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## DEFINITION OF A FALL

**Fall:** An unexpected event in which the participant comes to rest on the ground, floor, or lower level. (Lamb, et al 2005)

### FEAR OF FALLING (FOF) RISK FACTORS

- \* Fair or poor perceived general health
- \* Feeling unsteady
- \* Having 2 or more falls (Lach, 2005)

### POTENTIAL FACTORS FOR FALLING

- \* **Decreased muscle strength**
- \* **Decreased joint motion**
- \* **Decreased mobility**
- \* **Gait deficit**
- \* **Balance deficit**
- \* **Hearing deficit**
- \* **Visual deficit**
- \* **Neurological deficit**
- \* **Foot abnormalities**
- \* **Pain**
- \* **History of Falls**
- \* **Use of alcohol & medication**
- \* **Use of assistive device**

# ***Mobility Matters***



## **Mobility Assessment Tool® (MAT)**

***Assessment,  
intervention and  
rehabilitation tool  
for the  
21st Century***

### **CONTACT INFORMATION**

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## INTRODUCTION

**MOBILITY MATTERS:** In the day to day provision of patient treatment, mobility is addressed in balance, gait training, transfers and other therapeutic interventions to make a functional improvement toward a stated goal. Outside the work arena, mobility matters when we see a neighbor, loved one or friend struggle to maintain independence. Literature reports decreased mobility may lead to reduced social interaction, poor nutrition, loss of aerobic capacity and numerous physiological changes that have a negative impact on personal health.

Mobility matters when a person tries to cross a busy intersection, attend a scheduled appointment, shop for groceries, participate in a social activity or go to the bathroom. Mobility, while taken for granted until compromised, does matter to the health and safety of countless people in today's society.

Assessment tools and therapeutic interventions involving balance, gait training and vibration yield the potential to be effective modalities when applied appropriately in the clinic to improve or maintain patient function, independence and mobility. However, practitioners must familiarize themselves with contemporary research and literature to maximize the effectiveness of these tools in daily practice.

The lack of mobility and the resulting potential for falls poses a significant health risk in the geriatric community. The goal of Mobility Matters® is to provide contemporary assessment techniques, interventions and resources to provide for mobility problems.

## INCORPORATES

- \* Evidence-Based Medicine
- \* Healthy People 2010
- \* Physical Therapy Guide
- \* Safety of Seniors Act
- \* National Safety Council
- \* American Academy of Neurology, 2008

## VERSATILE ASSESSMENT TOOL

- \* Dynamic Gait Index (DGI) \*21 foot only
- \* Four Square Step Test (FSST)
- \* Figure-of-8 Walk Test (F8W)
- \* Timed Up and Go Test (TUG)

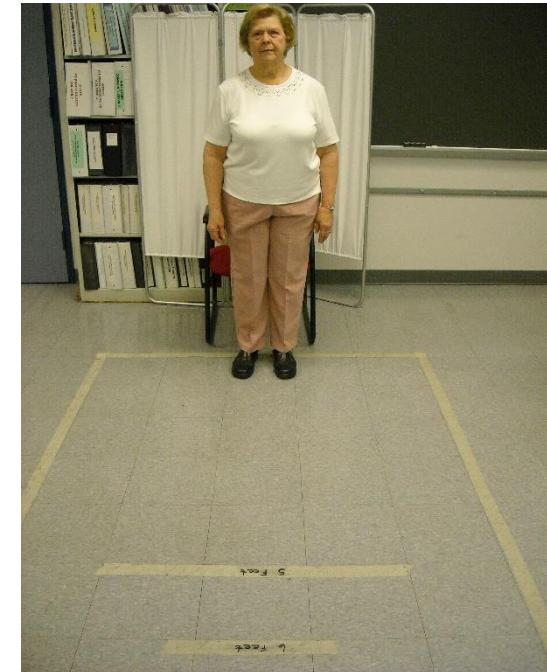
## BENEFITS

- \* Quickly perform valuable assessment tests
- \* Visible markings in feet and meters enhancing assessment observation and video recording of therapeutic interventions
- \* Portable, convenient set-up and breakdown
- \* Adapts to any clinic, facility or home
- \* Complement to Telehealth
- \* Complement to Home Health
- \* Complement to Balance Therapy
- \* Complement to Vibration Therapy
- \* Developed from contemporary literature and research
- \* Stores, transports and cleans easily

## Mobility Assessment Tools

- \* Mobility Assessment MAT® (MAT) 11 foot
- \* Mobility Assessment MAT® (MAT) 14 foot
- \* Mobility Assessment MAT® (MAT) 21 foot
- \* Mobility Assessment Manual

## ELIMINATE TAPE ON THE FLOOR



## MOBILITY ASSESSMENT TOOL® (MAT)

