



# MGH Patient Accommodations Care Plan

For patients who are Autistic, on the Autism Spectrum, or with Intellectual/Developmental Disabilities

The MGH Patient Accommodations Care outlines how to best support and provide accommodations for you, your loved one or an individual under your care. Once completed, the care plan is placed in the electronic medical record where it can be easily viewed by providers and staff.

**Patient Name:** Click or tap here to enter text.

**Date of Birth:** Click or tap here to enter text.

**Name and relationship of person completing this questionnaire (if not patient):** Click or tap here to enter text.

## Communication

### Speech

- Verbal
- Minimally Verbal
- Non-verbal/Non-speaking

**Comment:** Click or tap here to enter text.

### Communication Partner Required

**A communication partner is a trusted support person who understands and facilitates the patient's communication. Select all that apply.**

- For functional interactions
- For medical interactions
- When requested by patient
- When patient is in pain, ill or anxious
- For interpretation of patient's unique mode of expression

**Comment:** Click or tap here to enter text.

### Self-Expression

**How do you/does this individual express a basic need, including hunger, thirst, need for bathroom or for comfort item? Select all that apply.**

- Verbal
- Vocal intonation
- Alternative and augmentative communication
- Other: Click or tap here to enter text.
- Gestures/Sign language
- Does not express basic needs
- Communication partner required

**How do you/does this individual initiate asking a question, clarify or confirm information? Select all that apply.**

- Verbal
- Vocal intonation
- Alternative and augmentative communication
- Other: Click or tap here to enter text.
- Gestures/Sign language
- Does not initiate questions, clarification and/or confirmation
- Communication partner required

**How do you/does this individual express yes or no? Select all that apply.**

- Verbal
- Vocal intonation
- Alternative and augmentative communication
- Gestures/Sign language
- Other/Comment: Click or tap here to enter text.
- Yes/no is understood in familiar context
- Yes/no is not consistent
- Does not express yes or no
- Communication partner required

**How do you/does this individual express a preference or choice? Select all that apply.**

- Verbal
- Vocal intonation
- Alternative and augmentative communication
- Other/Comment: Click or tap here to enter text.
- Gestures/Sign language
- Does not express a preference or choice
- Communication partner required

Comment: Click or tap here to enter text.

**Understanding and Learning**

**How do you/does this individual best understand and learn information and instructions? Select all that apply.**

- Verbal
- Alternative and augmentative communication
- Gestures/Sign language
- Touching/manipulating items
- Understands when given extra time to process what has been said
- Other: Click or tap here to enter text.
- Does not understand verbal information or instructions
- Does not understand written information or instructions
- Communication partner required

Comment: Click or tap here to enter text.

### Alternative and Augmentative Communication (AAC)

Do you/does this individual use any of the following to communicate, understand and/or learn? Select all that apply.

- Communication device
- Pictures/symbols/photographs
- Written or typed words
- Schedule boards (e.g. To-Do/Finished, First-Then)
- Does not typically use AAC, but use of visuals and demonstration in medical settings would be beneficial
- Does not have access to AAC, but use of visuals and demonstration in medical settings would be beneficial

Comment: Click or tap here to enter text.

### Communication Accommodations and Supports

Which of the following accommodations and care approaches would be important to support your/the individual's communication? Select all that apply.

- Confer with communication partner regarding patient's communication
- Display calm demeanor, and positive and relaxed body language
- Designate one staff person to communicate information in specific interactions
- Pause after giving information or directions for patient to process and make decisions
- Look for cues to determine whether the patient is ready to take the next step
- Be specific and concrete in interactions
- Use as few words as possible
- Use only simple terms
- Use the words "first" "then" and "finished" to communicate the sequence of medical steps and duration
- Other: Click or tap here to enter text.
- Offer choices to reduce anxiety and encourage cooperation
- Confirm choice by presenting in alternate order (e.g. would you like x or y; would you like y or x)
- Provide a general schedule that allows the patient to understand the steps and duration
- Use verbal and/or hand counting up or down to help the patient understand steps and/or duration of medical procedure or test
- Write a list steps to be taken and duration of medical procedure or test and review them with patient before and during procedure or test

Comment: Click or tap here to enter text.

