What to do TIF SOME CONTROL Falls are a leading of



especially a senior



3

Falls are a leading cause of hospitalization among older individuals, impacting confidence and future mobility. The risk of falls in the elderly is heightened due to potential risk oversight and strong independence. Confusion and home hazards further contribute to these accidents.

FIRST AID FOR FALLS



- Check for **Dangers**
- Check for Response
- Send for help.
 Call 000
- Airway
 Open mouth.
 Check for obstructions
- Breathing. Normal?
 Yes put in recovery position
 No start CPR
- CPR
 30 compressions:
 2 breaths
 - Attach **Defibrillator** (AED) as soon as available, follow prompts

1.1

- Approach calmly, checking for dangers to yourself and the individual
- Follow DRSABCD
- If conscious, talk to them, inquire about injuries, and assess for bleeding or bruising



If they might have a neck or spine injury, avoid moving them. Call an ambulance and reassure them until help arrives.

(1.5)

Apply **firm pressure** to any bleeding

1.6

If signs of shock appear, lie them back, raise their legs, and **seek medical help**.

THE INITIAL ACTION PLAN OF DRSABCD

In an emergency **call triple zero** (000) for an ambulance. **Continue CPR** until the ambulance arrives or the person responds





Help them into a sitting position slowly, watching for pain, discomfort, or dizziness.



With assistance, guide them into a chair or back to bed





Reassuringly check for unseen injuries, crucial for diabetics as they may not feel the injury



Monitor them for 24 hours, inform next of kin, and complete an accident form if possible

If the person is unconscious and not breathing, proceed with **DRSABCD and perform CPR until help arrives**.