

Preventing Falls and Emergency Utilization Through Continuous Alert Response Technology in a High-Risk Older Adult.

Executive Summary

An elderly male in his late 70s experienced a series of unexplained falls over several weeks, resulting in severe skin tears and escalating injury risk. Traditional medical evaluation and episodic vital sign assessments conducted during office visits FAILED to identify the underlying cause.

At the request of the family, **H.E.A.R.T. 4 Seniors Alert Response Technology** powered by BioLink Systems was deployed in the patient's HOME, with active involvement from the patient's son and daughter, to observe real-world physiologic data continuously rather than relying on single-point clinical measurements.

This home-based study enabled continuous physiologic monitoring, medication risk correlation, and early identification of cardiovascular and autonomic instability occurring outside clinical settings. The collected data was shared directly with the patient's physicians to support clinical decision-making.

This case demonstrates how continuous, passive alert response technology—not episodic vitals—can uncover hidden drivers of falls, prevent emergency department utilization, and materially reduce payer costs through early discovery and intervention, all while allowing the patient to safely remain at home.

Patient Profile (De-Identified)

- Age: Late 70s
- Sex: Male
- Living Status: Community-dwelling, in-home
- Care Involvement: Son and daughter actively engaged in monitoring and response
- Referral Reason:
 - Recurrent nighttime falls
 - Extensive skin tears from minimal trauma
 - Concern for physiologic instability not detected during office visits

Home-Based Monitoring Environment

This case study was conducted entirely in the patient's home, not in a hospital or clinical setting. The patient wore a wrist-based monitoring device connected to a proprietary smartphone application forming the foundation of the H.E.A.R.T. 4 Seniors Alert Response ecosystem.

The system allowed:

- Continuous data capture during normal daily activities and sleep
- Real-time alerts delivered immediately to:

- The patient
- The son
- The daughter
- Remote access to data trends for caregivers and clinicians

All findings and trend data were subsequently provided to the patient's treating physicians for review and intervention planning.

Clinical Problem: Why Traditional Care Missed the Risk

In standard clinical workflows:

- Vital signs are captured once, seated, during daytime clinic visits
- Medication effects are reviewed in isolation, not in real-world physiologic context
- Nighttime and early-morning risk periods are completely invisible

Despite repeated falls at home, the patient appeared "stable" during office evaluations, delaying discovery of the true cause.

Medication Regimen Analysis (Integrated Fall-Risk Stack)

Morning Medications (Still Active at Night)

- Valsartan 160 mg
- Amlodipine 2.5 mg
- Finerenone (Kerendia) 10 mg
- Atorvastatin 20 mg

Clinical Impact:

These agents lower baseline blood pressure throughout the full 24-hour cycle, creating a vulnerable physiologic floor by nighttime, even though they are taken in the morning.

Evening / Bedtime Medications (Critical Risk Period)

Primidone 250 mg – Very High Fall Risk

- Sedation
- Ataxia (unsteady gait)
- Delayed reaction time
- Confusion in older adults

In geriatric medicine, primidone at bedtime is a well-documented cause of nighttime falls, particularly when awakening suddenly.

Tamsulosin 0.4 mg – Extreme Orthostatic Risk

- Sudden blood pressure drops on standing
- Nighttime syncope and fainting
- FDA-recognized fall risk when rising from bed

Tamsulosin taken at bedtime represents a classic orthostatic fall mechanism.

Finasteride 5 mg – Additive Risk

- Weakness
- Dizziness
- Blood pressure instability

Naproxen (PRN) – Hidden Multiplier

- Potentiates antihypertensive medications
- Can worsen dizziness
- Impacts renal function, amplifying blood pressure effects

Beers Criteria Implications

Multiple medications in this regimen are explicitly flagged for fall risk in older adults, particularly when combined and taken at night.

The Exact Fall Mechanism (Objectively Documented at Home)

1. Baseline blood pressure already reduced by daytime antihypertensives
2. Bedtime pramipexole causes sedation and delayed balance response
3. Tamsulosin triggers orthostatic blood pressure drop upon standing
4. Patient awakens at night to use the bathroom
5. Sudden postural change → cerebral hypoperfusion
6. No protective reflex → fall
7. Fragile skin → severe tears and injury

This is not aging. This is a detectable, preventable physiologic cascade.

