

Step 1

BMI score

+

Step 2

Weight loss score

+

Step 3

Acute disease effect score

BMI kg/m ²	Score
>20(>30 Obese)	= 0
18.5-20	= 1
<18.5	= 2

Unplanned weight loss in past 3-6 months	
%	Score
<5	= 0
5-10	= 1
>10	= 2

If patient is acutely ill **and** there has been or is likely to be no nutritional intake for >5 days
Score 2

Step 4

Overall risk of malnutrition

Add Scores together to calculate overall risk of malnutrition
Score 0 Low Risk Score 1 Medium Risk Score 2 or more High Risk

Step 5

Management guidelines

0
Low Risk
Routine clinical care

- Repeat screening
Hospital – weekly
Care Homes – monthly
Community – annually for special groups e.g. those >75 yrs

1
Medium Risk
Observe

- Document dietary intake for 3 days if subject in hospital or care home
- If improved or adequate intake – little clinical concern; if no improvement – clinical concern - follow local policy
- Repeat screening
Hospital – weekly
Care Home – at least monthly
Community – at least every 2-3 months

2 or more
High Risk
Treat*

- Refer to dietitian, Nutritional Support Team or implement local policy
- Improve and increase overall nutritional intake
- Monitor and review care plan
Hospital – weekly
Care Home – monthly
Community – monthly

* Unless detrimental or no benefit is expected from nutritional support e.g. imminent death.

All risk categories:

- Treat underlying condition and provide help and advice on food choices, eating and drinking when necessary.
- Record malnutrition risk category.
- Record need for special diets and follow local policy.

Obesity:

- Record presence of obesity. For those with underlying conditions, these are generally controlled before the treatment of obesity.

If unable to obtain height and weight, see reverse for alternative measurements and use of subjective criteria

Re-assess subjects identified at risk as they move through care settings

See The 'MUST' Explanatory Booklet for further details and The 'MUST' Report for supporting evidence.