### Mini-Mental State Examination

#### Senior Adult Oncology Program

**Maximum Score** | **Patient Score** | **ORIENTATION**
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5 | 5 | What is the (year) (date) (day) (month) (season)?
5 | 5 | Where are we (country) (state) (county) (city) (clinic)?

**REGISTRATION**

3 |  | Name three objects, allotting one second to say each one. Then ask the patient to name all three objects after you have said them. Give one point for each correct answer. Repeat them until he hears all three. Count trials and record number.

APPLE....BOOK.....COAT | Number of trials_______

**ATTENTION AND CALCULATION**

5 |  | Begin with 100 and count backwards by 7 (stop after five answers): 93, 86, 79, 72, 65. Score one point for each correct answer. If the patient will not perform this task, ask the patient to spell WORLD backwards (DLROW). Record the patients spelling:_______ Score one point for each correctly placed letter.

**RECALL**

3 |  | Ask the patient to repeat the objects above (see Registration). Give one point for each correct answer.

**LANGUAGE**

2 |  | Naming: Show a pencil and a watch, and ask the patient to name them.
1 |  | Repetition: Repeat the following: “No ifs, ands, or buts.”
3 |  | Three-Stage Command: Follow the three-stage command, “Take a paper in your right hand; fold it in half, and put it on the table.”
1 |  | Reading: Read and obey the following: “Close your eyes” (show the patient the item written on the reverse side).
1 |  | Writing: Write a sentence (on the reverse side).
1 |  | Copying: Copy the design of the intersecting pentagons (on reverse side).

30 |  | Total Score Possible

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CLOSE YOUR EYES

WRITE A SENTENCE

COPY DESIGN

Examiner's Name__________________________________________ Time:_____________ Date_____________________