

# Morse Fall Scale Huddle Card – Surgical



**Overview:** The Morse Fall Scale is an evidence-based risk stratification tool for fall prevention practices. The elements outlined below should be assessed routinely according to the table at the bottom of this page.

## Fall Risk Screening Frequency

OUTPATIENT SURGERY	INPATIENT SURGERY
<input type="checkbox"/> Once during pre-op phase in Same Day Surgery	<input type="checkbox"/> Once during pre-op phase in Same Day Surgery or inpatient unit
<input type="checkbox"/> Once during Phase II recovery	<input type="checkbox"/> Once in inpatient unit following surgery
<input type="checkbox"/> PRN with any change in patient status or in event of extended recovery	<input type="checkbox"/> PRN with any change in patient status or in event of Phase 1 recovery holds

## Morse Fall Scale

Element	Responses (Score)	Gait/Transferring
<b>History of Falling</b> <i>(Immediate or Past 3 Months)</i>	<ul style="list-style-type: none"> <li>No (0)</li> <li>Yes (25)</li> </ul>	<p><b>Weak</b></p> <ul style="list-style-type: none"> <li>Stooped stance</li> <li>Able to lift the head while walking</li> <li>Short, shuffled steps</li> </ul> <p><b>Impaired</b></p> <ul style="list-style-type: none"> <li>Difficulty rising from seated position</li> <li>Takes several attempts to stand</li> <li>Watches the ground while walking</li> <li>Support person / item is needed to steady oneself</li> </ul>
<b>Secondary Diagnosis</b> <i>(&gt; 2 Medical Diagnoses in Chart)</i>	<ul style="list-style-type: none"> <li>No (0)</li> <li>Yes (15)</li> </ul>	
<b>Ambulatory Aid</b>	<ul style="list-style-type: none"> <li>None / bedrest / nurse assist (0)</li> <li>Crutches / cane / walker (15)</li> <li>Furniture (30)</li> </ul>	
<b>IV/Heparin Lock</b>	<ul style="list-style-type: none"> <li>No (0)</li> <li>Yes (20)</li> </ul>	
<b>Gait/Transferring</b>	<ul style="list-style-type: none"> <li>Normal / bedrest / immobile (0)</li> <li>Weak (10)</li> <li>Impaired (20)</li> </ul>	
<b>Mental Status</b>	<ul style="list-style-type: none"> <li>Oriented to own ability (0)</li> <li>Forgets limitations (15)</li> </ul>	

Fall Risk Levels		
Low Risk	Medium Risk	High Risk
Score: 0-24	Score: 25-44	Score: 45+

### SECONDARY DIAGNOSIS

Secondary diagnoses can be viewed via the provider-completed History & Physical documentation and Problem List (available for viewing in the Progress Notes section).