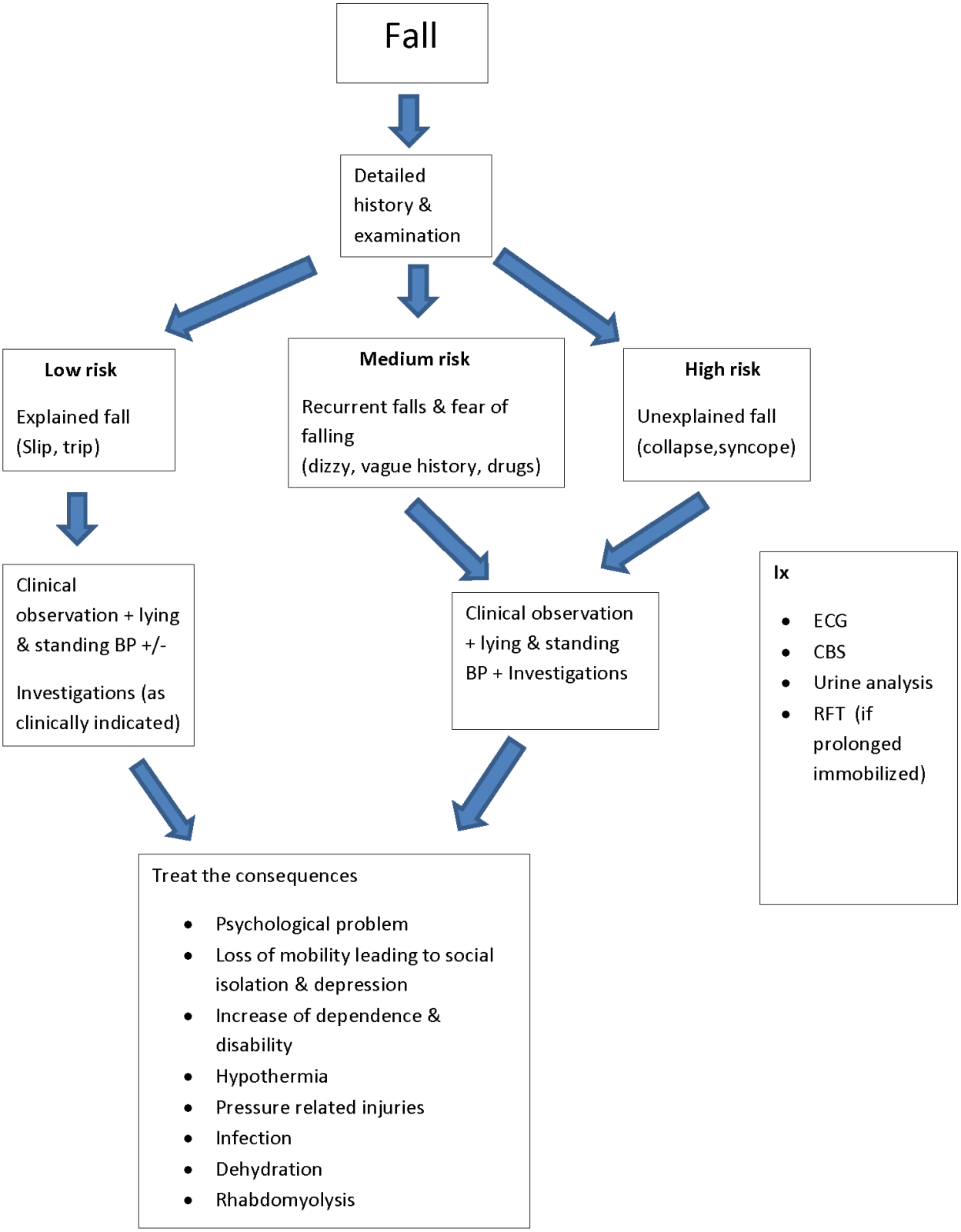
Fall
Detailed history & examination
Low risk
Explained fall (Slip, trip)
Medium risk
Recurrent falls & fear of falling
(dizzy, vague history, drugs)
High risk
Unexplained fall (collapse,syncope)
Clinical observation + lying & standing BP +/-
Investigations (as clinically indicated)
Clinical observation + lying & standing BP + Investigations
Ix
ECG
CBS
Urine analysis
RFT (if prolonged immobilized)
Treat the consequences
Psychological problem
Loss of mobility leading to social isolation & depression
Increase of dependence & disability
Hypothermia
Pressure related injuries
Infection
Dehydration
Rhabdomyolysis