

# Morse Fall Scale EHR Screens

## Inpatient and Surgical Services



**Overview:** The Morse Fall Scale is an evidence-based risk stratification tool for fall prevention practices. The screenshots and notes below outline changes within the EHR in alignment with the 2022.2 release.

### Safety/Risk Regulatory

The Safety/Risk/Regulatory screen has been updated with a new Morse Falls Scale and will be applicable to all acute care inpatient populations except for dedicated Behavioral Health units, Inpatient Rehab units, and Pediatric patients.

#### EHR Screen

Safety/Risk/Regulatory

Assess fall risk!

1 Yes

Fall risk should be documented at admission, every shift and any change in status

Isolation status: Standard precautions \*

Assess sepsis:

Assess vaccines:

Assess adult skin risk:

Assess pediatric skin risk:

**Assess fall risk:**

Assess suicide:

Assess Broset violence screening:

Assess trauma alcohol screening (CAGE):

Assess depression screening:

(End)

#### Process Step

Select “Yes” to document fall risk at outlined intervals.

##### Inpatient

- Upon admission
- Once per shift
- PRN with any change in patient status or level of care

##### Outpatient Surgery

- Once during pre-op phase in Same Day Surgery
- Once during Phase II recovery
- PRN with any change in patient status or in event of extended recovery

##### Inpatient Surgery

- Once during pre-op phase in Same Day Surgery or inpatient unit
- Once in inpatient unit following surgery
- PRN with any change in patient status or in event of Phase I recovery holds

## EHR Screen

Morse Fall Scale score and risk level:

Click box to display full documentation -->

History of falling (immediate or previous):>Yes \*

Secondary diagnosis:>No \*

Ambulatory aid:>Crutches/cane/walker \*

IV/heparin lock:>Yes \*

Gait/transferring:>Normal/bedrest/immobile \*

Mental status:>Oriented to own ability \*

Morse Fall Scale score and risk level:>

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Morse Fall Scale score and risk level:

Click box to display full documentation -->

History of falling (immediate or previous):>Yes \*

Secondary diagnosis:>No \*

Ambulatory aid:>Crutches/cane/walker \*

IV/heparin lock:>Yes \*

Gait/transferring:>Normal/bedrest/immobile \*

Mental status:>Oriented to own ability \*

Morse Fall Scale score and risk level:>60

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Morse Fall Scale score and risk level:

Click box to display full documentation -->

History of falling (immediate or previous):>Yes \*

Secondary diagnosis:>No \*

Ambulatory aid:>Crutches/cane/walker \*

IV/heparin lock:>Yes \*

Gait/transferring:>Normal/bedrest/immobile \*

Mental status:>Oriented to own ability \*

Morse Fall Scale score and risk level:>60

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## Process Step

### Complete Morse Fall Scale screening questions:

- History of falling
- Secondary Diagnosis
- Ambulatory aid
- IV/heparin lock
- Gait/transferring
- Mental status

### View the final score and risk level\*

*\*Due to native Meditech functionality, the risk level will not be visible when the cursor is in the final query field on this screen.*

*Simply arrow up or view the Morse Fall Scale in its entirety by clicking to the right of the red information bar.*

MORSE FALL SCALE

History of falling: immediate or previous

- Yes (25)
- No (0)

Secondary diagnosis

- Yes (15)
- No (0)

Ambulatory aid

- None/bedrest/nurse assist (0)
- Crutches/cane/walker (15)
- Furniture (30)

IV/Heparin Lock

- Yes (20)
- No (0)

Gait/Transferring

- Normal/bedrest/immobile (0)
- Weak (10)
- Impaired (20)

Mental Status

- Oriented to own ability (0)
- Forgets limitations (15)

No Risk: 0

to <end of text> <Return>/<Esc>/<Exit> when done

## EHR Screen

Morse Fall Scale

Active fall prevention interventions:

<input type="checkbox"/> 1 Assistive devices	<input type="checkbox"/> 7 Physical PSA	<input type="checkbox"/> 13 Other additional interv
<input type="checkbox"/> 2 Bed/chair alarm	<input type="checkbox"/> 8 Slow position changes	
<input type="checkbox"/> 3 Diversion techniques	<input type="checkbox"/> 9 Supervised/assisted amb	
<input type="checkbox"/> 4 Gait belt	<input type="checkbox"/> 10 Supervised toileting	
<input type="checkbox"/> 5 Low bed	<input type="checkbox"/> 11 Virtual PSA	
<input type="checkbox"/> 6 Med review/timing optimiz	<input type="checkbox"/> 12 Visual aids accessible	

Active fall prevention interventions: >

Additional fall prevention interventions:

Document maternal risk for newborn drop/falls:

(Prev Page)  (End)

## Process Step

**Assign fall prevention interventions based on individualized patient risk factors.**

*NOTE: This is a multi-select field to capture all applicable nursing interventions.*

*Additional fall prevention interventions is a required, free-text field when "Other additional interv" is selected in the Active fall prevention interventions field.*