

hospitalization. Risk factors for hospitalized children include:

- Medication effects: Postanesthesia or sedation; analgesics or narcotics, especially in those who have never had narcotics in the past and in whom effects are unknown
- Altered mental status: Secondary to seizures, brain tumors, or medications
- Altered or limited mobility: Reduced skill at ambulation secondary to developmental age, disease process, tubes, drains, casts, splints, or other appliances; new to ambulation with assistive devices such as walkers or crutches
- Postoperative children: Risk of hypotension or syncope secondary to large blood loss, a heart condition, or extended bed rest
- History of falls
- Infants or toddlers in cribs with side rails down or on the daybed with family members

Once children at risk of falls have been identified, alert other staff members by posting signs on the door and at the bedside, applying a special colored armband labeled "Fall Precautions," labeling the chart with a sticker, or documenting information on the chart.

Prevention of falls requires alterations in the environment, including:

- Keep the bed in the lowest position with the brakes locked and the side rails up.
- Place the call bell within reach.
- Ensure that all necessary and desired items are within reach (e.g., water, glasses, tissues, snacks).
- Offer toileting on a regular basis, especially if the patient is taking diuretics or laxatives.
- Keep lights on at all times, including dim lights while sleeping.
- Lock wheelchairs before transferring patients.
- Ensure that the patient has an appropriate size gown and nonskid footwear. Do not allow gowns or ties to drag on the floor during ambulation.
- Keep the floor clean and free of clutter. Post a "wet floor" sign if the floor is wet.
- Ensure that the patient has glasses on if he or she normally wears