

Supplemental Digital Appendix 1

Sociodemographic and Work Experience Characteristics of Committee Members

Disability Inclusion Expert Committee	N=4
Gender	1=Male; 3=Female
Educational level	2=Master’s degrees; 2=Doctoral degrees
Degree type	Counseling Psychology; Clinical Mental Health Counseling; Education Policy and Administration; Developmental Psychology/Education
Race	4=White or European
Disability status (Do you identify as disabled?)	2=No, 2=Yes
Geographic location	1=Southwest 1=West 1=Northeast 1=Midwest
Title	Director, Disability Resources, ADA/504 Compliance Officer; Director, Center for Learning Excellence; Director of Disability Resources; Professor of Medical Education
Years of experience working as a disability resource professional (DRP):	Cumulative 69 years of experience (range: 5-36 years)
Years of experience working as a DRP within health sciences and medicine	Cumulative 43 years of experience (range: 5-15 years)
Authored articles, books, or chapters on disability inclusion in medical education	4
Provided expert opinion for legal cases regarding disability inclusion in medical education	3
Instructor for advanced training in medical education and disability inclusion	4
Medical Student Committee	N=7
Gender	1=Male; 6=Female
Education level	3=Master’s degrees; 2=Doctoral degrees
Degree type	Health Policy; Microbiology and Immunology; Medical Science; Neuroscience; Bioengineering and Biomedical Engineering
Race*	4=Asian/Asian American; 1=Black or African American; 4=White or European
Disability status (Do you identify as disabled?)	7=Yes; 0=No
Geographic location	1=Southeast; 2=West; 2= Northeast; 2=Midwest

Years of experience in disability scholarship/leadership	Cumulative 38 years of experience (range: 1.5-9 years)
Average time on clinical wards	Cumulative 95 months of clinical experience (range: 5.5-17 months)
Disability Resource Professional (DRP) Committee	N=9
Gender	1=Male; 8=Female
Education level	8=Master’s degrees; 1=Doctoral degrees
Degree type	Social Work; Higher Education Administration; Counseling; Vocational Rehabilitation
Race	7-White or European; 1=Black or African American; 1=Hispanic or Latino/a
Disability status	4=Yes; 5=No
Geographic location	3=Midwest; 3=West; 2=Northeast; 1=Southeast
Title	4=Director; 1=Associate Director; 2=Assistant Director; 1=Lead Disability Specialist; 1=Disability Accommodations Resource Specialist
Years of experience working as a DRP	111 cumulative years of experience (range: 5-23 years)
Years of experience working as a DRP within health sciences and medicine	Cumulative 62 years of experience (range: 3.5-12 years)

*Total N for race may be higher than total N for reviewers given multi-race responses.

Supplemental Digital Appendix 2

Results and Trajectory of Delphi Process for Clinical Accommodations

	Category	Round 1	Round 2	Round 3	Round 4	Result
1	Adaptive Equipment	Use of Adaptive Furniture within Clinic	Use of Adaptive Furniture for Clinical Duties			
		Workstations should be equipped with specific adaptive furniture. Specific furniture may vary based on disability-related need, but could include the use of chairs with wheels, chairs with backrests, chairs with ergonomic features (e.g., adjustable lumbar support, raising armrests, tilting features, etc.), height adjustable workstations/tables, and more. Specific furniture-related needs to be listed as an appendix to the accommodation letter.	Charting workstations should be equipped with specific adaptive furniture. If an accessible workstation is not available in the clinical team's workroom, the student should not be separated from the rest of the team for the purposes of their accessibility. [DRP/University should include device specifics (e.g., adjustable lumbar support, raising armrests, tilting workstations/tables, etc.)].	Charting workstations must be equipped with the following adaptive furniture:[List specific adaptive furniture]. [DRP/University should include device specifics (e.g., adjustable lumbar support, raising armrests, tilting features, height adjustable workstations/tables, etc.). DRP/University must also discuss a process of inclusion for the student in the event a workstation with adaptive technology is not currently available in the clinical team's workroom (e.g., how to obtain the appropriate equipment, other locations the team may be moved to for group work/discussion, etc.), as the student should not be separated from the rest of the team for the purposes of their accessibility.]		Approved in Round 3
2	Adaptive Equipment	Use of Finger Splints				
		Student will use finder splints during patient evaluations and procedures, for which extended finger position is necessary.	The student utilizes finger splints during patient evaluations and procedures for which extended finger position is necessary.	The student will utilize finger splints during patient evaluations and procedures. [DRP/University should discuss and implement alternative accommodations for procedures that, due to the sensitive nature of the exam, may require alternative devices/approaches]		Approved in Round 3

