MDS Alert

Tool

I. General Guidelines

A. The Predisposition for Failing Assessment Tool is to be completed on all residents. The following instructions correspond numerically to the numbered data on the predisposition for falling overprint. Check applicable items and add score. A score of ten (10) or above indicates a risk for falling.

B. Age-Self-explanatory

II. Mental Status

A. Oriented at all times: Awareness of time, place, and person.

B. Comatose: A state of unconsciousness from which the resident cannot be aroused.

C. Confusion at all times: Disorientation to time, place or people in environment; communication unusual for the person, such as yelling and calling out, unusual or inappropriate behavior, such as attempting to get out of bed or pulling off dressings; and evidence of illusions or hallucinations.

III. Day Number of Stay Self-explanatory

IV. Elimination

A. Independent and Continent: Ambulates or transfers to commode with no help from others and has control of both voiding and defecation.

B. Catheter and/or Ostomy: Catheter refers to indwelling tube in urinary bladder. Ostomy is an artificial opening created to provide an outlet for intestinal or urinary excretions.

C. Elimination with Assistance: Ambulates or transfers to commode with help from others for purpose of voiding, defecating or for care or changing of ostomy appliance.

D. Independent and Incontinent: Ambulates ad lib with regular or irregular episodes of involuntary elimination or urine and/or stool.

V. History of Falling Within Past Six Months Self-explanatory

VI. Visual Impairment

A. Legally blind

B. Not wearing the required or properly prescribed prosthetic vision device, i.e. glasses, contacts.

C. Has diagnosed cataract.

VII. Confined to Chair

A. Has maximum out of bed activity of being confined to chair.

B. Totally unable to ambulate without staff member attendance.

C. Uses a wheelchair as a means of locomotion but retains self transfer capacity.

VIII. Drop In Systolic Blood Pressure

Self-explanatory

IX. Gait and BalanceSelf-explanatory

X. Medications

Editor's note: The instructions list specific examples of the type of medications listed on the assessment form.