Basic screening and the pelvic examinations
- Physicians caring for disabled women must perform pelvic examinations in a way that assures patient access, safety, and comfort.
- Adjustable tables that lower to the standard wheelchair height of 19 or 20 inches facilitate access for the examination.
- Handrails on either side of the table enhance safety and allow independent movement up or down the table.
- Alternative stirrups, particularly padded boot stirrups, increase comfort for women with limited range of motion of the lower extremities.
- An assistant should attend each examination and when necessary, manually support lower extremities, individually adjusting adduction/abduction and flexion/extension positioning.

Breast cancer screening
- Some patients wrongly believe that mammography can only be performed in a standing position.
- Physical limitations may impact the quality of the mammography image, limiting views to the anteroposterior dimension and restricting the ability to obtain lateral views.
- Access barriers such as high examination tables may limit a woman's ability to obtain regular clinical breast examination.
- Clinicians need to work closely with women to overcome obstacles in breast health care.
- Initiatives sponsored by the Center for Disease Control (CDC) and the Association of Professors for Gynecology and Obstetrics (APGO) have attempted to educate women's health care providers and improve access to mammography.

Pregnancy
- Most studies have found multiple sclerosis to have no effect on the course of pregnancy, labor, or delivery, including no change in the frequency of preterm labor, preterm rupture of membranes, or difficult delivery.
- It is recommended for clinicians to address the following topics with disabled women who plan to become pregnant:
  - Effects of their particular disability on pregnancy, labor, and delivery
  - Effects of pregnancy, labor, and delivery on their disability
  - Effects of medications on the fetus
  - Modifications of health that could enhance childbearing
  - Family adjustments for child care
  - Available community resources.
• Disabled women interviewed after pregnancy and delivery consistently advise health care professionals to respect the expertise the patient has acquired in the process of managing her disability
• Good prenatal care begins with a thorough history and physical examination and assessment of these issues. After that, physicians should address issues specific to the disabled population
• Despite legitimate obstetric concerns, physicians must reassure their disabled patients that together they can anticipate and overcome most obstetric problems through common-sense preventive measures
• The disabled patient needs extra reassurance from all obstetric staff that her pregnancy will most likely result in the normal, term delivery of a normal, healthy infant
• Many patients face an increased risk of unattended labor and delivery because of difficulties sensing contractions and other signs of labor. Strategies to prevent unattended birth in the disabled population include serial examinations complemented by education of the patient on ordinary signs of labor, early hospitalization, and the use of home uterine activity monitoring
  o Hospitalization is usually unnecessary, although it might be helpful for preventing unsupervised term delivery in the small subset of patients completely unable to sense contractions
  o HUAM, as with any kind of tocodynamometry that utilizes abdominal belts, can precipitate autonomic dysreflexia
• All patients and their families, regardless of disability, might benefit from a family meeting with their health care provider before delivery to anticipate common postpartum problems
• Resources on parenting with a disability or pregnancy among disabled women:
  o The Center for Research on Women with Disabilities
    Baylor College of Medicine
    http://www.bcm.edu/crowd
  o Americans with Disabilities Act: Questions and Answers
    http://www.ada.gov/q&aeng02.htm
  o Through the Looking Glass
    National Center for Parenting with a Disability
    http://lookingglass.org/index.php
  o The Initiative for Women with Disabilities
    NYU Langone Medical Center
    http://iwd.med.nyu.edu
  o The Center for Women With Disabilities