# Malnutrition

## Is your patient at risk?

### Malnutrition Screening Tool¹ (MST)

1. **Have you/the patient lost weight recently without trying?**
   - No: 0
   - Unsure: 2
   - Yes, how much (kg)?
     - 1 – 5: 1
     - 6 – 10: 2
     - 5 – 11: 3
     - > 15: 4
     - Unsure: 2

2. **Have you/the patient been eating poorly because of a decreased appetite?**
   - No: 0
   - Yes: 1

**Total Score**

### Score 2 or more

- Applies to the last six months
- If unsure, ask if they suspect they have lost weight - eg, clothes are looser
- For example, less than three-quarters of usual intake; may also be eating poorly due to chewing and swallowing problems.
- Of weight loss and appetite questions
- If your patients have lost weight and/or are eating poorly - ie, score two or more, or they are very underweight, then they may be at risk of malnutrition.

### Action

1. Refer to Malnutrition Action Flowchart and/or refer to Dietitian for full assessment and intervention
2. Document
3. Weigh patient’s on admission and:
   - (a) weekly (acute)
   - (b) monthly (long-term care)
4. Re-screen patients:
   - (a) weekly (acute)
   - (b) monthly (long-term care)

**Malnutrition occurs in approximately 30% of patients in Australian hospitals²**

---