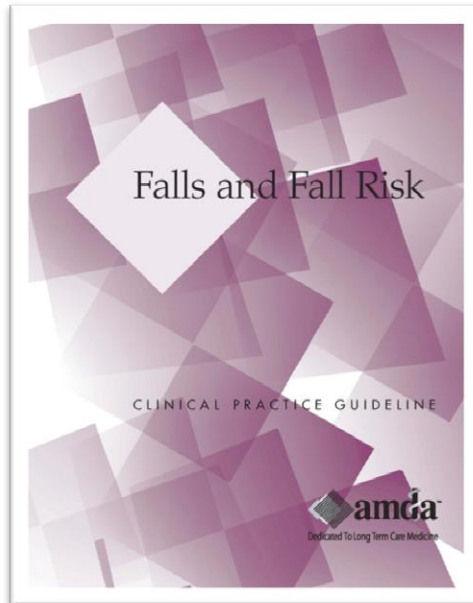


Falls and Fall Risk Clinical Practice Guideline



Continuing Professional Education Program Self-Study Course

Written by Liz Friedrich, MPH, RD, CSG, LDN, FAND

Edited by Becky Dorner, RDN, LD, FAND



Your Premier Senior Nutrition Resource

www.beckydorner.com

info@beckydorner.com

800-342-0285

546 Scotland Street
Dunedin, FL 34698

AMDA Falls and Fall Risk Clinical Practice Guideline - CPE Self-Study Course

©2017 Becky Dorner & Associates, Inc.

No part of this publication may be sold, published, made part of another program, copied, reproduced, transmitted, scanned, altered or modified by any means without prior written authorization of the copyright holder.

Health professionals are encouraged to apply what they learn from this publication in their practice. It is provided for your own personal, educational non-commercial use as a resource aid only. The program provides general concepts and, therefore, where its use may be appropriate for one person, its use may not be appropriate for another. It is not intended to be a substitute for professional medical advice. BD&A shall not be liable for any loss or damage directly or indirectly to the users of this publication.

**AMDA Falls and Fall Risk Clinical Practice Guideline -
CPE Self-Study Course**

Acknowledgements

Continuing Professional Education Program Self-Study Course

Written by Liz Friedrich, MPH, RD, CSG, LDN, FAND
President of Friedrich Nutrition Consulting in Salisbury, NC

Edited by Becky Dorner, RDN, LD, FAND
President, Becky Dorner & Associates, Inc.
Dunedin, FL

Thank you to the following expert reviewers for carefully reviewing this course:

Mary Ellen Posthauer, RDN, CD, LD, FAND
President, M.E.P. Healthcare Dietary Services, Inc.
Evansville, IN

Rose Hoenig, RD, CSG, LD
Consultant Dietitian
Davenport, IA

Mary (Marne) E. Keeler, RDN, LD
Director of Clinical Services, Abshire Dietary Consulting, LLC
El Campo, TX

AMDA Falls and Fall Risk Clinical Practice Guideline - CPE Self-Study Course

Professional Approvals

For details on professional approvals for this course, please check the product description on our website. You may also wish to visit this page: beckydorner.com/continuing-education/professional-approvals/.

Becky Dorner & Associates, Inc. has been a Continuing Professional Education (CPE) Accredited Provider (NU004) with the Commission on Dietetic Registration (CDR) since 2002.

We maintain records of course completions for a period of 7 years.



How to Complete this Course and Receive Your Certificate

For details on how to complete a continuing education course and obtain your certificate, please visit beckydorner.com/continuing-education/how-to-complete-cpe/.

This course and test must be completed prior to the expiration date. To obtain your continuing education certificate, you must review the material provided, take and pass an online test, and complete a simple evaluation. You may re-take the online test as many times as needed prior to the expiration date. If you are interrupted and cannot finish the test, you can save the test and come back later to finish it.

