**24 Hour Post Fall Observation Log**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of resident/ service user |  | Date of Birth |  |
| Residence |  | Date and time of fall |  |

**Observations should be done as soon as possible after the fall, then:**

* **Every 15 minutes for one hour**
* **Once half an hour later**
* **Once one hour later**
* **Once two hours later**
* **Every four hours until 24 hours post-fall. Wake the resident up to do the checks. *Do not assume the resident/ service user is simply asleep.***
* **Continue observations for a further 24 hours if there are ongoing concerns (contact GP/111 for advice)**

**Fill in the time observations are due in the ‘Time’ column on the chart**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Time** | **Reported Pain/ signs** | **Wounds/****Bruises** | **NEWS2 Score (if competent)** | **Comments** | **Signature** |
|  | **ASAP** |  |  |  |  |  |
|  | **15 min later** |  |  |  |  |  |
|  | **15 min later** |  |  |  |  |  |
|  | **15 min later** |  |  |  |  |  |
|  | **15 min later** |  |  |  |  |  |
|  | **Half hour later** |  |  |  |  |  |
|  | **One hour later** |  |  |  |  |  |
|  | **Two hours later** |  |  |  |  |  |
|  | **Four hours later** |  |  |  |  |  |
|  | **Four hours later** |  |  |  |  |  |
|  | **Four hours later** |  |  |  |  |  |
|  | **Four hours later** |  |  |  |  |  |
|  | **Four hours later** |  |  |  |  |  |