

Table 1. Cranial Nerve Function and Testing³

Cranial Nerve	Function	Test
I – Olfactory	<ul style="list-style-type: none"> • Sense of smell 	<ul style="list-style-type: none"> • Ask patient to occlude one nostril and close their eyes. • Present a stimulus, such as coffee, and ask the patient to identify the smell.
II – Optic	<ul style="list-style-type: none"> • Vision 	<ul style="list-style-type: none"> • Visual acuity. • Color vision. • Visual fields. • Pupillary response to light to test for an afferent pupillary defect.
III – Oculomotor	<ul style="list-style-type: none"> • Ocular motility (superior, inferior and medial recti, inferior oblique) • Lid elevation (levator palpebrae superioris) • Pupillary constriction (efferent limb of light pathway) 	<ul style="list-style-type: none"> • Routinely tested during examination with extraocular motility. • Supraduction. • Infraduction. • Adduction.
IV – Trochlear	<ul style="list-style-type: none"> • Ocular motility (superior oblique) 	<ul style="list-style-type: none"> • Routinely tested during examination with extraocular motility. Infraduction upon adduction. • Intorsion.
V – Trigeminal	<ul style="list-style-type: none"> • Facial sensation • Muscles of mastication 	<ul style="list-style-type: none"> • Test the distributions of V₁, V₂ and V₃ separately with a light touch with a cotton wisp to the forehead, upper cheek and jaw, respectively, with the patient's eyes closed. Ask the patient to compare the sensation from right to left, looking for any asymmetry • Assess the motor function of V by feeling either side of the jaw just inferior and anterior to the ear for muscle contraction while asking the patient to clench their teeth. • If indicated, test the corneal reflex (afferent limb: ophthalmic, V₁ and efferent limb, V₂) with a cotton wisp.
VI – Abducens	<ul style="list-style-type: none"> • Ocular motility (abduction) 	<ul style="list-style-type: none"> • Routinely tested during examination with extraocular motility. • Abduction.
VII – Facial	<ul style="list-style-type: none"> • Muscles of facial expression • Taste to anterior 2/3 of tongue 	<ul style="list-style-type: none"> • Ask the patient to smile, raise their eyebrows, frown, puff out their cheeks and squeeze their eyelids tightly together while looking for any asymmetry or weakness.
VIII – Vestibulocochlear	<ul style="list-style-type: none"> • Auditory and vestibular systems 	<ul style="list-style-type: none"> • Hearing can be grossly checked by rubbing your fingers together near a patient's ear and asking if they can identify which ear hears the sound and if they notice any asymmetry in the volume of the sound.
IX – Glosso-pharyngeal X – Vagus	<ul style="list-style-type: none"> • Palate elevation, gag reflex/ swallowing • Speaking 	<ul style="list-style-type: none"> • Ask the patient to open their mouth and say "ahh" and look for any asymmetry in the palate or deviation of the uvula.
XI – Accessory	<ul style="list-style-type: none"> • Sternocleidomastoid and trapezius muscle 	<ul style="list-style-type: none"> • Ask the patient to turn their head side-to-side and shrug their shoulders looking for any asymmetry or weakness.
XII – Hypo-glossal	<ul style="list-style-type: none"> • Muscle action of the tongue 	<ul style="list-style-type: none"> • Ask the patient to stick their tongue out and note if it deviates to one side.

Neurologic Examination

LM Reder



Neurologic Examination:

DeJong's the Neurologic Examination William Wesley Campbell, Russell N. DeJong, 2005 This classic text is a comprehensive detailed guide to the neurologic examination The book provides a thorough understanding of both the techniques of the examination and the anatomic and physiologic bases of the results The brand new edition offers you a complete concise reference you'll use everyday to quickly interpret the signs and symptoms of neurologic dysfunction compare and contrast abnormalities confirm findings and make accurate differential diagnoses confidently to assess responses to treatment This heavily revised new edition provides complete coverage of the nervous system including anatomic and physiologic presentation of disorders recommended examination procedures neurodiagnostic and laboratory testing diagnostic reasoning and neurologic differential diagnosis guidelines You'll confidently identify the signs and symptoms of disease know when additional diagnostic testing is indicated accurately interpret diagnostic data and recommend effective treatment options

