

## Références bibliographiques

1. Butterworth, C. E. The skeleton in the hospital closet. *Nutr Today* 1974; 9 (2) : 4-8.
2. Groupe de travail canadien sur la malnutrition. Qu'est-ce que la malnutrition? [en ligne]. [Consulté le 14 février 2016]. Disponible à [nutritioncareincanada.ca/fr/malnutrition/quest-ce-que-la-malnutrition](http://nutritioncareincanada.ca/fr/malnutrition/quest-ce-que-la-malnutrition).
3. Laporte, M., Villalone, L., Payette, H. Simple nutrition screening tools for healthcare facilities: Development and validity assessment. *Can J Diet Prac* 2001; 62 : 26-43.
4. Kondrup, J. Sorensen, J. M. The magnitude of the problem of malnutrition in Europe. *Nestle Nutr Workshop Ser Clin Perform Programme* 2009; 12 : 1-14.
5. Banks, M., Ash, S., Bauer, J., Gaskill, D. Prevalence of malnutrition in adults in Queensland public hospitals and residential aged care facilities. *Nutrition & Dietetics* 2007; 64 (3) : 172-78.
6. Pirlich, M., Schutz, T., Norman K. et collab. The German hospital malnutrition study. *Clin Nutr* 2006; 25 (4) : 563-72.
7. Wunderlich, S. M., Tobias, A. Relationship between nutritional status indicators and length of stay for patients with diverticular disease. *J Am Diet Assoc* 1992; 92 : 429-433.
8. Sayarath, V. G. Nutrition Screening for malnutrition: Potential economic impact at a community hospital. *J Am Diet Assoc* 1993; 93 : 1440-1442.
9. Allard, J. P., Keller, H., Jeejeebhoy, K.N. et collab. Malnutrition at hospital admission: Contributors and impact on length of stay. A prospective cohort study from the Canadian Malnutrition Task Force. *J Parenter Enteral Nutr*. E pub ahead of print 2015 Jan 26.
10. Somanchi, M., Tao, X., Mullin, G. E. The facilitated early enteral and dietary management effectiveness trial in hospitalized patients with malnutrition. *J Parenter Enteral Nutr* 2001; 35 : 209-216.
11. Allard, J. P., Keller, H., Teterina, A. et collab. Factors associated with nutritional decline in hospitalized medical and surgical patients admitted for 7 days or more: A prospective cohort study. *Br J Nutr* 2015; 15 : 1-11.
12. Laporte, M., Keller, H., Payette, H. et collab. Validity and reliability of the new Canadian Nutrition Screening tool in the 'real-world' hospital setting. *Eur J Clin Nutr*. E pub ahead of print 2014 Dec 17.
13. GTCM. Changez les choses aujourd'hui – utilisez ces outils dans votre pratique. Outil canadien de dépistage nutritionnel – couleur [en ligne]. [Consulté le 17 février 2016] Disponible à [nutritioncareincanada.ca/fr/ressources](http://nutritioncareincanada.ca/fr/ressources).
14. Allard, J. P., Keller, H., Jeejeebhoy, K. N. et collab. Malnutrition at hospital admission: Contributors and impact on length of stay. A prospective cohort study from the Canadian Malnutrition Task Force. *J Parenter Enteral Nutr*. E pub ahead of print 2015 Jan 26.
15. Barker, L. A., Gout, B. S., Crowe, T. C. Hospital malnutrition: Prevalence, identification and impact on patients and the healthcare system. *Int J Environ Res Public Health* 2011; 8 : 514-527.
16. Fry, D. E., Pine, M., Jones, B. L., Meimban, R. J. Patient characteristics and the occurrence of never events. *Arch Surg* 2010; 145 : 148-151.
17. Schneider, S. M., Veyres, P., Pivot, X. et collab. Malnutrition is an independent factor associated with nosocomial infections. *Br J Nutr* 2004; 92 : 105-111.
18. Demling, R. H. Nutrition, anabolism, and wound healing process: An overview. *EPlasty* 2009; 9 : 65-94.
19. Moran, L., Custer, P., Murphy, G. Nutritional assessment of lean body mass. *J Parenter Enteral Nutr* 1980; 4 : 595.
20. Lim, S. L., Ong, K. C., Chan, Y. H. et collab. Malnutrition and its impact on cost of hospitalization, length of stay, readmission and 3-year mortality. *Clin Nutr* 2012; 31 (3) : 345-350.
21. Chima, C. S., Barco, K., Dewitt, J. L. A., Maeda, M., Teran, J. C., Mullen, D. Relationship of nutritional status to length of stay, hospital costs, and discharge status of patients hospitalized in the medicine service. *Aliment Pharmacol Ther* 1997; 11, 975-978.
22. Allison, S. P. Malnutrition, disease, and outcome. *Nutrition* 2000; 16, 590-591.
23. Krumholz, H. M. Post-hospital syndrome – an acquired, transient condition of generalized risk. *N Engl J Med* 2013; 368 : 100-102.
24. Kassin, M. T., Owen, R. M., Perez, S. D. et collab. Risk factors for 30-day hospital readmission among general surgery patients. *J Am Coll Surg* 2012; 215 : 322-330.
25. Mudge, A. M., Kasper, K., Clair, A. et collab. Recurrent readmissions in medical patients: A prospective study. *J Hosp Med* 2011; 6 : 61-67.
26. Allaudeen, N., Vidyarthi, A., Maselli, J., Auerbach, A. Redefining readmission risk factors for general medicine patients. *J Hosp Med* 2011; 6 : 54-60.

27. Sullivan, D. H. Risk factors for early hospital readmission in a select population of geriatric rehabilitation patient: The significance of nutritional status. *J Am Geriatr Soc* 1992; 40 : 792.
28. Meguid, M. M., Campos, A. C. L., Meguid, L. et collab. IONIP: A criterion of surgical outcome and patient selection for perioperative nutrition support. *Br J Clin Pract* 1988; 63 : 8.
29. Eisenberg, J. M., Glick, A., Buzby, G. P. et collab. Does perioperative total parenteral nutrition reduce medical care cost? *J Parent Ent Nutr* 1993; 17 : 201.
30. Patterson, B. M., Cornell, C. N., Carbonne, B. et collab. Protein depletion and metabolic stress in elderly patients who have a fracture of the hip. *J Bone Joint Surg* 1992; 74-A : 251.
31. Sullivan, D. H., Moriarty, M. S., Chernoff, R. et collab. Patterns of care: An analysis of the quality of nutritional care routinely provided to elderly hospitalized veterans. *J Parent Ent Nutr* 1989; 13 : 249.