

Fall Risk Assessment Tool

If patient has any of the following conditions, check the box and apply Fall Risk interventions as indicated.

High Fall Risk - Implement High Fall Risk interventions per protocol

- History of more than one fall within 6 months before admission
- Patient has experienced a fall during this hospitalization
- Patient is deemed high fall-risk per protocol (e.g., seizure precautions)

Low Fall Risk - Implement Low Fall Risk interventions per protocol

- Complete paralysis or completely immobilized

Do not continue with Fall Risk Score Calculation if any of the above conditions are checked.

Patients please **ONLY** Check and our **CLINIC STAFF** will complete the calculations.

Points

Age (*single-select*)

- 60 - 69 years (1 point)
- 70 -79 years (2 points)
- greater than or equal to 80 years (3 points)

Fall History (*single-select*)

- One fall within 6 months before admission (5 points)
- N/A

Elimination, Bowel and Urine (*single-select*)

- Incontinence (2 points)
- Urgency or frequency (2 points)
- Urgency/frequency and incontinence (4 points)
- N/A

Medications: Includes PCA/opiates, anticonvulsants, anti-hypertensives, diuretics, hypnotics, laxatives, sedatives, and psychotropics (*single-select*)

- On 1 high fall risk drug (3 points)
- On 2 or more high fall risk drugs (5 points)
- Sedated procedure within past 24 hours (7 points)
- N/A

Patient Care Equipment: Any equipment that tethers patient (e.g., IV infusion, chest tube, indwelling catheter, SCDs, etc.) (*single-select*)

- One present (1 point)
- Two present (2 points)
- 3 or more present (3 points)
- N/A

Mobility (*multi-select; choose all that apply and add points together*)

- Requires assistance or supervision for mobility, transfer, or ambulation (2 points)
- Unsteady gait (2 points)
- Visual or auditory impairment affecting mobility (2 points)
- N/A

Cognition (*multi-select; choose all that apply and add points together*)

- Altered awareness of immediate physical environment (1 point)
- Impulsive (2 points)
- Lack of understanding of one's physical and cognitive limitations (4 points)
- N/A

Total Fall Risk Score (Sum of all points per category)

SCORING: 6-13 Total Points = Moderate Fall Risk, >13 Total Points = High Fall Risk