Alert Response Technology: What Changed Everything

Continuous Data vs. Episodic Vitals

Traditional Care

- One blood pressure, one heart rate, one SpO₂ snapshot
- Collected while seated, rested, and awake
- No visibility into nighttime or postural events

H.E.A.R.T. 4 Seniors Alert Response Technology

- Continuous heart rate, SpO₂, and HRV data collected 24/7 in the home
- Captures dangerous lows during sleep and early morning
- Identifies autonomic instability and bradycardia trends
- Correlates medication timing with physiologic response
- Triggers immediate alerts to patient and caregivers when thresholds are crossed

Objective Findings & Data Volume (7-Day Monitoring Period)

Over a 7-day period, the system collected thousands of physiologic data points, including:

- Heart Rate: sampled continuously, capturing multiple readings per hour
- Oxygen Saturation (SpO₂): continuous overnight and daytime measurements
- Heart Rate Variability (HRV): repeated autonomic measurements across sleep and waking periods

Estimated data volume over 7 days:

- Heart Rate: >5,000 individual data points
- SpO₂: >3,000 data points
- HRV: Hundreds of autonomic measurements

This level of physiologic visibility is impossible with traditional office-based vital sign collection.

Objective Findings (Clinical Summary)

Heart Rate

- Recurrent bradycardia into the low 30s bpm
- Wide daily swings up to 109 bpm
- Strong correlation with nighttime risk windows

Heart Rate Variability (HRV)

- Episodes as low as 19–25 ms
- Indicates poor autonomic reserve
- Strong predictor of falls, syncope, and cardiovascular instability

Oxygen Saturation

- Generally preserved but with intermittent nocturnal dips
- When combined with bradycardia, increases cerebral hypoperfusion risk

These events occurred at home, at night, and were never observed during clinic visits.

Skin Integrity Outcomes

The patient sustained large, traumatic skin tears from low-impact falls, consistent with:

- Sudden physiologic compromise
- Inability to brace or protect during descent
- High likelihood of future wound-related hospitalizations without intervention

Insurance Payer Value Proposition

Emergency Room Avoidance

Falls in older adults are among the highest-cost, most preventable ER visits.

Early discovery prevented escalation to emergency care.

Cost Containment

- Avoided ambulance transport
- Avoided imaging and inpatient admission
- Avoided wound-related complications
- Reduced downstream rehabilitation and SNF utilization

Proactive Risk Stratification

Alert response technology identifies:

- High-risk members before catastrophic events
- Medication-related instability early
- Patients who appear “stable” but are not

Clinical & Operational Recommendations

1. Urgent medication reassessment (dose, timing, or substitution)
2. Orthostatic blood pressure evaluation
3. Continued in-home alert response monitoring
4. Targeted nighttime fall-prevention protocols
5. Advanced skin-protection and wound-care planning

Conclusion

This case illustrates a fundamental truth:

You cannot prevent what you do not continuously observe.

