Geriatric Assessment for Nurses

Case-based discussions Teaching guide: Nutritional Assessment of Older Adults

Case-Based Discussions Guide
Learning outcomes
By the end of this session, students will be able to: 1. Identify key nutritional risk factors commonly seen in older adults. 2. Interpret findings from: ● Mini Nutritional Assessment (MNA) ● Malnutrition Screening Tool (MST) / Malnutrition Universal Screening Tool (MUST) ● Subjective Global Assessment (SGA) ● DETERMINE Your Nutritional Health Checklist ● Anthropometric measurements (BMI, MUAC, weight change) 3. Differentiate between normal, at risk, and abnormal nutritional status. 4. Discuss clinical implications of malnutrition in older adults. 5. Suggest appropriate follow-up plans and nursing interventions based on assessment findings.
Sample Case
Case Scenario: Mrs. Violet Silva ● Age: 78 years ● Gender: Female ● Living Situation: Lives alone, widowed ● Medical History: Hypertension, osteoarthritis, mild cognitive impairment ● Medications: Amlodipine, paracetamol PRN ● Social History: Limited mobility, difficulty shopping and cooking; daughter visits once a week ● Recent Concerns: o Unintentional weight loss of 4 kg in the last 3 months o Complains of poor appetite, early satiety o Difficulty chewing due to poorly fitting dentures

- Takes mostly tea and biscuits for breakfast, a small lunch, and skips dinner sometimes

Anthropometric Data

- Height: 150 cm
- Weight: 41 kg
- BMI: 18.2 kg/m²
- MUAC: 21.5 cm
- Recent weight loss: 8.8% (4/45 kg)

Tool-based Assessment Findings

1. Mini Nutritional Assessment (MNA)

- Decline in food intake → 1 point
- Recent weight loss → 1 point
- Mobility problems → 1 point
- BMI <19 → 0 points
- Psychological stress in past 3 months → 1 point

Total MNA Score = 10/30 → *Malnourished*

2. Malnutrition Screening Tool (MST)

- Unintentional weight loss (>3 kg) → 2 points
- Poor appetite → 1 point

Total MST Score = 3 → *High risk of malnutrition*

3. MUST Score

- BMI 18.2 → Score 1
- Unintentional weight loss (5–10%) → Score 1
- Acute disease effect → 0

Total MUST Score = 2 → *Medium risk*

4. Subjective Global Assessment (SGA)

- Significant weight loss

- Poor dietary intake
- Symptoms affecting intake (poor appetite, chewing problem)
- Physical exam: mild muscle wasting in temples & clavicle

SGA Category B: Moderately malnourished

5. DETERMINE Your Nutritional Health

- Eats <2 meals/day (3)
- Poor oral health (2)
- Disease affecting eating (2)
- Reduced social contacts (1)
- Limited income (1)

Score = 9 → High nutritional risk

Guided questions for students

A. Understanding the Case

1. What factors in Mrs. Silva's history place her at risk for malnutrition?
2. How do social and functional limitations influence her nutritional status?
3. What role does dental health play in older adults' nutrition?

B. Interpreting Assessment Tool Findings

4. Based on the MNA score (10/30), how would you classify her nutritional status?
5. Compare MST and MUST results—why might they differ slightly in risk level?
6. What clinical information from the SGA supports moderate malnutrition?
7. What does her DETERMINE score indicate about her lifestyle risk factors?

C. Interpreting Anthropometric Measurements

8. What does a BMI of 18.2 indicate in an older adult?
9. What does her MUAC value (21.5 cm) suggest about muscle mass?

10. How clinically significant is her 8.8% weight loss over 3 months?

D. Identifying Normal vs. Abnormal Status

11. Based on all tools, what indicators confirm malnutrition?
12. Which findings might still appear normal?
13. Are the findings consistent between different tools?

E. Applying Clinical Reasoning

14. What additional assessments would you perform?
15. What immediate nursing interventions would you plan?
16. Should this patient be referred to a dietitian? Why?
17. How would you prioritize her nutritional care needs?

F. Planning Management

18. Suggest practical strategies to improve her meal intake.
19. How can the family be involved in improving her nutrition?
20. What follow-up schedule is appropriate for monitoring her nutritional status?

Instructions for the Instructor

Students should identify:

- **Abnormal findings:**
  - BMI underweight, MUAC low, significant unintentional weight loss
  - Inadequate dietary intake
  - High malnutrition risk on all tools
  - Signs of muscle wasting
- **Contributing factors:**
  - Poor dentition, lack of support, mobility issues, chronic diseases

- **Normal findings (if any):**
    - No acute illness
    - Stable chronic conditions
- **Overall Interpretation:**
  The patient is **moderately malnourished** and **at high risk**, requiring urgent nutritional intervention and follow-up.