

Mini Nutritional Assessment — Short Form (MNA-SF)

Category: Nutrition, Geriatrics | Items: 6 | Time: ~2-3 min

Description / When to Use

Malnutrition risk in older adults

Instructions for Respondent

Please read each statement carefully and respond based on how you have felt over the specified time period. There are 6 items in this scale. Estimated completion time: 2-3 min.

Scale Items

- Has food intake declined in the past 3 months due to loss of appetite, digestive problems, or chewing/swallowing difficulties?
0 = Severe decrease | 1 = Moderate decrease | 2 = No decrease
- Weight loss in the past 3 months
0 = > 3 kg | 1 = Does not know | 2 = 1 – 3 kg | 3 = None
- Mobility
0 = Bed / chair bound | 1 = Able to get out of bed but does not go out | 2 = Goes out
- Has suffered psychological stress or acute disease in past 3 months?
0 = Yes | 2 = No
- Neuropsychological problems
0 = Severe dementia / depression | 1 = Mild dementia | 2 = No problems
- BMI (kg/m²) — or calf circumference if BMI unavailable
0 = BMI < 19 (or calf < 31 cm) | 1 = BMI 19 – 21 | 2 = BMI 21 – 23 | 3 = BMI ≥ 23 (or calf ≥ 31 cm)

Scoring Guide

Sum all 6 items. Total range 0-14.

Cutoff Interpretation

Score Range	Severity	Recommended Action
0–7	Malnourished	Refer to dietitian; consider nutritional support.
8–11	At risk of malnutrition	Initiate nutritional intervention; consider full MNA.
12–14	Normal nutritional status	No intervention needed; rescreen periodically.

Psychometric Properties

See original validation study for reliability and validity data.

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