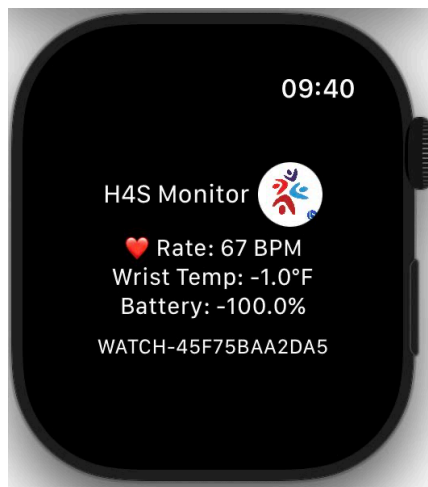
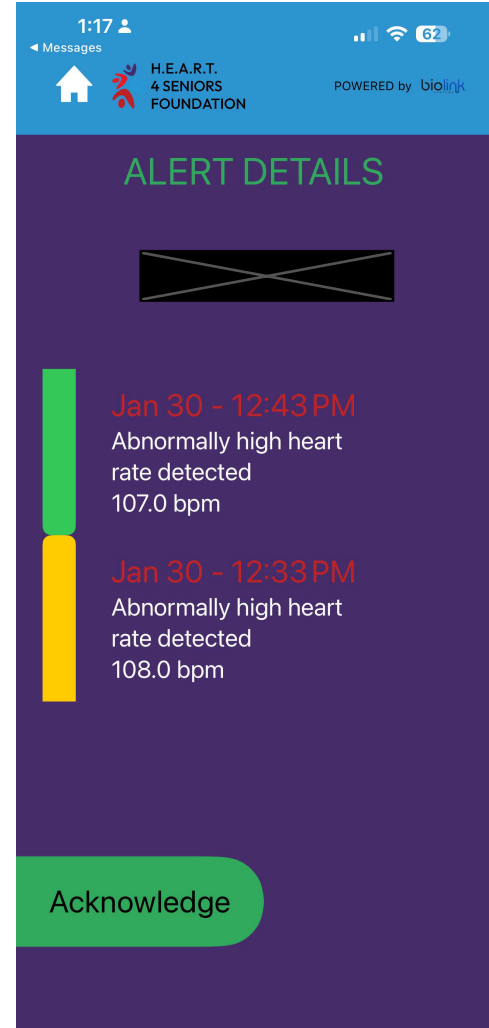
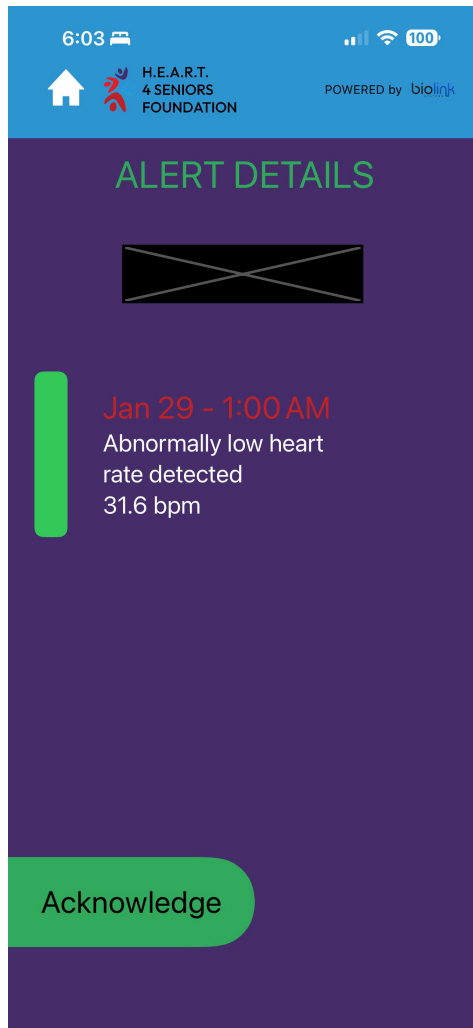
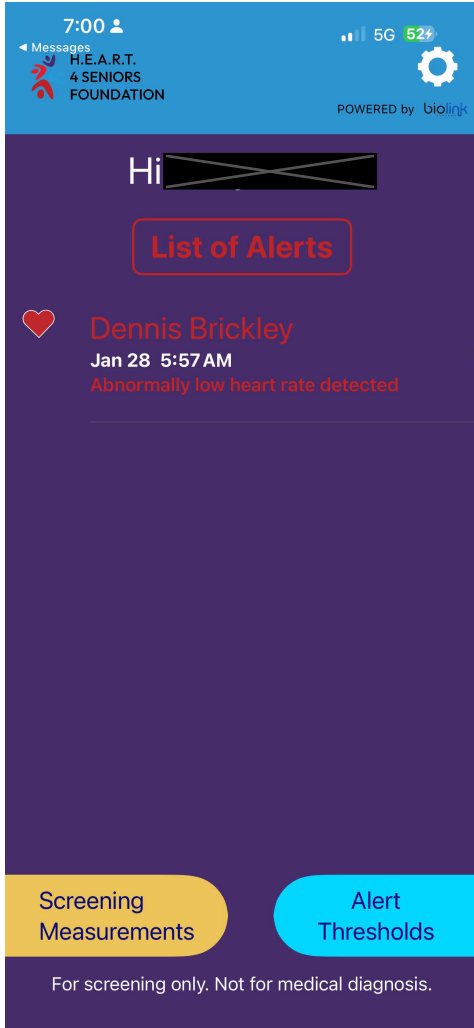
This study was conducted entirely in the home, using a wrist-worn device connected to a proprietary smartphone application, enabling continuous data capture and immediate alerting.

