Public Abstract
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ABSTRACT: Epidemiological reports indicate high prevalence of falls in individuals age 65 and older. Currently in the United States, prevention standards are available primarily for the older adult population. Research has identified and prioritized physiologic factors predictive of future falls that may be present earlier than 65 years of age. Multidimensional fall risk screening can enable identification of modifiable impairments from each of the physiological system that contribute to balance and functional mobility. Identification of physical impairments will focus intervention and provide primary prevention of fall risk in the community dwelling adult.

Research methods involved evidence based compilation of a multidimensional fall risk screen (MFRS) and subsequent examination and fall risk stratification of 190 adults aged 20-79. This cross sectional study utilized descriptive, multivariate analysis and multiple regression statistical analyses to reject the null hypotheses. Results revealed successful implementation of community fall risk screening utilizing the MFRS. Adult scores demonstrated significant decrease in performance in young, middle aged and older adults. Sex and physical activity proved to be minor predictors of physical performance related to impairment of modifiable fall risk factors.

Research implications include: 1) community screening will be able to identify fall risk and preclinical disability that lead to decreasing physical functioning and increasing fall risk as aging occurs; 2) fall risk stratification can be used as a primary prevention strategy to provide the high functioning adult with information and direction on how to minimize physical impairments and be able to age healthy.