Glossary of Key Terms for the Global Guidelines for Falls Initiative.

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| **GLOSSARY OF KEY TERMS** | |
| **AGREE-II** | The Appraisal of Guidelines for REsearch & Evaluation (AGREE) Instrument is a tool that assesses the methodological rigour and transparency with which a clinical practice guideline is developed.1 |
| **Assessment Tools** | Fall risk assessment tools including balance, gait, and/or mobility assessment tools for falls prediction, completed by any healthcare professional.2 |
| **Cardiovascular Intervention** | Recommendations for cardiovascular interventions include any advice or guidance geared towards  management of syncope and cardiovascular risk factors for falls: this includes recommendations for  individuals with cardiovascular conditions (i.e., blood pressure outside of age/sex typical norms). |
| **Caregiver** | In the present review, caregivers or carers encompass all individuals who care for  older adults. |
| **Clinical Practice Guideline** | Recommendations on diagnosis and treatment of a medical condition predominantly for healthcare  professionals to use in clinical practice.3 |
| **Cognitive Factors and Management** | Management of cognitive factors includes any recognition of cognitive risk factors for falls, including  evaluation of cognitive impairment, performance in specific cognitive domains, and/or cognitive  management with interventions to enhance cognitive function to potentially reduce fall risk. |
| **Deprescribing** | The process of withdrawal of an inappropriate medication under the supervision of a health care  professional to manage polypharmacy and improve fall-related outcomes.4 |
| **Environment Modification** | Any guidance or advice on modifying the individual’s home environment (such as furnishings and adaptations to homes)2 to prevent obstacles that may increase the risk of falls. Environment modification also includes advice to prevent slips by modifying flooring to provide better grip and reduce the presence of loose rugs and carpets, which may serve as tripping hazards. |
| **Exercise Recommendations** | Any guidance or advice to perform structured physical activity for preventing future falls and/or managing the consequences of past falls. This includes supervised exercises by an instructor as well as unsupervised exercises recommended to individuals.2 |
| **Fall** | An event in which an individual comes to rest on the ground, floor, or lower level.5 |
| **Fall Related Injury** | An injury sustained following a fall.6 This includes medical attention for a fall such as fractures (other  than thoracic vertebral or lumbar vertebral), joint dislocation, hospitalization, head injury, sprain or  strain, bruising, swelling, cutting, or other serious injury following a fall. |
| **Fall Risk Assessment** | A set of assessments performed to identify individuals at highest risk for falls, upon whom to target  specific interventions.7 This includes fall screening tools (short tests to determine fall risk).2 |
| **Fall Risk Increasing Drugs (FRIDs)** | Medications known to increase the risk of falls.8-11 |
| **Falls Education** | Any advice or guidance on fall prevention and management strategies. |
| **Fall Risk Stratification Algorithm** | The systematic process of decision-making and intervention that should occur for falls risk case  findings in patients.12 |
| **Footwear Evaluation and Recommendations** | Any advice or guidance to modify footwear to reduce slips, trips, and falls. This is typically done by a  podiatrist or chiropodist.2 |
| **Fractures and Osteoporosis Management** | Any advice or guidance to prevent, or treat fractures and/or osteoporosis as risk factors for falls and  fall-related injuries. |
| **GRADE Recommendations** | The ‘‘Grades of Recommendation, Assessment, Development, and Evaluation’’ (GRADE) approach  provides guidance for rating quality of evidence and grading strength of recommendations in health  care.13 |
| **Hemodynamic Intervention** | Any advice or guidance geared towards management of syncope and hemodynamic risk factors  for falls: this includes recommendations for individuals with cardiovascular conditions (i.e.,  blood pressure outside of age/sex typical norms). Assessment of basic cardiovascular status such as  heart rate and postural pulse may also be done.2 |
| **Hip Protectors Recommendations** | Any guidance on the use of hip protectors for the prevention of fall-related injuries. Hip protectors consist of foam pads or plastic shields that are worn to protect and shield  individuals from hip fractures following a fall.14 |
| **Medication Review** | A systematic assessment of medications from medical records, prescriptions, and  supplementation by qualified medical personnel such as a physician, nurse, or pharmacist.15 |
| **Multifactorial Interventions** | Any recommendation to perform several intervention strategies simultaneously (i.e., physical exercise paired with vision modification) to prevent or minimize falls and related injuries. This may entail interventions that include two or more sub-domains that may be linked to an individual’s risk profile.2 |
| **Older Adults** | Individuals 60 years of age or older.16 |
| **Physiotherapy Referral** | Any advice for the individual to seek help from a physiotherapist to prevent future falls and/or  manage symptoms of previous falls. Physiotherapists include professionals who treat disorders of  bones, muscles, and the circulatory and nervous systems.2 |
| **Risk Stratification** | Any method to stratify individuals based on falls risk, indicating them to be at a high, moderate, or low risk for future falls. This entails a diagnostic process intended to plan coordinated treatment based on the individual’s falls risk.2 |
| **STOPPFall** | A screening tool used to identify pharmacological prescriptions that may increase the risk of falls in older adults.17 |
| **Technology (including wearables)** | Any technology to prevent and/or manage falls, including wearable technological assistive devices that can be worn on the individual while moving (i.e., watch) and communicate attributes of the individual to her/him based on sensors (i.e., step-count).18 |
| **Vitamin D Recommendations** | In the present review, recommendations in vitamin D entail any guidance or advice on supplementation with vitamin D to prevent and/or manage falls. |
| **Vision Modification** | Any advice or guidance to correct visual impairment for the prevention of future falls. Vision  modification methods include the prescription of glasses and/or contact lenses, as well as cataract  surgery to correct for visual impairment. Assessment and treatment of visual acuity, depth  perception, contrast sensitivity and cataracts are all a part of in vision modification for falls  prevention.2 |

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