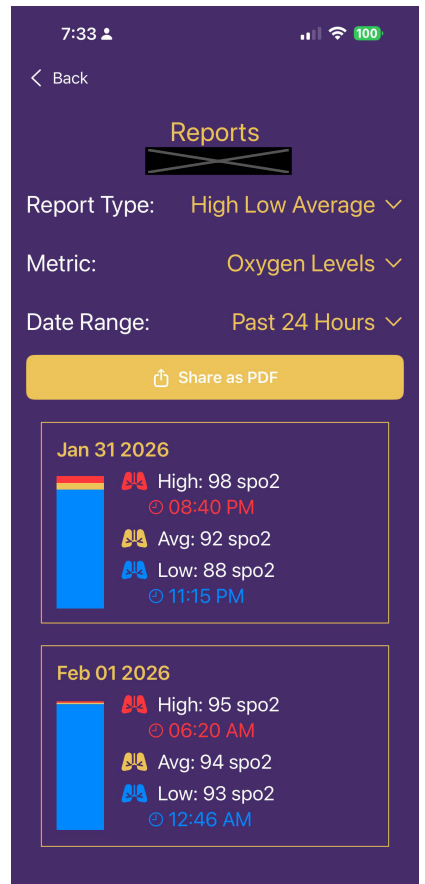
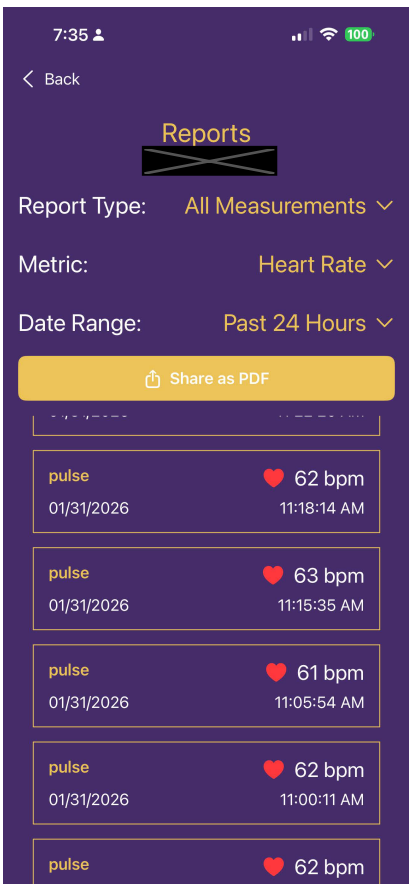
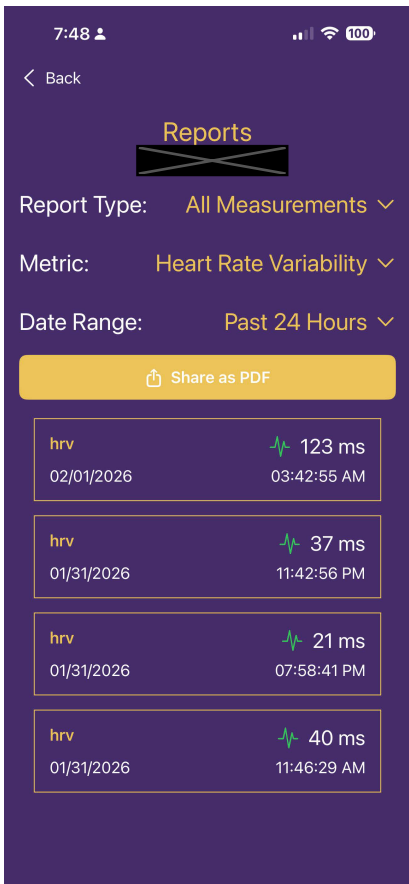
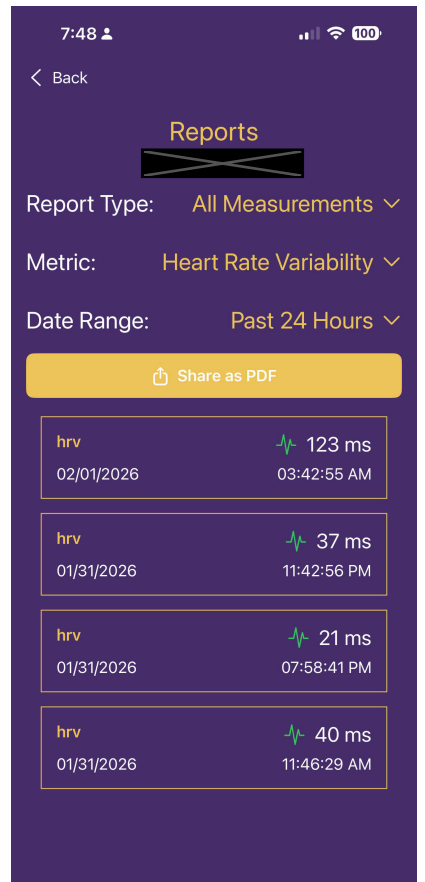
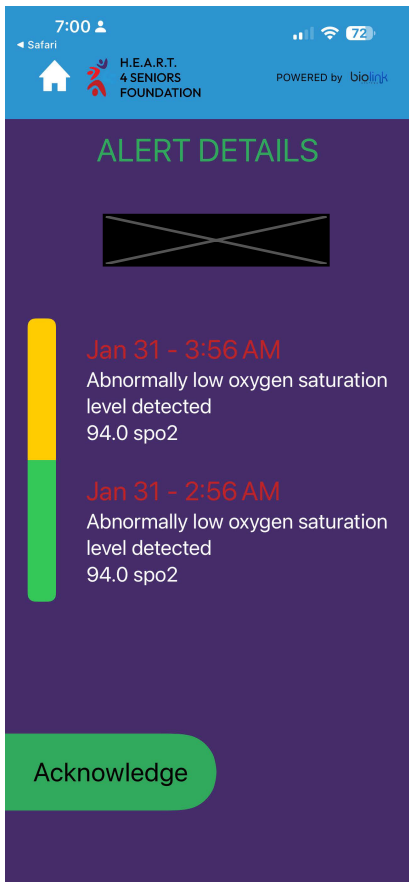
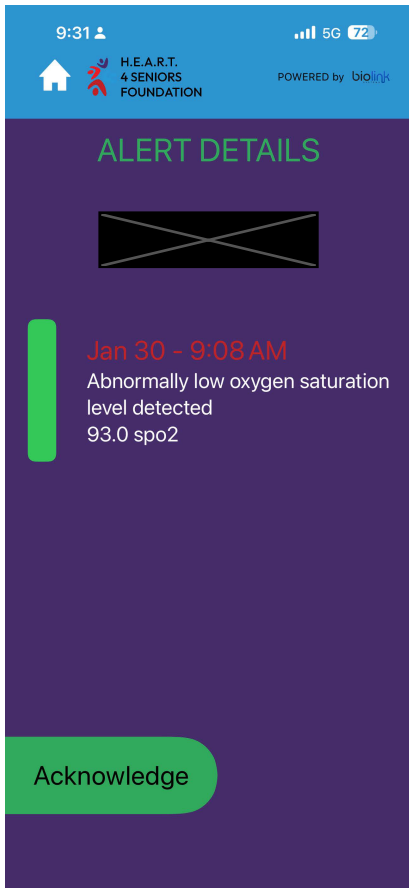
Alerts were delivered in real time to the patient and family caregivers, allowing rapid awareness and response. The data was subsequently shared with physicians to support clinical intervention.

