Patient Delivered Handover
Falls Risk

This sheet is not a script that must be followed. It has been provided to allow you to have a conversation and share important information between yourself and health care staff.

Hello my name is ……

I am in hospital because ……

……

Today I feel ……

I have / have not been seen by the doctors today, and they said ……

……

……

I have been seen by the:

☐	☐	☐	☐	☐
Dietitian	Physiotherapist	Pharmacist	Occupational Therapist	Social Worker

And they have said……

……

Please turn over

Adapted for Safety Fundamentals for Patient Centred Care from The Patient's Voice © State of NSW (NSW Ministry of Health – Nepean Blue Mountains Local Health District (NBMLHD)) 2019.

Before I walk or get up I need to …….

……..

……..

I need help with …….

……

……

……

I hope to go home on …….

……

……

……..

I am worried about …….

……

……

I need you to know ……

……..

……..

Anything else you wish to add …….

……..

……..

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