Predictors of a Fall Event in Hospitalized Patients With Cancer

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Fall prevention for hospitalized patients is an important nursing quality indicator. About 23%–42% of inpatient falls result in injury, with 2%–9% resulting in serious events including fractures, subdural hematoma, excessive bleeding, and death (Chelly et al., 2008; Enloe et al., 2005; Fisher et al., 2005; Hitcho et al., 2004). Wong et al. (2011) found that patients who fell and sustained serious injuries incurred $13,806 more cost and had a 6.9-day longer length of stay compared to matched patients who did not fall. Fall-related lawsuits generated against facilities and healthcare providers also can increase costs. In addition, fall injuries have cost implications for hospitals because Medicare reimbursement is eliminated for secondary diagnoses related to hospital-acquired fall injuries (Centers for Medicare and Medicaid Services, 2012).

Among hospitalized patients, those being treated for cancer have higher fall frequencies and injury rates than patients without cancer (Alcee, 2000; Hitcho et al., 2004; O’Connell, Baker, Gaskin, & Hawkins, 2007). In addition to general fall-risk factors, people with cancer have cancer-specific fall-risk factors, including neurologic and nutritional deficits as a result of cancer treatments, polypharmacy, and deconditioning from cancer-related fatigue (Dean et al., 1995; Holley, 2000; Holley & Borger, 2001). Cancer care is a highly prevalent reason for hospitalization; therefore, nurses need to understand evidence-based fall predictors so that processes and interventions can be developed and implemented to decrease patient risk.

Based on a review of the literature and previous research conducted by the authors, some characteristics of hospitalized patients with a cancer diagnosis who fell were similar to those of general medical-surgical hospitalized patients who fell. For example, mean age of adult patients with cancer who fell was 62.4 years (Capone, Albert, Bena, & Morrison, 2010) and mean age of adult medical-surgical inpatients in academic and nonacademic hospitals was 62–72 years (Krauss et al., 2007). Weakness was a prominent general characteristic in 80% of patients with cancer (Capone et