By capturing thousands of physiologic data points, correlating medication timing, and identifying hidden nocturnal risk, H.E.A.R.T. 4 Seniors Alert Response Technology enabled early discovery, prevented escalation, and delivered measurable value to the patient, family, clinicians, and payers alike.

Appendix

App Screenshots





Heart Rate - Report

Name: [REDACTED]

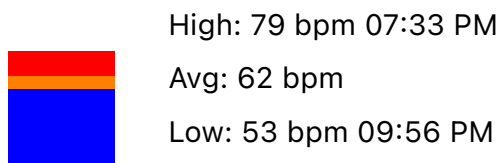
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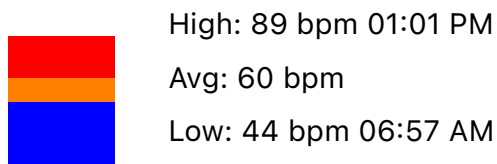
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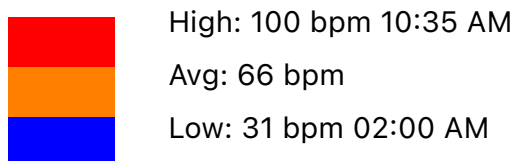
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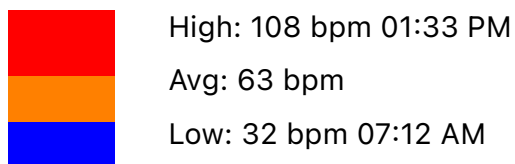
Jan 28 2026



Jan 29 2026



Jan 30 2026



Jan 31 2026



High: 109 bpm 01:33 PM

Avg: 60 bpm

Low: 46 bpm 03:01 PM

Feb 01 2026



High: 100 bpm 12:26 PM

Avg: 61 bpm

Low: 33 bpm 10:35 PM

Feb 02 2026



High: 85 bpm 08:33 AM

Avg: 58 bpm

Low: 50 bpm 06:49 AM

Heart Rate - Report

Name:



