

REGIONAL WRITE-UP—NUTRITIONAL ASSESSMENT

Date _____

Examiner _____

Patient _____ Age _____ Gender _____

Reason for visit _____

Features of the Scored Patient-Generated Subjective Global Assessment (PG-SGA)

(Select appropriate category with a checkmark, or enter numerical value where indicated by "#".)

A. History**1. Weight change**

Overall loss in past 6 months: amount = # _____ kg; % loss = # _____

Change in past 2 weeks: _____ increase, _____ no change, _____ decrease

2. Dietary intake change (relative to normal)

___ No change

___ Change _____ duration = # _____ weeks

___ Type: _____ suboptimal solid diet _____ full liquid diet _____ hypocaloric liquids

___ starvation

3. Gastrointestinal symptoms (that persisted for >2 weeks)

___ none _____ nausea _____ vomiting

___ diarrhea _____ anorexia

4. Functional capacity

___ No dysfunction (e.g., full capacity)

___ Dysfunction _____ duration = # _____ weeks

___ Type: _____ working suboptimally _____ ambulatory _____ bedridden

5. Disease and its relation to nutritional requirements

Primary diagnosis (specify)

Metabolic demand (stress): _____ no stress _____ low stress _____ moderate stress

_____ high stress

B. Physical (FOR EACH TRAIT SPECIFY 0 = NORMAL, 1+ = MILD, 2+ = MODERATE, 3+ = SEVERE)

_____ loss of subcutaneous fat (triceps, chest)

_____ muscle wasting (quadriceps, deltoids)

_____ ankle edema

_____ sacral edema

_____ ascites

C. SGA rating (SELECT ONE)

___ A = Well nourished

___ B = Moderately malnourished (or suspected of being malnourished)

___ C = Severely malnourished

Reprinted with permission from Detsky, A.J., McLaughlin, J.R., Baker, J.P., et al. (1987). What is subjective global assessment of nutritional status? *JPEN Journal of Parenteral and Enteral Nutrition*, 11, 9.



Mini Nutritional Assessment MNA®

Last name: _____ First name: _____ Sex: _____ Date: _____
 Age: _____ Weight, kg: _____ Height, cm: _____ I.D. number: _____

Complete the screen by filling in the boxes with the appropriate numbers. Total the numbers for the final screening 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 3 kg (6.6 lbs)
 1 = does not know
 2 = weight loss between 1 and 3 kg (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

F1 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

IF BMI IS NOT AVAILABLE, REPLACE QUESTION F1 WITH QUESTION F2.
 DO NOT ANSWER QUESTION F2 IF QUESTION F1 IS ALREADY COMPLETED.

F2 Calf circumference (CC) in cm

- 0 = CC less than 31
 3 = CC 31 or greater

Screening score

(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, complete the full MNA® which is available at www.mna-elderly.com

Ref. Vellas B, Villars H, Abellan G, et al. *Overview of the MNA® - Its History and Challenges*. J Nutr Health Aging 2006;10:456-465.

Rubenstein LZ, Harker JO, Salva A, Guigoz Y, Vellas B. *Screening for Undernutrition in Geriatric Practice: Developing the Short-Form Mini Nutritional Assessment (MNA-SF)*. J. Gerontol 2001;56A: M366-377.

Guigoz Y. *The Mini-Nutritional Assessment (MNA®) Review of the Literature - What does it tell us?* J Nutr Health Aging 2006; 10:466-487.

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For more information: www.mna-elderly.com