	Category	Round 1	Round 2	Round 3	Round 4	Result
3	Adaptive Equipment	Use of Adaptive Medical Devices				
		<p>Student will require use of adaptive medical devices (e.g., Plastic Speculum, Spring-Action Scissors, etc.) within procedural environments.</p> <p>Specific adaptive devices to be listed as an appendix to the accommodation letter.</p>	<p>Student requires use of adaptive medical devices (e.g., plastic speculums, spring-action scissors, etc) should be provided within procedural environments and easily accessible in the student's clinical space.</p> <p>[DRP/University should determine appropriate adaptive devices and who will supply (e.g., student, faculty, site, etc.)]</p>	<p>Student requires use of the adaptive medical devices[List Devices(e.g., plastic speculums, spring-action scissors, etc)]. Adaptive medical devices should be provided within procedural environments and easily accessible in the student's clinical space.</p> <p>[DRP/University should determine appropriate adaptive devices and who will supply (e.g., student, faculty, site, etc.)]</p>		Approved in Round 3
4	Adaptive Equipment	Noise Cancelling Ear Plugs when Charting				
		<p>Student may utilize noise-cancelling ear plugs while charting/documenting patient interactions to minimize noise-based environmental distractions. Student should speak with their clinical supervisor to discuss environments in which the use of noise-cancelling ear plugs may not be suitable.</p>	<p>Student may utilize a noise-reduction device (in or over-ear) to minimize environmental distractions while reviewing/documenting patient information and interactions.</p> <p>[DRP/University should include device specifics].</p>			Approved in Round 2
5	Adaptive Equipment	Use of Magnification Glasses				
		<p>Student will utilize magnification glasses/devices to enhance visual elements. At times, student may require use of magnification device during patient interactions to perform evaluations (e.g., Surgical Loupe, Monocular Lense, etc.).</p>	<p>Student may utilize magnification glasses to enhance visual elements during clinical duties (e.g., Surgical Loops, Monocular Lense, etc.).</p> <p>[DRP/University should include device specifics].</p>			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		Specific furniture-related needs to be listed as an appendix to the accommodation letter.				
6	Adaptive Equipment	Use of Portable Stool				
		Student will utilize personal portable stool during rounds and clinical procedures - personal stool should not be utilized within sterile operating rooms (alternatives should be identified within these settings).	Student will carry and utilize personal portable[indicate type of stool] stool during rounds and clinical duties. [DRP/University will need to indicate whether this is a seated stool or step stool. They will also need to indicate what environments the stool cannot be utilized in (e.g. OR, secure units, etc) and what alternatives should be provided within these settings.)]			Approved in Round 2
7	Adaptive Equipment	Use of Texturized Surgical Gloves				
		Student requires use of texturized surgical gloves (e.g., Microflex gloves, Dynarex Sterile Latex Surgical Gloves, Ansell Gammex Non-Latex PI Ortho, etc.) for procedures/learning opportunities involving the use of surgical gloves.	Student requires texturized surgical gloves for all clinical learning opportunities involving the use of surgical gloves. [DRP/University should determine type of texturized surgical glove (e.g., Microflex gloves, Dynarex Sterile Latex Surgical Gloves, Ansell Gammex Non-Latex PI Ortho, etc.)]			Approved in Round 2
8	Adaptive Equipment	Use of Amplified Stethoscope				
		To facilitate equal access to the clinical curriculum the student will require the ability to utilize an amplified stethoscope.	Student will utilize an amplified stethoscope during all clinical interactions in which a traditional unmodified stethoscope is necessary.			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
9	Adaptive Equipment	Adaptive on Call Room Equipment				
		The student's accommodation need is rooted in communication access. This requires visual or physical alternatives for auditory alert systems. All emergent and code alerts should be also communicated via visual or physical alerts such as flashing lights or vibrations.	The student requires visual and/or tactile alternatives to auditory alert systems.Ω [DRP/University should specify alert system needs (e.g., flashing lights, bed shaking devices, etc.)]			Approved in Round 2
10	Adaptive Equipment	Use of Elevation Prop				
		Student will utilize a prop (cushion, pillow, etc.) when conducting patient evaluations.	The student will utilize a prop during patient evaluations. [DRP/University should specify prop (e.g., stool, cushion, pillow, etc.) and usage (e.g., how the student utilize prop throughout patient evaluation)]			Approved in Round 2
11	Adaptive Equipment	Use of Sterilized Draping/Covering for Disability-Related Device	Use of Draping/Covering			
		Student requires use of sterile covers for disability-related mobility equipment. Sterile covers (e.g., covers used on x-ray machines and CT scanners) will be needed to cover mobility device armrest/joystick.	Student requires the use of protective draping/covering for disability-related equipment or accessory. [DRP/University should determine appropriate covering based on student need/environment and responsible party for purchase (e.g., drapings for mobility devices armrest/joystick, assistive technology, covering for oxygen concentrators, etc.)]			Approved in Round 2
12	Adaptive Equipment	Use of Grip Enhancements for Medical Tools				

	Category	Round 1	Round 2	Round 3	Round 4	Result
		Student will utilize gripping materials, such as foam tubing on handheld instruments (scalpels, reflex hammers, tuning forks, etc.), to enhance handle size and increase friction of surface area.	The student will utilize gripping materials, such as foam tubing on handheld instruments (scalpels, reflex hammers, tuning forks, etc.), to enhance handle size and increase friction of surface area. [DRP/University should determine appropriate grip enhancements with the assistance of the clinical site/rotation director and determine whether the institution, student, or site will purchase/provide]			Approved in Round 2
13	Adaptive Equipment	Use of Adaptive Stethoscope with Visual Display				
		To facilitate equal access to the clinical curriculum the student requires the ability to utilize an adaptive stethoscope that includes a visual display.	Student will utilize an adaptive stethoscope that includes a visual display during all clinical interactions in which a traditional unmodified stethoscope is necessary.			Approved in Round 2
14	Adaptive Equipment	Use of Adaptive Clinical Tools: Butterfly Needles		Use of Butterfly Needles		
		Student will require access to butterfly needles when 3 or more tubes are being filled.	The student will require access to butterfly needles when conducting blood draws. [DRP/University should specify situation in which butterfly needles are necessary]			Approved in Round 2
15	Adaptive Equipment	Use of Adaptive Clinical Tools: Glove Liners		Use of Glove Liners		
		Student will require the ability to access and utilize glove liners in clinical environments.	The student requires use of glove liners within clinical environments.			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
16	Adaptive Equipment	Use of Ergonomic Technology in Clinical Settings				
		Workstations should be equipped with specific adaptive /ergonomic technology. Specific adaptive/ergonomic technology may vary based on the student's disability need but may include access to a second computer monitor, ergonomic keyboard, or ergonomic mouse.				Eliminated in Round 1
17	Adaptive Equipment	Use of Adaptive Clinical Tools: Adaptive Pipettes				
		Student will require the ability to access and utilize adaptive pipettes in clinical and lab settings.				Eliminated in Round 1
18	Adaptive Equipment	Adaptive on Call Room Equipment				
		The student's accommodation need is rooted in communication access. When the student is completing a 24 hour call overnight shift, the call room should be equipped with a bed-shaker device and/or pager that vibrates when the student is summoned.				Eliminated in Round 1
19	Adaptive Equipment	Use of Recording Device for Memo/Dictation Purposes				
		Use of recording device (e.g., Standard Digital Recorder, Laptop/Tablet, etc.) to capture personal memos regarding patient				Eliminated in Round 1

	Category	Round 1	Round 2	Round 3	Round 4	Result
		interaction, which can then be reviewed for charting purposes (once reviewed and effectively documented, memo recordings/dictations will be destroyed).				
20	Adaptive Equipment		Access to Stool/Chair in Sterile Environments			
			Student requires ability to periodically sit or stand within sterile environments and requires access to a stool/chair while maintaining the sterile field. [DRP/University should discuss protocol with student for obtaining a stool/chair within sterile environments]			Approved in Round 2
21	Assistive Technology	Use of Large Monitor	Use of Adaptive Technology			
		Use of accessible workstation with large monitor to allow student ability to independently enhance the size of images, documents, and patient charts.	The student will require access to charting workstations equipped with adaptive technology. If a workstation with adaptive technology is not available in the clinical team's workroom, the student should not be separated from the rest of the team for the purposes of their accessibility. [DRP/University should include device specifics (e.g., large monitor, ergonomic keyboard/mouse, etc.).]	Charting workstations must be equipped with the following adaptive technology(ies);[List specific adaptive technologies]. [DRP/University should include device specifics (e.g., large monitor, ergonomic keyboard/mouse, etc.). DRP/University must also discuss a process of inclusion for the students in the event a workstation with adaptive technology is not available in the clinical team's workroom (e.g., how to obtain the appropriate equipment, other locations the team may be moved to for group work/discussion, etc.), as the student should not be separated from the rest of the team for the purposes of their accessibility.]		Approved in Round 3

