

Fall Prevention around the House

We All Fall Down

One in three older adults will suffer a fall each year. Falling can result in a simple scrape or more serious injury including bruises, sprains, broken hips or internal bleeding. You can reduce your risk of falls if you know how where in your home to look for hazards.

Stairways

Stairs are a common site for falls. To reduce your risk of falling, keep stair landings clear of clutter including shoes, laundry, children or grandchildren's toys.

Night lights at the top and bottom of stairways can alert you of anything placed on the stairs during the day that you might have forgotten. Use your hand rail going up and down the stairs every time and pause if you get winded, taking a knee if needed.

Kitchens

You likely spend most of your time indoors in your kitchen. Your falling risk in the kitchen includes wet floors as a result of dishwashers or water spills from the sink. Throw rugs can catch spills but can bunch up and increase your risk of falling. Wet rugs should be replaced frequently to avoid tracking water throughout your house.

Try to dry spills as they happen and pick up ice cubs before they melt.

Bathrooms

You can improve your safety by installing inexpensive suction cup grab bars. To secure your footing getting into and out of showers and bath tubs - non-skid mats or decals can be used. Carpet tape may be used to keep rugs from curling or sliding. Night lights from bed to bathroom ensure safe trips to and back from the bathroom throughout the evening.

Most falls are preventable. Knowing your home's higher risk areas can help you avoid an accidental fall. You should report all falls to your healthcare professional no matter how minor they seem.

For more information on safety or for a home safety checklist, visit www.PTINR.com or call 1-877-262-4669



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1. Bristol- Duthie EH Jr, Katz PR, eds. Practice of geriatrics. 3d ed. Philadelphia: Saunders, 1998:199-206, and Tinetti ME, Doucette J, Claus E, Marottoli R. Risk factors for serious injury during falls by older persons in the community. J Am Geriatr Soc. 1995;43:1214-21.