

Mini-Mental Status Examination (Marshall Folstein, MD)

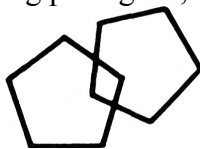
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PATIENT

EXAMINER

DATE

Add points for each correct response:

	Score	Points
ORIENTATION		
1. What is the: Year Season Date Day Month Ask for the date; then ask specifically for parts omitted (e.g. Can you also tell me what season it is?)		1 1 1 1 1
2. Where are we? State County Town or city Hospital Floor Ask in turn, "Can you tell me the name of this hospital?"(town, country, etc).		1 1 1 1 1
REGISTRATION		
3. Name three objects. Ask patient if you may test her memory. Then state names of three unrelated objects clearly and slowly (1 second to say each). After you have said all three, ask patient to repeat them. Give 1 point for each correct answer. This first repetition determines score (0-3), but repeat names until patient can repeat all three (up to six trials - record number of trials). If patient does not eventually learn all three words, recall cannot be meaningfully tested		3
ATTENTION AND CALCULATION		
4. Serial sevens. Ask patient to begin with 100 and count backward by 7. Stop after five subtractions (93, 86, 79, 72, 65). Give 1 point for each correct answer. Score the total number of correct answers. If patient cannot or will not perform this task, ask him to: Spell word " WORLD " backward. Score is number of letters in correct order (e.g. dlrow = 5, dlorw = 3).		5
RECALL		
5. Ask patient to recall three objects learned in question 3. Give 1 point for each correct answer.		3
LANGUAGE		
6. Name pencil and watch. Show patient wristwatch and ask what it is. Repeat for pencil.		2
7. Repeat "No ifs, ands, or buts" Ask patient to repeat sentence after you. Allow only one trial.		1
8. Follow three-stage command: "Take a paper in your right hand. Fold the paper in half. Put the paper on the floor" Give patient sheet of paper and repeat command. Give 1 point for each part of command that is correctly executed.		3
9. Read and obey following: "CLOSE YOUR EYES" (write it in large letters for patient to see clearly). Ask patient to read paper and do what it says. Give 1 point if patient actually closes his eyes.		1
10. Write sentence of his / her choice. Give patient blank sheet of paper and ask him to write sentence. Do not dictate sentence; it is to be written spontaneously. It must contain <i>subject</i> and <i>verb</i> and be sensible. Correct grammar and punctuation are not necessary.		1
11. Copy design (two intersecting pentagons; each side about 1 inch):  Ask patient to copy them exactly as they are. All ten angles must be present, and two must intersect to form quadrangle to score 1 point. Tremor and rotation are ignored.		1
Total:		30

Normal score is > 26

Cut-off score ≤ 23 has* **sensitivity** 87%, **specificity** 82%, **false-positive ratio** 39.4%, **false-negative ratio** 4.7%.

*in distinguishing organic **brain syndrome (dementia / delirium)** from patients without these syndromes; mean score of individuals with dementia is 12.

Score < 20 strongly suggests dementia / delirium / very poor cooperation

Individuals with **sensory difficulties** (vision, hearing) lose only few points!

Depressed patients have scores in 20s

Repeated (serial) test administration does not misinterpret cognitive function! (i.e. test can be administered to the same patient as many times as needed – test results are not influenced by patient’s “familiarity” with test)

Assess patient's **level of consciousness** along continuum:

- a) alert
- b) lethargic
- c) stupor
- d) coma

BIBLIOGRAPHY for ch. "Diagnostics" → follow this [LINK](#) >>

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