

AGS Falls Guidelines for Rehabilitation Professionals

Dale Avers DPT, PhD
Upstate Medical University

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Functional Screening for Medical Professionals

- Screen for strength, balance, mobility
 - TUG (>12s warrants referral) – heel toe gait, normal base of support, symmetrical, walking aid
 - Chair Rise (30s or Timed 5x)
 - If cannot stand without arms – warrants referral
 - Upper threshold would be <8x in 30s or over 12s
 - Gait speed (<0.8m/s warrants referral; maybe 1.0m/s should be cut off)
 - Inability to stand on one leg or inability to tandem stance

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Interventions

- Exercise
 - Must be of sufficient intensity to challenge patient
 - 6-8 out of 10
 - Must be standing
 - Supervised, individualized exercise will achieve maximum benefits
 - Requires 50 hours, minimum to reduce fall risk
 - Challenge ankles, quads, trunk

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Interventions

- Gait Training
 - Reduce need for assistive device or need for walker
 - Incorporate multiple kinds of surfaces
 - Stairs, curbs (with banister and without)
 - Carrying packages
 - Distance (goal of 400 meters in less than 6 minutes)
 - Gait speed of 1.2m/s

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Interventions

- Home Assessment
 - Internal
 - External
 - Mobility

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Foot and shoe assessment

- Most common problems: hallux valgus, corns and calluses, toe deformities
- Shoes with thick, soft inner sole impair ankle position sense and balance
- Orthotics
- Support
- Fla
- Be careful of soles that grip (must be able to pick foot up)

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