

Falls: Timed Get Up and Go

Note: The following applies to Tufts Medicare Preferred HMO and Tufts Health Plan Senior Care Options members.

The "Get Up and Go Test" is an assessment that should be conducted as part of a routine evaluation when dealing with older persons. Its purpose is to detect "fallers" and to identify those who need evaluation.

The staff should be trained to perform the "Get Up and Go Test" at check-in and query those with gait or balance problems for falls.

INITIAL CHECK

All older persons who report a single fall should be observed as they:

- Stand without using their arms for support, from sitting position.
- Walk 10 feet, turn and return to the chair.
- Sit back in the chair without using their arms for support.

Individuals who have difficulty completing the above in less than 20 seconds or who demonstrate unsteadiness performing this test require further assessment.

FOLLOW-UP ASSESSMENT

In the follow-up assessment, ask the person to:

- Sit.
- Stand without using their arms for support.
- Close their eyes for a few seconds, while standing in place.
- Stand with eyes closed, while you push gently on his or her sternum.
- Walk a short distance and come to a complete stop.
- Turn around and return to the chair.
- Sit in the chair without using their arms for support.

While conducting the test, pay attention to any abnormal movements. As you observe, answer the questions below. Record your assessment in the **Yes** or **No** boxes provided and/or on the "Falls Evaluation: Initial Visit" form.

Follow-Up Assessment Observations		
Is the person steady and balanced when sitting upright?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the person able to stand with their arms folded?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
When standing, is the person steady in narrow stance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
With eyes closed, does the person remain steady?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
When nudged, does the person recover without difficulty?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the person start walking without hesitancy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
When walking, does each foot clear the floor well?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there step symmetry, with the steps equal length and regular?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the person take continuous, regular steps?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the person walk straight without a walking aid?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the person stand with heels close together?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the person able to sit safely and judge distance correctly?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the person obviously fearful or anxious during assessment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Follow-Up Assessment Observations
Additional Observations