	Category	Round 1	Round 2	Round 3	Round 4	Result
22	Assistive Technology	Assistive Technology for Magnification Purposes				
		Student will use a portable magnifier, or the screen magnifier of a laptop/tablet for visual enhancement purposes.	The student will utilize a HIPAA compliant portable electronic magnifying device for visual enhancement purposes. [DRP/University should include specifics about the magnification technology and features required, which may include an option for the student to utilize their own accessible device (e.g., tablet/phone magnification applications, digital magnifier, etc.)]			Approved in Round 2
3	Assistive Technology	Use of Laptop/Tablet with Accessibility Features for Documentation Purposes				
		Provision/access to the use of a laptop/tablet with accessibility features for the purpose of documenting patient/client interactions.	The student will require the use of a laptop/tablet with accessibility features for the purpose of documenting patient/client interactions. In the event required accessibility features are not present or cannot be added, appropriate and effective alternatives should be provided. [DRP/University should include specifics about the accessibility software and features required, which may include an option for the student to utilize their own accessible device]			Approved in Round 2
24	Assistive Technology	Use of Screen Reader				
		Use of screen reader software (e.g., NVDA or Jaws) compatible with clinic site's EHR/EMR system.	Student will utilize screen reader software to access and complete reading-based clinical activities/duties.			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
			[DRP/University should identify and implement screen reader software compatible with the clinic site's secure systems.]			
25	Assistive Technology	Speech-to-Text Dictation Software for Charting/Noting Purposes				
		Dictation software (e.g., Dragon Medical One) will be used for dictating notes/charting purposes. Appropriate access to documentation stations equipped with dictation software will be necessary.	Student will utilize dictation software for notes/charting purposes, and must have access to charting stations equipped with dictation software. [DRP/University should identify/implement compatible dictation software.]			Approved in Round 2
26	Assistive Technology	Direct Access to Disability-Monitoring Device	Direct Access to Monitoring Device			
		Student must have direct access to disability-monitoring device at all times. For many learners, disability-management is made possible through the use of a smartphone/device. In instances technology must be kept separate from the student (e.g., during surgical procedures), an effective process must be developed to ensure the student receives immediate updates/alerts regarding condition management/needs.	The student must have direct access to condition-related monitoring device(s) at all times. In instances where technology must be kept separate from the student (e.g., during surgical procedures), an effective process must be developed to ensure the student receives immediate updates/alerts regarding condition management/needs in a discrete manner. [DRP/University should include device specifics (e.g., smartphone, insulin pump, etc.). Monitoring device may require the use of smartphone in airplane mode with wifi/bluetooth enabled technologies.]			Approved in Round 2
27	Assistive Technology	Use of Headphones While Accessing Digital Materials	Use of Headphones/Earbuds While Accessing Digital Materials			

	Category	Round 1	Round 2	Round 3	Round 4	Result
		Student will use either Bluetooth or corded headphones while navigating digital platforms in order to effectively utilize screen reader/text-to-speech software.	Student will utilize either wireless or corded headphones/earbuds while navigating digital platforms in order to access screen reader/text-to-speech software.			Approved in Round 2
28	Assistive Technology	Use of Text-to-Speech				
		Text-to-speech software is used as a means to providing an audio version of written electronic text.	Student will utilize text-to-speech software to access electronic text. [DRP/University should identify and implement text-to-speech software compatible with the clinic site's secure systems.]			Approved in Round 2
29	Assistive Technology	Use of Recording Device During Patient Interactions				
		Learner may record conversations (formal and informal) & meetings. Assistive Technology and process of regarding protection of patient information must be discussed prior to implementation -to be used when cleared by the site	Student will utilize HIPAA compliant recording device during patient interactions in order to effectively capture necessary patient information required for charting. Recording device will be encrypted and secured within site-identified location, all recordings will be deleted at the conclusion of each clinical shift. [DRP/University should include device specifics and security protocols.]			Approved in Round 2
30	Assistive Technology	Use of Adaptive Otoscope				
		Student will use adaptive Otoscope with fiber optic camera for patient evaluation/examination.	The student will utilize an adaptive Otoscope with a fiberoptic camera for patient evaluation/examination.			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result	
31	Communication Access	Use of Assistive Listening Device					
		Student will require the ability to utilize an assistive listening device (FM System, Pocket Talker, Roger Pen, etc. - insert tech specifics). To facilitate clear audio, primary speakers will be asked to wear a lapel microphone which will transmit directly to the student's personal device. Please do not move or tap the microphone while speaking.	Student will utilize an assistive listening device (FM System, Pocket Talker, Roger On iN, etc.) to facilitate clear audio. Primary speakers will be asked to wear a lapel microphone which will transmit directly to the student's personal device.	Will require the primary speaker (e.g., attending, resident, patient, etc.) to wear or be within close proximity to a lapel microphone, which will transmit audio directly to the student's personal device. [DRP/University should specify what listening device (FM System, Pocket Talker, Roger On iN, etc.) will be used and provide guidance to clinical teams]		Approved in Round 3	
32	Communication Access	Transcripts of all Media-Based Course Materials	Transcripts of all Media-Based Materials				
		Transcripts should be provided for all pre-recorded videos, including recorded lectures, podcasts/vodcasts, and previously recorded media must be personally or professionally before posting or sharing with participants.	Transcripts should be provided for all pre-recorded videos, including recorded lectures, podcasts/vodcasts, and previously recorded media. Media materials used throughout clinical instructional activity must be accurately transcribed before posting or sharing with participants. [DRP must discuss transcription protocol and accuracy requirements with clinical leadership]			Approved in Round 2	
33	Communication Access	Remote CART	Use of Remote Communication Access Real-Time Translation (CART)				
		Student will utilize remote CART services during clinical rotations. To ensure effective translation, student will utilize both an electronic tablet (to review captions) and Bluetooth mic, which should be worn by (or be with direct proximity of) the	The student will utilize remote CART services during clinical rotations. To ensure effective translation, the student will utilize both an electronic tablet (to review captions) and a Bluetooth mic, which should be worn by (or be in direct proximity of) the presenter. CART			Approved in Round 2	

