

Falls



What is a fall?

A fall occurs when an individual suddenly comes to rest on the ground unintentionally. Falls may lead to serious complications such as head injuries, fractures, a decline in function, and may even cause death. It is important to reduce the risk of falling.

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Why is there a need to take extra precautions?

Falls can happen anywhere. The risk of falls is higher when a patient is feeling unwell.

At Alexandra Hospital (AH), we want our patients to stay safe throughout their stay with us and when they are back in the community.

This Patient Education Leaflet contains information and tips that will help you or your family member (for caregivers) stay safe and avoid falls.

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What are risk factors and what precautions can caregivers take in the hospital and at home?

Risk factors	What to do?
Confusion, disorientation and restlessness	Ensure that: <ul style="list-style-type: none">• The patient has someone by his/her side at all times.• The bed rails are up at all times. (Note: The hospital staff may apply restraints when / if necessary.)
Drowsiness E.g. from certain medications or from the effects of anaesthesia after surgery	Ensure that the patient: <ul style="list-style-type: none">• Stays in bed with the bed rails raised at all times.• Does not climb out of bed.• Presses the call bell or requests assistance from staff if in need of help.
Giddiness E.g. due to high or low blood pressure	Ensure that the patient: <ul style="list-style-type: none">• Changes to the sitting or standing position slowly.• Sits or lies down immediately if he / she is feeling giddy while standing or walking.

	<ul style="list-style-type: none"> • Does not get out of the bed / wheelchair / commode / toilet seat alone. • Presses the call bell or requests assistance from staff if in need of help.
<p>Frequent, or urgent need to use the toilet</p>	<p>Ensure that the patient:</p> <ul style="list-style-type: none"> • Discusses his / her toileting needs with the nurse (e.g. voiding time, use of commode / urinal). • Presses the call bell or requests assistance from staff if in need of help or if he / she experiences any drowsiness or weakness. • Has someone by his / her side while using the toilet.
<p>Difficulty in standing and / or walking</p>	<p>Ensure that:</p> <ul style="list-style-type: none"> • The patient uses appropriate walking aids as recommended by his / her doctor or therapist. • The patient uses walking aids properly. • The rubber tips of the walking aid are not worn out. • The patient does not lean on movable items for support (e.g. items that have wheels). • Presses the call bell for nurse's assistance.

Footwear and clothing	<ul style="list-style-type: none">• The patient should wear well-fitted shoes with velcro straps or buckles. The shoes should be flat, broad-based and have a non-slip sole.• Avoid slippers and heavy footwear.• Ensure that pants are of appropriate length. Fold the ends if they are too long to avoid tripping.
Environmental risks (indoor)	<ul style="list-style-type: none">• Ensure that there is no clutter on the floor.• Avoid placing loose floor rugs that may be slippery and cause trips and falls.• Keep wires and loose items neatly, away from the floor.• Ensure that the floor is dry and not slippery (especially the toilet or shower area after a bath).• Ensure that the environment is well-lit with proper lighting. Use night lights if necessary.• Avoid using chairs or seats that are low. Use seats of a suitable height.• Be mindful when managing steps or kerbs at home (e.g. in the toilet). Install and use grab bars where necessary.

Environmental risks (outdoor)

- Plan your day before going out to avoid bad weather, slippery ground and / or crowds as these may increase the risk of falls.
 - Check the floor for water or any slippery lubricants so as to avoid walking on them.
 - Walk on levelled terrains whenever possible.
 - Use handrails when navigating stairs and slopes.
 - Use the lift instead of the escalator or stairs when possible.
 - Wait for the bus or train to come to a stop before standing up to board or alight.
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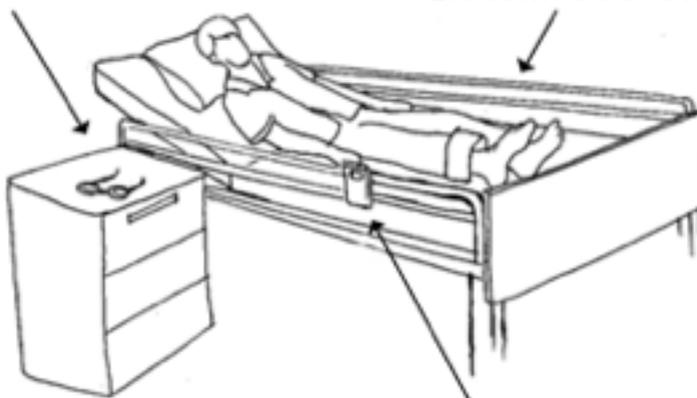
What are some preventive actions one can take?

