Please mark the correct boxes that apply to your institution Date nutritionDay worldwide **NURSING HOME** Center-Code SHEET 1 **Unit-Code** Number of residents in the unit Maximum number of residents in the unit Maximum number of residents in the institution Is there a dietician, nutritionist, or dietetic assistant available in this unit? O Yes O No Is there a person in your unit dedicated to nutrition care? O Yes O No Do you regularly screen your residents for malnutrition/risk of malnutrition? (choose only one) Once at admission Approx. once a month 0 4 - 6 times a year 0 1 - 2 times a year Never All residents are evaluated for malnutrition/ risk of malnutrition by: (multiple answers possible) O Body mass index (BMI) Weight course Monitoring food intake Clinical view Screening for malnutrition (MNA-SF, MUST, NRS...) Others Routinely, how often do you weigh your residents? (choose only one) Once at admission O Approx. once a month 0 4 - 6 times a year 1 - 2 times a year Never Thank you!