Complete the screen by filling in the boxes with the appropriate numbers. Add the numbers for the screen. If score is 11 or less, continue with the assessment to gain a Malnutrition Indicator Score.

### Screening

**A** Has food intake declined over the past 3 months due to loss of appetite, digestive problems, chewing or swallowing difficulties?
- 0 = severe decrease in food intake
- 1 = moderate decrease in food intake
- 2 = no decrease in food intake

**B** Weight loss during the last 3 months
- 0 = weight loss greater than 3kg (6.6lbs)
- 1 = does not know
- 2 = weight loss between 1 and 3kg (2.2 and 6.6 lbs)
- 3 = no weight loss

**C** Mobility
- 0 = bed or chair bound
- 1 = able to get out of bed / chair but does not go out
- 2 = goes out

**D** Has suffered psychological stress or acute disease in the past 3 months?
- 0 = yes
- 2 = no

**E** Neuropsychological problems
- 0 = severe dementia or depression
- 1 = mild dementia
- 2 = no psychological problems

**F** Body Mass Index (BMI) (weight in kg) / (height in m²)
- 0 = BMI less than 19
- 1 = BMI 19 to less than 21
- 2 = BMI 21 to less than 23
- 3 = BMI 23 or greater

**Screening score**
(subtotal max. 14 points)
- 12-14 points: Normal nutritional status
- 8-11 points: At risk of malnutrition
- 0-7 points: Malnourished

For a more in-depth assessment, continue with questions G-R

### Assessment

**G** Lives independently (not in nursing home or hospital)
- 1 = yes
- 0 = no

**H** Takes more than 3 prescription drugs per day
- 0 = yes
- 1 = no

**I** Pressure sores or skin ulcers
- 0 = yes
- 1 = no

**J** How many full meals does the patient eat daily?
- 0 = 1 meal
- 1 = 2 meals
- 2 = 3 meals

**K** Selected consumption markers for protein intake
- At least one serving of dairy products (milk, cheese, yoghurt) per day
- Two or more servings of legumes or eggs per week
- Meat, fish or poultry every day

**L** Consumes two or more servings of fruit or vegetables per day?
- 0 = no
- 1 = yes

**M** How much fluid (water, juice, coffee, tea, milk...) is consumed per day?
- 0.0 = if 0 or 1 yes
- 0.5 = if 2 yes
- 1.0 = if 3 yes

**N** Mode of feeding
- 0 = unable to eat without assistance
- 1 = self-fed with some difficulty
- 2 = self-fed without any problem

**O** Self view of nutritional status
- 0 = views self as being malnourished
- 1 = is uncertain of nutritional state
- 2 = views self as having no nutritional problem

**P** In comparison with other people of the same age, how does the patient consider his / her health status?
- 0.0 = not as good
- 0.5 = does not know
- 1.0 = as good
- 2.0 = better

**Q** Mid-arm circumference (MAC) in cm
- 0.0 = MAC less than 21
- 0.5 = MAC 21 to 22
- 1.0 = MAC 22 or greater

**R** Calf circumference (CC) in cm
- 0 = CC less than 31
- 1 = CC 31 or greater

**Assessment (max. 16 points)**

**Screening score**

**Total Assessment (max. 30 points)**

### Malnutrition Indicator Score

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>24 to 30</td>
<td>normal nutritional status</td>
</tr>
<tr>
<td>17 to 23.5</td>
<td>at risk of malnutrition</td>
</tr>
<tr>
<td>Less than 17</td>
<td>malnourished</td>
</tr>
</tbody>
</table>

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**References:**
- For more information: [www.mna-elderly.com](http://www.mna-elderly.com)