TITLE: Post-Fall Monitoring in Long-Term Care: Guidelines

DATE: 17 February 2012

RESEARCH QUESTION

What are the evidence-based guidelines regarding the frequency and type of monitoring required for patients experiencing a fall in long-term care?

KEY MESSAGE

Limited evidence was identified regarding the frequency and type of monitoring required for patients experiencing a fall in long-term care; evidence-based guidelines suggest a post-fall evaluation using a Post-Fall Assessment Tool or algorithm which includes a physical assessment of the patient and all possible contributing factors to the fall.

METHODS

A limited literature search was conducted on key resources including PubMed, The Cochrane Library (2012, Issue 1), University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and abbreviated list of major international major international health technology agencies, as well as a focused Internet search. Methodological filters were applied to limit retrieval to health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, and guidelines. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2007 and February 6, 2012. Internet links were provided, where available.

The summary of findings was prepared from the abstracts of the relevant information. Please note that data contained in abstracts may not always be an accurate reflection of the data contained within the full article.
RESULTS

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

Three evidence-based guidelines and recommendations were identified regarding the frequency and type of monitoring required for patients experiencing a fall in long-term care. No health technology assessment reports, systematic reviews, meta-analyses, randomized controlled trials, or non-randomized studies were identified. Additional references of potential interest are provided in the appendix.

OVERALL SUMMARY OF FINDINGS

Three evidence-based guidelines and recommendations\(^1\)\(^-\)\(^3\) suggest a post-fall evaluation using a Post-Fall Assessment Tool or algorithm which includes a physical assessment of the patient and all possible contributing factors to the fall. One guideline suggests that patients be monitored for approximately 48 hours following an observed or suspected fall as delayed complications may potentially arise.\(^2\) Once an assessment has ruled out any significant injury to the patient, the following should be documented:

- history of the fall or witness description\(^2\)
- patient’s underlying illness and problems\(^2\)
- patient medications and care plan\(^2,3\)
- environmental conditions surrounding the area of the fall\(^2,3\)
- functional, sensory, and psychological status of the patient\(^2\)

If a patient experiences a serious injury from a fall, an in-depth analysis (e.g. a critical incident review) is required.\(^3\)
REFERENCES SUMMARIZED

Health Technology Assessments
No literature identified

Systematic Reviews and Meta-analyses
No literature identified

Randomized Controlled Trials
No literature identified

Non-Randomized Studies
No literature identified

Guidelines and Recommendations

   See section 2.C.1 ‘Post Fall Evaluation’

   See ‘Follow-Up Monitoring of Condition’

   See Appendix C, ‘Post-Fall Management’

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APPENDIX – FURTHER INFORMATION:

Additional References
