

Table 1
Conditions Representing Risk Factors for Fall

- ◆ Previous Falls
- ◆ Fear of falling
- ◆ Cardiac arrhythmias
- ◆ Transient ischemic attacks (TIAs)
- ◆ Stroke
- ◆ Parkinson's Disease
- ◆ Delirium
- ◆ Dementing illnesses
- ◆ Depression
- ◆ Musculoskeletal conditions such as myopathy and deformities
- ◆ Problems with mobility/gait
- ◆ History of fractures
- ◆ Orthostatic hypotension
- ◆ Incontinence of bowel or bladder
- ◆ Visual and auditory impairments
- ◆ Dizziness
- ◆ Dehydration
- ◆ Acute and subacute medical illnesses
- ◆ Use of restraints
- ◆ Hypoglycemia
- ◆ Polypharmacy (multiple medications)

Table 2
Medication Categories More Commonly Associated with Injury from Falling

- ◆ Anticoagulants
- ◆ Antidepressants
- ◆ Antiepileptics
- ◆ Antihypertensives
- ◆ Anti-Parkinsonian agents
- ◆ Benzodiazepines
- ◆ Diuretics
- ◆ Narcotic analgesics
- ◆ Non-steroidal anti-inflammatory agents (NSAIDs)
- ◆ Psychotropics
- ◆ Vasodilators

Table 3 (see attached page)

Table 4
Environmental Factors Associated with Falling

- ◆ Dim lighting
- ◆ Poor or weak seating
- ◆ Glare
- ◆ Use of full-length side rails
- ◆ Uneven flooring
- ◆ Bed Height
- ◆ Loose carpet or throw rugs
- ◆ Inadequate assistive devices
- ◆ Wet or slippery floor
- ◆ Inappropriate footwear
- ◆ Lack of safety railings in room or hallway
- ◆ Malfunctioning emergency call systems
- ◆ Lack of grab bars in bathrooms
- ◆ Poorly fitting or incorrect eye wear
- ◆ Poorly positioned storage areas

Table 5
Complications from Falling

- ◆ Abrasions, contusions, lacerations
- ◆ Ecchymosis (bruising)
- ◆ Hemorrhage (internal and external bleeding)
- ◆ Anemia, secondary to bleeding
- ◆ Concussion
- ◆ Subdural Hematoma
- ◆ Fracture, sprain or dislocation
- ◆ Fear of falling resulting in loss of confidence, decreased independence, and social isolation.

Table 3

Checklist for Assessing Fall Risk or Performing a Post-Fall Evaluation

	Assessing Fall Risk	Performing a Post-Fall Evaluation
Fall History	<ul style="list-style-type: none"> Review patient's history of falls 	<ul style="list-style-type: none"> Review patient's history of recent or recurrent falls.
Medications	<ul style="list-style-type: none"> Review patient's record for medications or combinations of medications that could predispose to falls. Stop or reduce the dosage of as many of these medications as possible. 	<ul style="list-style-type: none"> Review patient's records for medications or combinations of medications that could predispose to falls. Stop or reduce the dosage of as many of these medications as possible. Review patient's record for recent changes in the medication regimen that may have increased fall risk.
Underlying conditions	<ul style="list-style-type: none"> Assess patient for underlying medical conditions that affect balance or cause dizziness or vertigo. Assess heart rate and rhythm, postural pulse and blood pressure. Assess patient for orthostatic hypotension and conditions predisposing to it. Assess for underlying medical conditions that may increase the risk of injury from falls. 	<ul style="list-style-type: none"> Review status of medical conditions that predispose to falls or that could increase the risk of injury from falls. Assess patient for orthostatic hypotension and manage predisposing conditions.
Functional status	<ul style="list-style-type: none"> Assess level of mobility. Assess gait and standing/sitting balance. Assess lower extremity joint function. Assess ability to use ambulatory assistive devices (e.g., cane, walker). Review appropriateness and safety of any current restraints. Review activity tolerance. Assess for deconditioning. Review bowel and bladder continence status. 	<ul style="list-style-type: none"> Reassess patient for significant changes in gait, mobility and standing/sitting balance and lower extremity joint function. Reassess use of ambulatory assistive devices (e.g., cane, walker) and modify as indicated. Review appropriateness and safety of any current restraints. Assess for significant changes in activity tolerance. Review bowel and bladder continence status. Assess whether patient's footwear may have contributed to fall.
Neurological status	<ul style="list-style-type: none"> Assess patient for conditions that impair vision (e.g., cataracts, glaucoma, macular degeneration). Assess for sensory deficits, including peripheral neuropathies. Assess muscle strength, lower extremity peripheral nerves, proprioception, reflexes, motor and cerebellar function. 	<ul style="list-style-type: none"> Reassess visual and auditory impairments. Assess new or progressive neurological impairments.
Psychological factors	<ul style="list-style-type: none"> Review for impaired cognition, judgment, memory, safety awareness, and decision-making capacity. 	<ul style="list-style-type: none"> Reassess as indicated for significant changes in cognition, safety awareness, and decision-making capacity.
Environmental factors	<ul style="list-style-type: none"> Assess presence of environmental factors that could cause or contribute to falls. Assess whether patient's footwear may be contributing to fall risk. 	<ul style="list-style-type: none"> Review and modify environmental factors that could have caused or contributed to fall.