May 27, 2022

Architectural and Transportation Barriers Compliance Board (ATBCB)
1331 F Street NW, Suite 1000,
Washington, DC 20004-1111

Re: Part 1195 – Standards for Accessible Medical Diagnostic Equipment

Dear Sir or Madam,

In service of the neuromuscular disease (NMD) patient community, the Muscular Dystrophy Association (MDA) thanks the Architectural and Transportation Barriers Compliance Board (ATBCB or "Board") for the opportunity to comment on the Board's Guidance entitled, "Standards for Accessible Medical Diagnostic Equipment". We are grateful for the Board's efforts to ensure safe access to medical examination for all patients.

MDA is the nation's leading nonprofit organization dedicated to transforming the lives of individuals living with neuromuscular diseases through innovations in science and innovations in care. MDA fulfills its mission by funding biomedical research, providing access to expert clinical care and support through its national MDA Care Center Network, and by championing public policies and programs that benefit those we serve. Since inception, MDA has invested more than $1 billion in research grants to accelerate treatments and cures for neuromuscular disorders, making MDA the largest source of neuromuscular disease research funding in the U.S. outside of the federal government.

Neuromuscular diseases are diseases that affect individuals' muscles, limbs, and mobility, and often leads to reliance on a wheelchair or other assistive mobility device. This often presents obstacles to safe and effective medical care. Given the frequency of use of mobility devices in the NMD community there is a high potential for injury for patients when transferring to and from their mobility device to examining tables, MRIs etc. The proposed rule by the Board takes significant steps to reduce that risk to patients, and the sunset provision in the rule also leaves the door open to make further adjustments as additional data arrives from these changes.

Background and Proposed Rule

In 2017 the Board issued a final rule which regulated maximum and minimum heights for diagnostic equipment for Supine, Prone, Side-Lying Position, Seated Position, Equipment Used by Patients Seated in a Wheelchair, and Equipment Used by Patients in Standing Position per 36 CFR part 1195 setting a range of heights from 17 to 19 inches minimum and 25 inches maximum. The 17 to 19 inch minimum range was subject to a sunset provision which has since been extended to January 10, 2025 to "provide additional time to complete [the Board's]

research [seeking to establish a feasible low transfer height for compliance by manufacturers while maintaining inclusivity for patients] and the required rulemaking processes to establish a final specification for the low transfer surface height" via 87 FR 6037 Meeting Notice, 87 Fed. Reg. 21089 Mar. 11, 2022. The purpose of this regulation was to reduce the effort needed from patients to lift their body weight between two surfaces and reduce patient injury therein. *Id.* MDA applauds the Board for taking steps to reduce the potential injury of patients while transferring from their mobility devices to diagnostic equipment.

Conclusion:
MDA is committed to ensuring that individuals with neuromuscular diseases and other disabilities can safely obtain medical care. While we appreciate that manufacturers may have difficulty supplying equipment at the lowest possible heights, it has been noted that raising diagnostic equipment even a few more inches would prohibitively impact access to safe medical care and diagnostics. *Id.* As such MDA fully supports the adoption of a 17 inch minimum 25 inch maximum standard.

We appreciate this opportunity to provide comment on the Department's Notice of Proposed Rulemaking for Standards for Accessible Medical Diagnostic Equipment. For questions regarding MDA or the above comments, please contact me at 336-409-4000 or jcartner@mdausa.org.

Sincerely,

Joel Cartner
Director, Access Policy
Muscular Dystrophy Association