Metric: Heart Rate

Date Range: Past 7 Days

Report Type: All Measurements

Generated: 02/02/2026 11:37 AM

74 bpm - 02/02/2026 08:41:49 AM

85 bpm - 02/02/2026 08:33:31 AM

67 bpm - 02/02/2026 08:28:31 AM

64 bpm - 02/02/2026 08:24:27 AM

63 bpm - 02/02/2026 08:17:29 AM

61 bpm - 02/02/2026 08:16:12 AM

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54 bpm - 01/28/2026 11:10:28 AM
63 bpm - 01/28/2026 11:04:21 AM
61 bpm - 01/28/2026 10:59:44 AM
55 bpm - 01/28/2026 10:52:12 AM
62 bpm - 01/28/2026 10:45:51 AM
64 bpm - 01/28/2026 10:41:44 AM
67 bpm - 01/28/2026 10:36:20 AM
70 bpm - 01/28/2026 10:34:49 AM
62 bpm - 01/28/2026 10:27:07 AM
66 bpm - 01/28/2026 10:26:26 AM
63 bpm - 01/28/2026 10:22:42 AM
61 bpm - 01/28/2026 10:16:56 AM
63 bpm - 01/28/2026 10:16:50 AM
66 bpm - 01/28/2026 10:15:13 AM
67 bpm - 01/28/2026 10:01:45 AM
65 bpm - 01/28/2026 09:57:57 AM
67 bpm - 01/28/2026 09:51:17 AM
72 bpm - 01/28/2026 09:48:18 AM
85 bpm - 01/28/2026 09:40:24 AM

85 bpm - 01/28/2026 09:36:27 AM
84 bpm - 01/28/2026 09:31:08 AM
81 bpm - 01/28/2026 09:25:24 AM
84 bpm - 01/28/2026 09:23:25 AM
84 bpm - 01/28/2026 09:19:10 AM
87 bpm - 01/28/2026 09:08:12 AM
68 bpm - 01/28/2026 08:57:58 AM
62 bpm - 01/28/2026 08:52:51 AM
66 bpm - 01/28/2026 08:49:34 AM
89 bpm - 01/28/2026 08:43:50 AM
65 bpm - 01/28/2026 08:35:46 AM
66 bpm - 01/28/2026 08:34:20 AM
63 bpm - 01/28/2026 08:27:04 AM
65 bpm - 01/28/2026 08:22:45 AM
62 bpm - 01/28/2026 08:21:42 AM
60 bpm - 01/28/2026 08:19:17 AM
66 bpm - 01/28/2026 08:15:10 AM
46 bpm - 01/28/2026 07:09:16 AM
44 bpm - 01/28/2026 06:57:33 AM
47 bpm - 01/28/2026 06:52:47 AM
77 bpm - 01/28/2026 06:47:40 AM
55 bpm - 01/28/2026 06:40:49 AM
49 bpm - 01/28/2026 06:37:18 AM
48 bpm - 01/28/2026 06:30:27 AM
48 bpm - 01/28/2026 06:27:56 AM
52 bpm - 01/28/2026 06:22:14 AM
56 bpm - 01/28/2026 06:16:07 AM
57 bpm - 01/28/2026 06:11:05 AM
55 bpm - 01/28/2026 06:07:36 AM
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54 bpm - 01/28/2026 06:00:31 AM
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55 bpm - 01/28/2026 05:52:06 AM
57 bpm - 01/28/2026 05:45:40 AM
57 bpm - 01/28/2026 05:44:22 AM
54 bpm - 01/28/2026 05:36:31 AM
57 bpm - 01/28/2026 05:33:10 AM
52 bpm - 01/28/2026 05:27:16 AM
53 bpm - 01/28/2026 05:21:54 AM
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54 bpm - 01/28/2026 04:31:16 AM
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52 bpm - 01/28/2026 04:22:19 AM
54 bpm - 01/28/2026 04:16:57 AM
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53 bpm - 01/28/2026 04:09:16 AM
52 bpm - 01/28/2026 04:04:19 AM
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54 bpm - 01/28/2026 03:05:43 AM
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54 bpm - 01/28/2026 02:52:56 AM
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58 bpm - 01/28/2026 02:07:10 AM
66 bpm - 01/28/2026 02:06:12 AM
80 bpm - 01/28/2026 02:00:38 AM
57 bpm - 01/28/2026 01:56:08 AM
59 bpm - 01/28/2026 01:55:04 AM
55 bpm - 01/28/2026 01:49:00 AM
54 bpm - 01/28/2026 01:40:23 AM
55 bpm - 01/28/2026 01:23:46 AM
55 bpm - 01/28/2026 01:19:01 AM
55 bpm - 01/28/2026 01:13:16 AM
56 bpm - 01/28/2026 01:10:01 AM
56 bpm - 01/28/2026 01:03:06 AM
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60 bpm - 01/27/2026 11:57:38 PM
59 bpm - 01/27/2026 11:53:12 PM
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59 bpm - 01/27/2026 11:43:10 PM
58 bpm - 01/27/2026 11:40:20 PM
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56 bpm - 01/27/2026 10:46:26 PM
56 bpm - 01/27/2026 10:44:00 PM
58 bpm - 01/27/2026 10:37:03 PM
56 bpm - 01/27/2026 10:30:40 PM
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59 bpm - 01/27/2026 10:24:22 PM
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59 bpm - 01/27/2026 09:33:25 PM
54 bpm - 01/27/2026 09:27:11 PM
55 bpm - 01/27/2026 09:22:45 PM
59 bpm - 01/27/2026 09:16:32 PM
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59 bpm - 01/27/2026 09:08:39 PM
58 bpm - 01/27/2026 09:04:31 PM
58 bpm - 01/27/2026 08:51:24 PM
60 bpm - 01/27/2026 08:47:30 PM
64 bpm - 01/27/2026 08:44:17 PM
66 bpm - 01/27/2026 08:36:59 PM
71 bpm - 01/27/2026 08:35:12 PM
63 bpm - 01/27/2026 08:27:55 PM
63 bpm - 01/27/2026 08:20:27 PM
64 bpm - 01/27/2026 08:19:13 PM
65 bpm - 01/27/2026 08:11:50 PM
66 bpm - 01/27/2026 08:10:30 PM
67 bpm - 01/27/2026 08:07:36 PM
68 bpm - 01/27/2026 08:04:09 PM
66 bpm - 01/27/2026 07:56:57 PM
68 bpm - 01/27/2026 07:47:50 PM
72 bpm - 01/27/2026 07:41:41 PM
72 bpm - 01/27/2026 07:39:41 PM

