

# Recommendations for Nutrition Intervention

## Mini Nutritional Assessment (MNA®) Score

**Well nourished**  
MNA® SF ≥12

### Rescreen

- After acute event or illness.
- 1 x per year in community-dwelling elderly.
- Every 3 months in institutionalised patients.

**MNA® helps  
with meeting the  
Aged Care Quality  
Standards.\***

\*Department of Aged Care, Quality and Safety Commission Available at: <https://www.agedcarequality.gov.au/providers/standards> (Accessed August 2023).

^ESPEN guidelines: Clinical Nutrition and Hydration in Geriatrics 2022. Available at: [https://www.espen.org/files/ESPEN-Guidelines/ESPEN\\_practical\\_guideline\\_Clinical\\_nutrition\\_and\\_hydration\\_in\\_geriatrics.pdf](https://www.espen.org/files/ESPEN-Guidelines/ESPEN_practical_guideline_Clinical_nutrition_and_hydration_in_geriatrics.pdf)

RESOURCE® Fruit Flavoured Beverage, RESOURCE® Protein, RESOURCE® Plus, RESOURCE® 2.0, RESOURCE® 2.0 + Fibre, RESOURCE® ULTRA Clear Fruit Flavoured Beverage, RESOURCE® ULTRA+ and RESOURCE® Crema 2.0 are food for special medical purposes specifically formulated for medical conditions where nutritional needs cannot be met through diet modification alone.

Nutritional supplements can only be of assistance where dietary intake is inadequate. Please seek advice on your individual dietary needs from an Accredited Practising Dietitian or your healthcare professional. SUSTAGEN® Hospital Formula and SUSTAGEN® Hospital Formula Plus Fibre are formulated meal replacements and cannot be used as total diet replacements. Consume as part of a varied and balanced diet and healthy lifestyle.

NUTREN® Diabetes is a food for special medical purposes specifically formulated for the dietary management of people with diabetes who cannot meet their nutritional needs through diet modification alone. Suitable for use as a sole source of nutrition.

BENEPROTEIN® is a food for special medical purposes specifically formulated for medical conditions where nutritional needs cannot be met by diet modification alone.

ARGINAID® is a food for special medical purposes specifically formulated with L-Arginine for the nutritional management of wounds. Must be used under medical supervision. Not suitable for use as a sole source of nutrition. Contains Phenylalanine.

THICKENUP® Clear and THICKENUP® Gel Express are food for special medical purposes for the dietary management of people with swallowing difficulties.

All foods for special medical purposes must be used under medical supervision.

**At risk of malnutrition**  
MNA® SF 8-11

### No Weight Loss

#### Monitor

- Close weight monitoring.
- Rescreen every 3 months.
- If nutrition not met through food alone, consider a high energy, high protein diet or food fortification.

### Weight Loss

#### Treat

- Nutrition intervention.
- Diet enhancement (high energy, high protein diet, or food fortification).
- Oral nutritional supplementation (at least 400kcal/d including 30g or more of protein/day).<sup>^</sup>
- Close weight monitoring.
- Further in-depth nutrition assessment.

**Malnourished**  
MNA® SF ≤7

### Treat

- Nutrition intervention.
- Oral nutritional supplementation (at least 400kcal/d including 30g or more of protein/day).<sup>^</sup>
- Diet enhancement (high energy, high protein diet, or food fortification).
- Close weight monitoring.
- Further in-depth nutrition assessment.

### Oral nutrition supplements (ONS)



- ONS may be offered between or with meals but should not deter food intake.
- Provide a diabetes specific supplement where required.
- Most ONS are suitable for tube feeding (excluding RESOURCE® Fruit Flavoured Beverage and RESOURCE® ULTRA Clear Fruit Flavoured Beverage).
- Powdered supplements can be made up with water or milk.



### High energy, high protein oral nutrition supplements (ONS)



- Where appetite is poor, high energy high protein ONS can be consumed with medication chart (MedRound – offering between 4 x per day at 50–60mL).

### Food Fortification



- Mix into food and drinks such as:
  - Tea and coffee (1 scoop per serve)
  - Mashed potato
  - Cereal.



- Mix 1 scoop per serve into foods such as soup, custard and porridge.

### Wound Management



- For chronic wounds, provide 2 serves per day until wound is healed.
- ARGINAID® – 2 x sachets per day provides 9g of L-arginine, Vitamins C & E.

### Dysphagia



- When required, thicken fluids to the recommended consistency level.
- Refer to a healthcare professional when mixing protein containing liquids (e.g. milk and oral nutrition supplements), carbonated liquids and alcoholic beverages. These liquids behave uniquely when mixed with THICKENUP®.

### No weight loss

- Monitor weight 1 x week or as per facility guidelines.
- Rescreen every 3 months.

### Weight loss

- Refer to/organise review by dietitian.
- Monitor weight regularly.

- Continue to monitor in consultation with dietitian and medical professional.
- Monitor weight regularly.



For more information visit  
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# Mini Nutritional Assessment

# MNA<sup>®</sup>

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. 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 m)<sup>2</sup>

- 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

Ref. Vellas B, Villars H, Abellan G, et al. *Overview of the MNA<sup>®</sup> - 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. Geront 2001;56A: M366-377.  
Guigoz Y. *The Mini-Nutritional Assessment (MNA<sup>®</sup>) Review of the Literature - What does it tell us?* J Nutr Health Aging 2006; 10:466-487.  
Kaiser MJ, Bauer JM, Ramsch C, et al. *Validation of the Mini Nutritional Assessment Short-Form (MNA<sup>®</sup>-SF): A practical tool for identification of nutritional status*. J Nutr Health Aging 2009; 13:782-788.  
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