**Morse Fall Scale**

| **Item** | **Item Score** | **Patient Score** |
| --- | --- | --- |
| 1. History of falling (immediate or previous) | No 0Yes 25 |  |
| 2. Secondary diagnosis (≥ 2 medical diagnoses in chart) | No 0Yes 15 |  |
| 3. Ambulatory aidNone Crutches/cane/walker Furniture | 01530 |  |
| 4. Intravenous therapy/heparin lock | No 0Yes 20 |  |
| 5. GaitNormal/wheelchairWeak\*Impaired† | 01020 |  |
| 6. Mental statusOriented to own abilityOverestimates/forgets limitations | 015 |  |
| **Total Score: Tally the patient score and record.**<25: Low risk25-45: Moderate risk>45: High risk |  |

\* Weak gait: Short steps (may shuffle), stooped but able to lift head while walking, may seek support from furniture while walking, but with light touch (for reassurance).

† Impaired gait: Short steps with shuffle; may have difficulty arising from chair; head down; significantly impaired balance, requiring furniture, support person, or walking aid to walk.