	Category	Round 1	Round 2	Round 3	Round 4	Result
		presenter. CART providers have been vetted and cleared through University procedures and are held to the same confidentiality and privacy standards as the student.	providers have been vetted and cleared through University procedures and are held to the same confidentiality and privacy standards as the student.			
34	Communication Access	In-Person CART	Use of In-Person Communication Access Real-Time Translation (CART)			
		The student will utilize in person CART services during clinical rotations. All CART providers have completed the necessary trainings and on-boarding requirements for[insert health system/school] to facilitate access in clinical environments.	The student will utilize in-person CART services during clinical rotations, which will necessitate the use of a personal electronic device for display of captions. All CART providers have completed the necessary training and onboarding requirements for[insert health system/school] to facilitate access in clinical environments.			Approved in Round 2
35	Communication Access	ASL Interpreters (remote/in person)	Access to American Sign Language (ASL) Interpreters			
		For the purpose of communication access, a Sign Language Interpreter will be present in the clinical environment (interpreting services will be arranged by Disability Resources). Physical environment must allow for a clear line of vision between the student, interpreter, clinical instructor/patient, and any presented materials. For any questions or concerns related to the presence of sign language interpreters, please contact Disability Resources. Sign Language Interpreters have been vetted and cleared through University procedures and are held	An ASL Interpreter will be present in the clinical environment, arranged through Disability Resources. The physical setup should allow a clear line of sight between the student, interpreter, clinical instructor/patient, and any materials presented. Sign Language Interpreters are vetted and cleared through university procedures and adhere to the same confidentiality and privacy standards as the student. [DRP/University to clarify whether interpreters will be in-person or virtual and ensure appropriate set-up of service]			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		to the same confidentiality and privacy standards as the student.				
36	Communication Access	Rounding in Reduced Distraction Space	Rounding in Quiet Location			
		The student's accommodations are rooted in the need for communication access. Whenever possible, it is helpful to round or provide clinical instruction in patient rooms or conference spaces rather than hallways to eliminate ambient background noise that may interfere with the student's ability to capture content.	Unless addressing an urgent concern, clinical instruction and rounds should take place in a quiet space (e.g., patient room, conference space), rather than hallways or other busy spaces.			Approved in Round 2
37	Communication Access	Vibrating Text-Based Pager	Provision of Vibrating Text-Based Pager			
		Student requires specialized pager that does not require use of a phone	University will provide student a vibrating text-based pager device.			Approved in Round 2
38	Communication Access	Use of Microphone During Didactic Lectures	Use of Microphone During Lecture-Based Clinical Activities			
		To facilitate effective audio access, speakers (including those asking questions or making comments) should use a microphone.	To facilitate effective audio access, use of a microphone is required for all speakers during lecture-based clinical activities, including individuals asking questions or making comments.			Approved in Round 2
39	Communication Access	Closed Captioning of all Media-Based Course Materials	Closed Captioning of all Media-Based Materials			
		All pre-recorded videos, including recorded lectures, podcasts/vodcasts, and previously	All pre-recorded videos, including recorded lectures, podcasts/vodcasts, and previously recorded media used in			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		recorded media must be personally or professionally (not auto) captioned before posting or sharing with participants.	clinical instructional activity, must be accurately captioned before posting or sharing with participants. [DRP/University must discuss captioning protocol and accuracy requirements with clinical leadership]			
40	Communication Access	Advanced Provision of Presented Material				
		The student will require any presentation materials, including handouts, in advance (24-hour min). These documents aid the speed and accuracy of real time transcription.	All presentation materials (PowerPoint slides and other visual materials), including handouts, must be provided to the student in advance (24-hour minimum).			Approved in Round 2
41	Communication Access	Clear Face Mask				
		When possible and appropriate, clear masks should be utilized by individuals interacting with the student to allow for lip reading and facial referencing during communication. These will be provided by the institution to the student for distribution. The masks are FDA cleared (CLASS II) and ASTM Level 3 – 432/CS	Clear masks - FDA-cleared (CLASS II) and ASTM Level 3 – 432/CS - should be utilized by individuals interacting with the student to allow for lip reading and facial referencing during communication. [DRP/University should work with the clinical site to determine distribution and access of clear masks]			Approved in Round 2
42	Communication Access	Video Phone, Video Relay Service, or IP Relay				
		Student will require access to an adaptive phone system to facilitate sign language, lip reading, or the ability to communicate via text.	Adaptive phone system (e.g., video phone, video relay service, or internet protocol relay) must be available on-site to perform phone-based clinical duties.			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result	
			[DRP/University should determine appropriate alternative phone system and coordinate with clinical site]				
43	Communication Access	Wait Time for Tech Set-Up					
		Assistive listening and communication devices may be needed in patient rooms in order to facilitate access to audio for the student. Please allow for set up prior to instruction in clinical settings. This should only take 1-2 minutes. Note: This does not apply to emergency provision of care.				Eliminated in Round 1	
44	Communication Access	Communication Access Memo					
		The student's accommodations are rooted in the need for communication access. In order to effectively promote communication access in lecture environments that rely heavily on verbal instruction, the following practices should be followed: <ul style="list-style-type: none"> - During rounding/group learning opportunities, participant questions should be communicated/repeated into a microphone to ensure content is captured within live captions. - Important updates, details, or information presented verbally should be verified with the learner for understanding. - At times, especially when learning occurs in large groups with excess 				Eliminated in Round 1 <i>(Information will be Included within the Clinical Accommodation Guide)</i>	

	Category	Round 1	Round 2	Round 3	Round 4	Result
		background noise, some guidelines/key points should be reinforced in writing.				
45	Communication Access	Use of Induction Loop System				
		The student will utilize an induction loop system which magnetically transfers sound signals directly to the student's hearing aids or cochlear implants. This technology requires the ability to enable Bluetooth and access Wifi.				Eliminated in Round 1
46	Communication Access	Communication Tip Sheet				
		The student's accommodations are rooted in the need for communication access. Attached to the student's accommodation letter you will find a communication tip sheet to aid the team in developing mechanisms for effective communication in clinical spaces when working with deaf and hard of hearing trainees.				Eliminated in Round 1 <i>(Information will be Included within the Clinical Accommodation Guide)</i>
47	Communication Access	Verbal Instructions in Writing				
		Student will require the ability to transcribe verbal information and directives in writing and confirm accuracy of the information captured.				Eliminated in Round 1
48	Communication Access	Use of Automatic Live Captioning During Didactic Sessions.				

