**Malnutrition Screening Tool (MST)**

**Age:** ________  **Is consumer a nutrition program client (Y/N)?** ________

### STEP 1: Screen with the MST

1. **Have you recently lost weight without trying?**
   - No 0
   - Unsure 2

2. **If yes, how much weight have you lost?**
   - 2-13 lb 1
   - 14-23 lb 2
   - 24-33 lb 3
   - 34 lb or more 4
   - Unsure 2

   **Weight loss score:**

3. **Have you been eating poorly because of a decreased appetite?**
   - No 0
   - Yes 1

   **Appetite score:**

### STEP 2: Score to determine risk

<table>
<thead>
<tr>
<th>MST Score</th>
<th>Description</th>
</tr>
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</table>
| 0 OR 1 | **NOT AT RISK**
| Eating well with little or no weight loss |
| 2 OR MORE | **AT RISK**
| Eating poorly and/or recent weight loss |

If length of stay exceeds 7 days, then rescreen, repeating weekly as needed.

### STEP 3: Intervene with nutrition for your patient at risk of malnutrition.

**MST SCORE:**

Notes:

If high risk, has consumer been admitted to the hospital in the past 3 months (Y/N)? ________

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These health organizations are dedicated to the education of effective hospital nutrition practices to help improve patients' medical outcomes and support all clinicians in collaborating on hospital-wide nutrition procedures. The Alliance to Advance Patient Nutrition is made possible with support from Abbott Nutrition.