Neurologic Examination Robert Schwartzman, 2008-04-15 Neurologic Examination is the ideal text for any neurologist learning the difficult art of diagnosis This illustrated guide to all aspects of the neurological exam Reemphasizes the usefulness of the exam in localizing lesions in the central and peripheral nervous system from which differential diagnoses are derived Demonstrates the examination of the brachial plexus cervical plexus chronic regional pain patients is demonstrated not found in other manuals of neurological examination Reintroduces the use of drifts the arm roll and parietal copy to clinical neurology

Pocket Guide and Toolkit to DeJong's Neurologic Examination William W. Campbell, 2007-11-01 Designed as a diagnostic tool for non neurologists or first year neurology residents this pocket guide contains the most essential information from the best selling DeJong's The Neurologic Examination Sixth Edition Included are step by step instructions for each stage of the neurologic examination numerous illustrations depicting examination techniques and frequently used tests and scales such as the Boston Naming Test Glasgow Coma Scale and Denver Scale of Communication Function A toolkit at the back of the book contains lightweight adaptations of implements used in performing the examination such as visual acuity charts a red lens a multi pinhole an optokinetic nystagmus tape and other devices

The Neurologic Examination Hiroshi Shibasaki MD, PhD, Mark Hallett MD, 2016-06-15 Whereas most book about the neurologic examination are disease and anatomy oriented The Neurologic Examination Scientific Basis for Clinical Diagnosis focuses on a pathophysiological approach to the nervous system The authors emphasize that the scientific interpretation of symptoms obtained from carefully taking the patient's history and noting signs found during physical examination are essential in the diagnosis of neurologic diseases even if laboratory testing such as electrophysiology and neuroimaging are more widely used This book aims to provide a bridge from the basic sciences such as anatomy physiology pharmacology and molecular biology to the neurologic symptoms Neurologic examinations provide the foundation for diagnosis and only after a thorough and expertly executed examination can one begin to incorporate

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Campbell,2012-09-21 This 7th edition of DeJong s The Neurological Examination offers practitioners and residents of Neurology an in depth discussion of neurologic exams that will not be found anywhere else Without abandoning classic concepts and science this definitive source on neurologic examination techniques has been streamlined and updated The text integrates details of neuroanatomy and clinical diagnosis in an easy to read format Anatomical and exam illustrations help ensure proper technique Plus illustrative cases and tables summarize differentials and list clinical findings With this book as their guide readers will truly understand the anatomical underpinnings of examination techniques **FEATURES** Four color design Updated figures and references Text is supplemented by helpful boxes that highlight key points When available evidence based medical insights are incorporated in assessing the value of specific tests **Dejong's The Neurologic Examinations** Lakshmi Narasimhan Ranganathan,2019-01-01 Key Points Numerous illustrations and clinical images ensure proper technique and emphasize key information necessary for an optimally effective examination Case scenarios bridge the gap between the book and the bedside The comments section has been tailored to maximize concept in minimum content

Neuroanatomy and the Neurologic Exam Terence R. Anthoney,1993-10-18 In this book Neuroanatomy and the Neurologic Exam is an innovative comprehensive thesaurus that surveys terminology from neuroanatomy and the neurologic examination as well as related general terms from neurophysiology neurohistology neuroembryology neuroradiology and neuropathology The author prepared the thesaurus by examining how terms were used in a large sample of recent widely used general textbooks in basic neuroanatomy and clinical neurology These textbooks were written by experts who received their primary professional training in 13 different countries allowing the thesaurus to incorporate synonyms and conflicting definitions that occur as a result of variations in terminology used in other countries The thesaurus contains **The Neurologic Examination** Russell N. DeJong,1950 *Neurological Examination* Charles A. McKendree,1928 *DeMyer's The Neurologic Examination: A Programmed Text, Sixth Edition* Jose Biller, Gregory Gruener, Paul Brazis,2011-04-25 The classic step by step guide to learning how to perform the diagnostic neurologic examination now in full color This is an excellent book that will be very useful for learning the neurologic examination It is easy to read well illustrated and