When in bed

Ensure that frequently used items, such as glasses, are within easy reach.

Ensure that the patient does not:

- Climb over bed rails
- Lean on the bed rails
- Let down the bed rails



If in need of assistance, press the call bell.

When moving about

Use suitable and necessary aids as recommended by the doctor or therapist.

Wheelchair



Walking Frame



Rollator Frame



Walking Stick



Broad-based Quadstick



Narrow-based Quadstick



Axillary Crutches



Hearing Aid



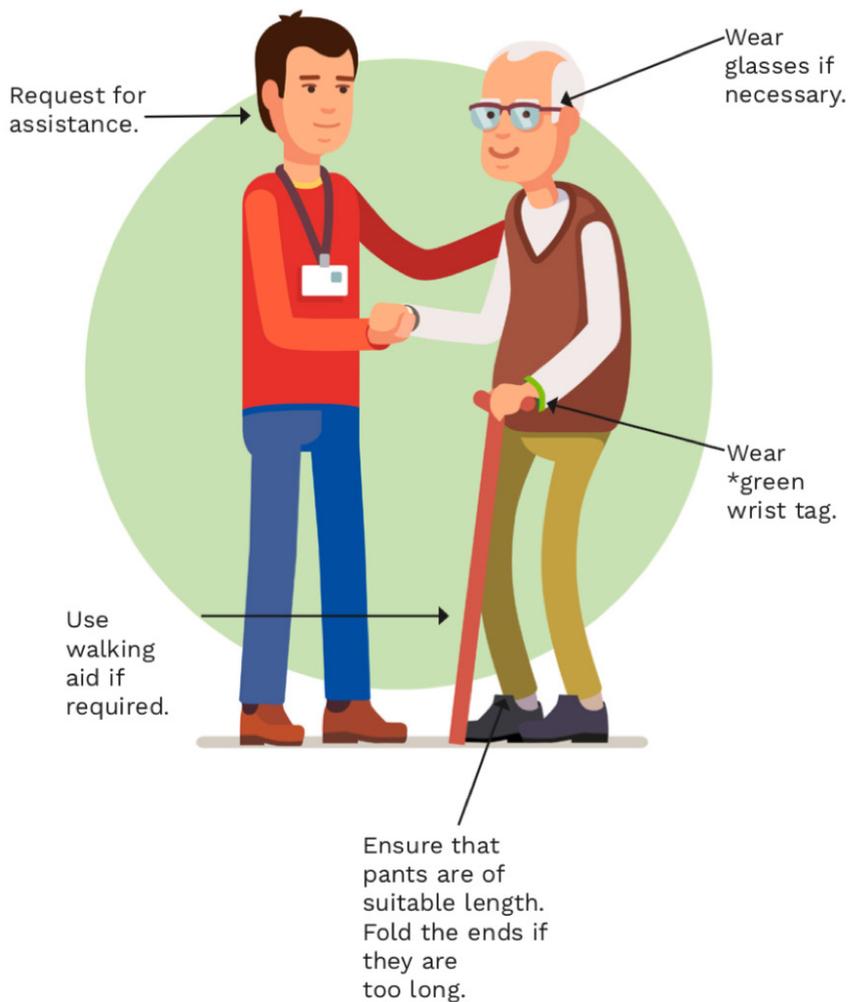
Glasses



Non-slip Footwear



General advice



* For inpatients with high risk of falls

What should one do after a fall?



