

Falls or Imbalance

Developed by	American Geriatrics Society
How developed	Literature review and consensus process engaged in by members of expert panel and society leadership.
Additional essential patient information	<p>Circumstances of fall (check if present):</p> <ul style="list-style-type: none"> • Loss of consciousness • Tripped / stumbled over something • Lightheadedness / dizziness • Chest pain/palpitations • Recent illness • Urinary frequency/dysuria • Sob/cough <p>History of (check if present):</p> <ul style="list-style-type: none"> • Head trauma • Seizures • Stroke • Alcohol use • Neuropathy • Parkinson’s Disease <p>Have patient bring an up to date list of medications, including vitamins/ over-the -counter OR “brown bag” of all medicines taking.</p>
Additional patient information, if available	<p>Labs : CBC, CMP, Vitamin D level Brain imaging reports (only if done, not recommended routinely) Orthostatic BP: supine; sitting; standing Timed Up and Go: number of seconds</p> <p>(Check if present)</p> <ul style="list-style-type: none"> • Romberg test positive • Glasses • Uses assistive device
Alarm symptoms	<p>Fall with injury. Progressive course. Focal neurologic findings or associated change in cognitive status.</p>

<p>Tests/Procedures to avoid prior to consult</p>	<p>Imaging in the absence of focal neuro findings.</p>
<p>Common rule-outs to consider prior to consults</p>	<p>Intracranial event. Other identifiable and correctable causes of imbalance: Deficits in vision, including altitudinal related to multifocal corrective lenses; peripheral neuropathy; orthostatic hypotension; polypharmacy.</p>
<p>Relevant “Choosing Wisely” elements</p>	<p>“Don’t use benzodiazepines or other sedatives-hypnotics...” due to risks of <u>falls</u> and hip fractures. “Don’t prescribe a medicine without conducting a...review” Because “Polypharmacy may lead to...<u>falls</u>”</p>
<p>Physician and/or patient resources</p>	<p>Healthcare Professional Information: Quality indicators for falls workup: Chang JT, Ganz DA. Quality Indicators for Falls and Mobility Problems in Vulnerable Elders. J Am Geriatr Soc 2007;55:s327-334. Drugs and Falls: Leipzig RM, Cumming RG, Tinetti ME. Drugs and falls in older people: A systematic review and meta-analysis. II. Cardiac and analgesic drugs. J Am Geriatr Soc 1999;47:40–50. Patient Information: Home Fall prevention checklist for older adults: http://www.cdc.gov/HomeandRecreationalSafety/Falls/CheckListForSafety.html or https://healthy.kaiserpermanente.org/health/care/!ut/p/a0/FYrBDolwEAV_xR8wL4GLEvMbGqPthaxlbRva7QYqhr8XbjOZgcMLTmhNgVqqQnl366s0lnaLTLnFM4vffK7KYyl84eAmNUyzj7A687qvScLpQzkvR22bMuz0Pjj-0gj7DV3fXRdID8MyPAy0IEtfhvsvfA9GpvQ!!/ or http://www.mayoclinic.org/healthy-lifestyle/healthy-aging/in-depth/fall-prevention/art-20047358</p>