

FALL RISK ASSESSMENT

Form # HC-1040H (03/10)

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Reorder From: MED-PASS 800-438-8884

INH 032210

Patient Name	Record #	SOC Date	Patient's Age
Primary Diagnosis		Other Pertinent Diagnoses	

Medical Equipment or Adaptive Devices Used

ASSESSMENT DATES				
Required Core Elements – Assess one point for each core element “yes”	1	2	3	4
Age 65+				
Diagnosis (3 or more co-existing) Assess for hypotension				
Prior history of falls within 3 months An unintentional change in position resulting in coming to rest on the ground or a lower level				
Incontinence Inability to make it to the bathroom or commode in timely manner Includes frequency, urgency, and/or nocturia.				
Visual impairment Includes macular degeneration, diabetic retinopathies, visual field loss, age related changes, decline in visual acuity, accommodation, glare tolerance, depth perception, and night vision or not wearing prescribed glasses or having the correct prescription.				
Impaired functional mobility May include patients who need help with IADL, OADL or have gait or balance problems, arthritis, pain, fear of falling, foot problems, impaired proprioception, impaired coordination or improper use of assistive devices.				
Environmental hazards May include poor illumination, equipment tubing, inappropriate footwear, pets, hard to reach items, floor surfaces that are uneven or cluttered, or clutter near entry and exits.				
Poly Pharmacy (4 or more prescriptions) Drugs highly associated with fall risk include but not limited to, sedatives, anti-depressants, tranquilizers, narcotics, antihypertensives, cardiovascular drugs, corticosteroids, anti-anxiety drugs, anticholinergic drugs, and hypoglycemic drugs.				
Pain affects level of function Pain often affects an individual's desire or ability to move or pain can be a factor in depression or compliance with safety recommendations.				
Cognitive impairment Could include patients with dementia, Alzheimer's or stroke patients or patients who are confused, use poor judgment, have decreased comprehension, impulsivity, memory deficits. Consider patients ability to adhere to the plan of care.				
score for months considered at risk for falling				
TOTAL				

Additional Fall Risk Assessment Performed (Per Agency Policy)

TUG Score: _____ seconds Tinetti Score: _____

Functional Reach Score: _____ inches Berg Score: _____

1 Clinician's Signature/Discipline/Date	3 Clinician's Signature/Discipline/Date
2 Clinician's Signature/Discipline/Date	4 Clinician's Signature/Discipline/Date

