

ADULT NEUROLOGICAL ASSESSMENT IN THE E.D. (II)

Key skills

By the end of this session, you should be **confident** and **competent** in the following:

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| Focussed assessment tools III | <i>Muscle bulk, tone, power</i> | "Mental map" of myotomes |
| Fundoscopy and pupillary signs | | |

Focussed neurological assessment tools III

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|---------------|---|
| MUSCLE BULK | <i>How do you clinically test these?</i> |
| FASCICULATION | |
| MUSCLE TONE | <i>What is the significance of fasciculation?</i> |
| MUSCLE POWER | |

Fundoscopy and pupillary signs

Pupillary signs: key clinical steps

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|----------|-----------------------------------|---|
| A | Quick general look | Face / eyes: Myaesthetic? Exophthalmos? Ptosis? |
| B | Pupil equality/ size | Argyll-Robertson? Horner's? Holmes-Adie? IIN palsy? |
| C | Eye movements | III, IV, VI Nystagmus VIII, cerebellar disease? |
| D | Pupillary light reflex | Direct and consensual |
| E | Accommodation/ convergence reflex | |

Fundoscopy: key clinical steps

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| A | Quick general look | Medic alert bracelet worn? Facial signs of lipid disease? Does the patient have foot ulcers? |
| B | Lens, vitreous | May give pointers to diabetes May be damaged in ocular trauma |
| C | Optic disc | Margins – optic atrophy, papillitis, papilloedema |
| D | Arterioles and venules | Calibre, light reflex (silver wiring), A-V nipping |
| E | Fundus quadrants | Especially macular area: Haemorrhages Microaneurysms Exudates, new vessels <i>Photocoagulation scars</i> |