# Pain

## Pain Communication

**How do you/does the individual communicate about pain? Select all that apply.**

- Verbally without additional supports
- Consistently when using preferred communication method (e.g. gesture, alternative and augmentative communication)
- Reports pain but is unable or inconsistent with describing pain or where pain is located
- Only when in severe pain
- Other: [Click or tap here to enter text.](#)
- Does not initiate communicating about pain and requires a verbal or visual prompt
- Contradictory non-verbal and/or verbal response to acknowledging or confirming pain (e.g. may shake head or say no while wincing)
- Does not communicate about pain, even when prompted verbally or with visuals

**Which of the following observable actions or behaviors may indicate that you are/the individual is in pain? Select all that apply.**

- Aggression toward self or others
- Attempts to reduce or replace pain sensation through alternative act on the body that is not necessarily consistent with the location of the pain sensation (e.g. Banging/hitting head when having GI pain)
- Subtle or strong pinching/grabbing body part that is painful
- Emergence of exaggerated repetitive actions (Describe: [Click or tap here to enter text.](#))
- Running/bolting
- Other: [Click or tap here to enter text.](#)
- Jumping/stomping/thrashing
- Movement of body in irregular motions/positions to make accommodations for discomfort
- Screaming/ Ingestion (e.g. overeating, fast pace of ingestion of drinks and foods, food avoidance, vomiting, mouthing inappropriate objects)
- Crying
- Withdraws
- Shutdown (e.g. no forward movement)

## Strategies to Determine the Current Pain Experience

**Which of the following strategies may help you/the individual communicate about pain? Select all that apply.**

- Use specific simple phrases that lead to yes/no response (e.g. "Does your hand hurt?")
- Pointing to written word(s)
- Visual pain scale
- Other: [Click or tap here to enter text.](#)
- Depiction of body for patient to point to
- Observation of changes to actions/behaviors (e.g. Non-communicating persons pain checklist)

Comment: [Click or tap here to enter text.](#)

## Safety and Comfort

### Stressors

Please select any of the following stressors that may cause you/this individual distress during healthcare visits.

#### Medical Setting Stressors

- Separation from trusted support person/caregiver
- Communication needs not being addressed
- Discomfort not being addressed (e.g. pain, anxiety, hunger, bathroom)
- Negative associations with hospitals/medical settings from past experiences
- Observing distress in others (e.g. babies crying)
- Waiting for long periods of time
- Highly populated areas
- Feeling rushed (e.g. with decision making, for any transition)
- Not knowing plan or unexpected change in plan
- More than one provider speaking at a time
- Too many providers/staff in the room
- Needles
- Restraint use
- Disruption in routine
- People in uniform
- Other: Click or tap here to enter text.

#### Sensory Stressors

- Loud, unexpected or repetitive noise
- Bright lights/Florescent lights
- Smells (Odd smells, medical smells)
- Being touched (Describe: Click or tap here to enter text. )
- Crowded places (busy hallway, crowded elevator or waiting room)
- Sticky or scratchy textures (band-aids, tape, hospital clothing or linens, ID band)
- Other: Click or tap here to enter text.

### Safety

Do you/Does the individual express pain, illness, or severe anxiety in ways that may impact patient and/or staff safety? Select all that apply.

- Aggression towards others
- Property destruction/throws objects
- Self-injurious behavior
- Verbal threats to harm self or others
- Bolting
- Other: Click or tap here to enter text.
- None
- Wandering
- PICA/Ingestion of non-food objects
- Intolerance for any perceived foreign material placed on the body (e.g. will remove tape, IV, sutures)
- Poor safety awareness

**Which of the following precursor signals indicate emotional elevation, dysregulation or pain? Select all that apply.**

- Agitated movements (e.g. pacing, tapping, hand wringing, jumping, body slamming)
- Emergence of exaggerated repetitive actions
- Agitated vocalizations (e.g. yelling, becomes loud, heightened or intensified tone of voice)
- Crying
- Severe anxiety
- Observable sympathetic nervous system response (e.g. Flushing of face/ears, breathing harder, sweating, dilation of pupils, grinding teeth, clenching of jaw)
- Withdraws
- Level of un-cooperation not typical of baseline
- Other: [Click or tap here to enter text.](#)