	Category	Round 1	Round 2	Round 3	Round 4	Result
		For face-to-face and virtual lectures, instructors should utilize live automatic captioning through mechanisms, such as Zoom Captioning, Automatic Captions or Subtitles in PowerPoint, Google Slide Captioning, etc. These programs are utilized for captioning purposes only - no recording of conversation or storage of transcripts will occur. To ensure effective translation, student will utilize both an electronic tablet (to review captions) and Bluetooth mic, which should be worn by (or be with direct proximity of) the presenter.				Eliminated in Round 1
49	Location	Physically Accessible Clinical/Fieldwork Site	Physically Accessible Clinical Site			
		Clinical/Fieldwork site (specifically, spaces in which the student will be conducting work and providing patient/client care) must be physically accessible and in compliance with Americans with Disabilities Act (ADA) 2010 Design Standards. Examples of accessible attributes detailed within the design standards include the following: accessible building entryways (ground-level entrance or ramp when stairs present); accessible hallways/pathways (36 width), room entrances/turn diameter (32 width/60 turn diameter); accessible or adaptable furniture (e.g., tables, desks, workstations, etc.);	Student requires physically accessible clinical site. In advance of assigning clerkships, the DS provider will meet with the clinical coordinator to determine site accessibility and make recommendations for excluding non-accessible sites from the selection process.	Student requires physically accessible clinical site(s). [DRP/University will communicate specific needs for physical accessibility needs with clinical leadership and determine site accessibility to then make recommendations for excluding non-accessible sites from the selection process.]	Student requires physically accessible clinical site(s), which should include[list specific requirements based on student need]. [DRP/University will communicate specific needs for physical accessibility with clinical leadership and determine site accessibility to then make recommendations for excluding non-accessible sites from the selection process.]	Approved in Round 4

	Category	Round 1	Round 2	Round 3	Round 4	Result
		accessible restroom entrances and stalls; available accessible parking associated with the fieldwork/clinical site; and accessible call rooms. In the rare event no such site exists, Disability Resources should be contacted to engage in a process of determining reasonable alternatives.				
50	Location	Priority Assignment/Placement for Clinical Experiences				
		Given the nature of student needs, priority assignment/placement may be necessary to allow for appropriate identification of sites with the capacity to effectively meet the student's accommodations.	Student requires priority assignment/placement to allow for appropriate identification of accessible sites in conversation with site directors and Disability Resources.	Student requires priority clinical assignment, to be initiated in advance of the standard lottery placement process. [DRP/University should work in collaboration with the student and clinical leadership to communicate specific accommodation/access-related needs in order to identify accessible clinical sites.]		Approved in Round 3
51	Location	Clinical Site Exclusion				
		Due to a disability-related conflict of interest, student should not be placed at specific sites/locations. Sites/Location to be excluded from the placement process are listed as an appendix to the letter of accommodation.	The following sites/locations must be excluded from the clinical placement lottery process: [DRP/University should list specific sites to be excluded and associated follow-up conversation with placement coordinator]			Approved in Round 2
52	Location	Pre-Exposure to Clinical/Fieldwork Site				
		Due to the nature of the student's disability, an opportunity to review	Pre-exposure to assigned clinical site should be permitted sufficiently in			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		clinical/fieldwork sites in advance of their scheduled start date is required. This experience allows the student to orient to the site, familiarize themselves with the environment, and identify any potential disability-related access barriers. In the event a disability-related access barrier is identified, student should communicate with Disability Resources as soon as possible to explore additional accommodation-related needs and options.	advance for student to orient to the site, familiarize themselves with the environment, and identify any potential disability-related access barriers that may require additional accommodations.			
53	Location	Clinical Placement Proximity/Access to Transit	Clinical Placement Proximity/Access to Transit			
		Student will require the exclusion of clinical placements outside a specific distance from the School of Medicine. If the clinical placement is to be considered outside defined parameters, confirmation of available accessible public transportation (that is available during their clinical shift hours) must be verified in advance. Specific placement parameters to be listed as an appendix to the accommodation letter.	The student will require clinical placements within[a defined placement parameter] from the School of Medicine. For placements outside this area, accessible public transportation that operates during the student's clinical shift hours must be confirmed in advance.			Approved in Round 2
54	Individualized Adjustment/Need	Limited Adjustment to Attendance Expectations/Policies				
		Limited adjustment to attendance expectations/policies is needed for occasional, periodic academic	Student requires limited adjustment to attendance expectations/policies.	Student requires limited adjustment to attendance expectations/policies for pre scheduled and unexpected absences.		Approved in Round 3

	Category	Round 1	Round 2	Round 3	Round 4	Result
		<p>interruptions that impact the student's ability to participate in or attend clinical activity due to their disability. This accommodation is intended to build in a limited amount of flexibility with attendance policies, when reasonable, to address the impact of periodic flare ups. It is not designed to comprehensively address or fully support a student who misses or is unable to participate for extended periods of time. Student should contact their clinical director/instructor ahead of the absence or within 48-hours after the absence. Clinical Director/Instructor should communicate expectations to student regarding how student should notify of absence, how to obtain information from missed clinical work/activity, and other relevant information needed for implementation of this accommodation. Should the degree to which the student is absent cause the program to believe they are no longer meeting essential clinical requirements/outcomes/competencies, they are encouraged to communicate with Disability Resources (disabilityresources@wustl.edu). If there are any questions about this accommodation, please contact Disability Resources.</p>	<p>[DRP/University should establish frequency of absence-related needs and communication expectations. DRP should review accommodation implementation details with student/clinical leads (e.g., standard attendance expectations, amount of clinical hours that can be missed without compromising essential elements/competency attainment, when/how should absences be communicated, how clinical hours can be made up)]</p>	<p>[DRP/University should establish frequency of absence-related needs and communication expectations surrounding both planned and unplanned absences. DRP should review accommodation implementation details with student/clinical leads (e.g., standard attendance expectations, amount of clinical hours that can be missed without compromising essential elements/competency attainment, when/how absences should be communicated, how clinical hours can be made up). DRP/University should also discuss protocol for addressing extended periods of absences, which would necessitate alternate measures (leave of absence, repeat of clinical experience, etc.)]</p>		
55	Individualized Adjustment/Need	Avoid Exposure to Equipment/Devices				

