



Safer Patients Better Care

Everyone should receive access to quality healthcare, regardless of mobility limitations. Having the right equipment and trained staff can make a huge difference in providing safe, quality care and improving patient outcomes.



36.5%
percentage of US adults who are obese¹



1/5
number of US adults with a disability²

Today, poor patient handling practices put patients and caregivers at risk for injury and lesser quality care.

77%

percentage of practice administrators who indicated their employees were trained to lift a patient³

4.8%

percentage of practices with a mechanical lift available to transfer patients³

57%

percentage of wheelchair users who did not attempt to ascend to a non-height adjustable exam table⁴

8.6%

percentage of provider sites with a height-adjustable exam chair⁵

44%

percentage of administrators who acknowledged that parts of an exam were skipped when a barrier was encountered³



Patients without a thorough exam risk:

Poorer quality care

Greater risk of misdiagnoses

Missed benefits of early detection

How can we help patients be safer during medical office visits without sacrificing quality care?

A recent study by Dr. Guy Fragala and colleagues (sponsored by Midmark), evaluated patient exertion, difficulty and safety for patients requiring various levels of assistance to sit on an exam chair or table.

Height-adjustable exam chair

Traditional fixed-height exam table (similar to those found in most clinics)



33.38
inches

18
inches

Patients needing minimal assistance experienced:

72%

reduction in exertion

64%

reduction in difficulty

42%

higher feeling of safety

when using a height-adjustable chair vs. a fixed-height table.⁴

“As new ambulatory clinics are built and renovations are done to existing clinics, the benefits of height-adjustable examination chairs needs to be recognized, and those making decisions on furnishings need to understand how height-adjustable exam chairs can add to the quality of care provided.”

Guy Fragala, PhD, PE, CSP, CSPHP

Read the full study by Dr. Fragala [online](#).

Sources:

¹ Obesity statistic: <https://www.cdc.gov/obesity/data/adult.html>; https://nccd.cdc.gov/NPAO_DTM/LocationSummary.aspx?statecode=94

² Disability statistic: <https://www.cdc.gov/ncbddd/disabilityandhealth/infographic-disability-impacts-all.html>

³ Reducing Risk: Fragala G. Reducing Occupational Risk to Ambulatory Caregivers. Workplace Health Saf. 2016 Sep;64(9):414-9. doi: 10.1177/2165079916642776. Epub 2016 May 12. PMID: 27174130

⁴ Benefits Achieved for Patients Through Application of Height-Adjustable Examination Tables: https://www.researchgate.net/publication/316834705_Benefits_Achieved_for_Patients_Through_Application_of_Height-Adjustable_Examination_Tables

⁵ Lagu T, Hannon NS, Rothberg MB, Wells AS, Green KL, Windom MO, et al. Access to subspecialty care for patients with mobility impairment: a survey. Ann Intern Med. 2013; 158:441-6

