**Otago Exercise Program SESSION 0**

**Assessment Tracking**

**Participant ID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Initial Assessment Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- |
| Have you fallen in the past year? |
| ­­­­­­Are you unsteady when standing/walking? |
| Are you afraid of falling? |

|  |  |
| --- | --- |
| Initial TUG score |  |
| Initial 4SBT score (Pass/Fail, can they hold tandem stance at least 10 seconds). |  |
| Initial 30sec chair stand score |  |

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| --- |
| # Of Previous Falls: |
|  |

|  |  |
| --- | --- |
| Level Fall Risk: |  |

**Re-assessment Date (if completed):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Final TUG score** |  |
| **Final 4SBT score** (Pass/Fail, can they hold tandem stance at least 10 seconds). |  |
| **Final 30sec chair stand score** |  |