	Category	Round 1	Round 2	Round 3	Round 4	Result
		Student must not be put in environments using specific medical devices/equipment (e.g., X-Ray, MRI, etc.)	The student must not be put in environments requiring the use of the following medical devices/equipment: [DRP/University must identify specific environments/equipment student must avoid (X-Ray, MRI, etc.)]	The student must not be put in environments requiring the use of the following medical devices/equipment:[List specific environments/equipment] [DRP/University must identify specific environments/equipment student must avoid (X-Ray, MRI, etc.) and additional considerations (e.g., distance from devices, protocol of communication when student must excuse themselves to avoid exposure, etc.)]		Approved in Round 3
56	Individualized Adjustment/Need	Access to Food/Drink				
		Access to snack/drink in clinical setting allows student to bring and consume quiet snacks/drinks into the environment. Snacks/drinks should be non-disruptive (e.g. Gatorade, banana). Snacks are limited to typical snack size and not full meals. In a clinical setting where food/drink is typically not allowed, a plan should be discussed with the student regarding where food/drink can be safely stored/accessed when necessary.	Student requires periodic access to non-disruptive food/drink within the clinical setting. In a sterile or other clinical setting where food/drink is typically not allowed, the student should be given a safe place to store their food/drink where it may be quickly and easily accessed.			Approved in Round 2
57	Individualized Adjustment/Need	Additional Time to Complete Patient Notes				
		Student may need time outside of standard clinical/fieldwork hours to complete patient notes. This may entail a need for the student to have access to the placement setting	Student requires additional time outside of clinical hours to complete patient notes. [DRP/University should determine and specify method of providing extended			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		before or after assigned hours to utilize private, on-site records. If available, access to patient records through use of a secure virtual private network (VPN) during evening hours may be needed for the student to complete notes within a reasonable time frame aligned with required productivity standards.	access (e.g., access to the clinical site before or after assigned hours, access to patient records through the use of a secure virtual private network (VPN) on an approved personal device, etc.)]			
58	Individualized Adjustment/Need	Assistance with Manual/Physical Tasks and Maneuvers				
		Student requires assistance performing clinical tasks involving the act of lifting, pulling, pushing, and/or carrying items over a certain weight (please review notes listed below). To develop an understanding of general physical tasks, students with weight restrictions should connect with their Clerkship/Fieldwork Directors and Coordinators to discuss the nature of the clinical environment prior to the start of clinical/fieldwork activity to determine if any specific location may be best suited for their needs (Disability Resources can be present to facilitate these discussions). As a reminder, the need for assistance, while potentially promoting adjustment to standard methods of practice, does not waive or remove a student's responsibility to perform essential clinical/fieldwork duties.	Student requires assistance performing clinical tasks involving the act of lifting, pulling, pushing, and/or carrying items over["X amount of weight"]. [DRP/University will clarify specific physical restrictions with student and discuss implementation with clinical site.]			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
59	Individualized Adjustment/ Need	Use of Specialized Personal Protective Equipment	Use of Additional Personal Protective Equipment (PPE)			
		Student will utilize enhanced or modified personal protective equipment during patient interactions/procedures. Examples of adjustments could include double masking/gloving, provision of facial shield/cloth mask in lieu of N95 mask, or use of clear facemask. Specific PPE adjustments to be listed as an appendix to the accommodation letter.	Student requires the following enhanced/additional personal protective equipment during patient interactions/procedures:[List specific PPE and associated clinical activity for which PPE is needed]			Approved in Round 2
60	Individualized Adjustment/ Need	Patient Exemption	Patient Assignment Exemption			
		Student must be exempt from caring for patients with specific confirmed diagnoses - Examples of exemptions may include patients diagnosed with Cystic Fibrosis, TB, etc.	Student is exempt from caring for patients with specific confirmed or suspected diagnosis of[insert specific diagnosis (e.g., Cystic Fibrosis, Tuberculosis, etc.)]			Approved in Round 2
61	Individualized Adjustment/ Need	Student will be Accompanied by Service Animal	Service Animal Notice			
		This student has engaged in a voluntary interactive process with University's Disability Resources office to disclose they will be accompanied by a Service Animal. A Service Animal is a dog specifically trained to do work or perform tasks necessary for an individual with a disability ("handler"). Specific to the clinical	Student will be accompanied by a service animal - an animal trained to perform specific tasks related to the student's disability and will remain under the student's control at all times. [DRP/University will review each environment, address any advance preparations that may be necessary to ensure the health and safety of others, and identify any environments where			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result	
		environments, it is understandable that advance preparations may be necessary to ensure the health and safety of others. To preemptively address concerns and make arrangements for the learner and their animal, please consult with Disability Resources as soon as possible.	the animal may not be permitted (e.g., sterile environments, etc.). For environments in which the service animal is not permitted, alternative accommodations will need to be explored and implemented.]				
62	Individualized Adjustment/Need	Use of Non-Latex Gloves/Products					
		Non-latex gloves should be provided/available within clinical environments requiring the use of gloves.	Non-latex gloves should be provided/available within clinical environments when gloves are required.			Approved in Round 2	
63	Individualized Adjustment/Need	Uninterrupted Patient Information Presentation					
		Learner will utilize an uninterrupted style of presentation when presenting patient information. Questions and/or comments should come after, not during, the presentation of patient information.	Student requires uninterrupted style of patient presentation. Attending questions and/or comments should come after, not during, the presentation of patient information.			Approved in Round 2	
64	Individualized Adjustment/Need	Use of Simulation Lab for Assessment of Skill/Procedure Demonstration					
		Predetermined procedures/skills will be demonstrated and assessed within a simulated setting. After thorough review and evaluation, involving necessary medical education administrators, it has been determined reasonable for the	The following predetermined procedures/skills have been identified as suitable for simulated assessment and should be demonstrated/evaluated in a controlled, simulated environment (in lieu of direct patient interaction):			Approved in Round 2	

	Category	Round 1	Round 2	Round 3	Round 4	Result
		specific skills/procedures to be assessed within a simulated environment. Skills/procedures to be listed as an appendix to the accommodation letter.	[DRP/University to identify and outline specific skills/procedures].			
65	Individualized Adjustment/Need	Assistance with Gowning/Gloving				
		Student requires assistance with gowning and gloving procedures. A developed procedure regarding necessary sterilization practices and an effective gowning/gloving protocol should be discussed with the student at the start of each clerkship rotation that entails gowning/gloving procedures.	The student requires assistance with gowning and gloving procedures. A developed procedure regarding necessary sterilization practices and an effective gowning/gloving protocol is available here: [DRP/University should provide specific protocol information]			Approved in Round 2
66	Individualized Adjustment/Need	Enlarged Font on Printed Handouts/Documents				
		Any hard copy/printed documents should be provided in an enlarged format in the event documents are not available digitally.	Any hard copy/printed documents should be provided in an enlarged format. [DRP/University should indicate required font size based on individual student need]			Approved in Round 2
67	Individualized Adjustment/Need	Notice - Use of Personal Mobility Device				
		Student will use a personal mobility device (e.g., Wheelchair, Scooter, Segway, etc.). Specific to the clinical environments, it is understandable that advance preparations may be	Student will utilize a personal mobility device. [DRP/University should specify which device will be used (e.g., manual/power wheelchair, scooter, Segway, etc.)]			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		necessary to ensure the environment is suitable and accessible. To preemptively address concerns and make arrangements, Disability Resources will consult with appropriate administration.				
68	Individualized Adjustment/Need	Sit or Stand, When Necessary				
		Student may need to periodically sit or stand during clinical activity to address disability-related needs. In addition, access to a stool/chair may be necessary during patient/client interactions.	Student requires ability to periodically sit or stand during clinical activities. Student should be permitted to utilize a stool/chair as needed.[DRP/University should discuss protocol with student for obtaining a stool/chair within sterile environments]			Approved in Round 2
69	Individualized Adjustment/Need	Advanced Notice of Assigned Patients/Records				
		Student should have access to patient schedule/records at least 1 day prior to patient interaction.	Student requires ability to arrive early for shift to review patient/chart information. When students are not permitted/able to arrive prior to clinic opening, alternative options should be implemented (e.g., allowing student to remain after their completed shift to review patient assignments/information for the next day, remote access to patient assignments, etc.). [DRP/University should include scheduling/access specifics]			Approved in Round 2
70	Individualized Adjustment/Need	Quiet Private/Semi-Private Location for Breaks	Quiet Private Location for Breaks			

