

Risky Habits That Can Lead to Falls

Read each statement and check the appropriate response.

	Always	Sometimes	Never
1. I lean on furniture and walls for extra support when I walk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I use the towel bar in my bathroom to help me get up from the tub or toilet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. There are hallways or other places in my house that are dimly lit and difficult to see.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Some of my clothes are too long and drag on the floor.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. If I get up at night I try to make my way through the dark without turning the light on.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I have difficulty putting on my clothes while I am standing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I wear socks, floppy slippers, or flip flops when I walk around the house.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I get up quickly to answer the phone or doorbell.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I have pets that tend to get underfoot.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. When I drop or spill things, I'll wait for the most convenient opportunity to pick it up.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I tend to get distracted whenever I try to do several tasks at the same time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Instead of making several trips, I try and carry as much as possible at one time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I tend to push myself, even when I get tired.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I usually leave my sunglasses on when I come in from the outside.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FREE FROM FALLS

A COMPREHENSIVE FALL PREVENTION PROGRAM FOR PEOPLE WITH MS

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15. I tend to walk down stairs without holding the handrail.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. I find myself walking fast or running to be on time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. I find that I get overtired by trying to do too much.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are you doing that might increase your risk of falls?