Falls Assessment Proforma
Department of Accident & Emergency Medicine

Name: Attending Dr
Date of attendance: Time:

Fall History
First fall: Y / N
*No of falls in previous year: (>1 = high risk)
*Location of fall: Indoors / Outdoors (indoors = high risk)
Was fall witnessed: Y / N
Definite slip/trip: Y / N Associated dizziness: Y / N
LOC: Y / N Palpitations: Y / N
*Able to get self off floor: Y / N (Y=high risk) Time on floor (mins):

Medical History
Heart disease □
Stroke □
COPD/Asthma □
Hypertension □
Diabetes □
Degenerative joint disease □
Cognitive impairment □
Vision impairment □
Syncope □
Epilepsy □
Incontinence □
Other - (please state) ___________________________

Drug History (4+ meds = high risk)

Social Circumstances
Lives in: Flat / House / Bungalow / WCF / Residential Home / Nursing Home
Lives alone: Y / N Stairs: Yes / No
Lambeth / Southwark / Other Usually able to go out: Yes / No

Mobility □ Independent Services: □ MOW Carer: □ None
□ Stick □ HH □ Spouse
□ Frame □ Personal Care □ Other family
□ Wheelchair □ District Nurse □ Friend/neighbor

Alcohol: ______ units/week
Examination

Temp:  Pulse:  BP; Lying /  Standing /

AMT
- Age
- Time (to nearest hour)
- Address for recall
- Year
- Location
- Recognition of two persons
- Date of Birth
- WW2
- Present monarch
- Count backwards 20 – 1

Score:  /10

Injuries Sustained
- Head injury – no laceration
- Head injury - laceration
- Fracture
- Laceration requiring stitches
- Laceration but no stitches
- Superficial bruising
- No injury

Indicate site of injury including pressure areas

Relevant Systems Examination

Current Level of Function
- No change from pre-fall level of function
- Decreased mobility/function but able to go home
- Decreased mobility/function – unable to discharge

Conclusions

Likely cause of fall: simple slip/trip, acute illness, multifactorial, unexplained

X-Rays  Bloods  ECG  Urinalysis

Score: /10

Outcome:
- Home with GP letter
- Admit to observation ward overnight
- Refer to Falls Clinic / Day Hospital
- Refer to Rapid Response
- Refer to DHE (Out-Patients)
- Refer for hospital admission