

Person—level of cognitive ability, Standardised Mini-Mental State Examination item score code N

Exported from METEOR (AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at <https://creativecommons.org/licenses/by/4.0/>.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

Person—level of cognitive ability, Standardised Mini-Mental State Examination item score code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Level of cognitive ability (SMMSE item score)
Synonymous names:	SMMSE item score; Mini-Mental item score
METEOR identifier:	647335
Registration status:	Health , Superseded 25/01/2018
Definition:	The person's degree of cognitive ability to process thoughts and respond appropriately and safely, as represented by a Standardised Mini-Mental State Examination (SMMSE) score-based code.
Data Element Concept:	Person—level of cognitive ability
Value Domain:	Standardised Mini-Mental State Examination item score code N

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N
Maximum character length:	1

	Value	Meaning
Permissible values:	0	Score of 0
	1	Score of 1
	2	Score of 2
	3	Score of 3
	4	Score of 4
	5	Score of 5
Supplementary values:	7	Not applicable - item has been omitted
	8	Not known/not specified

Collection and usage attributes

Guide for use:

The Standardised Mini-Mental State Examination (SMMSE) is a clinical assessment tool which is used as a screening test for cognitive impairment (Molloy et al. 1991a).

The SMMSE consists of 12 items or questions which assess a range of cognitive domains, requiring vocal and physical actions (such as memory recall and drawing) in response to reading and listening to commands. Each item has a maximum score:

Question/ Item number	Cognitive domain	Maximum score
1	Orientation - time	5
2	Orientation - place	5
3	Memory - immediate	3
4	Language/attention	5
5	Memory - short	3
6	Language/memory - long	1
7	Language/memory - long	1
8	Language/abstract thinking/verbal fluency	1
9	Language	1
10	Language/attention/comprehension	1
11	Attention/comprehension/follow commands/constructional	1
12	Attention/comprehension/ construction/follow commands	3
Total		30

Scores above 1 are not permissible for items 6-11.

Scores above 3 are not permissible for items 3 and 12.

Scores above 5 are not permissible for items 1, 2 and 4.

The final SMMSE score is a sum of the 12 items, and can range from a minimum of 0 to a maximum of 30. The SMMSE can be adjusted for non-cognitive disabilities.

As outlined in the SMMSE guidelines, if an item cannot be modified or adjusted then the item is omitted, reducing the maximum obtainable score from 30 (Molloy et al. 1991a). The formula $((\text{Actual score} \times 30) / \text{Maximum obtainable score})$ is used to readjust the score to be comparable with unadjusted scores.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

- Reference documents:** Molloy D, Alemayehy E, & Roberts R 1991a. Reliability of a standardized Mini-Mental State Examination compared with the traditional Mini-Mental state Examination. *American Journal of Psychiatry*, Vol. 148:102-105.
- Molloy D, Alemayehy E, & Roberts R 1991b. The *Standardised Mini-Mental State Examination* tool, Independent Hospital Pricing Authority, Australia. Viewed 24 August 2016, <https://www.ihoa.gov.au/publications/standardised-mini-mental-state-examination-smmse>
- Molloy D, Alemayehy E, & Roberts R 1991c. The *Standardised Mini-Mental State Examination* guidelines, Independent Hospital Pricing Authority, Australia. Viewed 24 August 2016, <https://www.ihoa.gov.au/publications/standardised-mini-mental-state-examination-smmse>

Data element attributes

Collection and usage attributes

- Guide for use:** This data element is used to report a score for one of the 12 items that comprise the Standardised Mini-Mental State Examination tool. It should be reported in an array of 12 to enable to gain a full SMMSE assessment score

Source and reference attributes

- Submitting organisation:** Independent Hospital Pricing Authority

Relational attributes

- Related metadata references:** Supersedes [Person—level of cognitive ability, Standardised Mini-Mental State Examination item score code N](#)
[Health](#), Superseded 03/11/2016

Has been superseded by [Person—level of cognitive ability, Standardised Mini-Mental State Examination item score code N](#)
[Health](#), Standard 25/01/2018

- Implementation in Data Set Specifications:** [Admitted subacute and non-acute hospital care NBEDS 2017-18](#)
[Health](#), Superseded 25/01/2018
[Independent Hospital Pricing Authority](#), Recorded 04/08/2016

Implementation start date: 01/07/2017

Implementation end date: 30/06/2018

Conditional obligation:

Only required to be reported for episodes of admitted patient care with [Hospital service—care type, code N\[N\]](#) recorded as Code 4, Geriatric evaluation and management.

Only one array of SMMSE scores (i.e. 12 individual scores) per Geriatric Evaluation and Management episode are required to be reported.

If multiple sets of SMMSE scores are recorded in the patient's record, the set of scores (12 individual scores) which demonstrate the lowest level of cognitive ability recorded during the Geriatric Evaluation and Management episode should be reported.