What to do if a patient falls

- 1. Was the fall witnessed or not? If not, assume patient hit their head
- 2. If the patient is found on the floor, assess for injury before moving
- 3. Complete Post-Fall Ax Intervention including **all** components, i.e. vitals/neuro/skin/blood glucose etc.
- 4. Consider, has the patient been taking anticoagulants?
- 5. Complete Post-Fall-Huddle
- 6. Document a "Fall" focus note
- 7. Ensure a *QHC Cares* event is completed
- 8. Complete a new Falls Risk Assessment
- 9. Complete the Post-Fall Ax intervention for **all** follow-up post-fall reassessments
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Psychoactive medications Antidepressants (SSRIs, TCAs) Antipsychotics (1st & 2nd generation) Benzodiazepines Sedatives and hypnotics (i.e. Zopiclone) Anticonvulsants Opioids (Codeine derivatives especially)

Others

Antihistamines Antihypertensive agents Nonsteroidal anti-inflammatory drugs

*Creatinine clearance uses height, weight and serum creatine to estimate renal clearance of the drug. Drug accumulation may lead to increased side effects and fall risk.

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