Carefully review the contents of this program. Keep in mind the practical applications it has for you in your individual setting. The focus is to increase your knowledge and application of the subject matter. For multiple choice questions select the one best answer from the choices given.

AMDA Falls and Fall Risk Clinical Practice Guideline - CPE Self-Study Course

Course Expiration Date <small>Must be completed prior to this date</small>	Continuing Education Hours	CDR Level
June 11, 2020	1	II

Course Description

The *AMDA Falls and Fall Risk Clinical Practice Guideline* outlines potential causes of falls and interventions to address fall prevention in long-term care facilities.

Falling is a significant cause of injury and death in older persons, especially the frail elderly. Among other things, decreased body weight and osteoporosis may result in serious injuries or fracture as a consequence of a fall. Nutrition assessment can help identify risk factors for falls that can be addressed with nutrition intervention.

Objectives:

After completion of this CPE program, participants will be able to:

1. Identify how body weight might affect the outcome of a fall.
2. Understand medical conditions that could increase fall risk.
3. Identify nutrition-related interventions that might help decrease fall risk.
4. Understand the impact of several medications and nutrition supplements on fall risk.

Suggested CDR Learning Needs Codes

- 5040 Long Term Care, Intermediate, Assisted Living
- 5100 Elderly
- 5130 Bone diseases, osteoporosis
- 5410 Client protocols, clinical guidelines

Suggested CDR Performance Indicators

- 4.1.1 Demonstrates effective problem solving and professional judgment to address a need
- 4.1.2 Interprets and integrates evidence-based research and literature in decision making
- 8.1.2 Applies knowledge of food and nutrition as well as the biological, physical and social sciences in practice
- 10.2.9 In collaboration with the client and interdisciplinary team (including NDTRs), selects and implements current and evidence-based nutrition interventions and patient education.

Note: Numerous Other Learning Needs Codes and Performance Indicators May Apply.

AMDA Falls and Fall Risk Clinical Practice Guideline - CPE Self-Study Course

Continuing Professional Education Self-Assessment Test and Answer Key

Mrs. Anderson is an 83-year old resident of a skilled nursing facility who was recently hospitalized after she tripped over a bedroom slipper. Testing revealed that she had a mild stroke that probably contributed to the fall. The episode resulted in contusions, increased confusion, and some left-sided weakness but no fracture. Her diagnoses include recent stroke, Alzheimer's dementia, depression, anxiety, type 2 diabetes, and mild osteoporosis. She is 63 inches tall, weighs 152 pounds, and has a BMI of 27, which is normal for her weight history. She returned to the facility on new medications, including Metformin, Lisinopril, Vitamin E, and fish oil supplements. She also takes Ativan, Zoloft, and calcium citrate.

1. Mrs. Anderson's fall didn't result in a fracture because:
 - a. She is underweight, so had less impact when she fell.
 - b. She is overweight, so had fat and muscle to absorb the impact of the fall (step 5 page 10).
 - c. She is obese, so had fat and muscle to absorb the impact of the fall.
 - d. Her weight had no impact on the risk for fracture when she fell.

2. A nutrition assessment might help identify nutrition-related risk factors for falls, including which of the following?
 - a. Dehydration (Table 1 page 3)
 - b. Constipation
 - c. Inadequate protein intake
 - d. Excessive calorie intake

3. Which vitamin supplement should be recommended for Mrs. Anderson?
 - a. A higher dose of calcium
 - b. A multivitamin
 - c. Vitamin D (page 10, page 12)
 - d. Vitamin B12

4. Which new medication could contribute to Mrs. Anderson having another fall?
 - a. Vitamin E
 - b. Fish oil
 - c. Metformin
 - d. Lisinopril (Tables 2 and 3, page 4)

AMDA Falls and Fall Risk Clinical Practice Guideline - CPE Self-Study Course

5. Complications of diabetes that can contribute to falls include:
 - a. Kidney damage.
 - b. Peripheral neuropathy (page 12).
 - c. Gastroparesis.
 - d. Coronary artery disease.