Form Approved

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**Patient ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**STEADI Stopping Elderly Accidents, Deaths & Injuries: Stay Independent**

**Check Your Risk for Falling**

|  |  |  |  |
| --- | --- | --- | --- |
| **Circle “Yes” or “No” for each statement below** | | | **Why it matters** |
| Yes (2) | No (0) | I have fallen in the past year. | People who have fallen once are likely to fall again. |
| Yes (2) | No (0) | I use or have been advised to use a cane or walker to get around safely | People who have been advised to use a cane or walker may already be more likely to fall. |
| Yes (1) | No (0) | Sometimes I feel unsteady when I am walking. | Unsteadiness or needing support while walking are signs of poor balance. |
| Yes (1) | No (0) | I steady myself by holding onto furniture when walking at home. | This is also a sign of poor balance. |
| Yes (1) | No (0) | I am worried about falling. | People who are worried about falling are more likely to fall. |
| Yes (1) | No (0) | I need to push with my hands to stand up from a chair. | This is a sign of weak leg muscles, a major reason for falling. |
| Yes (1) | No (0) | I have some trouble stepping up onto a curb. | This is also a sign of weak leg muscles. |
| Yes (1) | No (0) | I often have to rush to the toilet. | Rushing to the bathroom, especially at night, increases your chance of falling. |
| Yes (1) | No (0) | I have lost some feeling in my feet. | Numbness in your feet can cause stumbles and lead to falls. |
| Yes (1) | No (0) | I take medicine that sometimes makes me feel light-headed or more tired than usual. | Side effects from medicines can sometimes increase your chance of falling. |
| Yes (1) | No (0) | I take medicine to help me sleep or improve my mood. | These medicines can sometimes increase your chance of falling. |
| Yes (1) | No (0) | I often feel sad or depressed. | Symptoms of depression, such as not feeling well or feeling slowed down, are linked to falls. |
| **Total** \_\_\_\_\_\_\_\_\_\_\_\_ Add up the number of points for each “yes” answer. If you scored 4 points or more, you may be at risk for falling.  Discuss this brochure with your doctor. | | | |

This checklist was developed by the Greater Los Angeles VA Geriatric Research Education Clinical Center and affiliates and is a validated fall risk self-assessment tool (Rubenstein et al. J Safety Res; 2011: 42(6)493-499). Adapted with permission of the authors.