CLINICAL NUTRITION SUBJECTIVE GLOBAL ASSESSMENT

MEDICALHISTORY						
NUTRIENT INTAKE						
2	2 Inadequate; duration of inadequate intake ☐ Suboptimal solid diet ☐ Full fluids or only oral nutrition supplements ☐ Minimal intake, clear fluids or starvation					
WE	EIGHT Usual weight: Current weight:					
	Non fluid weight change past 6 months Less than 5% loss or weight stability 5 to 10% loss without stabilization or increase More than 10% loss and ongoing If above not known, has there been a subjective loss of weight during the past six months? None or mild Moderate Severe Weight change past 2 weeks* Amount (if known) (*See page 2 SGA Rating for more description.) Increased No change Decreased					
SY	MPTOMS (Experiencing symptoms affecting oral intake)					
2 3	☐ Dental problems ☐ Feels full quickly ☐ Constipation 2 ☐ None ☐ Intermittent/mild/few ☐ Constant/severe/multiple					
2 3	No dysfunction Reduced capacity; duration of change Difficulty with ambulation/normal activities					
	gh metabolic requirement					
Lo	PHYSICAL EXAMINATION ss of body fat					
SGA RATING						
□ A Well-nourished Normal □ B Mildly/moderately malnourished Some progressive nutritional loss □ C Severely malnourished Evidence of wasting and progressive symptoms						
	CONTRIBUTING FACTOR					
	☐ CACHEXIA (fat and muscle wasting due to disease and inflammation) ☐ SARCOPENIA (reduced muscle mass and strength)					

Subjective Global Assessment Guidance for Body Composition

SUBCUTANEOUS FAT						
Physical examination	Normal	Mild/Moderate	Severe			
Under the eyes	Slightly bulging area	Somewhat hollow look, Slightly dark circles,	Hollowed look, depression, dark circles			
Triceps	Large space between fingers	Some depth to fat tissue, but not ample. Loose fitting skin.	Very little space between fingers, or fingers touch			
Ribs, lower back, sides of trunk	Chest is full; ribs do not show. Slight to no protrusion of the iliac crest	Ribs obvious, but indentations are not marked. Iliac Crest somewhat prominent	Indentation between ribs very obvious. Iliac crest very prominent			

MUSCLE WASTING						
Physical examination	Normal	Mild/Moderate	Severe			
Temple	Well-defined muscle	Slight depression	Hollowing, depression			
Clavicle	Not visible in males; may be visible but not prominent in females	Some protrusion; may not be all the way along	Protruding/prominent bone			
Shoulder	Rounded	No square look; acromion process may protrude slightly	Square look; bones prominent			
Scapula/ribs	Bones not prominent; no significant depressions	Mild depressions or bone may show slightly; not all areas	Bones prominent; significant depressions			
Quadriceps	Well defined	Depression/atrophy medially	Prominent knee, Severe depression medially			
Interosseous muscle between thumb and forefinger (back of hand) **	Muscle protrudes; could be flat in females	Slightly depressed	Flat or depressed area			

FLUID RETENTION						
Physical examination	Normal	Mild/Moderate	Severe			
Edema	None	Pitting edema of extremities / pitting to knees, possible sacral edema if bedridden	Pitting beyond knees, sacral edema if bedridden, may also have generalized edema			
Ascites	Absent	Present (may only be	only be present on imaging)			

SGA RATING:

- A Well-nourished no decrease in food/nutrient intake; less than 5% weight loss; no/minimal symptoms affecting food intake; no deficit in function; no deficit in fat or muscle mass OR *an individual with criteria for SGA B or C but with recent adequate food intake; non-fluid weight gain; significant recent improvement in symptoms allowing adequate oral intake; significant recent improvement in function; and chronic deficit in fat and muscle mass but with recent clinical improvement in function.
- B Mildly/moderately malnourished definite decrease in food/nutrient intake; 5% to 10% weight loss without stabilization or gain; mild/some symptoms affecting food intake; moderate functional deficit or recent deterioration; mild/moderate loss of fat and/or muscle mass OR *an individual meeting criteria for SGA C but with improvement (but not adequate) of oral intake, recent stabilization of weight, decrease in symptoms affecting oral intake, and stabilization of functional status.
- C Severely malnourished severe deficit in food/nutrient intake; more than 10% weight loss which is ongoing; significant symptoms affecting food/nutrient intake; severe functional deficit OR *recent significant deterioration obvious signs of fat and/or muscle loss.

CACHEXIA: If there is an underlying predisposing disorder (e.g. malignancy) and there is evidence of reduced muscle and fat and no or limited improvement with optimal nutrient intake, this is consistent with cachexia.

SARCOPENIA: If there is an underlying disorder (e.g. aging) and there is evidence of reduced muscle and strength and no or limited improvement with optimal nutrient intake.