1

Call for help. If you are in extreme pain or feel giddy, do not try to get up.



2

If you feel strong enough, roll over and bring your elbows under your shoulders.

What Should I Do If I Fall?



3

Bring your knees towards your chest and crawl to a chair.



4

Put your hands on a chair and push into a kneeling position.



5

Stand up, turn and sit on a chair. Let your family members know that you fell.

Source: Alexandra Health System

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Image source: Health Promotion Board, Singapore

How should one manage injuries after a fall?

Self-monitoring at home

Falls resulting in minor cuts and bruises can be monitored at home over the next 2 to 3 days. Seek treatment at your family doctor or the nearest polyclinic if your condition does not improve.

Visiting a family doctor

Consult your family doctor or nearest polyclinic for a physical examination if you experience persistent pain or symptoms of headache, nausea, dizziness or ringing in the ears.

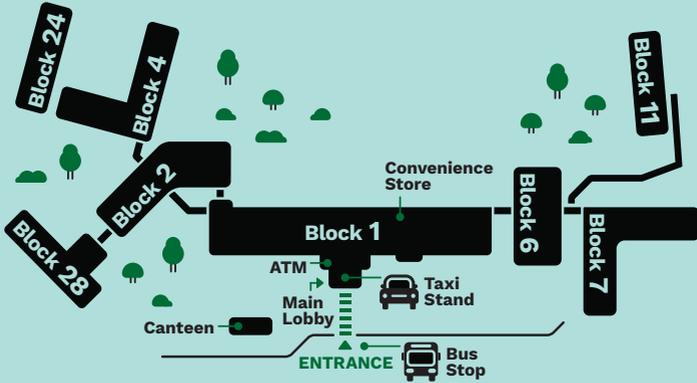
Call an ambulance

Call 995 if:

- The person is unconsciousness
- There is severe pain
- The person is unable to move or get up from the fall
- The person experiences breathing difficulties
- There is persistent bleeding

Have a plan in place to get help in the event of an emergency.

How to Get Around Alexandra Hospital



Block 1

Level 1

- Clinic F, Clinical Measurement Centre
- Pharmacy

Level 2

- Clinic J, Integrated Care Clinic | Well Clinic
- Clinic K, Healthy Ageing Clinic | General Surgery Centre

Level 3

- Ward 7

Block 2

Level 1

- Clinic D, Dental Centre
- Clinic E, Orthopaedic Centre | Anaesthesia Outpatient Consultation Clinic

Level 3

- Day Surgery Operating Theatre (DSOT)

Block 4

Level 1

- Ambulatory Surgery Centre
- Endoscopy Centre
- Rehabilitation 1

Level 2

- Wards 2 and 3

Level 3

- Wards 4 and 5
- Intensive Care Unit 2 (ICU 2)

Block 6

Level 1

- Diagnostic Imaging 2 (DI 2)
- 24-HR Urgent Care Centre

Level 2

- Diagnostic Imaging 3 (DI 3)
- Major Operating Theatres 1 and 2 (MOT 1 & 2)

Level 3

- Major Operating Theatres 3 and 4 (MOT 3 & 4)
- Intensive Care Unit 1 (ICU 1)

Block 7

Level 1

- Wards 8 and 9

Level 2

- Wards 10 and 11

Level 3

- Wards 12 and 13

Block 11

Level 1

- Rehabilitation 2

Block 24

Level 1

- Active Health Lab

Block 28

Level 1

- Care and Counselling
- Clinic A, Ear, Nose and Throat Centre (ENT Centre)

Level 2

- Clinic B, Eye Surgery Centre

The information provided in this publication is meant purely for educational purposes and may not be used as a substitute for medical diagnosis or treatment. You should seek the advice of your doctor or a qualified healthcare provider before starting any treatment or if you have any questions related to your health, physical fitness or medical conditions. Information is accurate at time of printing (June 2019) and subject to revision without prior notice.

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