79 bpm - 01/27/2026 07:33:42 PM
77 bpm - 01/27/2026 07:30:06 PM
72 bpm - 01/27/2026 07:23:33 PM
72 bpm - 01/27/2026 07:15:28 PM
69 bpm - 01/27/2026 07:14:23 PM
75 bpm - 01/27/2026 07:08:36 PM
79 bpm - 01/27/2026 07:02:39 PM
68 bpm - 01/27/2026 06:56:46 PM
68 bpm - 01/27/2026 06:53:02 PM

Oxygen Levels - Report

Name:



Metric: Oxygen Levels

Date Range: Past 7 Days

Report Type: All Measurements

Generated: 02/02/2026 11:38 AM

99 spo2 - 02/02/2026 08:04:51 AM
98 spo2 - 02/02/2026 07:34:50 AM
100 spo2 - 02/02/2026 04:06:32 AM
98 spo2 - 02/02/2026 02:05:49 AM
99 spo2 - 02/02/2026 01:35:48 AM
98 spo2 - 02/02/2026 01:05:48 AM
97 spo2 - 02/02/2026 12:35:47 AM
97 spo2 - 02/01/2026 11:35:41 PM
96 spo2 - 02/01/2026 10:35:40 PM
99 spo2 - 02/01/2026 09:29:59 PM
97 spo2 - 02/01/2026 08:59:53 PM
100 spo2 - 02/01/2026 07:25:31 PM
100 spo2 - 02/01/2026 03:10:08 PM
98 spo2 - 02/01/2026 08:58:26 AM
95 spo2 - 02/01/2026 08:21:45 AM
95 spo2 - 02/01/2026 07:20:52 AM
94 spo2 - 02/01/2026 06:20:50 AM
94 spo2 - 02/01/2026 05:20:49 AM
95 spo2 - 02/01/2026 02:46:47 AM
94 spo2 - 02/01/2026 02:16:46 AM
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93 spo2 - 02/01/2026 01:46:45 AM
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94 spo2 - 02/01/2026 01:15:50 AM
92 spo2 - 02/01/2026 12:45:49 AM
92 spo2 - 02/01/2026 12:45:49 AM
88 spo2 - 02/01/2026 12:15:49 AM
88 spo2 - 02/01/2026 12:15:49 AM
93 spo2 - 01/31/2026 11:45:48 PM
96 spo2 - 01/31/2026 10:45:47 PM
98 spo2 - 01/31/2026 09:40:11 PM
93 spo2 - 01/31/2026 02:40:10 PM
92 spo2 - 01/31/2026 02:02:16 PM
97 spo2 - 01/31/2026 08:40:21 AM
98 spo2 - 01/31/2026 08:03:53 AM
96 spo2 - 01/31/2026 07:26:15 AM
96 spo2 - 01/31/2026 06:56:14 AM
96 spo2 - 01/31/2026 05:56:13 AM
95 spo2 - 01/31/2026 05:26:13 AM
94 spo2 - 01/31/2026 04:56:12 AM
94 spo2 - 01/31/2026 03:56:03 AM
96 spo2 - 01/31/2026 03:23:50 AM
95 spo2 - 01/31/2026 01:53:21 AM
97 spo2 - 01/30/2026 10:51:49 PM
96 spo2 - 01/30/2026 10:21:49 PM
100 spo2 - 01/30/2026 08:28:25 PM
99 spo2 - 01/30/2026 05:01:36 PM
95 spo2 - 01/30/2026 03:27:32 PM
93 spo2 - 01/30/2026 02:57:31 PM
97 spo2 - 01/30/2026 02:27:31 PM
97 spo2 - 01/30/2026 11:17:56 AM

