

## FALLS PATHWAY

Unit number	_____
Surname	_____
First Name	_____
Address	_____
Postcode	_____
Date of birth	_____

Date: \_\_\_\_\_ Doctor: \_\_\_\_\_

Date of first fall: \_\_\_\_\_

Circumstances of fall  
Indoor/Outdoors \_\_\_\_\_

Frequency of falls  
How many falls in last 12/12 \_\_\_\_\_

*Remember 30-40% of community dwelling > 65 yr olds fall per year. 5% suffer major injury*

### Past medical history

Palpitations ☐

Syncope ☐ Without warning ☐

Chest pains ☐

Postural symptoms ☐

Peripheral neuropathy ☐

Cognitive impairment ☐

Previous fracture details

Bruises/Soft tissue injury ☐

Required A&E attendance ☐

Vertigo ☐

- ☐ Associated nausea
- ☐ Previous head injury?
- ☐ Prolonged episode?
- ☐ Tinnitus/hearing loss
- ☐ Aggravating factors (specify)
- ☐ Visual vertigo
- Duration of symptoms: \_\_\_\_\_

### Medications (look for antihypertensives, diuretics, sedatives etc)

### Independent risk factors

- ☐ Previous fall
- ☐ Lower limb weakness
- ☐ Age
- ☐ Female
- ☐ Cognitive impairment
- ☐ Balance problems
- ☐ Psychotropic medications
- ☐ Arthritis
- ☐ History of stroke
- ☐ Orthostatic hypotension
- ☐ Dizziness
- ☐ Anaemia

### AMTS:

- (42 west street)
- ☐ Age
  - ☐ D.O.B
  - ☐ Place
  - ☐ Year
  - ☐ Time
  - ☐ QE2
  - ☐ WWII
  - ☐ 20-1
  - ☐ Object
  - ☐ Recall

/10

### Social history

Mobility:  
I ☐ S ☐ ZF/RF ☐  
Carers (daily):  
1 ☐ 2 ☐ 3 ☐ 4 ☐  
R/H ☐ N/H ☐  
Incontinent:  
Bowels ☐ Urine ☐  
Independent with ADL's ☐

### Bone health:

- ☐ Loss height
- ☐ Previous #
- ☐ Parent hip #
- ☐ Current smoker
- ☐ Steroids
- ☐ RA
- ☐ Secondary Osteoporosis
- ☐ Alcohol > 3 units/day

Has patient had previous DEXA? ☐  
When \_\_\_\_\_  
Result \_\_\_\_\_

### Lying / Standing BP

Lying \_\_\_\_\_

Standing at 30 seconds \_\_\_\_\_

Standing at 2 minutes \_\_\_\_\_

(significant drop = 20mmHg systolic or 10mmHg diastolic)

**Think fracture - visit**  
[www.shef.ac.uk/FRAX](http://www.shef.ac.uk/FRAX) and  
treat appropriately.