

To find out more information, please discuss this checklist during your next appointment with either your:

- › Doctor
- › Nurse
- › Optometrist
- › Pharmacist
- › Podiatrist
- › Dietitian or Nutritionist
- › Exercise Physiologist
- › Occupational Therapist
- › Physiotherapist
- › Speech Pathologist

These health professionals can advise you about steps you can take to help you to stay active, maintain your independence and mobility and decrease your risk of falling.

**This checklist provides information and does not constitute medical advice. Readers need to seek medical advice if they answered yes or were unsure about any of the statements within this checklist.**

This checklist has been adapted by Queensland Stay On Your Feet® with copyright and trademark permission from Department of Health WA and acknowledgement to South Australian Adelaide West and NSW North Coast Public Health Unit Falls Prevention programs.

Published by the Queensland Government January 2008, Updated May 2009.

ISBN: 978-1-92477-02-0

© The State of Queensland, Queensland Health, 2008

The Queensland Government supports and encourages the dissemination and exchange of information. However, copyright protects this material. This material can be reproduced, made available online or electronically, provided it is for your personal, non-commercial use or use within your organisation, this material remains unaltered and the State of Queensland (Queensland Health) is recognised as the owner.

Inquiries for commercial use or to adapt this material should be addressed by email to:  
ip\_officer@health.qld.gov.au

An electronic version of this document is available at  
[www.health.qld.gov.au/stayonyourfeet/resources.asp](http://www.health.qld.gov.au/stayonyourfeet/resources.asp)

## Helpful organisations contact numbers and websites

- › Commonwealth CareLink  
on free call 1800 052 222  
[www9.health.gov.au/ccsd](http://www9.health.gov.au/ccsd)
- › 13 Health – 13 432584
- › National Continence Help Line freecall  
1800 330 066 [www.continence.org.au](http://www.continence.org.au)
- › Council of the Ageing Queensland (COTAQ)  
1300 738 348 [www.cotaq.org.au](http://www.cotaq.org.au)
- › Osteoporosis Queensland freecall  
1800 242 141  
[www.osteoporosis.org.au](http://www.osteoporosis.org.au)
- › Arthritis Queensland freecall  
1800 011 041 [www.arthritis.org.au](http://www.arthritis.org.au)
- › Home Assist Secure freecall: 1800 642 902  
[www.housing.qld.gov.au/programs/ch/  
support/has.htm](http://www.housing.qld.gov.au/programs/ch/support/has.htm)
- › Life Tec Queensland formerly Independent  
Living Centre phone 1300 885 886  
[www.lifetec.org.au](http://www.lifetec.org.au)
- › Medicines Line 1300 888 763  
[www.nps.org.au](http://www.nps.org.au)
- › Dietitians Association Australia  
Telephone: 1800 812 942  
[www.daa.asn.au](http://www.daa.asn.au)
- › Veterans Affairs General enquiries number  
133 254 [www.dva.gov.au](http://www.dva.gov.au)

# Checklist

## Queensland Stay On Your Feet®



### Will you stay active and independent?

If you are over 60 please take a couple of minutes to complete this checklist and then discuss your answers with a health care professional. Knowing and addressing your risk factors for falling is vital to reduce your risk of injury and loss of your independence.

### › My history of falling

1. I have had at least one fall in the last 6 months.  
agree  disagree  unsure

### › About my medications

2. I take sleeping tablets or tranquilisers or antidepressants.  
agree  disagree  unsure

### › About my level of exercise

3. I do less than 30 minutes of physical activity in a day such as brisk walking, swimming, cycling or group exercise.  
agree  disagree  unsure
4. I do less than two sessions of balance and strength exercise per week, for example Tai chi or a specific exercise program provided by a physiotherapist or fitness instructor.  
agree  disagree  unsure

### › About my balance and walking

5. I have difficulty getting up from a chair.  
agree  disagree  unsure
6. I have poor balance when walking.  
agree  disagree  unsure

### › About my feet

7. I have foot pain when walking: or, I have swelling and /or deformity of my feet.  
agree  disagree  unsure

### › About my eyesight

8. I have difficulties with my vision.  
agree  disagree  unsure
9. It has been more than 12 months since my eyes were tested or glasses checked.  
agree  disagree  unsure
10. I have difficulties with my vision even when wearing my glasses.  
agree  disagree  unsure

### › About my health conditions

11. I have or previously had the following:
- A. Problems with my heart, blood pressure or circulation  
agree  disagree  unsure
- B. A stroke  
agree  disagree  unsure
- C. Diabetes  
agree  disagree  unsure
- D. Parkinson's Disease  
agree  disagree  unsure
- E. Dizziness or funny turns  
agree  disagree  unsure
- F. Having to rush to the toilet or incontinence  
agree  disagree  unsure
- G. A recent major change in my health.  
agree  disagree  unsure

### › About healthy eating

12. I have lost weight recently without trying.  
agree  disagree  unsure
13. I have been eating poorly recently because of a decreased appetite.  
agree  disagree  unsure
14. Each day, I eat less than three to four servings of high calcium foods (such as milk, yoghurt, cheese, salmon or sardines).  
agree  disagree  unsure
15. I am not aware of my vitamin D blood levels.  
agree  disagree  unsure
16. I have a mouth, teeth, or swallowing problem that has changed the kind and/or amount of food I eat.  
agree  disagree  unsure

If you agreed with or were unsure for more than one of the previous statements, then you may be at risk of a fall, which may effect your future independence and mobility.

Please note that if you have osteoporosis your risk of a serious injury if you fall is even greater; please discuss falls prevention and osteoporosis management with your doctor.