### **Safety Accommodations and Supports**

**Which of the following are important when you/the individual is distressed? Select all that apply.**

- Calm demeanor, and positive and relaxed body language will help reassure the patient
- Visuals or written forms of communication may be more effective when patient in pain, ill or anxious, as communication abilities deteriorate in these situations
- Take cues from caregiver/communication partner about how to proceed when patient in pain, ill or anxious
- Avoid traditional acts of physical comfort (e.g., Touching the patient's hand or shoulder, moving closer to patient) as may cause opposite response.
- Avoid common means of verbal reassurance (e.g. giving a 'pep talk', encouraging patient to take an alternate perspective) as these may be experienced as invalidating. Validating/directly recognizing the patient's experience may be more effective (e.g. "This is hard").
- If actions persist, pain could be the trigger and patient may not be able to self-regulate.
- Due to previous difficult experiences in medical settings, patient may present under duress even when there is no clear stressor

Comment: [Click or tap here to enter text.](#)

### **Comforts**

#### **Address Basic Needs**

- Trusted caregiver's presence provides the patient with a sense of safety and reduces anxiety
- Utilize individualized communication strategies to support the patient (see communication section)
- Offer preferred foods and drink as a source of comfort
- Ensure bathroom needs are addressed and patient/caregiver aware of bathroom location
- Prescribed PRN medication use may be helpful for proactively reducing medical-setting related anxiety
- Other: [Click or tap here to enter text.](#)

### **Destimulation & Sensory Strategies**

- If distressed, step away to provide patient space and time to calm
- Minimize number of staff present
- Reduce noise and/or visual overstimulation (e.g. pulling curtain, closing door, quiet/private space, lower or turn off monitors/alarms)
- Dim lighting
- Allow patient to walk or pace
- Fidgets/squeeze balls
- Warm blanket
- Heavy blanket(s) or weighted blanket
- Preferred music
- Rocking chair
- Other: Click or tap here to enter text.

### **Distraction**

- Provide diversion or distraction with: Click or tap here to enter text.
- Interests include: Click or tap here to enter text.
- Use humor and positive body language
- Other: Click or tap here to enter text.

## Healthcare Visit Accommodations

Below please find common healthcare tasks and possible accommodations that may help. Please note if accommodation needed and select any accommodations that may help improve healthcare access.

### Appointment Time or Waiting for Appointment to Begin

### Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Does not tolerate even with accommodations

Schedule for early appointment/procedure/surgery of the day to limit waiting or delays

Allow arrival time as close to appointment, procedure or surgery time as possible

Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

### Crowded Areas or Waiting Room

### Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Does not tolerate even with accommodations

Quiet/private entrance into office or hospital

Quiet/private space to wait

Allow patient to check-in and then exit waiting room (e.g. to pace in hallway) until ready to be seen

Reduced number of transitions (e.g. avoid waiting room and expedite to exam room or bay, intake)

Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Hospital Room and Stay

## Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Does not tolerate even with accommodations

Comment: Click or tap here to enter text.

- Single/private room
- Room/bay with door or located in quiet location
- Room/bay located near bathroom
- Dimmed lights
- Reduce noise from monitors
- Consistent direct care staff as possible
- Reduced number providers/staff present during rounds
- Consistent timeframe for rounds as possible
- Alternative call bell (call bell that can be squeeze to alert nurse)
- Offer distraction and comfort items (see Comfort section)
- Other: Click or tap here to enter text.

## Hospital Clothing and Linens

## Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Does not tolerate even with accommodations

Comment: Click or tap here to enter text.

- Allow patient to wear own clothing from home (patient/caregiver OK if clothing ruined, patient will wear metal free clothing)
- Allow patient to use preferred blanket from home
- Other: Click or tap here to enter text.

## ID Band on Wrist

## Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Does not tolerate even with accommodations

Comment: Click or tap here to enter text.

- Tolerates ID band around ankle over sock
- Tolerates ID band if loose end trimmed off
- If having procedure/surgery with sedation/anesthesia, place ID band on shoelace until asleep
- For procedure/surgery with sedation/anesthesia, allow caregiver to hold and apply once patient asleep
- Other: Click or tap here to enter text.

