

Neurological

Single Organ System Exam – 1997

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CONTENT AND DOCUMENTATION REQUIREMENTS	<u>Level of Exam</u>	<u>Perform and Document</u>
	Problem Focused	One to five elements identified by a bullet.
	Expanded Problem Focused	At least six elements identified by a bullet.
	Detailed	At least twelve elements identified by a bullet.
	Comprehensive	Perform all elements identified by a bullet; document every element in every heavy box and at least one element in the regular box.

SYSTEM/BODY AREA ELEMENTS OF EXAMINATION	
Constitutional	<ul style="list-style-type: none"> Measurement of any three of the following seven vital signs: 1) sitting or standing blood pressure, 2) supine blood pressure, 3) pulse rate and regularity, 4) respiration, 5) temperature, 6) height, 7) weight (may be measured and recorded by ancillary staff) General appearance of patient e.g. development, nutrition, body habitus, deformities, attention to grooming.
Eyes	<ul style="list-style-type: none"> Ophthalmoscopic examination of optic discs e.g. size, C/D ratio, appearance and posterior segments e.g. vessel changes, exudates, hemorrhages
Cardiovascular	<ul style="list-style-type: none"> Examination of carotid arteries e.g. pulse amplitude, bruits Auscultation of heart including sounds, abnormal sounds and murmurs Examination of peripheral vascular system by observation e.g. swelling, varicosities and palpation e.g. pulse, temperature, edema, tenderness
Musculoskeletal (includes extremity)	<ul style="list-style-type: none"> Examination of gait and station Assessment of motor function including: <ul style="list-style-type: none"> Muscle strength in upper and lower extremities Muscle tone in upper and lower extremities e.g. flaccid, cog wheel, spastic with notation of any atrophy or abnormal movements e.g. fasciculation, tardive dyskinesia
Neurological	<p>Evaluation of higher integrative functions including:</p> <ul style="list-style-type: none"> Orientation to time, place and person Recent and remote memory Attention span and concentration Language e.g. naming objects, repeating phrases, spontaneous speech Fund of knowledge e.g. awareness of current events, past history, vocabulary <p>Test the following cranial nerves:</p> <ul style="list-style-type: none"> 2nd cranial nerve e.g. visual acuity, visual fields, fundi 3rd, 4th, and 6th cranial nerves e.g. pupils, eye movements 5th cranial nerve e.g. facial sensation, corneal reflexes 7th cranial nerve e.g. facial symmetry, strength 8th cranial nerve e.g. hearing with tuning fork, whispered voice and/or finger rub 9th cranial nerve e.g. spontaneous or reflex palate movement 11th cranial nerve e.g. shoulder shrug strength 12th cranial nerve e.g. tongue protrusion Examination of sensation e.g. by touch, pin vibration, proprioception Examination of deep tendon reflexes in upper and lower extremities with notation of pathological reflexes e.g. Babinski. Test coordination e.g. finger/nose, heel/knee/shine, rapid alternating movements in the upper and lower extremities, evaluation of fine motor coordination in young children