MINI-MENTAL STATUS EXAM

1. What is the year _____, season _____, date _____, day _____, month _____.
2. What are we: state _____, county _____, town _____, hospital _____, floor _____.
3. Name 3 objects: orange _____, airplane _____, tobacco ______. (trails _____).
4. Serial 7's: ______ ______ ______ ______ ______

   (93) (86) (79) (72) (65)

   or spell "world" backwards ______ ______ ______ ______ ______ ______ ______ ______ ______ ______ ______

   (d) (l) (r) (o) (w)
5. Recall 3 objects: orange _____, airplane _____, tobacco ______.
6. Name a pencil _____, and watch ______.
7. Read and obey _____

   CLOSE YOUR EYES
8. Copy design ______ (below)
9. Write a sentence ______ (below).
10. Repeat the following "no ifs, ands, or buts" ______.
11. Follow a 3-stage command:
   a. take a paper in your right hand ______
   b. fold it in half ______
   c. put it on the floor ______

Level of consciousness ___________________________ (check)
alert drowsy stupor coma

Total (One point for each blank, maximum = 30)

Physician signature ___________________________ Date __________________