

RESIDENT FALL TRACKING LOG

DIRECTIONS: Each time a resident experiences a fall, enter the date and time of the fall at the top of the column. In that same column, check (✓) all of the items listed that may have contributed to that fall. Be sure to include items listed on the reverse. Summarize findings, record any conclusions and related plans on the reverse. Sign and date all entries on reverse.

DATE																			
TIME																			
LOCATION OF FALL R = Room, B = Bathroom, H = Hall DR = Dining Room, O = Other																			
INTERNAL RISK FACTORS																			
CONDITIONS / DIAGNOSES	Circulation/Heart																		
	Presence of pain																		
	Psychiatric/Mood disorder																		
	Perceptual/Decreased vision																		
	Orthopedic/Musculoskeletal																		
	Fatigue/Weakness/ Weight loss																		
	Neuromuscular/ Functional deficits																		
	Infection/Acute illness																		
	Diabetes																		
	Neurological																		
	History of falls																		
	Vitamin D deficiency																		
EXTERNAL RISK FACTORS																			
APPLIANCE / DEVICE	Pacemaker																		
	Cane/Crutch																		
	Walker																		
	Wheelchair																		
	Physical restraints																		
MEDICATIONS	Antipsychotic																		
	Antianxiety																		
	Hypnotic																		
	Antidepressant																		
	Opioid																		
	Diuretic																		
	Cardiovascular																		
	Neuroleptic																		
	Recent change in meds																		
	9+ Medications																		
ENVIRO. HAZARDS	Poor lighting																		
	Glare																		
	Carpet/Rug																		
	Poorly arranged furniture																		
	Slippery floor																		

NAME-Last	First	Middle	Attending Physician	Record No.	Room/Bed
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RESIDENT FALL TRACKING LOG

EXTERNAL RISK FACTORS (Cont'd.)

[illegible]

SUMMARY/CONCLUSION/PLAN

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(800) 247-2343

INIT	SIGNATURE	INIT	SIGNATURE	INIT	SIGNATURE