**Information on the patients over 65 years**

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| Place the form was filled in | Emergency  Unit, what? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Gender | Male  Female |
| Birth year |  |
| Post code of the address of patient |  |
| The reason for arriving in the emergency |  |
| The relation of possible escort to the patient | Relative, who?  Someone else, who? |
| Accommodation | Living alone  Lives with a spouse  Lives with someone else, whom with?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Care contact of the patient | Home care  Sheltered housing, what?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Something else, what? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No care contact |
| The use of alcohol | Yes  No  Doesn’t answer |
| Reconized injuries | Physical injuries, what? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Psychological signs, what kind of? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Behavioural signs (for example agitated), what kind of? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Follow-up care |  |
| Patient refused to answer | Reason(s) |
| Patient refused follow-up interview | Reason(s) |
| It was not possible to ask questions | Reason(s)(for example too tired) |