## Vital Signs

### Blood Pressure Cuff

- No accommodation needed
- Needs accommodation(s) and support
- Does not tolerate even with accommodations

### Probe on Finger to Measure Oxygen/Heart Rate

- No accommodation needed
- Needs accommodation(s) and support
- Does not tolerate even with accommodations

### Temperature Gauge Drawn Across Forehead

- No accommodation needed
- Needs accommodation(s) and support
- Does not tolerate even with accommodations

## Accommodations that may help

- Use manual blood pressure cuff instead of automatic to avoid repeated inflating or over-tight
- Tolerates blood pressure cuff better with barrier between cuff and skin (i.e. sleeve)
- Tolerates blood pressure cuff better with barrier between cuff and skin (i.e. sleeve)
- Will tolerate O2 probe clip but not sticker
- Strategically order vital signs based on patient preference (least aversive first vs. most aversive first)
- Take vitals on someone else first
- Distract the patient (see comfort section for specifics)
- Hide equipment until its use becomes necessary
- Avoid vital signs when patient sleeping if medically appropriate
- If having procedure/surgery with sedation/anesthesia, complete vitals once asleep
- Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Physical Exam

- No accommodation needed

- Needs accommodation(s) and support

- Does not tolerate even with accommodations

Bothersome parts of exam include:

- Stethoscope,  Eye test,  Ear test,  Belly exam,  Oral exam/opening mouth
- Other: Click or tap here to enter text.

## Accommodations that may help

- Order physical exam based on patient preference (offer least aversive first vs. most aversive first)
- Order physical exam from least to most invasive (e.g. ears, mouth and then eyes)
- Do parts of the exam on someone else first
- Touching/manipulating any instruments before they are used
- Hide instruments until their use becomes necessary
- Distract the patient from the examination (see comfort section for specifics)
- Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Needles

## Accommodations that may help

### Blood Draw

- No accommodation needed
- Needs accommodation(s) and support
- Does not tolerate even with accommodations

### IV

- No accommodation needed
- Needs accommodation(s) and support
- Does not tolerate even with accommodations

### Intra-muscular Injections (e.g. vaccines)

- No accommodation needed
- Needs accommodation(s) and support
- Does not tolerate even with accommodations

- Numbing cream or patch
- Small needle if possible (e.g. butterfly needle)
- Touching/manipulating appropriate equipment before it is used (i.e. touch rubber band, alcohol wipe)
- Hide equipment until its use becomes necessary
- Distract the patient (see comfort section for specifics)
- Take vitals on someone else first
- Distract the patient (see comfort section for specifics)
- Cover IV as soon as placed and keep covered until safe to remove
- Difficult venous access and may require ultrasound
- Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Items Touching Face/Nose (oxygen mask, nasal cannula)

## Accommodations that may help

- No accommodation needed

- Needs accommodation(s) and support

- Does not tolerate even with accommodations

- Less intrusive alternative to nasal cannula will be best tolerated
- Preferred scent applied inside mask
- Touching/manipulating equipment before it is used
- Distract the patient (see comfort section for specifics)
- Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Sticky Textures on Skin (Band-Aids, tape, EKG or EEG leads)

## Accommodations that may help

- No accommodation needed

- Needs accommodation(s) and support

- Does not tolerate even with accommodations

- Coban wrap may be better tolerated
- Cover as soon as placed and keep covered until time to remove
- Touching/manipulating materials before they are used
- Distract the patient (see comfort section for specifics)
- Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Transport/Stretchers

## Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Does not tolerate even with accommodations

Tolerates with head of stretcher in upright position during transport

Use wheelchair for transport

Allow patient to walk

Support person/communication partner to remain with patient during transport

Other: [Click or tap here to enter text.](#)

### Bothersome Aspects of Transport/Stretchers:

Fearful of stretchers

Unable to lie flat due to sensory issue or physical condition

Movement not of person's control is uncomfortable

Other: [Click or tap here to enter text.](#)

Comment: [Click or tap here to enter text.](#)

## NPO Status (Nothing by Mouth Status)

## Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Does not tolerate even with accommodations

Schedule for early OR/procedural case due to poor tolerance of prolonged NPO status

Educate patient/caregiver on NPO guidelines and last possible time to eat and drink

Other: [Click or tap here to enter text.](#)

Comment: [Click or tap here to enter text.](#)

## Anesthesia Induction

## Accommodations that may help

### IV

- No accommodation needed
- Needs accommodation(s) and support
- Does not tolerate even with accommodations

### Mask Induction

- No accommodation needed
- Needs accommodation(s) and support
- Does not tolerate even with accommodations

### Oral Sedation

- No accommodation needed
- Needs accommodation(s) and support
- Does not tolerate even with accommodations

