Long MNA®
Mini Nutritional Assessment

Nestlé Nutrition Institute

Last name: _____   First name: _____

Sex: _____   Age: _____   Weight, kg: _____   Height, cm: _____   Date: _____

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 m)^2
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   yes ☐ no ☐
- Two or more servings of legumes or eggs per week   yes ☐ no ☐
- Meat, fish or poultry every day   yes ☐ no ☐
0.0 = if 0 or 1 yes
0.5 = if 2 yes
1.0 = if 3 yes ☐.☐

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 = less than 3 cups
0.5 = 3 to 5 cups
1.0 = more than 5 cups ☐.☐

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 greater than 22 ☐.☐

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
24 to 30 points   ☐   Normal nutritional status
17 to 23.5 points   ☐   At risk of malnutrition
Less than 17 points   ☐   Malnourished

References
1. Vellas B, Villars H, Abellan G, et al. Overview of the MNA® - Its History and Challenges. *J Nutr Health Aging.* 2006; **10:456**-465.
2. 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. Geront.* 2001; **56A**: M366-377
3. Guigoz Y. The Mini-Nutritional Assessment (MNA®) Review of the Literature - What does it tell us? *J Nutr Health Aging.* 2006; **10**:466-487.