100 spo2 - 01/30/2026 11:14:58 AM
100 spo2 - 01/30/2026 10:47:50 AM
93 spo2 - 01/30/2026 10:08:54 AM
96 spo2 - 01/30/2026 09:23:21 AM
96 spo2 - 01/30/2026 07:12:27 AM
99 spo2 - 01/30/2026 12:56:21 AM
100 spo2 - 01/30/2026 12:26:20 AM
96 spo2 - 01/29/2026 11:31:37 PM
96 spo2 - 01/29/2026 10:59:09 PM
100 spo2 - 01/29/2026 10:29:09 PM
99 spo2 - 01/29/2026 09:37:10 PM
100 spo2 - 01/29/2026 08:34:34 PM
99 spo2 - 01/29/2026 08:04:29 PM
100 spo2 - 01/29/2026 05:42:29 PM
97 spo2 - 01/29/2026 04:42:17 PM
95 spo2 - 01/29/2026 03:37:41 PM
98 spo2 - 01/29/2026 03:07:40 PM
98 spo2 - 01/29/2026 01:32:24 PM
100 spo2 - 01/29/2026 11:05:44 AM
98 spo2 - 01/29/2026 08:22:14 AM
97 spo2 - 01/29/2026 07:15:08 AM
96 spo2 - 01/29/2026 04:41:32 AM
97 spo2 - 01/29/2026 04:11:01 AM
98 spo2 - 01/29/2026 03:10:03 AM
98 spo2 - 01/29/2026 01:56:43 AM
97 spo2 - 01/28/2026 10:56:51 PM
97 spo2 - 01/28/2026 10:26:50 PM
100 spo2 - 01/28/2026 08:29:00 PM
100 spo2 - 01/28/2026 07:27:33 PM
97 spo2 - 01/28/2026 02:43:23 PM

97 spo2 - 01/28/2026 01:43:12 PM
96 spo2 - 01/28/2026 10:16:56 AM
98 spo2 - 01/28/2026 08:21:42 AM
97 spo2 - 01/28/2026 06:51:33 AM
98 spo2 - 01/28/2026 02:06:57 AM
96 spo2 - 01/27/2026 11:24:07 PM
98 spo2 - 01/27/2026 10:54:06 PM
99 spo2 - 01/27/2026 10:24:05 PM
100 spo2 - 01/27/2026 09:47:10 PM
100 spo2 - 01/27/2026 09:16:32 PM
100 spo2 - 01/27/2026 08:11:50 PM
99 spo2 - 01/27/2026 07:41:15 PM

Heart Rate Variability - Report

Name:



Metric: Heart Rate Variability

Date Range: Past 7 Days

Report Type: All Measurements

Generated: 02/02/2026 11:39 AM

80 ms - 02/02/2026 04:42:48 AM

58 ms - 02/01/2026 08:45:23 AM

123 ms - 02/01/2026 04:42:55 AM

37 ms - 02/01/2026 12:42:56 AM

21 ms - 01/31/2026 08:58:41 PM

40 ms - 01/31/2026 12:46:29 PM

19 ms - 01/31/2026 08:44:22 AM

25 ms - 01/31/2026 04:42:47 AM

30 ms - 01/30/2026 09:00:54 PM

86 ms - 01/30/2026 04:44:23 PM

20 ms - 01/30/2026 01:29:38 PM