Neurologic Exam Evaluation Checklist 2011 (NEURO OSCE)

Student’s Name: ______________________________

Date: _____Monday September 12  _____Friday September 16

Evaluator’s Name: _______________________________________________

Mark A if the step was done correctly
Mark B if the step was done but if the technique was unsatisfactory
Mark C if the step was omitted

PLEASE NOTE: FOR ITEMS MARKED “B,” THE EVALUATOR NEEDS TO BE SPECIFIC AS TO WHY THE STEP WAS UNSATISFACTORY. PLEASE WRITE DIRECTLY ON THIS SHEET.

1. WASH HANDS

CRANIAL NERVES:

2. ASSESS VISUAL FIELDS
   The student can check one eye at a time, or have pt with both eyes open.

3. DO THE FUNDUS EXAM (CN2 Student inspects both eyes with the ophthalmoscope.)
   _____ left eye
   _____ right eye

4. ASSESS PUPIL RESPONSE TO LIGHT (CN2, 3)
   _____ Right eye
   _____ Left eye
   (The examiner should check for the direct and consensual response to light in each pupil)

5. CHECK FOR ALL 6 CARDINAL POSITIONS OF GAZE (CN 3, 4, 6)
   -Examiner makes a large “H” while pt moves their eyes and also checks for near reaction

6. ASSESS THE 3 SENSORY DIVISIONS OF CN 5 (light touch on pt’s face, eyes closed)
   -SIX AREAS MUST BE ASSESSED – Eyes closed
   _____ both sides of the forehead (ophthalmic division of CN5)
   _____ both sides superficial to maxillary sinuses = cheeks (maxillary division)
   _____ both sides superficial to the mandibles = jaw (mandibular division of CN5)

7. ASSESS CN 7
   Examiner asked pt to raise both eyebrows or frown or wrinkle my forehead. (CN7)

8. ASSESS CN 7
   Examiner asked pt to “show my teeth” or “smile and show your teeth” (CN7)

9. ASSESS THE AUDITORY DIVISION OF CN 8 (eyes closed)
10. **ASSESS SOFT PALATE MOVEMENT** (CN10, questionably CN9)
   - Examiner asks pt to “say ah.” Uses light source to look in mouth.

11. **ASSESS PTS ABILITY TO COUGH** (CN10, Vagus nerve, innervates the vocal cords)

12. **ASSESS TRAPEZIUS MUSCLE STRENGTH** (CN11, Spinal Accessory Nerve).
    - Examiner places his/her hands on pt’s trapezii muscles and then asks pt to shrug

13. **ASSESS STERNOCLEIDOMASTOID MUSCLE STRENGTH** (CN11)
    - Examiner asks pt to turn the head to each side against resistance from the examiner’s hand.

14. **ASSESS HYPOGLOSSAL NERVE** (CN12)
    - Examiner asked pt to protrude their tongue

**MOTOR SYSTEM:**

15. **ASSESS MUSCLE TONE IN THE UPPER LIMBS (RESISTANCE TO PASSIVE ROM)**
    - RUE
    - LUE

16. **ASSESS MUSCLE STRENGTH OF THE UPPER EXTREMITIES**
    - shoulder-abduction *(start with hands at pt’s side, then ask pt to abduct arms to 90°)*
    - elbow flexion
    - elbow extension
    - wrist flexion
    - wrist extension
    - hand grip

    *If student misses any one, mark as “B”*

(Patient may be supine or seated from here on.)

17. **ASSESS LIMB TONE IN THE LOWER LIMBS (RESISTANCE TO PASSIVE ROM)**
    - RLE
    - LLE

18. **ASSESS MUSCLE STRENGTH OF THE LOWER EXTREMITIES**
    - hip flexion
    - knee flexion
    - knee extension
    - ankle dorsiflexion
    - ankle plantar flexion

    *If student misses any one, mark as “B”*
REFLEXES: Examiner elicited the following deep tendon reflexes bilaterally

____ 19. BICEPS REFLEX (C5, C6)
   _____ RUE
   _____ LUE

____ 20. TRICEPS REFLEX (C7, C8)
   _____ RUE
   _____ LUE

____ 21. BRACHIORADIALIS REFLEX (C5, C6)
   _____ RUE
   _____ LUE

____ 22. KNEE REFLEX
   _____ RLE
   _____ LLE

____ 23. ANKLE REFLEX
   _____ RLE
   _____ LLE

____ 24. TEST FOR THE PLANTAR RESPONSE ON EACH FOOT. (Babinski sign)
   _____ RLE
   _____ LLE

SENSORY SYSTEM: (eyes closed)

____ 25. ASSESS LIGHT TOUCH IN ALL FOUR EXTREMITIES (with a wisp of cotton, or tip of cotton swab)
   _____ RLE   _____ RUE
   _____ LUE   _____ LLE

____ 26. ASSESS PAIN IN ALL FOUR EXTREMITIES (with a splintered cotton tip applicator, or tongue blade)
   _____ RLE   _____ RUE
   _____ LUE   _____ LLE

____ 27. ASSESS POSITION SENSE IN ALL FOUR EXTREMITIES
   _____ RLE   _____ RUE
   _____ LUE   _____ LLE

____ 28. ASSESS VIBRATION SENSE IN ALL FOUR EXTREMITIES (posterior columns)
   _____ RLE   _____ RUE
   _____ LUE   _____ LLE
COORDINATION

____ 29. **ASSESS COORDINATION WITH 3 DIFFERENT MANEUVERS**

- finger-to-nose-to-finger _____RUE _____LUE
- fine finger movements _____RUE _____LUE
- heel-to-knee-to-shin _____RUE _____LUE

*If student misses any one, mark as “B”*

(Patient is standing)

GAIT/STATION

____ 30. **ROMBERG TEST** (feet must be together)

____ 31. **ASSESS GAIT**

- _____NORMAL GAIT
- _____TANDEM GAIT

____ 32. **WASH HANDS**