An estimated two-thirds of the elderly population are at risk for \textit{malnutrition} and are undiagnosed by their healthcare providers. Malnutrition in the elderly can increase the risks of varying complications as well as the risks of morbidity and mortality. It is estimated that at least half of elderly individuals 65 and over in the US will have some type of surgical procedure.

For the elderly surgical patient, \textit{malnutrition} can lead to delayed healing, postoperative complications, increased hospital length of stay, overall poor surgical outcomes, and an elevated cost of care.

Preoperative nutritional assessment and optimization is needed prior to surgery to minimize surgical risks.

\textbf{PICOT QUESTION}

In patients 65 years of age and older presenting for preoperative assessment for elective surgical procedures, how do those patients identified as severely malnourished compared to those identified as not malnourished influence hospital length of stay within 30 days after surgery?