support person as well, with your permission

My Accommodation Request

Fill this in, keep a copy, and ask the clinic to add it to your chart. You can email or upload it through the patient portal before your visit.

NAME

DATE OF BIRTH

CLINIC OR DERMATOLOGIST

APPOINTMENT DATE AND TIME

BEST WAY TO REACH ME

SUPPORT PERSON AND PHONE, IF ANY

THE ACCOMMODATIONS I AM REQUESTING

HOW I COMMUNICATE BEST

For example: I use ASL and need an interpreter booked; please face me when speaking; send instructions by email in plain text.

WHAT I NEED IN THE EXAM ROOM

For example: a table that lowers for transfer, two staff to assist, extra time, a quieter room, help with dressing.

WHAT HELPS ME MOST, AND WHAT TO AVOID

THINGS THE TEAM SHOULD KNOW ABOUT MY BODY OR HEALTH

For example: pressure injury risk, positions I cannot hold, adhesive sensitivity, pain triggers, seizure history.

MY QUESTIONS FOR THE DERMATOLOGIST

I REQUESTED THIS ON

I SPOKE WITH

CONFIRMATION

☐ The clinic confirmed in writing ☐ Confirmed by phone ☐ No answer yet ☐ Request was declined

Follow up date: _____ Who I follow up with: _____

Tip. Keep this page with your appointment reminders and bring a second copy for the clinic. If you go back to the same practice, the same sheet works again, and having it in your chart means you do not have to explain everything from the beginning each time.

If you use a service animal. Staff may ask only two questions: whether the dog is a service animal required because of a disability, and what work or task it has been trained to perform. They may not ask about your disability, require certification or training documents, or require the dog to wear a vest or ID. A service animal can still be asked to leave if it is out of control or not housebroken, and it may be excluded from the small number of areas where its presence would compromise a sterile field, which can matter for surgical procedures. [4]

IF THE ANSWER IS NO

What you can do next

- 1 Ask who handles accessibility.** Larger practices and health systems often have an ADA coordinator, a patient relations or patient experience office, or a practice manager. Ask for that person by name and ask for the decision in writing.
- 2 Write down what happened** while it is fresh: the date, who you spoke with, exactly what you asked for, and exactly what you were told. A short dated log is the single most useful thing to have later.
- 3 Ask again in writing** through the patient portal or by email, and keep the reply. A written request creates a record and often reaches someone with more authority than the front desk.
- 4 Get free outside help** before you decide anything. Every organization in the table below helps patients at no cost, and none of them require you to have a lawyer.
- 5 Consider filing a civil rights complaint.** There is no filing fee and no lawyer is required. Complaints to the HHS Office for Civil Rights generally must be filed within 180 days of what happened, though that window can sometimes be extended for good cause. [7] Deadlines for going to court are different, so ask a lawyer or your Protection and Advocacy agency early rather than waiting.

This section describes options generally available to patients. It is informational and is not legal advice about your situation.

FREE HELP

Where patients can get support at no cost

ORGANIZATION	WHAT IT CAN HELP WITH	HOW TO REACH IT
ADA National Network	Free, confidential answers about your rights and about what a clinic can be asked to do. Your call is routed to the center serving your state.	800-949-4232 adata.org
Your state Protection and Advocacy agency	Federally funded legal advocacy, including health care access. One in every state and territory. Free, though each agency sets priorities and cannot take every case.	Find yours at ndrn.org
Centers for Independent Living	Local organizations run by and for people with disabilities. Peer support and one to one help advocating for yourself.	acl.gov ncil.org, ilru.org
Disability Rights Education and Defense Fund	National disability civil rights law and policy center. Takes information and referral inquiries.	510-644-2555 info@dredf.org
National Association of the Deaf, Law and Advocacy Center	Interpreter and communication access problems in health care, including sample advocacy letters.	nad.org
Autism Healthcare Accommodations Tool	Free online tool that builds a personalized accommodations report to give your provider.	researchautism.org/ healthcaretoolkit
US Access Board	Free technical help on accessible medical diagnostic equipment, including exam tables and scales.	202-272-0080 ext. 3 mde@access-board.gov
Talking prescription label finder	Locate a pharmacy near you that provides ScripTalk talking labels. Braille and large print are offered through separate programs, and several national chains run their own, so ask your pharmacy directly as well.	acb.org/find-scriptalk-pharmacy
Filing a complaint	HHS Office for Civil Rights takes disability complaints about health care providers. The Department of Justice ADA Information Line answers general ADA questions.	ocrportal.hhs.gov 800-514-0301 voice 833-610-1264 TTY

REFERENCE

Sources and important notes

Everything in this guide is drawn from the primary sources below. Federal guidance and advocacy organization contact details change over time, so check the original source before relying on a specific requirement or deadline.

Sources

1. US Department of Justice and US Department of Health and Human Services. *Access to Medical Care for Individuals with Mobility Disabilities*. ada.gov
2. US Department of Justice, Civil Rights Division. *ADA Requirements: Effective Communication*. ada.gov
3. National Association of the Deaf. *Questions and Answers for Health Care Providers*. nad.org
4. US Department of Justice, Civil Rights Division. *ADA Requirements: Service Animals*. ada.gov
5. US Department of Health and Human Services, Office for Civil Rights. *Section 504 of the Rehabilitation Act of 1973 Final Rule: Section by Section Fact Sheet*. hhs.gov
6. US Access Board. *Standards for Accessible Medical Diagnostic Equipment*. access-board.gov/mde
7. US Department of Health and Human Services. *Filing a Civil Rights Complaint*. hhs.gov
8. Nicolaidis C, Raymaker D, McDonald K, et al. The development and evaluation of an online healthcare toolkit for autistic adults and their primary care providers. *J Gen Intern Med*. 2016;31(10):1180 to 1189.
9. Zemlok SK, Muzumdar S, Chang MW, Krug R, Sloan B. Disability and the dermatology patient, part 1: improving access to dermatologic care. *J Am Acad Dermatol*. 2026;94(3).
10. Zemlok SK, Muzumdar S, Chang MW, Krug R, Sloan B. Disability and the dermatology patient, part 2: supporting patients with disabilities. *J Am Acad Dermatol*. 2026;94(3):777 to 789.
11. American Academy of Dermatology. Patient education library. aad.org/public

ABOUT

Using and sharing this handout

- ☐ **Share it freely.** Clinics, independent living centers, support groups, and patient advocates are welcome to print and distribute this handout
- ☐ **Bring the request form to your visit.** It is the part that does the most work, and it can stay in your chart for future appointments
- ☐ **For clinicians.** A companion checklist for dermatology practices is at dermability.org/clinician-checklist
- ☐ **Tell us what is missing.** If an accommodation that matters to you is not on this list, write to us through dermability.org so the next version includes it

Please read. This handout is an educational guide for patients and caregivers. It is not medical advice, it is not legal advice, and it does not create a clinician and patient relationship or an attorney and client relationship. It does not certify or guarantee compliance with the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, or any other law, and it does not replace individualized evaluation by a qualified health professional. Nothing here is a promise that a particular accommodation will be provided, since what a clinic can offer depends on its setting, its resources, and the circumstances. Laws, regulations, compliance deadlines, and contact information change over time, so confirm current requirements with the primary sources listed above. Talk with your dermatologist or care team about your individual medical needs, and consider contacting one of the free organizations listed here about your particular situation. Compiled by DermAbility from publicly available federal guidance, disability advocacy organizations, and peer reviewed dermatology literature. Reviewed September 2026. Current version at dermability.org/patient-resources.