Algorithm

for Fall Risk Screening, Assessment, and Intervention

As a healthcare provider, you are already aware that falls are a serious threat to the health and well-being of your older patients.

More than one out of four people 65 and older falls each year, and over 3 million are treated in emergency departments annually for fall injuries.

The CDC's STEADI initiative offers a coordinated approach to implementing the American and British Geriatrics Societies' clinical practice guideline for fall prevention. STEADI consists of three core elements: **Screen**, **Assess**, and **Intervene** to reduce fall risk.

The **STEADI Algorithm for Fall Risk Screening, Assessment, and Intervention** outlines how to implement these three elements.

Additional tools and resources include:

- ➤ Information about falls
- ➤ Case studies
- ➤ Conversation starters
- ➤ Screening tools
- ➤ Standardized gait and balance assessment tests (with instructional videos)
- ➤ Educational materials for providers, patients, and caregivers
- ➤ Online continuing education
- ➤ Information on medications linked to falls
- ➤ Clinical decision support for electronic health record systems

CDC's STEADI tools and resources can help you screen, assess, and intervene to reduce your patient's fall risk. For more information, visit www.cdc.gov/steadi
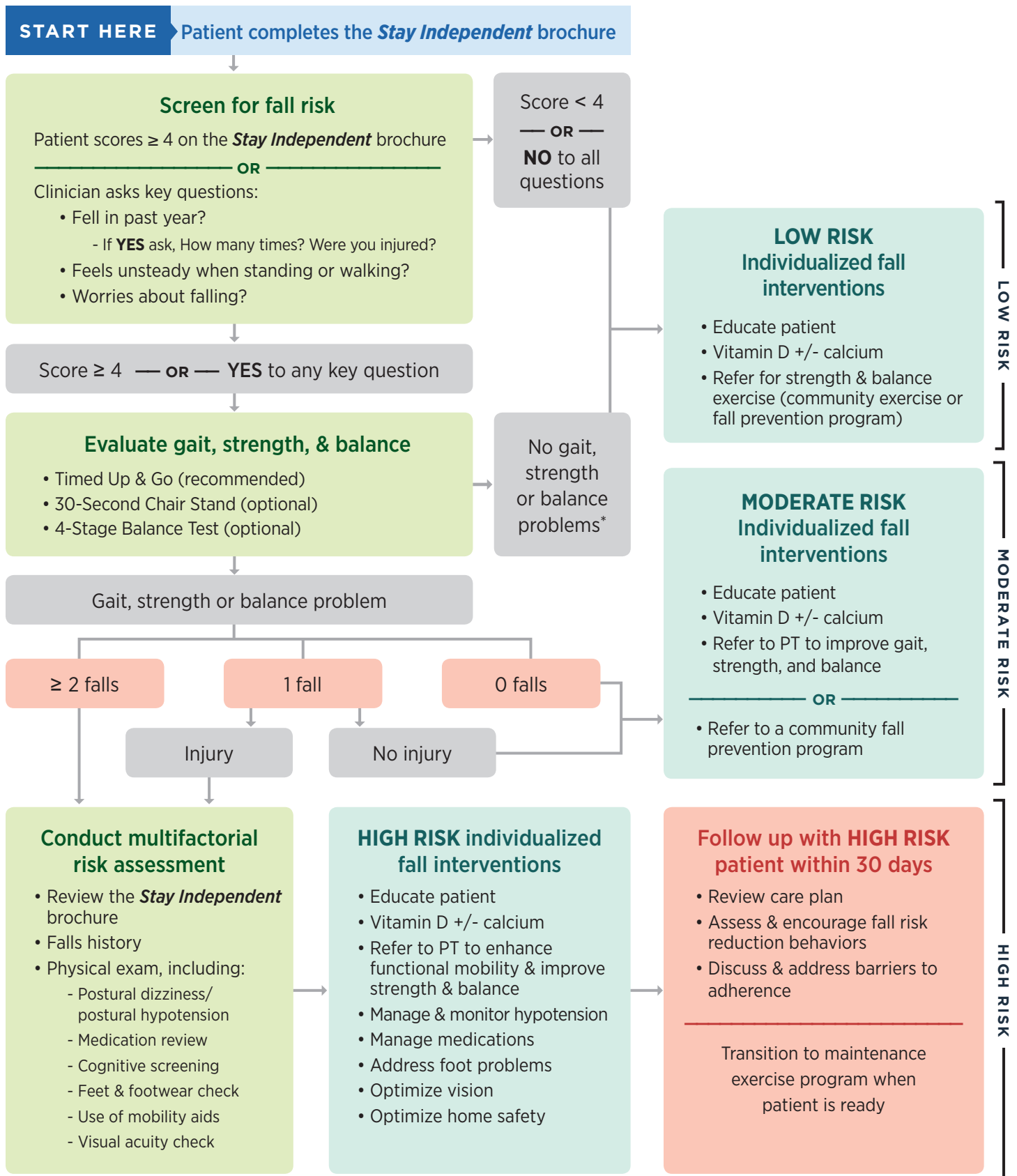
> **You play an important role in caring for older adults, and you can help reduce these devastating injuries.**

Centers for Disease Control and Prevention
National Center for Injury Prevention and Control

STEADI Stopping Elderly Accidents, Deaths & Injuries

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START HERE ▶ Patient completes the *Stay Independent* brochure

Screen for fall risk

Patient scores ≥ 4 on the *Stay Independent* brochure

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Clinician asks key questions:
- Fell in past year?
  - If **YES** ask, How many times? Were you injured?
- Feels unsteady when standing or walking?
- Worries about falling?

Score < 4 — **OR** — **NO** to all questions

Score ≥ 4 — **OR** — **YES** to any key question

Evaluate gait, strength, & balance
- Timed Up & Go (recommended)
- 30-Second Chair Stand (optional)
- 4-Stage Balance Test (optional)

No gait, strength or balance problems*

Gait, strength or balance problem

≥ 2 falls   1 fall   0 falls

Injury   No injury

LOW RISK Individualized fall interventions
- Educate patient
- Vitamin D +/- calcium
- Refer for strength & balance exercise (community exercise or fall prevention program)

MODERATE RISK Individualized fall interventions
- Educate patient
- Vitamin D +/- calcium
- Refer to PT to improve gait, strength, and balance

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- Refer to a community fall prevention program

Conduct multifactorial risk assessment
- Review the *Stay Independent* brochure
- Falls history
- Physical exam, including:
  - Postural dizziness/ postural hypotension
  - Medication review
  - Cognitive screening
  - Feet & footwear check
  - Use of mobility aids
  - Visual acuity check

HIGH RISK individualized fall interventions
- Educate patient
- Vitamin D +/- calcium
- Refer to PT to enhance functional mobility & improve strength & balance
- Manage & monitor hypotension
- Manage medications
- Address foot problems
- Optimize vision
- Optimize home safety

Follow up with **HIGH RISK** patient within 30 days
- Review care plan
- Assess & encourage fall risk reduction behaviors
- Discuss & address barriers to adherence

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Transition to maintenance exercise program when patient is ready

LOW RISK

MODERATE RISK

HIGH RISK

*For these patients, consider additional risk assessment (e.g., medication review, cognitive screen, snycope).

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