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**For Provider Use Only: Use the CDC STEADI algorithm on other side.**

**Screen:** Identify patients at risk for falls.

**Assess:** Identify modifiable risk factors.

**Intervene:** Use effective clinical and community strategies.



**For Fall Prevention**

**Stay strong, stay active, stay standing!**

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

Patient Name: \_\_\_\_\_

Provider Name: \_\_\_\_\_

**Begin a falls prevention program (in-person and/or virtual options may be available)**

**A Matter of Balance**

For patients who need to address a fear of falling, develop fall prevention strategies, and engage in gentle exercises.

**Tai Chi for Arthritis and Fall Prevention**

For patients who need to improve mobility, balance, strength, flexibility, relaxation, and/or self awareness. Modifications available.

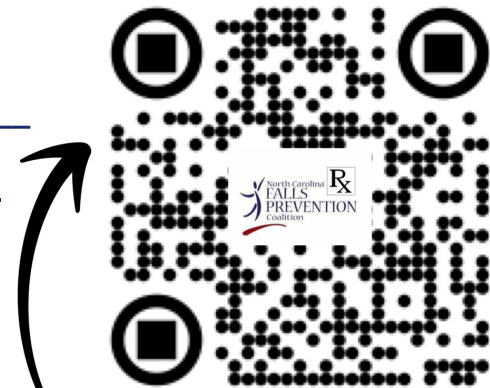
**Do a home safety check for fall risk and trip hazards through [ncfallsprevention.org](http://ncfallsprevention.org).**

**Other:** \_\_\_\_\_

**Call 828-255-7712 or visit [www.healthyagingnc.com](http://www.healthyagingnc.com) for a list of classes.**



**Scan the QR Code to see all the resources!**



**SCAN ME**

**Visit [ncfallsprevention.org](http://ncfallsprevention.org) for more falls prevention resources.**

# STADI Algorithm for Fall Risk Screening, Assessment, and Intervention among Community-Dwelling Adults 65 years and older

## START HERE

### 1 SCREEN for fall risk yearly, or any time patient presents with an acute fall.

#### Available Fall Risk Screening Tools:

- Stay independent: a 12-question tool [at risk if score  $\geq 4$ ]
- Important: If score  $< 4$ , ask if patient fell in the past year (If YES  $\rightarrow$  patient is at risk)

- Three key questions for patients [at risk if YES to any question]
  - Feels unsteady when standing or walking?
  - Worries about falling?
  - Has fallen in past year?
- » If YES ask, "How many times?" "Were you injured?"

### SCREENED NOT AT RISK

#### PREVENT future risk by recommending effective prevention strategies.

- Educate patient on fall prevention
- Assess vitamin D intake
  - If deficient, recommend daily vitamin D supplement
- Refer to community exercise or fall prevention program
- Reassess yearly, or any time patient presents with an acute fall

### SCREENED AT RISK

#### 2 ASSESS patient's modifiable risk factors and fall history.

#### Common ways to assess fall risk factors are listed below:

- Evaluate gait, strength, & balance
- Common assessments:
  - Timed Up & Go
  - 4-Stage Balance Test
  - 30-Second Chair Stand Balance Test

#### Identify medications that increase fall risk (e.g., Beers Criteria)

Ask about potential home hazards (e.g., throw rugs, slippery tub floor)

#### Measure orthostatic blood pressure (Lying and standing positions)

#### Check visual acuity

Common assessment tool:
 

- Snellen eye test

#### Assess feet/footwear

#### Assess vitamin D intake

Identify comorbidities (e.g., depression, osteoporosis)

Use other side to refer patient to an evidence-based falls prevention program.

#### 3 INTERVENE to reduce identified risk factors using effective strategies.

#### Reduce identified fall risk

- Discuss patient and provider health goals
  - Develop an individualized patient care plan (see below)
- Below are common interventions used to reduce fall risk:

- Poor gait, strength, & balance observed
  - Refer for physical therapy
  - Refer to evidence-based exercise or fall prevention program (e.g., Tai Chi)

#### Medication(s) likely to increase fall risk

- Optimize medications by stopping, switching, or reducing dosage of medications that increase fall risk

#### Home hazards likely

- Refer to occupational therapist to evaluate home safety

#### Orthostatic hypotension observed

- Stop, switch, or reduce the dose of medications that increase fall risk
- Educate about importance of exercises (e.g., foot pumps)

#### Visual impairment observed

- Refer to ophthalmologist/optometrist
- Stop, switch, or reduce the dose of medication affecting vision (e.g., anticholinergics)

#### Feet/footwear issues identified

- Provide education on shoe fit, traction, insoles, and heel height
- Refer to podiatrist

#### Vitamin D deficiency observed or likely

- Recommend daily vitamin D supplement

#### Comorbidities documented

- Optimize treatment of conditions identified
- Be mindful of medications that increase fall risk



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

### FOLLOW UP with patient in 30-90 days.

Discuss ways to improve patient receptiveness to the care plan and address barrier(s)