

Use the word
DETERMINE
to remind you of the
warning signs.

Disease
Eating Poorly
Tooth Loss/Mouth Pain
Economic Hardship
Reduced Social Contact
Multiple Medicines
Invuntary Weight Loss/Gain
Needs Assistance in Self Care
Elder Years Above Age 80

TALK TO YOUR HEALTHCARE PROVIDER ABOUT YOUR NUTRITIONAL STATUS

Share this brochure and review the DETERMINE questions. Ask about your specific health conditions and nutrition. Discuss other services that you might be eligible for.



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Contact your local Area Agency on Aging
or the Senior HelpLine at 1-800-252-8966
(711 TRS) for more information about available
services and programs in your community.

The Illinois Department on Aging does not discriminate in admission to programs or treatment of employment in programs or activities in compliance with appropriate State and federal statutes. If you feel you have been discriminated against, call the Senior HelpLine at 1-800-252-8966, 711 (TRS).

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State of Illinois
Illinois Department on Aging

Nutritional Risk and Your Health

*Reducing nutritional risk
among older adults*



DETERMINE Your Nutritional Health Questionnaire	YES	NO
I have an illness or condition that made me change the kind and/or amount of food I eat.	2	0
I eat fewer than 2 meals per day.	3	0
I eat few fruits or vegetables or milk products.	2	0
I have 3 or more drinks of beer, liquor, or wine almost every day.	2	0
I have tooth or mouth problems that make it hard for me to eat.	2	0
I don't always have enough money to buy the food I need.	4	0
I eat alone most of the time.	1	0
I take 3 or more different prescribed or over-the-counter drugs a day.	1	0
Without wanting to, I have lost or gained 10 pounds in the last 6 months.	2	0
I am not always physically able to shop, cook, and/or feed myself.	2	0
TOTAL		

The DETERMINE checklist was developed and distributed by the Nutrition Screening Initiative, a project of the American Academy of Family Physicians, The American Dietetic Association and The National Council on the Aging, Inc.

WHAT DOES YOUR SCORE MEAN?

SCORE

0-2: GOOD

Recheck your nutritional score in 6 months or annually.

3-5: MODERATE NUTRITIONAL RISK

Lifestyle changes may be necessary. Recheck your score in 3 to 6 months.

6-21: HIGH NUTRITIONAL RISK

Bring this questionnaire to your healthcare provider, registered dietitian, or social service professional to help improve your nutritional health.

Remember that warning signs suggest risk, but do not represent a diagnosis of any condition.

YOUR HEALTH AND NUTRITION RISK

Your nutritional status can impact your overall health. If your score is a **6 or more** on the Questionnaire (High Nutritional Risk), you should talk with your healthcare provider and other professionals to further understand your nutritional status.



MALNUTRITION IS A CONCERN

Signs of poor nutritional health are often overlooked. It is estimated that up to half of older adults are at risk of malnutrition. Being malnourished can lengthen hospital stays by 4 to 6 days and poor nutritional status can increase healthcare costs by 300%. Chronic health conditions can increase the risk for malnutrition and being malnourished leads to further complications, falls, and readmissions to the hospital.