**BACKGROUND:** Malnutrition and/or involuntary weight loss, increases the risk of mortality and disability, decreasing the quality of life. Nutritional status is an independent predictor of mortality per year, especially in institutionalized elderly patient.

**PURPOSE:** To determine the prevalence of nutritional-risk and malnutrition in institutionalized elderly patients in a Public Nursing Home (NH) and make recommendations about use of enteral nutrition (EN).

**MATERIALS AND METHODS:** All institutionalized patients in a Public NH were selected.

- **Main variable:** Classification of patients according to the risk-malnutrition using the abbreviated nutritional screening tool MNA®-SF (Mini Nutritional Assessment), validated in elderly patients in different settings, and the clinical interview. Patients were classified in three groups:
  - Malnutrition (with or without weight loss).
  - Risk-malnutrition (with or without weight loss).
  - Normal-nutritional-status.

- **Secondary variable:** We made recommendations about use of EN based on the MNA®-SF and the types of EN recommended were recorded.

**RESULTS:**

- Average age: 78.6 years (53-101).
- 52.3% (45/86) men.
- Average BMI was 26.3 kg/m².

*It was possible to weigh 53.5% of the patients (46/86) while the rest of the patients were assessed through the calf circumference.*

**CONCLUSIONS:** The prevalence of nutritional-risk and malnutrition in a Public NH reaches approximately half of the patients, according to the abbreviated MNA®-SF scale. Protein-malnutrition associated with minimal weight loss was the majority alteration in institutionalized elderly patients.