## STEADI-R<sub>X</sub>

## **Community Pharmacy Fall Risk Checklist**

Patient:				
Date of Birth:			Date:	
Fall Risk Factor(s) Identified				
FALL HISTORY	PRESENT?		NOTES	
Any falls in the past year?	Yes	🗆 No		
Worries about falling?	Yes	🗆 No	_	
Feels unsteady when standing or walking?	Yes	🗆 No		
POSTURAL HYPOTENSION				
Patient-reported symptoms of lightheadedness or dizziness from lying to standing?	🗌 Yes	🗆 No		
MEDICATION CLASSES WITH FALL RISK	<b>MEDICATION(S)</b> Include medication name, dosage prescribed, and administration directions.			PRESCRIBED BY:
Anticonvulsants				
Antidepressants				
Antihypertensives				
Antipsychotics				
Antispasmodics				
Benzodiazepines				
Opioids				
Sedative hypnotics				
Tricyclic antidepressants				
Other (e.g., OTC agents)				

## **Notes:**

**STEADI-Rx** is a pharmacy initiative to reduce the risk of falls in older adults through collaboration between healthcare providers and pharmacists. It was developed by the University of North Carolina Eshelman School of Pharmacy and School of Medicine through a grant from the Centers for Disease Control and Prevention.