

Distinguishing a Fall for J1800

What is a fall? An unintentional change in position coming to rest on the ground, floor, or onto the next lower surface (e.g., onto a bed, chair, or bedside mat). A fall may be witnessed or unwitnessed. Falls are not a result of an overwhelming external force (e.g., a person pushes another person).

Intercepted Fall: Occurs when the patient/ resident would have fallen if they had not caught themselves or had not been intercepted by another person. This is still considered a fall.

Challenging a Patient's/Resident's Loss of Balance: An anticipated loss of balance resulting from a supervised therapeutic intervention, during which the patient's/ resident's balance is being intentionally challenged during balance training, is not considered a fall when coding J1800.



Post-Fall Injury Terms for J1900

No injury: No evidence of any injury is noted on physical assessment; no complaints of pain or injury by the patient/resident; and no change in the patient's/resident's behavior is noted after the fall

Injury (except major): Includes skin tears, abrasions, lacerations, superficial bruises, hematomas, and sprains; or any fall-related injury that causes the patient/resident to complain of pain.

Major injury: Bone fractures, joint dislocations, closed head injuries with altered consciousness, and subdural hematoma.