	Category	Round 1	Round 2	Round 3	Round 4	Result
		Student will require the use of a private or semi-private location to address disability-related needs. Call rooms or administrative office locations may be appropriate, based on the nature of the clinical setting. If no identifiable location exists, please contact Disability Resources for further review of options/alternatives.	Student requires access to a private location for disability-related management purposes. Call rooms or administrative office locations may be appropriate, based on the nature of the clinical setting. [DRP/University should engage with the site to determine and clarify appropriate spaces]			Approved in Round 2
71	Individualized Adjustment/Need	Access to Disability-Related Supplies				
		Ability to have a small pack/bag and secure location/space in order to store disability-related items during shift.	Student requires proximate and unfettered access to disability-related supplies in a secure location. [DRP/University indicate any needs related to type of location and supply storage needs (e.g., refrigeration, etc.)]			Approved in Round 2
72	Individualized Adjustment/Need	Use of Sterile Cast/Brace Covering				
		Covering for cast/brace should be provided to ensure sterility within procedural environment. Specific covering needs to be listed as an appendix to the accommodation letter.	Student requires covering for cast/brace within environments requiring sterility. [DRP/University should indicate specific covering needs and responsible party for provision]			Approved in Round 2
73	Individualized Adjustment/Need	Allowance of Momentary Pause During Rounding Question/Answer				
		In the process of bedside teaching/rounding and questioning, allow flexibility for learner to pause	Student requires a brief pause[insert specific range of time (e.g., "5-10 seconds")] before communicating their			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		briefly when responding in communication about patients and procedures. Momentary pauses should consist of 2-4 seconds of wait time before necessitating response from the student.	response during rounding/bedside teaching.			
74	Individualized Adjustment/Need	Use of Scribe				
		Student will utilize a medical scribe to document patient-physician interactions in real time/assist student with administrative tasks. If a scribe is not available, equal alternatives must be implemented, which may include identifying back-up personnel who may be present to assist with tasks defined above, assistive technology, or limited flexibility with timeframes for charting completion. To ensure alternative is equal/reasonable, Disability Resources should be consulted for guidance.	Student requires a medical scribe to document patient-physician interactions in real-time and to record pertinent information into the patient medical record.			Approved in Round 2
75	Individualized Adjustment/Need	Adjustments in Standardized/Typical Apparel				
		Adjustments in standardized/typical apparel is necessary to ensure appropriate disability-related condition management. Specific Apparel may vary based on disability-related need, but could include the use of a small brimmed visor/hat, tinted eyewear (either	Student requires an exception to the standard dress code policy. [DRP/University must provide specific exceptions (e.g., the use of a small-brimmed visor/hat, tinted eyewear, custom footwear/orthopedic shoes, or specified sizing for scrub tops/bottoms).]			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		standard or full coverage lenses), custom footwear/orthopedic shoes, or specified sizing for scrub tops/bottoms. Specific apparel items to be listed as an appendix to the accommodation letter.				
76	Individualized Adjustment/Need	Use of Qualified Intermediary/Assistant for Patient-Related Interactions	Use of Qualified Intermediary			
		Student requires the use of a qualified intermediary/assistant to provide support on non-competency bearing patient-related skills/tasks, such as assisting with patient positioning/maneuvers during examinations. Disability Resources will engage with necessary medical education administrators to determine specific and reasonable intermediary-based assistance to be provided, which is listed as an appendix to the accommodation letter.	The student will be accompanied by a qualified intermediary/assistant, who will provide support on non-competency-bearing clinical duties (e.g., assisting with patient positioning/maneuvers during examinations, obtaining supplies, etc.). All intermediaries/assistants have completed the necessary training and onboarding requirements for [insert health system/school] to facilitate access in clinical environments. [DRP/University should identify and provide examples of what skills/tasks intermediary will/will not provide support/assistance for.]			Approved in Round 2
77	Individualized Adjustment/Need	Use of Qualified Intermediary/Assistant for Administrative Purposes				
		Student requires the use a qualified intermediary/assistant to provide support on non-competency bearing skills/tasks. Examples of tasks may vary, but could include assistance with administrative tasks, obtaining supplies, providing visual				Eliminated in Round 1

	Category	Round 1	Round 2	Round 3	Round 4	Result	
		<p>descriptions of inaccessible materials (for which technology may be an insufficient means to access), etc.</p> <p>Disability Resources will engage with necessary medical education administrators to determine specific and reasonable intermediary-based assistance to be provided, which is listed as an appendix to the accommodation letter.</p>					
78	Individualized Adjustment/Need	Priority Placement for Rotations Involving Surgical Procedures					
		<p>Priority placement is necessary to allow for appropriate identification of sites (specifically associated with surgical procedures) with the capacity to effectively meet the student's needs. Examples of needs may vary, but could include scheduling the student at a site with appropriate physical access, sites that perform surgical procedures that can be performed from a seated position, sites that perform shorter surgical procedures that are conducive to mitigating the need for breaks, or sites that conduct surgical procedures that promote the ability to take breaks in a non-disruptive manner.</p> <p>Specific needs to be outlined in an appendix of the accommodation letter.</p>				Eliminated in Round 1	