- Pre-op sedating medication may be indicated due to safety concerns
- For IV induction accommodations see Needles section
- Difficult venous access and may require ultrasound
- For mask induction accommodations see Items Touching Face/Nose section
- Practice in advance (e.g. applying mask, tying rubber band on arm, using alcohol wipe)
- Demonstrate what you need patient to do on trusted caregiver or other staff (e.g. breathe through mask)
- Allow support person/communication partner to remain with patient at all times until asleep
- Other: [Click or tap here to enter text.](#)

Comment: [Click or tap here to enter text.](#)

## Recovery from Sedation/Anesthesia

## Accommodations that may help

- No accommodation needed

- Needs accommodation(s) and support

- Does not tolerate even with accommodations

- Support person/communication partner must remain with patient at all times (e.g. transport, in operating room until asleep, in recovery when waking)
- Personal belongings must be in view when patient waking
- Removal of foreign items on skin (e.g. IV, mask, tape) as soon as safely possible
- Wheelchair ready in recovery (e.g. patient will have low tolerance for waiting when wakes)
- Other: [Click or tap here to enter text.](#)

### Recovery History:

- Agitation when waking
- Nausea when waking
- Other: [Click or tap here to enter text.](#)

Comment: [Click or tap here to enter text.](#)

## Accommodations for Daily Activities and Self Care

### Diet/Eating

### Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Requires total assistance to eat or drink  
 Does not take any food or drink by mouth

- Requires supervision for meals for safety
- Finger foods/pediatric menu when on adult service
- Open all containers
- Foods cut into bite-size pieces
- Foods not touching/in separate containers
- Plastic silverware
- Needs additional snack(s)/meal scheduled outside typical mealtimes
- Other: Click or tap here to enter text.

#### Communicates Hunger and Thirst:

- Verbally
- Vocal intonation
- Gestures/Sign language (Describe: **Click or tap here to enter text.**)
- Communication partner support
- Alternative and augmentative communication support (see communication section)
- Does not communicate about basic needs. Basic needs must be anticipated and managed by caregivers/staff.
- Other: Click or tap here to enter text.

**Food and Drink Preferences:** Click or tap here to enter text.

Comment: Click or tap here to enter text.

### Sleep

### Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

- Keep door closed at all possible times
- Avoid interrupting sleep (e.g. for vitals signs) if possible
- Support person/caregiver to remain with patient overnight
- Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Toileting

## Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Requires total assistance

Needs supervision and possible assist for hygiene

Does best with bathroom in line of sight

Needs assistance if connected to lines and tubes

Other: Click or tap here to enter text.

### Communicates Bathroom Need:

Verbally

Vocal intonation

Gestures/Sign language (Describe: Click or tap here to enter text.)

Communication partner support

Alternative and augmentative communication support (see communication section)

Does not communicate about basic needs. Basic needs must be anticipated and managed by caregivers/staff.

Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Dressing

## Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Requires total assistance

Needs assistance with dressing and/or undressing

Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Bathing and Grooming

## Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Requires total assistance

Sponge baths, as does not tolerate shower

Limited or no tolerance of oral care

Limited or no tolerance of hair care

Avoid mouthwash

Unable to spit or difficulty with spitting

Other: Click or tap here to enter text.

Highly sensitive on:

Face  Head/hair  Ears  Mouth  Other: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Medication

## Accommodations that may help

No accommodation needed

Needs accommodation(s) and support

Requires total assistance

Does not swallow pills

Provide with specific preferred liquids (describe): Click or tap here to enter text.

Provide with specific food (describe): Click or tap here to enter text.

Provide with specific utensil or cup (describe): Click or tap here to enter text.

Other: Click or tap here to enter text.

Describe any specific routine that facilitates taking medication: Click or tap here to enter text.

Comment: Click or tap here to enter text.

## Additional Disability and Accommodation Needs

### Disability Identity or Condition

### Additional information or accommodations

Blind or low vision

Click or tap here to enter text.

Deaf, hard of hearing, or Deaf-blind

Click or tap here to enter text.

Cognitive, intellectual, or learning

Click or tap here to enter text.

Mental health

Click or tap here to enter text.

Neurodivergent

Click or tap here to enter text.

Physical or mobility

Click or tap here to enter text.

Speech, communication

Click or tap here to enter text.

Other (please clarify): Click or tap here to enter text.

Click or tap here to enter text.

Comment: Click or tap here to enter text.