## I. General Information

**Title of the test:** Mini-Mental State Examination (MMSE)

**Author:** Marshal F. Folstein, MD, Susan E. Folstein, MD, Gary Fanjiang, MD

**Publisher:** Psychological Assessment Resources, Inc. www.parinc.com

**Time required to administer:** 5-20 minutes to administer, 5 minutes to score

**Cost of the Test:** $155 for users manual, 25 standard blue forms, 25 standard red forms, 10 brief version blue forms, 10 brief version red forms and pocket norms guide

## II. Description of Test

**Type/Purpose of Test:** Screen for cognitive impairment.

**Population:** 18-100 year olds whose cognitive function may be impaired (dementia, learning disability, intellectual disability, schizophrenia, delirium)

**Focus of measurement:**
___ **Organic systems**   **X Abilities**   ___ **Participation/life habits**   ___ **Environmental Factors**

## III. Practical Administration

**Ease of Administration:** Easy to administer.  Requires score form, pen and if not on form a piece of paper for drawing task.  Can be done in many different settings.

**Clarity of Directions:**  The directions are clear and the manual is not needed to administer.

**Scoring Procedures:** Score each question with a 0 if incorrect or 1 if correct.  Add all item scores for total score (30 points max).  Indicate examinee's level of consciousness.  Total score 27-30: normal cognitive function, 21-26: mild cognitive impairment, 11-20: moderate cognitive impairment, 0-10: severe cognitive impairment.  T scores can be used if age and education level want to be considered.  These can be found in the pocket norms card.  A T score less than 29 suggests cognitive impairment.

**Examiner Qualification & Training:** Anyone who has experience with people with cognitive impairment and how to administer and score MMSE.  One training with an experienced administrator should be done to establish inter-rater reliability.  Physicians, medical students, psychologists, nurses, social workers, and trained researchers are the examples of professions listed.

## IV. Technical Considerations

**Standardization:** __X__ Norms ____ Criterion Referenced   ____ Other _____

**Reliability:** test-retest: 0.79-0.98, inter-rater: 0.83-0.95, internal consistency: 0.31-0.96

**Validity:** content: value not listed – Wechsler Memory Scale, Bender Visual Motor Gestalt test

predictive: adequate

convergent: 0.78-0.82, clinical: good predictor of functional independence in older adults especially activities of daily living

**Manual:  __X__ Excellent              ___ Adequate             ____ Poor**

The manual has good information on reliability and validity, as well as research into the clinical applications of the MMSE.  It also has information about what each section is testing and how scores may differ based on the diagnosis of the client.  It makes sure to note that this is only a screening tool and should not be used for diagnosing a client.

**What is (are) the setting/s that you would anticipate using this assessment?**

Outpatient clinic, hospital, community setting, home health, mental health facility, skilled nursing facility.

**Summary of strengths and weaknesses**

**Weakness:** Only a screening: may require further assessments, client may memorize answers if given test multiple times, have to buy and it is expensive.

**Strength:** Easy to administer, easy to score, can be used with anyone over 18, does not require a lot of set-up, does not take a lot of time, available in multiple languages, allows examiner to add observations.

**References:**

Folstein, M. F., Folsein, S. E., & Fanjiang, G. (2001). *Mmse mini-mental state examination clinical guide*. Lutz, FL:
        Psychological Assessment Resources, Inc.