Free Fall Risk Checklist

More than one out of four older people falls each year, but less than half tell their doctor (CDC). This free printable helps you spot fall risk early and keep a record the doctor can use. Use it for yourself, or fill it in with a parent.

1. **Take the 12-question checklist**
   The CDC's Stay Independent checklist on page 2. Tick what is true, add up the points. A total of 4 or more means you may be at risk for falling: discuss it with your doctor.

2. **Record every fall and near miss**
   Use the log on page 3, even when nobody was hurt. Write where, what you were doing and what you changed after.

3. **Know what to do if you fall**
   Read page 4 together and keep it by the phone.

4. **Fill it in your way**
   Type into any box in Chrome, Edge or Adobe Acrobat Reader and save it, or print it and use a pen.

Falls can be prevented

The CDC's four steps: speak up about falls and worries with your health care provider; keep moving with exercises for strength and balance; have your eyes checked every year; and make your home safer.

Want the full 8-week planner?

The Fall Prevention Planner (41 pages) adds a 12-record fall log, a dizziness log, the CDC room-by-room home check with a fix plan, a medicine review, the chair-rise exercise with an 8-week strength and balance tracker, and doctor-visit pages.
shop.elderlydaily.com/l/fall-prevention-planner

Sources: CDC, "Older Adult Falls: Facts and Stats" and STEADI "What You Can Do to Prevent Falls" (cdc.gov). A record to share with your doctor; not medical advice. © ElderlyDaily. Free for personal use; please do not resell.

Stay Independent: Fall Risk Checklist

Tick each statement that is true for you, then add up the points for the boxes you ticked. There are three columns, so you can take it again later: after a fall, a new medicine or a hospital stay.

Tick if true for you	Points	Today	Next time	Later
I have fallen in the past year. People who have fallen once are likely to fall again.	2	☐	☐	☐
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.	2	☐	☐	☐
Sometimes I feel unsteady when I am walking. Unsteadiness or needing support while walking are signs of poor balance.	1	☐	☐	☐
I steady myself by holding onto furniture when walking at home. This is also a sign of poor balance.	1	☐	☐	☐
I am worried about falling. People who are worried about falling are more likely to fall.	1	☐	☐	☐
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.	1	☐	☐	☐
I have some trouble stepping up onto a curb. This is also a sign of weak leg muscles.	1	☐	☐	☐
I often have to rush to the toilet. Rushing to the bathroom, especially at night, increases your chance of falling.	1	☐	☐	☐
I have lost some feeling in my feet. Numbness in your feet can cause stumbles and lead to falls.	1	☐	☐	☐
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.	1	☐	☐	☐
I take medicine to help me sleep or improve my mood. These medicines can sometimes increase your chance of falling.	1	☐	☐	☐
I often feel sad or depressed. Symptoms of depression, such as not feeling well or feeling slowed down, are linked to falls.	1	☐	☐	☐
Total points (add up the points for each tick)				

If the total is 4 or more, you may be at risk for falling. Discuss this checklist with your doctor.

Stay Independent checklist from the CDC's STEADI materials, developed by the Greater Los Angeles VA Geriatric Research Education Clinical Center and affiliates; a validated fall risk self-assessment. Adapted with permission of the authors (Rubenstein et al., J Safety Res 2011;42(6):493-499).

RECORD EVERY ONE, EVEN IF NOBODY WAS HURT

Fall & Near-Miss Log

Date & time ☐ Fall ☐ Near miss Where

What happened

☐ Tripped ☐ Slipped ☐ Felt dizzy ☐ Legs gave way ☐ Missed a step ☐ Don't know

What I was doing

Setting: lighting, shoes, glasses, floor

Hurt? How did I get up, and how long on the floor?

What we changed after

Told the doctor (date)

Notes

Date & time ☐ Fall ☐ Near miss Where

What happened

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Hurt? How did I get up, and how long on the floor?

What we changed after

Told the doctor (date)

Notes

If You Fall: What to Do

If you can get up

1. Stay still for a couple of minutes and check for pain or injury. Take your time: do not get up too quickly.
2. Roll onto your side, then push up onto your hands and knees.
3. Crawl to something sturdy, like a heavy chair, and hold on to it.
4. Put one foot flat on the floor and stand up slowly, holding on to the sturdy furniture.
5. Turn and sit down. Rest before you do anything else.

If you can't get up

1. Use your phone or personal alarm if you can reach it.
2. If not, call out, or bang on the wall or the floor.
3. Keep warm: cover yourself with anything nearby, like a towel, coat, rug or blanket.
4. Gently move your arms and legs, and try to change position about every 30 minutes.

Call 911 if someone has fallen and:

- May have hurt their head, back, neck or hip
- Can't get up

Hurt or unwell, but not an emergency?

Call the doctor's office the same day if someone has fallen and may be in pain, injured or unwell.

If you find someone who has fallen

Keep them warm and comfortable. Help them up only if they can get up with careful help, following the steps above. Do not try to lift them yourself.

Afterwards

Tell the doctor about every fall, even if nobody was hurt, and record it in the Fall & Near-Miss Log. Falls can be a sign of a new health problem, a medicine side effect or a hazard at home that can be fixed.

Sources: NHS, "Falls" (nhs.uk), adapted for U.S. emergency and urgent-care contacts; CDC STEADI, "What You Can Do to Prevent Falls" ("Tell a provider right away if you fall, worry about falling, or feel unsteady").