One in Four hospitalizations in participants enrolled in "Pre" using the electronic medical records Evaluation of implementation and outcome measures The OEP in this setting could be beneficial and cost-effective.

There was a positive anecdotal impact on quality of life such as increased mobility and energy levels. Exercise Program falls risk. Despite interventions to decrease falls rates and screening for falls, despite interventions to decrease falls rates and screening for falls.

The main purpose of this project is to evaluate the impact of Otago Exercise Program on hospitalizations related to falls and quality of life of elderly adults at PACER for 8 weeks.

The project is divided into nine categories to measure quality of life.

Hospitals related to falls using the electronic medical records and non-functional ability indicating risk of falling (balance, strength, gait tests), 2) Able to walk 3 meters with or without an assistive device, and 3) aged 55 and older.

A literature search was performed to find relevant literature and the John Hopkins’ Evidence-Based Practice research and quality evidence appraisal form were used to gauge the strength, level, and quality of evidence.

The OEP was developed to evaluate and generate new knowledge on the impact of this fall prevention program in the geriatric population for future projects in various settings.

The project was implemented over eight weeks at the PACE Day Center with instructors trained on the OEP manual.

This project was implemented over eight weeks at the PACE Day Center with instructors trained on the OEP manual.

The majority of hospitalizations in participants enrolled in the Program for All-Inclusive Care for the Elderly (PACE) were found to be related to falls, despite interventions to decrease falls rates and screening for falls.

The project is divided into nine categories to measure quality of life.

Participants Total of 36 voluntary participants, 28 females and 8 males. Inclusion criteria 1) nonsyncopal falls during the last 12 months and/or functional ability indicating risk of falling (balance, strength, gait tests), 2) Able to walk 3 meters with or without an assistive device, and 3) aged 55 and older.

Exclusion criteria 1) Individuals with neurodegenerative disease, 2) Previously diagnosed with or suspected to have moderate or advanced dementia (of any type), and 3) absolute contraindications to performing physical exercise.

The results reveal that there were no hospitalizations related to falls and an improvement in quality of life after the implementation of the Otago Exercise Program.