Reviewer's report

Title: Diagnostic performance of the Minimal Eating Observation and Nutrition Form - Version II (MEONF-II) and Nutritional Risk Screening 2002 (NRS 2002) among hospital inpatients - a cross-sectional study

Version: 2 Date: 23 October 2011

Reviewer: Michael Hiesmayr

Reviewer's report:

The authors have revised their manuscript extensively based on the comments. A few items need clarification and one result (user friendliness....) may need statistical review.

The user friendliness is important for the conclusions and thus the method and results need clarification.

1. time to perform the assessment: Was there a specific order in the three assessments. Since several items are present/shares between scores the time needed will be lower in those scores done as second and third. Please specify and if necessary discuss. Ideally the order of scores should have been chosen randomly.

2. "easy to understand......": If understand correctly than the same question was asked 87 times to one of the 4 nurses collecting data. thus there are no 87 independent observations. In addition there may be a learning curve for each nurse ? Was there an intention to check difficulty related to an individual patient? I feel that asking 4 persons about user -friendliness is a severe limitation that needs to be addressed, more over statistics appear over-optimistic. I recalculated the "easy to understand" and found in a chi-square test P=0.01 and P=0.0009. Please get statistical advice on this issue. If this issue cannot be improved (small sample remains) please concentrate your conclusion on time to be performed and similar or superior performance compared to other instruments.

3. new Table 2 is well done. Could you address the issue that MEONF ( H1gh risk for UN), NRS (Risk for UN) and MNA (UN) may mean the same as these numbers rarely differ by more than one individual. You should discuss that the grouping may affect your result. You address correctly that NRS has been tested with RCT but this study was also a post development of the score evaluation that is not a real validation and that the evaluation was based in the fact whether there was an effect of an intervention (usually artificial nutrition ) in the groups with different cutoffs. Moreover the experts categorised the populations for each study globally into the score categories and thus it is not a validation study.

4. in the discussion para 2 "one strength ..... and albumin levels are still normal." This sentence is really not in agreement with the fact that the cutoff for malnutrition was defined based on albumin values. I would erase the sentence if you agree.
5. in the discussion page 12 line 4 ("and possibly the age of the sample") it is "the age of the patients in the sample".

6. in the discussion. if you state lower/higher this needs to be supported by a significant statistical test (.... NRS 2002 identified a lower percentage....) page 12. consider the issue of different terminology for risk/high risk/UN. You could state that a clear vocabulary and uniform definitions would be helpful.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**

I declare that I have no competing interests.