DREDF Healthcare Stories

Part One: Tables and Scales

Alice Wong:
My name is Alice Wong and I live in San Francisco. There’s one area that I’m very bad about, are getting routine pelvic exams. So this is a woman’s health practice, and they do not have a single adjustable height exam table. I’m not getting regular pelvic exams because of this hassle.

Larry Voss:
My name’s Larry Voss and I, uh, live in Darien, Illinois, a suburb of Chicago. I had a lot of discomfort in my abdomen. It was diagnosed originally as a bowel obstruction. And it was recommended by him that I have an MRI. But when I went there, we found out that there was no way that physically they could get me, as a wheelchair user and a vent user, onto the exam, you know, table that they use for the MRI. And they didn’t have a Hoyer lift or any kind of other ways of giving me access to that equipment. So, finally, we did get a call from the nurse that she had found an accessible facility. This took about nine months in total. And when the scan was done, the MRI was done, they found that what had originally been a much smaller growth that they detected had become almost double the size.

Francis Deloatch:
Well, my name is Francis Deloatch. My doctor’s office, unfortunately, is not that wheelchair accessible. The exam tables, forget it. I have to really be picked up to put me even on the table or off the table. I need the examining tables in order for me to
transfer in and out myself, I need them to be moved up and down so I can do what I call a slide transfer, which is, basically, transfer on my bottom, from one surface to the other. If they go and pick me up to put me on the exam table, and if they don't do it right or listen to me so I can tell them how to do it, I will end up breaking a bone.

Michael Ogg:
My name is Michael Ogg. I live here in Princeton Junction, New Jersey. Just before I was hospitalized at the doctor who examined me and then sent me to the hospital, again, in his doctor's office, he had an examination table but no transfer equipment. He worked single-handedly. Actually, the first time I saw him he got his secretary to help transfer me. Generally, secretaries don't like having to lift people. It's not their job and they shouldn't be doing it and they're certainly not trained to do it.

I don't think I've been to any single doctor's office where they've actually had transfer equipment.

Jennifer Thomas:
My name is Jennifer Thomas. I'm 35 years old. I live in Arlington Heights. When I was 9 months pregnant and had to go for one of my last ultrasounds, there was no accessible table [laughs]. Really can't, can't barely get up to the desk to check in and somebody says, 'Oh, oh.' And really sort of dumbfounded like, 'How are we going to treat her, wow.' Like a person with a disability getting pregnant was some kind of science experiment and it's not.

Mary Delgado:
My name is Mary Delgado, and I live here in Chicago.
I, I went five years without a Pap smear because I could no longer get up on the table.
So I told my doctor, I need a Pap smear. She said, 'Oh, you know, you do
need a Pap smear.’ And then--and then she said--I said, ‘I need--I need one with a table’s lower so I can--I can scoot over there.’ She said, ‘That’s a great idea. Find one.’ I have to always guess at my weight. I’ve not been weighed, let’s say, for 20 years.

Michael Ogg:
I have frequent visits to a doctor’s office, neurologist, physiatrist, urologist, you name it, primary care, you name it. I see quite a few doctors and not one of them has a way of weighing me. The last time I was weighed in a doctor’s office was when I could last stand on my own two feet, which was well over 10 years ago.

Alice Wong:
I think if you ask any person with a disability, these issues are part and parcel with every day experiences.