

Falls and Mobility

- Goal:** To provide an opportunity for the fellow to learn the causes of gait disorders and falls in older adults and to manage these using appropriate non-pharmacologic treatments
- Location:** Benedum Geriatrics Clinic
200 Lothrop Street
Pittsburgh, PA 15213
- Preceptor:** Stephanie Studenski, MD. Dr. Studenski is a dual-fellowship trained (geriatrics and rheumatology) Professor of Medicine with expertise in mobility and falls in older adults.
- Experience:** The fellow is expected to see and evaluate at least five (5) patients in the Falls Clinic.

Competency- based Objectives:

Medical Knowledge

1. To understand the different components of normal gait and mobility
2. To understand the sensory, central processing and effector changes with aging which contribute to gait disorders and falls, and to understand the significance of different risk factors for falls in different subpopulations of the elderly
3. To describe medical conditions that can present with balance problems.
4. To understand the role of drugs in contributing to gait disorders

Patient Care (Clinical Skills)

5. To perform an accurate and thorough gait and balance exam.
6. To assess environmental factors which contribute to mobility and balance problems.
7. To review a patient's medications and be able to identify those that might contribute to falls.
8. To function in an interdisciplinary team in collaboration with rehabilitation, nursing and social work professionals to assess and plan care for persons with mobility and balance disorders.

Patient Care (Patient Management Skills)

9. To be proficient in incorporating accessory information (records from other physicians, rehabilitations specialists, diagnostic testing including imaging) into a patient's plan of care

10. To refer appropriately to other health care professionals such as PT, OT, and optometry, who can help the older adult with falls.
11. To prescribe assistive devices for mobility, orthotics and home modifications for persons with balance and gait disorders

Evaluations: Competency-based evaluation by preceptor at end of rotation

Recommended reading:

Guideline for the prevention of falls in older persons. American Geriatrics Society, British Geriatrics Society, and American Academy of Orthopaedic Surgeons Panel on Falls Prevention. [J Am Geriatr Soc 2001; 49:664-72.](#)

Carter ND, Kannus P, Khan KM. Exercise in the prevention of falls in older people: a systematic literature review examining the rationale and the evidence. [Sports Med 2001; 31:427-38](#)

Day L, Fildes B, Gordon I, Fitzharris M, Flamer H, Lord S. Randomised factorial trial of falls prevention among older people living in their own homes. [BMJ 2002; 325:128.](#)

Gillespie LG, WJ; Robertson, MC; Lamb, SE; Cumming RG, Rowe, BH. Interventions for preventing falls in elderly people. [Cochrane Database of Systematic Reviews 2003.](#)

Leipzig RM, Cumming RG, Tinetti ME. Drugs and falls in older people: a systematic review and meta-analysis: I. Psychotropic drugs. [J Am Geriatr Soc 1999; 47:30-9.](#)

Leipzig RM, Cumming RG, Tinetti ME. Drugs and falls in older people: a systematic review and meta-analysis: II. Cardiac and analgesic drugs. [J Am Geriatr Soc 1999; 47-50.](#)

Lord SR, Menz HB, Tiedemann A. A physiological profile approach to falls risk assessment and prevention. [Phys Ther 2003; 83:237-52.](#)

Tinetti ME, Inouye SK, Gill TM, Doucette JT. Shared risk factors for falls, incontinence, and functional dependence. Unifying the approach to geriatric syndromes. [JAMA 1995; 273: 1348-53.](#)

Tinetti ME. Clinical practice. Preventing falls in elderly persons. [N Engl J Med 2003; 348:42-.](#)

Preceptor

Fellow

Date: _____

Date: _____