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Neurologic Examination of the Dog John T. McGrath,1960 *Neurologic Examination* Robert J. Schwartzman,2020-07-14 Neurologic Examination is designed to help medical personnel make a diagnosis for a neurological illness with the patient s history and physical examination Neurology is logical but requires the physician to localize the lesion to an anatomical part of the neuroaxis and then to develop a differential diagnosis based on this localization Imaging technology is now superb and buttresses but does not replace the examination There is no imaging technique that can diagnose a migraine headache It may however demonstrate white matter hyperintensities that are often confused with a demyelinating disease or small vessel disease A negative MRI of the spine in a patient with clear L5 S1 signs and symptoms such as a weak extensor hallucis longus muscle and a depressed ankle jerk still has overwhelming evidence of L5 S1 pathology This book leads the physician to the correct localization of a lesion utilizing simple bedside tests The only tools employed are a reflex hammer and a pin The illustrations and technique descriptions guide the practitioner through important distinctions with the observation of subtle details Information gleaned in less than 10 minutes allows the attending to order the pertinent laboratory and imaging studies required to confirm a diagnosis and initiate treatment in the current health care climate In general the patient history gives the diagnosis the neurological examination proves it modern imaging

and laboratory evaluation guides the treatment and predicts the prognosis Experience with generations of medical students and residents utilizing the techniques illustrated and described in this book have been successful in making reliable neurologic diagnoses easier *A Text-book of Clinical Neurology* Israel Spanier Wechsler,1927 **Manual for medical examiners of the United States Veterans' Administration** United States. Veterans Administration. Central Office,1951 Archives of Internal Medicine ,1919 *Fundamentals of Neurology* Heinrich Mattle,Marco Mumenthaler,2016-12-14 The essential neurotransmitter for assimilating the basics of clinical neurology The second edition of this practical guide provides a thorough introduction to the essential concepts of clinical neurology Coverage includes history taking the neurological examination and ancillary tests topical diagnosis and differential diagnosis of typical syndromes the diseases of the central nervous system peripheral nerves autonomic nervous system and muscles epilepsy and inflammatory diseases such as multiple sclerosis Central to the book are the lucid structuring of complex contents allowing efficient learning even without prior knowledge of the subject and the vital link between theory and clinical practice with essential information on history taking the clinical examination and additional tests all supported by informative graphics and appropriate computed tomography or magnetic resonance imaging studies Key Features Complete revision of contents and an enhanced layout from the first edition Brilliant format and structure making the assimilation of complex information easy and efficient Clear color illustrations and graphics many new or revised for the second edition Comprehensive tables expand and organize information on many topics Vast clinical experience of two highly respected university teachers *Fundamentals of Neurology An Illustrated Guide* Second Edition is the ideal introduction to clinical neurology for medical students physical therapists and other professionals involved in patient care *American Journal of Syphilis and Neurology* ,1919 **Southwestern Medicine** ,1925 **A.M.A. Archives of Neurology and Psychiatry** ,1919 *California. Court of Appeal (2nd Appellate District). Records and Briefs* California (State),.

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web programmed cell death protein 1 also known as pd 1 and cd279 cluster of differentiation 279 is a protein on the surface of t and b cells that has a role in regulating the immune system s response to the cells of the human body by down regulating the immune system and promoting self tolerance by suppressing t cell inflammatory activity

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web el servicio de inmunología forma parte del centro de diagnóstico biomédico del hospital clínic de barcelona es el responsable de las pruebas asistenciales para la prevención diagnóstico y seguimiento de las enfermedades de origen inmunológico aplica para ello los últimos avances científicos y un amplio espectro de técnicas

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web immunology service the immunology service is part of the biomedical diagnostic center of the hospital clínic de barcelona it is responsible for healthcare tests for the prevention diagnosis and follow up of diseases of immune origin it applies the latest scientific advances and a wide range of advanced techniques of high complexity

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