	Category	Round 1	Round 2	Round 3	Round 4	Result	
79	Individualized Adjustment/ Need	Exposure to simulated clinical setting with standardized patient as a means to assess access-related needs					
		Allow student access to a simulated setting to work through a common clinical scenario, during which they can pause to record, discuss, refine, and explore potential access-barriers/disability-related needs.				Eliminated in Round 1	
80	Individualized Adjustment/ Need	Designated Practice Time in Skills/Simulation Center					
		Student should be allowed designated practice time within clinical skills simulation center in order to practice using adaptive medical equipment for specialized procedures.				Eliminated in Round 1	
81	Individualized Adjustment/ Need		Notes During Patient Presentation				
			Student requires access to their personal notes during patient presentation.			Approved in Round 2	
82	Scheduling	Periodic Breaks	Unscheduled Periodic Breaks				
		Student may need periodic breaks throughout daily rotation to address disability-related needs. In general, student may require short breaks (10-15 minutes) up to 4 times per day (number of breaks will vary based upon the nature of the clinical	Student may require brief breaks[insert duration (e.g., 5-10 minutes)] break up to[insert number of times per shift] in addition to any provided lunch break.	Student may require brief breaks[insert duration (e.g., 5-10 minutes)] break up to[insert number of times per shift] in addition to any provided lunch break. [DRP/University should establish frequency of potential breaks and review accommodation implementation		Approved in Round 3	

	Category	Round 1	Round 2	Round 3	Round 4	Result
		setting and hours worked). Given the chronic nature of the student's disability, they may not require the use of this accommodation every shift; however, during flares, student may require emergent, frequent breaks (aligned with the parameters detailed above). Student and Clinical Supervisor should discuss the implementation of breaks and what communication/notification is necessary in the event a break is needed to ensure breaks do not interfere with patient care/safety or other essential clinical obligations.		details with student/clinical leads. DRP/University should also discuss protocol for addressing extended breaks that impact consistency of patient care, which would necessitate alternate measures (e.g., absences in lieu of breaks, leave of absence/repeat of clinical experience in the event significance of frequency infringes upon student learning/competency attainment, etc.)]		
83	Scheduling	Pre-Scheduled Periodic Breaks	Pre-Scheduled Breaks			
		Student may need periodic breaks throughout daily rotation to address disability-related needs. In general, student will need pre-arranged 5–10-minute breaks in addition to standard mid-day/lunch breaks - not to exceed twice per day. Student and Clinical Supervisor should discuss the implementation of breaks, productivity expectations/standards, and what communication/notification is necessary in the event a break is needed.	Student Requires a[insert duration (e.g., 5-10 minutes)] break every[insert frequency (e.g., 2-hours)].[DRP/University should include specific break needs for each clinical rotation and indicate if these breaks are in addition to any provided lunch break]			Approved in Round 2
84	Scheduling	Rotation Schedule Continuity				
		Student requires consistency with clinical schedule to allow for	The student requires a consistent clinical schedule. When the clinical			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		appropriate management of disability-related needs, which must adhere to pre-determined schedule. In the event clerkship hours will entail an 8-12-hour adjustment within a specific setting, student must be provided with “x number of days” of transitional time in preparation to address disability-related management needs. The specific manner in which the consistency of a clerkship block is delivered is dependent on the nature of the rotation. Disability Resources will engage with the administrative team of each clerkship block to discuss the essential elements and design of the specialty-specific clinical experience and explore appropriate and reasonable options for decompression.	rotation requires a schedule change of an 8-12-hour difference (e.g., day shift adjusting to night shift)[insert number of days] should be provided between shifts. [DRP/University should identify the specific manner in which the consistency of a clerkship block is delivered based on the nature of the rotation and needs of the student]			
85	Scheduling	Designated Off Hours				
		Student must be provided "X- Number of Hours" off in-between the conclusion and start of clinical shifts in order to adhere to appropriate disability-management.	Student requires[Insert number of hours/days] off between the conclusion and start of clinical shifts.			Approved in Round 2
86	Scheduling	Release Time for Disability-Related Appointments				
		Student requires release time to attend disability-related appointments. unless otherwise stated, disability-related	Student requires release time to attend disability-related appointments. [DRP/University should establish frequency of appointment needs and			Approved in Round 2

	Category	Round 1	Round 2	Round 3	Round 4	Result
		<p>appointments will occur once per week and last approximately one-hour (excluding transit time). Student should communicate any standing appointment at the beginning of the Clinical/Fieldwork experience. Any changes/revision to an appointment schedule should be communicated at least one week prior to appointment day/time (or as soon as possible). In some circumstances, additional notice may be necessary.</p>	<p>amount of time necessary for appointment leave (including transit time), communication expectations. DRP should review accommodation implementation details with student/clinical leads (e.g., when/how should standing appointments be communicated)]</p>			
87	Scheduling	Decompressed Clerkship Blocking				
		<p>Student requires a decompression of clerkship blocks, which will consist of an adjustment to the standard length of clinical rotation, allowing for shorter working days or fewer days worked each week. The specific manner in which the decompressed format of a clerkship block is delivered is dependent on the nature of the rotation. Disability Resources will engage with the administrative team of each clerkship block to discuss the essential elements and design of the specialty-specific clinical experience and explore appropriate and reasonable options for decompression.</p>	<p>Student requires a decompression of clerkship block, which will adjust the standard length of clinical rotations. [DRP/University should specify type of decompression schedule type (e.g. block on block off, less time per day over more days, more days off per week, etc) for each individual clerkship]</p>			<p>Approved in Round 2</p>
88	Scheduling	Exemption from Overnight Call/Shifts	Alternative to Overnight Call/Shifts			

	Category	Round 1	Round 2	Round 3	Round 4	Result
		Student requires clinical schedule to include no overnight call or shifts. Equivalent alternatives to overnight learning opportunities should be identified.	Student requires[insert identified alternatives] in lieu of overnight call/shifts. [DRP/University should specify appropriate/reasonable alternatives (e.g., working weekend/holiday shifts, early morning/late evening, etc.)]			Approved in Round 2
89	Scheduling	Priority Clerkship Order	Priority Clerkship Ordering			
		Student requires a specific sequence of clerkship ordering to be listed as an appendix to the accommodation letter.	Student requires the following sequence for clerkship ordering[insert necessary clerkship order/parameters]. [DRP/University must identify specific parameters (e.g., should not begin with an 8-week rotation, must/must not begin with "X" rotation, etc.)]			Approved in Round 2
90	Scheduling	Block On/Block Off Clerkship Cycle				
		Student requires a block on/block off clerkship cycle to address disability-related needs.				Eliminated in Round 1
91	Scheduling	Modified Break Schedule				
		Student may need adjustments of/modifications to predetermined break schedules. Specific modification to be listed as an appendix to the accommodation letter.				Eliminated in Round 1