

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 MANUEVERS**

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**